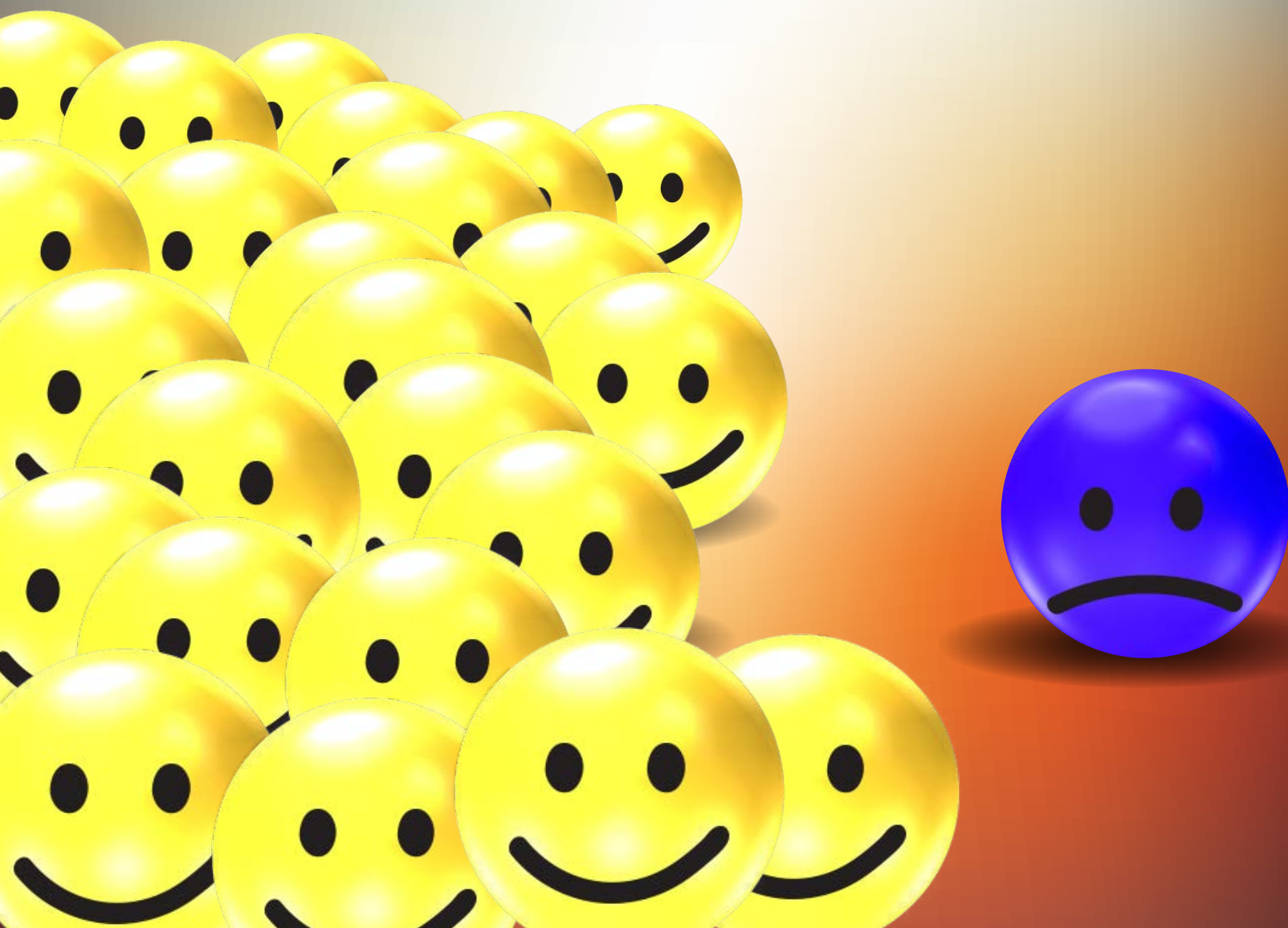


Yes I Can

A Mental Health Guide for Adult Literacy Facilitators

Written by Jennifer E. Hewitt



Acknowledgements

Yes I Can: A Mental Health Guide for Adult Literacy Facilitators is a combination of the talents of many individuals and organizations. Without this collective investment of time and effort, the Guide would never have been completed.

First, “Thank you” to the Ontario Trillium Foundation for the project grant and support.

Thank you to our project advisory committee:

- Thea Trussler, Bridging Employment Supports, Canadian Mental Health Association Waterloo-Wellington
- Mira Clarke, Action Read
- Sue Dawe, Conestoga College
- Brian Hofstetter, Conestoga College
- Adam Jensen, Conestoga College
- Karen Morgan-Bowyer, Core Essentials, St. Louis Adult Learning Centre, Waterloo Catholic District School Board
- Linda Brooks, Essential Skills Upgrading, Waterloo Region District School Board
- Kerry Halliday, Skills Upgrading Program, Upper Grand District School Board
- Julie Sigrist, The Literacy Group
- Sue Damon, The Literacy Group
- Elizabeth Debergh, Wellington County Learning Centre

Thank you to the people who made the finishing touches in rounding out the project:

- Lisa McArthur, Project Evaluator
- Chelsea Crank, Graphic Design and Desktop Publisher
- Truus Dragland, Editor
- Robin Crank, Program Assistant

A huge “thank you” to Jennifer E. Hewitt for researching and writing the manual and training workshop for this project. Jennifer’s excellent writing skills and her critical knowledge of the adult literacy field were invaluable in creating what I think is the most interesting and comprehensive guide on supporting learners dealing with mental health.

It was the collective agreement of all the Learning Networks of Ontario that we needed to develop this guide for practitioners, which helped us to get this funding. I thank my colleagues for supporting this venture and always working together for the betterment of Literacy and Basic Skills programs in Ontario.

Thank you, once again,

Jane Tuer, Executive Director



Tables of Contents

Acknowledgements.....	1
-----------------------	---

Chapter 1: Introduction.....19-27

How to use this guide.....	19
Glossary of terms used in this guide.....	19
What you will find in this guidebook.....	20
Your Role.....	22
What is Mental Health?.....	23
Mental Health Awareness.....	25
Chapter 1 References.....	27

Chapter 2: Mental Health and the adult learner 28-38

What is the likelihood of adult learners experiencing mental health issues?.....	28
Are the specific needs of adult learners different for those experiencing mental health issues?.....	29
How can I encourage learners to ask for what they need?.....	32
How can my classroom environment accommodate learners with mental health issues?.....	35
Chapter 2 References.....	38

Chapter 3: General suggestions for supporting learners living with mental health conditions and disorders 39-59

Get to know the learner and be open to conversations on mental health.....	40
--	----

Listen	41
Encourage the learner to get information, and give any information you can	44
Support the learner in the classroom	45
Seek help for critical issues or crises	53
Practice self-care	55
Chapter 3 References.....	58

Chapter 4: Mental Health First Aid. . 60-62

Chapter 4 References.....	62
---------------------------	-----------

Chapter 5: Mental Health Conditions and Disorders63-122

Types of Mental Health Conditions or Disorders	64
General effects of mental health conditions or disorders on the individual	64
Causes of mental health conditions and disorders	65
Diagnosis of mental health conditions and disorders.....	66
Treatments for mental health conditions and disorders	67
Who can be affected	69
What you can do:	71
General learning strategies for learners living with mental health conditions and disorders	72
For lack of energy or fatigue	73
For anxiety, worry, stress	78
For lowered concentration, attention span, or ability to make decisions.....	84

For difficulty with organization	92
For trouble with memory.....	96
For mood swings.....	101
For self-criticism or pessimism	103
For frustration or anger.....	107
For sensitivity to environmental factors.....	112
For lateness or unexplained absences	114
For side-effects of medication	117
Chapter 5 References.....	120

Chapter 6: Mood Conditions and Disorders 123-204

Types of Mood Conditions or Disorders.....	123
Depressive conditions or disorders	123
Bipolar disorder.....	124
Causes of mood conditions and disorders	125
Diagnosis of mood conditions and disorders	125
Treatments for mood conditions and disorders	126
Concurrent disorders, co-occurring disorders, and other risks	128
Who can be affected	129
What you might notice.....	129
Supporting learners living with mood conditions or disorders	130
What you can do	132
Learning strategies for learners living with mood conditions or disorders.....	133
For sadness or mood sensitivity, crying, or expression of “no one	

likes me"	134
For lethargy or depression	139
For anxiety, worry, stress	143
For self-criticism or pessimism	149
For lack of energy or chronic fatigue.....	152
For lowered concentration, attention span, or ability to make decisions.....	157
For trouble with memory.....	167
For difficulty with organization	172
For lack of attention to personal hygiene	176
For lack of interest in class work.....	177
For lateness or unexplained absences	180
For mood swings between irritability and euphoria.....	183
For hyperactivity.....	185
For frustration or anger	192
For sensitivity to environmental factors.....	197
For side-effects of medication	200
Chapter 6 References.....	202

Chapter 7: Anxiety Disorders205-290

Types of Anxiety Disorders	206
Generalized Anxiety Disorder (GAD)	206
Phobia Disorders	206
Obsessive-Compulsive Disorder (OCD)	207
Acute Stress Disorder and Post-Traumatic Stress Disorder	

(PTSD)	208
Causes of anxiety disorders	208
Diagnosis of anxiety disorders.....	209
Treatments for anxiety disorders.....	209
Concurrent disorders, co-occurring disorders, and other risks	211
Who can be affected	211
What you might notice.....	212
Supporting learners living with anxiety disorders.....	212
What you can do	214
Learning strategies for learners living with anxiety disorders	215
For anxiety, worry, stress	216
For lateness or unexplained absences	221
For test-taking anxiety	224
For separation anxiety or excessive checking on others (relative, child).....	228
For recovery from trauma (PTSD)	231
For discomfort or nervousness being around others.....	237
For self-criticism or perfectionism about school work	240
For restlessness, leaving seat or room, or repeated patterns of movements	245
For lack of energy or chronic fatigue.....	253
For lowered concentration or attention span, or “mind going blank”	258
For difficulty with organization	264
For trouble with memory.....	268
For irritability or anger	273

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest.....	276
For sensitivity to environmental factors.....	283
For side-effects of medication	285
Chapter 7 References	288

Chapter 8: Substance-Related Disorders 291-370

Types of substance-related disorders	292
Substance use disorders.....	292
Substance-induced conditions and disorders.....	293
Types of Substances.....	293
Causes of substance-related disorders	295
Diagnosis of substance-related disorders.....	295
Treatments for substance-related disorders	295
Concurrent disorders and other risks	298
Who can be affected	299
What you might notice.....	299
Supporting learners living with substance-related disorders.....	301
What you can do	302
Learning strategies for learners living with substance-related disorders.....	304
For fatigue.....	304
For lowered concentration, attention span, or ability to make decisions.....	308
For anxiety, worry, stress	318
For trouble with memory.....	323

For difficulty with organization	328
For lack of attention to personal hygiene	332
For lack of interest in class work.....	333
For lateness or unexplained absences	336
For sadness.....	339
For mood swings between irritability and euphoria	343
For hyperactivity.....	345
For frustration or anger	352
For distracting physical symptoms, such as headache, nausea.....	357
For sensitivity to environmental factors.....	363
For side-effects of medication	366
Chapter 8 References	368

Chapter 9: Psychotic Disorders . . . 371-442

Types of Psychotic Disorders	372
Schizophrenia	372
Psychotic Depression	372
Schizoaffective Disorder.....	372
Substance-induced Psychotic Disorder	373
Causes of psychotic disorders	373
Diagnosis of psychotic disorders.....	373
Treatments for psychotic disorders.....	374
Concurrent disorders, co-occurring disorders, and other risks	375
Who can be affected	376

What you might notice	376
Supporting learners living with psychotic disorders.....	377
What you can do	379
Learning strategies for learners living with psychotic disorders .	380
For anxiety, suspicions, paranoia	381
For lethargy or depression	386
For mood swings.....	390
For social withdrawal or aversion to social situations.....	392
For lowered concentration, attention span, or ability to make decisions.....	395
For trouble with memory.....	405
For difficulty with organization	410
For reduced ability in abstract thought processes.....	414
For disturbed and distracting thoughts, delusions, hallucinations	415
For agitation and restlessness	416
For lack of attention to personal hygiene	423
For lack of interest in class work.....	424
For lateness or unexplained absences	427
For irritability or anger	430
For sensitivity to environmental factors.....	434
For side-effects of medication	436
Chapter 9 References	440

Chapter 10: Attention Deficit/ Hyperactivity Disorder (ADHD) . . . 443-537

- Types of ADHD 444
- Causes of ADHD..... 446
- Diagnosis of ADHD 446
- Treatments for ADHD 447
- Concurrent disorders, co-occurring disorders, and other risks ... 449
- Who can be affected 450
- What you might notice..... 450
- Supporting learners living with ADHD 451
- What you can do 453
- Learning strategies for learners living with ADHD 454
 - For trouble with attention or concentration 454
 - For trouble processing verbal instruction..... 467
 - For constraints on working memory..... 475
 - For difficulty with organization 487
 - For impulsivity 491
 - For restlessness or hyperactivity 495
 - For anxiety, worry, stress 503
 - For talking during quiet times or creating distractions for others..... 508
 - For interrupting or blurting out answers 512
 - For frustration or irritation..... 517
 - For slower processing speed for information intake and output..... 523
 - For weak writing output 527

For sensitivity to environmental factors.....	529
For side effects from medication	532
Chapter 10 References	534

Chapter 11: Autism Spectrum Disorders (ASD).....538-645

Types of Autism Spectrum Disorders.....	540
Causes of Autism Spectrum Disorders	541
Diagnosis of Autism Spectrum Disorder.....	541
Treatments for Autism Spectrum Disorders.....	542
Co-occurring disorders and other risks	543
Who can be affected	544
What you might notice.....	544
Supporting learners living with higher functioning ASD/Asperger’s Syndrome.....	546
What you can do	547
Learning strategies for learners living with ASD.....	549
For extreme need for routines, difficulty with flexibility	549
For difficulty with problem solving or generating ideas if requiring flexible thinking.....	552
For sensory issues.....	553
For trouble with attention or concentration	556
For intense focus on a preferred activity, with difficulty breaking focus, or staring into space.....	569
For lack of understanding of basic concepts or “unwritten rules”	578
For trouble processing verbal instruction.....	582

For constraints on working memory.....	589
For difficulty with organization	601
For anxiety, worry, stress	605
For lack of attention to personal hygiene	611
For communication and social skills challenges	612
For talking during quiet times or creating distractions for others.....	618
For frustration or irritation.....	622
For slower processing speed for information intake and output	628
For weak writing output	633
For difficulty with reading comprehension	634
For repetitive behaviours leading to faulty or partial understanding.....	637
For sensitivity to environmental factors.....	638
For side-effects of medication	641
Chapter 11 References	643

Chapter 12: Developmental Disorders 646-728

Types of Developmental Disorders.....	647
Causes of Developmental Disorders	649
Diagnosis of Developmental Disorders	649
Treatments for Developmental Disorders.....	650
Concurrent disorders, co-occurring disorders, and other risks	651
Who can be affected	652

What you might notice	652
Supporting learners living with Developmental Disorders	653
What you can do	654
Learning strategies for learners living with Developmental Disorders.....	655
For communication and social skills challenges	656
For constraints on working memory.....	662
For difficulty with problem solving or generating ideas if requiring flexible thinking.....	674
For difficulty with organization	676
For difficulty with reading comprehension	680
For irritability, frustration, or anger.....	682
For lack of understanding of basic concepts or “unwritten rules”	689
For reduced ability in abstract thought processes.....	692
For slower processing speed for information intake and output	693
For trouble processing verbal instruction.....	698
For trouble with attention or concentration	706
For weak writing output	719
For sensitivity to environmental factors.....	721
For side-effects of medication	723
Chapter 12 References	726

Chapter 13: Behavioural Disorders 729-766

- Types of Behavioural Disorders **729**
 - Oppositional Defiant Disorder (ODD) **729**
 - Conduct Disorder (CD) **730**
- Causes of Behavioural Disorders **730**
- Diagnosis of Behavioural Disorders **730**
- Treatments for Behavioural Disorders **731**
- Co-occurring disorders, concurrent disorders, and other risks . . . **732**
- Who can be affected **733**
- What you might notice **733**
- Supporting learners living with Behavioural Disorders **734**
- What you can do **735**
- Learning strategies for learners living with Behavioural Disorders **736**
 - For arguing with or contradicting you or others **737**
 - For pessimism or negativity about school work **741**
 - For difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for challenges **745**
 - For irritability, frustration, or anger **747**
 - For distracting others **755**
 - For difficulty navigating social interactions **758**
 - For sensitivity to environmental factors **760**
 - For side effects from medication **762**
- Chapter 13 References **765**

Chapter 14: Personality Disorders. 767-830

Types of Personality Disorders	767
Causes of Personality Disorders	768
Diagnosis of Personality Disorders.....	769
Concurrent disorders, co-occurring disorders, and other risks	770
Who can be affected	771
What you might notice.....	771
Supporting learners living with Personality Disorders.....	772
What you can do	773
Learning strategies for learners living with Personality Disorders.....	775
For communication and social skills challenges	775
For difficulty navigating social interactions	782
For arguing with or contradicting you or others	784
For difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for challenges.....	788
For irritability, frustration, or anger.....	791
For impulsivity	798
For anxiety, suspicions, paranoia	802
For disturbed and distracting thoughts, delusions	807
For sadness or mood sensitivity, crying, or expression of “no one likes me”	808
For self-criticism or pessimism	813
For social withdrawal or aversion to social situations.....	817
For talking during quiet times or creating distractions for others.....	820
For sensitivity to environmental factors.....	824

For side-effects of medication	826
Chapter 14 References	829

Chapter 15: Physical illnesses and brain injury..... 831-874

Types of illnesses	832
Causes of brain injuries.....	832
Diagnosis of illnesses or brain injury.....	833
Treatments for illnesses and brain injury.....	833
Concurrent disorders, co-occurring disorders, and other risks ...	834
Who can be affected	835
What you might notice.....	835
Supporting learners living with physical illnesses or brain injury	836
What you can do	837
Learning strategies for learners living with brain injury	838
For trouble with attention or concentration	839
For trouble with memory.....	852
For irritability, frustration, or anger.....	857
For lack of energy or chronic fatigue.....	864
For self-criticism or pessimism	869
Chapter 15 References	873

Chapter 16: Learning Disabilities. . 875-939

Types of learning disabilities.....	876
Causes of learning disabilities.....	877
Diagnosis of learning disabilities	878

Treatments for learning disabilities.....	878
Concurrent disorders, co-occurring disorders, and other risks	879
Who can be affected	879
What you might notice.....	879
Supporting learners living with learning disabilities	880
What you can do	881
Learning strategies for learners living with learning disabilities .	883
For lowered concentration, attention span, or ability to make decisions.....	884
For slower processing speed for information intake and output	893
For trouble processing verbal instruction.....	898
For trouble with memory.....	906
For difficulty with reading comprehension	911
For difficulty with organization	913
For impulsivity	917
For lack of understanding of basic concepts or “unwritten rules”	921
For lateness or unexplained absences	924
For reduced ability in abstract thought processes.....	928
For weak writing output	929
For self-criticism or pessimism	930
For sensitivity to environmental factors.....	934
Chapter 16 References	937

Chapter 17: Learner resources . . . 940-950

Mental Health Services and Resources in Ontario	941
Centre for Addiction and Mental Health (CAMH)	949

Chapter 18: Learner handouts 951-998

My learning agreement	952
List of available Learning Tips handouts	954
Tracking form for learning strategies	955
1/ Tips for using learning styles	956
2/ Tips for using a visual schedule	958
3/ Tips for using to-do lists	960
4/ Tips for using checklists	961
5/ Tips for improving concentration	962
6/ Tips for handling stress in class	964
7/ Tips for test-taking anxiety	967
8/ Tips for relaxation	972
9/ Tips for using a mantra	975
10/ Tips for using positive self-talk	977
11/ Tips for time management	979
12/ Tips for improving memory	983
13/ Tips for using mnemonics	986
14/ Tips for using constructive feedback	989
15/ Tips for social skills practice	992
16/ Tips to solve a problem	995

Chapter 1: Introduction

As an adult education facilitator, you are in a position to support adult learners living with mental health issues on their learning path.

This guide has been developed to support you, the facilitator, on your professional learning journey.

You already bring to your learners your experience, flexibility, and understanding. This guide is intended as a helpful addition to your toolkit.

How to use this guide

This guide for adult education facilitators provides information and strategies for supporting adult learners living with mental health conditions or disorders.

The chapters 1 - 5 contain an overview of concepts and important general suggestions for supporting learners living with mental health issues. To get the most from this guide, it is suggested that you read chapters 1 - 5 first.

Chapters 6 - 16 present information on specific conditions and disorders, and strategies for supporting learners living with these specific issues. Because some learning needs will be similar across multiple disorders, some information and strategies will be repeated in more than one chapter. These chapters, and the strategies they contain, are listed separately in the Table of Contents so that you, as a facilitator, can look up a specific issue and use only the material you need.

Chapter 17 - 18 include resources and handouts for learners. You will find the handout topics listed in the Table of Contents. Links to the handouts which correspond with learning strategies are also included in the learning strategy charts, where applicable.

Glossary of terms used in this guide

The language used to categorize and describe mental health topics varies from organization to organization. Below you will find a list of terms and their intended meanings used in this guidebook.

Terms used in this guidebook reflect current awareness and preferred language as much as is possible.

Classroom: will refer to the learning environment and will include spaces used for small group instruction and one-to-one tutoring.

Co-occurring or co-existing disorders: refers to a situation in which a person lives with more than one mental health issue simultaneously.

Concurrent disorders: refers to a situation in which a person experiences a mental health condition or disorder at the same time as a substance-related disorder.

Facilitator: will refer to an instructor, teacher, or leader in an adult education classroom, or a tutor in a small group or one-to-one instruction setting.

Learner: will refer to an adult learning in an adult education environment.

Mental Health: will refer to the broader concept of mental health which includes the components of mental wellness and mental illness.

Mental health condition: will refer to a mental illness which may produce less severe symptoms than a mental health disorder.

Mental health disorder: will refer to a severe mental illness which definitively disrupts a person's ability to function or participate in everyday activities.

Mental health issue: this general term will be used to describe mental health conditions and disorders when they are referred to together.

Mental Illness: will refer to a state in which a person's systems of feelings, thoughts, or actions do not always work at an optimal level for them to function fully in the world. Mental illnesses will also be referred to as conditions, disorders, or issues.

Mental Wellness: will refer to a positive state of well-being in which a person's systems of feelings, thoughts, and actions are working at an optimal level which allows them to function fully in the world.

Recovery: refers to a person's journey to wellness, or to find ways to resume the level of functioning they had before the mental health issue began. Recovery is not necessarily finding a cure but rather finding ways for symptoms to be alleviated so functioning can improve.

Treatment: refers to a variety of forms of assistance a person might choose to help with recovery. Treatment can include therapy, alternative supporting therapies, group activities with others who are affected, or medications to alleviate symptoms so the person can resume their activities.

What you will find in this guidebook

This guidebook contains:

- **information about mental health**

This guidebook seeks only to summarize information researched from a variety of sources. Please refer to the reference sections at the end of each chapter for resources on mental health.

- **information about the adult learner and mental health**

Adult learners share specific learning needs. Depending on their life circumstances they also may share an increased risk for mental health issues. The information in this guidebook may help you to support all learners.

- **information about specific mental health conditions and disorders**

For ease of use, the guidebook is divided by mental health issues. Each chapter presents information about a specific disorder or group of disorders, including symptoms, causes, risk factors, diagnosis, treatment, and indicators you may observe in the classroom.

This information is for your use only, to help you better understand what may be happening for a learner. You are not expected to draw conclusions or to diagnose a problem.

Certain learners may need quite specific supports to be productive in the classroom.

- **general suggestions and strategies for supporting learners who may be living with a mental health issue**

You can choose to try suggestions for supporting a learner based on what you observe and the challenges the learner reports. You do not need to know with certainty if a learner is living with a mental health issue in order to use ideas for supporting learners. General tips for creating a friendly and inclusive classroom, and supporting a variety of learning needs, can help any learner.

- **specific learning strategies for learners who may be living with specific mental health conditions or disorders**

Learning strategies for each group of mental health conditions and disorders will appear at the end of each chapter.

For example, you will find a chapter on anxiety disorders, and at the end of that chapter will appear strategies to support learners who may be living with an anxiety disorder.

You will find possible challenges a learner might face listed with each mental health issue, and you can use what you observe about the learner's challenges to look up strategies and resources for that learner. When suggesting a strategy, you can involve the learner in the decision-making process about whether this strategy might work for them.

- **handouts for learners to help them self-manage learning strategies**

Handouts provided in Chapter 18 relate to specific learning challenges. For example, a learning strategy for difficulty with organization might be to create a checklist of items to stay on track, and a handout on creating a checklist can help the learner to self-manage this learning strategy (with guidance from you). Handouts are numbered for reference within the strategy charts.

- **contact information for learners who need mental health services**

Again, you cannot help to diagnose, but you can gently recommend the learner

seek help from someone who can, and you can provide information for mental health services or professionals. You can also offer to help them make a call, or call to get information for them (when they are present to help you). It is best not to make a call for information without the learner present, as they may feel their privacy is compromised.

In rural areas, a family doctor is usually the first step, but hotlines are also available for immediate needs. In urban areas, a family doctor or the Canadian Mental Health Association can begin the assessment and referral process. Please see the Appendices for listings of services and hotlines in Ontario.

Your Role

As an adult education facilitator, your area of expertise is education. You are not expected to also acquire expertise in mental health or to become a mental health professional. This guidebook is designed as a source of information for quick reference to what learners may be experiencing that can affect learning, and strategies you could try to support them in their learning. Recognizing the limits of what you can reasonably expect to do will ensure that learning more about mental health issues brings a welcome addition to your professional development.

Am I going to have to do more as a result of learning more about mental health?

Yes, increasing accommodations for learners living with mental health issues can initially mean more for you to do in the classroom. However, gathering strategies to help these learners can ultimately lighten your load. Read on.

What will supporting learners living with mental health issues require from me?

Supporting learners living with mental health issues requires:

- **flexibility**

Learners living with mental health issues may present a variety of needs and challenges, which may vary from day to day and week to week. Finding the time to check in with learners on what is happening and what is needed, and then adapting lessons, assessments, or schedules to what is needed, requires a flexible approach.

- **empathy**

A learner living with a mental health issue could exhibit difficulties with social skills, communication, or controlling impulses. Finding ways to help a learner manage classroom expectations can require a willingness to empathize and adapt to individual challenges.

- **patience**

A learner living with a mental health issue could respond to challenges with frustration, or might struggle to use problem-solving skills. These learners can benefit from learning self-management strategies, but change may come slowly and the path to change may have ups and downs. Your patience will be required to help the learner try and try again to find a strategy that works for them.

How will the strategies provided in this guide help me and my learners?

Trying learning strategies can benefit you and your learners in several ways:

- strategies can help certain learners to maximize what they can do
- strategies can help learners learn to self-manage their challenges
- some strategies may benefit all learners
- with more tools to choose from (such as handouts and resources) your workload can decrease
- seeing others try strategies can benefit all learners as they learn about diversity and about developing problem-solving skills and resiliency

Do I have to change what I am already doing?

Many of the strategies presented will touch on what you are already doing in the classroom. Building a rapport with learners using your compassion is possibly your most important strategy, and that has not changed.

What is Mental Health?

Mental Health is a general term that refers to the health of mental systems.

Mental systems create our:

- feelings
- thoughts
- actions

These systems are vital to every aspect of our lives, because they form the platform for our self-image, create our ability to do what we want to do, and shape our well-being. These systems are controlled by the brain, and so mental health has its foundation in the brain.

We often think of the words “mental health” as describing a singular issue that refers to a problem, but, like the concept of physical health, mental health is a broad concept made up of components.

Mental health includes:

- mental wellness
- mental illness
- care measures to promote mental wellness or to heal mental illness

Thinking about mental health in terms of ‘wellbeing’ emphasises the ‘positive physical, social and mental state’, rather than merely the absence of illness.

Mental Health Foundation UK (2011)

Mental Wellness

Mental wellness refers to a positive state of well-being in which a person’s systems of feelings, thoughts, and actions are working optimally to allow them to function fully in the world.

Mental wellness works like physical wellness

When we are mentally well, we can participate in all the activities we need and want to do. We have a sense of health and well-being that allows us to engage in and enjoy life.

There are self-care actions we can take to gain and maintain aspects of mental wellness. We can:

- monitor and reduce stress
- make time for physical exercise and relaxation
- get adequate sleep and proper nutrition
- develop a support system of caring friends and family

However, just as a person following a healthy lifestyle can develop a physical illness, a person who habitually practices self-care can develop a mental illness.

Mental Illness

Mental illness refers to a state in which a person’s systems of feelings, thoughts, or actions do not always work at an optimal level for them to function fully in the world.

A mental illness can affect a person’s ability to carry out daily tasks, engage fully in relationships, or undertake commitments at school or work. They cannot always participate in all the activities they need and want to do.

When a person's functioning is limited, their sense of self and their well-being is affected, which can lower self-esteem.

Health practitioners may use the terms issue, condition, or disorder, to describe a mental illness.

Mental illness works like physical illness

Each of the following points could refer to a mental or physical illness.

- any person, from any walk of life, can develop an illness
- illness can stem from a variety of causes
- illness can change what a person can do or the way they do things
- illnesses are not in a person's sole control
- a person can develop an illness and not know why
- a variety of treatments and self-help options are available, and treatments and helping programs have varying rates of success
- sometimes an illness will completely resolve, and sometimes an illness requires ongoing maintenance and treatment
- illness can affect the ability to learn and to carry out responsibilities related to school or work
- illness can lead to reduced functioning, which in turn can lead to lowered self-esteem
- accommodations at school and in the workplace can allow an individual living with an illness to participate and contribute

Thinking of mental wellness and mental illness as similar to physical wellness and physical illness can help to demystify and destigmatize mental health.

Mental Health Awareness

Mental health issues have recently begun to receive frequent attention from news outlets and media. Stories of mental illness and of increasing awareness of these issues seem to appear everywhere we look. This change may represent an increase in mental illnesses, but it also represents a more accurate picture of mental health in Canada, one that has been shrouded due to stigma.

According to the Mental Health Commission of Canada (2011), one person in three will experience a mental health problem within their lifetime, and one person in five will experience a mental health problem within the course of a year. These statistics, findings of studies by the Government of

Canada and by the International Federation of Psychiatric Epidemiology, reveal the prevalence of mental health issues, and force us to reflect on why an issue that affects so many is only now gaining increased attention.

The stigma surrounding mental health

Unfortunately, a stigma has limited the way we think and talk about mental health issues, due to a history of misconceptions.

Misconceptions about those experiencing mental health problems include:

- they are simply being difficult or defiant
- they could get better if they only tried harder
- they are being weak
- their problem makes them violent
- their problem is not a 'real condition'
- their problem is somehow contagious, that is, it will affect the mental health of others

The repercussions of stigma affect many aspects of our society. Fear of being judged can lead to reluctance to seek treatment, which leads to decreased opportunities for education and employment.

New attitudes

Fortunately, attitudes toward mental health and wellness are changing. This change results from several factors:

- increased information and education about mental health
- increased tolerance for difference
- brave people telling their own mental health stories to help others

New attitudes allow more openness about mental health issues, which leads to increased support for those living with mental health conditions and disorders.

Chapter 1 References

General Information:

Canadian Mental Health Association (2016)

<http://www.cmha.ca/>

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012)

Centre for Addiction and Mental Health CAMH (2012)

<http://www.camh.ca/en/hospital/Pages/home.aspx>

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

Government of Canada

The Human Face of Mental Health and Mental Illness in Canada (2006)

<http://www.phac-aspc.gc.ca/publicat/human-humain06/index-eng.php>

Meek, Fiona. (2013). *A Comprehensive Mental Health Training Format for Adult Education Teachers*. Electronic Thesis and Dissertation Repository. (1181)

Mental Health Commission of Canada

Mental Health First Aid Guide (2011)

Mental Health Commission of Canada (2016)

<http://www.mentalhealthcommission.ca/English/>

In-text citations and quotations:

Mental Health Foundation (UK)

Learning for Life: Adult Learning, mental health and wellbeing (2011)

<http://www.eaea.org/media/policy-advocacy/ae-and-health/learning-for-life.pdf>

Mental Health Commission of Canada (2016)

<http://www.mentalhealthcommission.ca/English/>

Chapter 2: Mental Health and the adult learner

Adult learners may present with mental health issues which can create learning challenges.

What is the likelihood of adult learners experiencing mental health issues?

Life circumstances may mean that adult learners are at risk of experiencing mental health issues.

The life circumstances that often bring adults to continue their education can mean that adult learners are at increased risk of experiencing mental health issues. Those life circumstances can include:

- lack of educational opportunity or success in school
- learning disabilities
- low literacy
- unemployment
- job loss
- poverty

These situations can bring a host of other life challenges leading to known risk factors for mental health issues. Therefore, there is a high likelihood that some adult learners will be living with mental health issues. For more information, please see **Who can be affected** in the **Mental Health Conditions and Disorders** section of this guidebook.

Inclusion policies may mean that more learners with special needs arrive in adult education classrooms.

Over the past number of years a shift has occurred in practices for those needing accommodations in elementary and secondary school classrooms, including students who live with mental health issues.

In the past, students needing accommodations were often placed in separate classes where they could work within modified learning expectations where they could access special resources.

With changes in awareness and professional resources in special education, the approach in elementary and secondary education has changed to one of inclusion. Where possible, students needing accommodation are kept in the regular classroom where accommodations are made to meet their learning needs

and learning expectations may be modified. Support staff may be available to assist the student in the classroom, and/or the student may be withdrawn at intervals to access special resources.

For adult education, this may mean that more learners arrive with special needs.

Whereas in the past, learners with special needs may have lagged in progress due to lowered expectations and lack of resources, students with support can frequently progress at the same rate as their peers. A learner that might not have had the opportunity to progress in school in the past might now have been able to attend school into higher grades, or to graduate, and may be in a position to further their education.

Are the specific needs of adult learners different for those experiencing mental health issues?

The principles of andragogy can be applied to support learners living with mental health issues.

Andragogy, or adult education practices, differs from pedagogy or children's education practices. Adults want and need specific conditions in order to become engaged in and benefit from learning.

Adult learners present specific learning needs, expectations, and ways of learning that inform how we plan and implement adult education programs.

Adult learners:

- like learning to be self-directed
- enter learning with a wealth of knowledge and experience
- want to know why they are learning
- are goal and task oriented
- are relevancy oriented or practical
- need to be shown respect in their learning

Adapted from Malcom Knowles' theory of optimal adult learning as self-directed inquiry, found in Russell, Sally S., MN, CMSRN. (1996 – 2016)

These learning needs apply to all adult learners. However, keeping these guidelines at the forefront of planning for your classroom can be particularly helpful as you support learners living with mental health issues.

Adult learners like to be self-directed

All adult learners can benefit from opportunities to self-manage their learning, and these opportunities can particularly benefit those living with mental health

issues.

These learners may have experienced feelings of loss of control in many aspects of their lives. Gaining control in managing their learning may:

- reduce anxiety in the classroom
- promote confidence and self-esteem
- help the learner gain valuable transferable skills

This guide will provide strategies for supporting learners experiencing mental health issues, and learner handouts to assist with learner self-management. Where possible, you can involve the learner in choosing and trying strategies together.

The learner living with mental health issues will in most cases benefit from:

- being offered choices in learning content and materials
- being offered choices in learning methods
- the ability to plan and follow their own learning schedule
- the opportunity to self-monitor which strategies work and adjust their plans accordingly

These methods of self-directed learning may increase the learner's confidence and feeling of control over their own learning path.

However, learners will need your help to understand and incorporate the learning strategy.

For example, when using a strategy or handout, you can:

- ✓ review the strategy or handout with the learner
- ✓ decide together on how they will use the strategy or handout
- ✓ help the learner gather tools they will need, (for example, checklist, timer)
- ✓ model using the strategy
- ✓ use the strategy together
- ✓ have them try using the strategy on their own, with you present to guide or coach them in their first steps
- ✓ check in frequently to encourage and help, and to assess the effectiveness of the strategy together (what is working, what is not)
- ✓ help them develop ways to assess the effectiveness of the strategy on their

own (for example, use a tracking chart)

- ✓ assist the learner to adapt the strategy based on what worked and try it again (or, try a different strategy).

With your guidance, learners may gradually begin to practice self-management techniques on their own.

Of course, you will want to adapt learning strategies within the **Ontario Adult Literacy Curriculum Framework** and the learning competencies. You will find that many of the learning strategies suggested in this guide parallel performance descriptors in **Competency E: Manage Learning**.

[http://www.tcu.gov.on.ca/eng/eopg/publications/OALCF Curriculum Framework Mar 15.pdf](http://www.tcu.gov.on.ca/eng/eopg/publications/OALCF_Curriculum_Framework_Mar_15.pdf)

Adult learners enter learning with a wealth of knowledge and experience

All adult learners bring life experience to their learning. Those living with mental health issues bring particular knowledge and experience, such as:

- an understanding of their condition and how it affects them

Learners living with mental health issues are the sole experts on this information, because no one else can share their experience.

- specialized knowledge and experience of using assistive resources

Resources such as assistive technologies can be a boon in the elementary or secondary classroom where class sizes make one-on-one time difficult to achieve. The down side to special resources is that some learners struggle without them and they may not be available in every situation. The up side can be that learners may arrive in your class with the knowledge and experience to use assistive technologies to maximize their success, and to educate you and other learners on types of assistive technologies available and on ideas for how to use assistive technologies in your classroom.

- an understanding of learning strategies and what works for them

Elementary and secondary school classrooms have adopted a variety of learning and classroom strategies for students with special needs, including those living with mental health issues. For example, differentiated instruction practices, visual or tactile schedules, and sensory tools have all become the norm rather than the exception. As well, students are taught to self-manage these strategies where possible. The adult learner living with mental health issues may already have clear ideas about what has worked, or not worked, for them in the past. You can use their knowledge and guidance to plan learning and classroom strategies together.

Adult learners need to be shown respect in their learning

All adult learners want to be shown respect, but those living with mental health

disorders can particularly benefit from your respect and from the confidence you show in their ability to help themselves. It is possible that they have never received that confidence before.

You can show respect and confidence by:

- ✓ involving the learner in planning their learning path including which strategies they feel will best work for them
- ✓ providing positive reinforcement for attendance, efforts, and accomplishments
- ✓ genuinely praising the learner for their efforts to use learning strategies to help themselves in the classroom

Adult learners are relevancy oriented or practical

Where possible, encouraging the learner to transfer self-management skills learned while using the strategies to other subjects or across activities can increase the practical applications for the strategies.

For example, if the learner has found that checklists work for them when planning a reading and writing task, you could encourage the learner to develop a checklist for an employment-related task such as steps needed to complete a memo or advertisement.

Transferring self-management skills to more than one activity can help the learner develop and use skills in other situations, for example, in the workplace.

How can I encourage learners to ask for what they need?

With your support, learners can begin to or continue to self-advocate for accommodations.

People living with mental health issues have often learned to hide their condition and so have not had the opportunity to develop self-advocacy skills. Self-advocacy skills allow individuals needing accommodations to ask directly for what they need to perform a task or to function in a new environment. For example, asking for academic accommodations might include asking for a copy of notes used for a lecture.

Learners living with mental health issues can benefit from learning about and practicing self-advocacy in the classroom. For example, using self-advocacy skills in the classroom can help the learner make decisions about how they use self-advocacy in a place of employment, depending on how much information they choose to disclose to the employer.

Often accommodation is available, but instructors and employers cannot provide

accommodations they do not know are needed, so asking directly for what is needed can be an important skill.

Self-advocacy includes:

- knowing what is needed
- confidence to ask for what is needed, or accommodations
- words to use when asking for accommodations
- a clear idea of how much information they want to disclose
- ideas for how accommodations can be made
- flexibility to discuss options and come to a solution

Accommodations at school or in the workplace might include small changes in environmental, communication, or scheduling factors which are easily met and can make all the difference to daily functioning. Some examples might include:

Environmental:

- increased or decreased lighting or decreased volume of background music
- changes to the way a person organizes their work space
- the opportunity to stand or move around rather than sit for some tasks

Communication:

- instructions in writing, or the opportunity to jot down or record instructions
- advance warnings of changes to the schedule or routine
- use of checklists, to do lists, or another system of reminders for tasks

Scheduling:

- extra time to complete certain tasks
- changes to break times, or self-initiated breaks when needed
- flexible schedule when needed

Accommodations might be regularly needed, or only needed on a request basis.

Of course, some accommodations may be out of reach. For example, employers are required to provide “reasonable accommodations,” but if the accommodation requires prohibitive costs, or might result in undue hardship for the employer such as compromising the health and safety of other employees, they can refuse.

You can encourage learners to ask for specific accommodations by:

- ✓ offering choices and giving the learner time to think through the options

Learners may not be able to think of what they need initially, but can benefit from choosing between options as a way to start. For example, you could ask:

- Do you feel you'll work better at a table with others, or on your own at a desk?
- You can see how it goes today and let me know tomorrow.

- ✓ suggesting words to use when asking for accommodations

You may need to suggest specific words the learner can use to frame their requests for accommodations in a positive way:

- You can let me know by saying: "I'll do best if..."

- ✓ gradually encouraging the learner to come up with solutions

As the learner comes to understand that they can ask for accommodations, you can ask them to generate options:

- Can you think about that challenge and come up with an idea or two that might work?

Learners can benefit from your support when making decisions about asking for accommodations when transitioning to further education or employment.

The decision of whether to reveal a mental health condition or disorder can be fraught with difficulty, particularly when seeking employment. The decision to disclose information of this nature is individual and based on many factors.

Unfortunately, a stigma still exists, and individuals may be rightly concerned that disclosing this personal information could hurt their chances of gaining employment, or change how they are treated in an existing position.

If a learner has disclosed a condition or disorder to you, you may be in a position to help them make decisions about the pros and cons of disclosure to an employer.

Pros of disclosure:

- disclosure gives the opportunity to ask for necessary accommodations
- disclosure means the individual does not have to hide a mental health issue
- disclosure can help build trust so that potential problems are easier to navigate

Cons of disclosure:

- discrimination is still common, and company policies don't always protect the individual from being denied work because of a mental health issue
- depending on the employer's awareness, disclosure may limit opportunities in the workplace, for example promotion

Weighing the pros and cons above, an individual may choose not to disclose a mental health issue to an employer, or they may choose to disclose partial information only. For example, a person might choose to describe their condition in general terms ("a health condition") rather than reveal the full diagnosis.

If a person does decide to disclose a mental health issue to an employer, it is best for them to be prepared with information to share, such as:

- the specific situation requiring accommodation:
"I sometimes have challenges with concentration. If the office gets very noisy I can become distracted."
- ideas for how the situation can be accommodated:
"I often use noise-cancelling headphones for a short time to help me re-focus."
- information about the mental health issue, if the person is comfortable naming their condition:
"I've brought a brochure so you have more information."

You can help by practicing with the learner and suggesting ways to frame requests in a positive way that lets the employer know they are working to create a situation in which they can do the best job possible.

Finding strategies that help, learning to self-advocate, and making decisions about disclosure, are all part of gaining self-management in living with a mental health issue. Learners will benefit from receiving information and from practicing their skills in the classroom.

Information on disclosure adapted from:

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012). Canadian Mental Health Association Grand River Branch, Guelph

How can my classroom environment accommodate learners with mental health issues?

The learning environment can be adapted to create optimal learning conditions.

The learning environment is increasingly recognized as a partner in learning. The environment can influence how learning happens and the emotions or attitudes that accompany learning and attending school.

For example, a well-laid-out classroom with enough space for learners to sit comfortably and spread out their work, and with organized tools readily available, can help learners focus on their tasks. A cramped or cluttered environment might distract learners from their work. The classroom environment can include the “feeling” of a classroom – is it bright and cheerful, or dark and gloomy? – and can extend to the attitudes of the facilitator and others in the class.

Of course, you do not always have control over the specifics of the space you work in, but any efforts to create a comfortable space will help. These considerations are of particular importance in supporting learners experiencing mental health issues. These learners may face challenges in concentration and may find physical stimuli more intense or distracting than other learners.

For example, a musty smell might go unnoticed by most, but create too much distraction for some learners, or even increase anxiety.

Those living with mental health issues may also be more sensitive to the attitudes of the facilitator and others in the class. Maintaining a positive, caring, supportive atmosphere as much as possible will be of special benefit to these learners.

Learning Strategies can be adapted to various Adult Education instruction modalities.

The strategies contained in this guide are designed for the use of adult education facilitators, but instruction in adult education programs can take several forms: large-group classroom teaching, small-group classroom teaching, individual work with one-on-one instruction in a group setting, and one-on-one private instruction or tutoring. As well, these instruction modalities may occur either in person or online.

You will adapt the suggestions and strategies in this guidebook to fit the instruction modality of your classroom. For example, using checklists, a strategy to help with organization, can be adapted to large group, small group, individual, and online instruction.

You may need to create methods to manage distractions, disruptions, and safety issues.

Learners living with mental health issues may experience increased difficulty in

- sitting for periods of time
- sitting still or avoiding fidgeting and restlessness
- working quietly or independently

These challenges can in turn affect other learners, who may feel distracted by extra sounds, talking, or movements.

Finding a balance between accommodating one learner's need for movement or talking with another's need for calm and quiet can make maintaining an optimal learning environment a challenge.

As with all decisions on classroom strategies, talking the matter over with the learner and deciding together on what might work may help to alleviate frustrations.

Raising awareness on mental health issues in the classroom in general may also help others increase their tolerance of distractions. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Strategies to help learners self-manage needs that may be distracting for others can be found in the learning strategies sections for each group of mental health disorders. For example, learners experiencing restlessness may benefit from sensory tools such as a sensory ball to squeeze as they work.

However, sometimes distractions become disruptions if a learner cannot maintain focus in the classroom. For ideas on how to help the learner assess their ability to be in class, please see **Support the learner in the classroom** under the **General suggestions for supporting learners living with mental health conditions and disorders** section of this guide.

In the unlikely event that a learner experiencing mental health issues were to act in an aggressive or violent way, your primary responsibility is to ensure your own safety and that of your learners. Remove yourself and others from the immediate situation and call for help.

For more information about what to do in the event of a crisis, please see the section **Seek help for critical issues or crises** under the **General suggestions for supporting learners living with mental health conditions and disorders** section of this guide.

Chapter 2 References

General Information:

Canadian Mental Health Association (2016)

<http://www.cmha.ca/>

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012)

Meek, Fiona. (2013). *A Comprehensive Mental Health Training Format for Adult Education Teachers*. Electronic Thesis and Dissertation Repository. (1181)

Stanyon, Wendy. (2014). *Presentation: Mental Health Awareness A Life Skill*. University of Ontario Institute of Technology.

Quotations and in-text citations:

Russell, Sally S, MN, CMSRM, CPP. (1994 – 2016). *An Overview of Adult Learning Processes*. http://www.medscape.com/viewarticle/547417_2

Ministry of Advanced Education and Skills Development

Ontario Adult Literacy Curriculum Framework (March 2011)

[http://tcu.gov.on.ca/eng/eopg/publications/OALCF Curriculum Framework Mar 15.pdf](http://tcu.gov.on.ca/eng/eopg/publications/OALCF_Curriculum_Framework_Mar_15.pdf)

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 202 (January 2012)

Chapter 3: General suggestions for supporting learners living with mental health conditions and disorders

Learners living with various mental health issues will experience some of the same challenges. Although their issues may differ, there are a few key ways you can approach supporting these learners in general.

Learners first and foremost are adults who remain in charge of their own minds, bodies, and options. It can be difficult to watch a learner in your class experience mental health issues and other related challenges, and it's normal and healthy to want to help. However, each learner's experiences are unique and each learner's needs will vary, and only they can truly know their experiences and their needs. You are never expected to know what is really going on or to diagnose. You can only offer support, resources and information, and learning options.

Your careful support will help your learners on their learning path and possibly, too, on their journey to mental wellness.

What you can do:

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment

- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Get to know the learner and be open to conversations on mental health

As with any learner, getting to know them can help gain their trust and can help you identify their interests, strengths, and challenges. Take time to ask questions and listen.

Also, read below for suggestions on conversations when a learner may choose to disclose a mental health issue.

✓ at intake:

The learner may choose to disclose a mental health condition or disorder when you meet, and/or your intake questions might elicit this information. Since you have just met the learner, this is a sensitive time and requires careful handling.

To be ready to listen and respond with empathy, you will need to schedule enough time at intake to listen, or have a plan for another time that day to listen to more information if necessary.

Questions you might ask at intake:

- Do you have any health concerns that might affect learning or attendance?
 - Do you experience any mental health conditions, such as anxiety or depression, that might affect learning or attendance?
 - What classroom conditions are best for you to learn?
 - What classroom or environmental conditions might not be ideal for you?
 - Are there any methods you have found work best for you when learning something new?
- ✓ **during regular attendance:**

It can take time for the learner's trust in you to build to a point where they feel ready to disclose information about mental health issues. As you get to know them, they may choose to talk more about an issue. To you, it may feel that a sudden disclosure is randomly scheduled; to them, they may have been thinking over what they will say and working up the courage for some time. Read on for ideas on listening with empathy and without judgement to help you navigate a sudden disclosure.

- ✓ **when transitioning to further education or employment:**

A learner may choose to reveal a mental health issue when they are transitioning to another program or to employment. They may disclose in an effort to explain how much your program helped them, or to explain why specific strategies were of benefit. Although this may seem an odd choice since your time to support them is now limited, they have come to trust you and are seeking support for their transition into an unknown situation. Information about the pros and cons of disclosure to an employer can be found in the previous section of this guide, **Mental Health and the Adult Learner**.

Listen

Being listened to, and really heard, can be a rare experience for a person living with a mental health issue. Even sympathetic and well-meaning others may be quick to step in with judgements or advice. Listening is one of the most valuable efforts you can offer.

- ✓ **listen with empathy and without judgment**

We all make judgements every day, based on our knowledge and experience of the world. Judgements are necessary to help us decide what is right, wrong, safe, or dangerous, to help us to act in morally responsible ways, and to survive. In the case of mental health issues, however, we cannot draw on our knowledge and experience, because we cannot possibly see into another person's mind, or feel what they have felt.

When learners living with mental health issues tell you their story, they are placing enormous trust in you. The single best thing you can do is listen without judgement. Listening this way is admittedly not easy because our minds are trained to make judgements and think forward to how to fix a problem. Listening without judgement is a skill to be learned and practiced.

For a person living with a mental health issue, being listened to in this way can feel radically different than the reactions they may be used to. In placing trust in you their confidence in their own strength can grow. Therefore, if for any reason you cannot listen when they are ready to talk, it is important to let the learner know why so they can be assured you are not judging them.

Some ideas to help with listening without judgement:

- be ready to listen, or if you cannot, make a time later to listen, and keep your promise to listen when you have time
- if you cannot listen because of a personal connection to the topic:
 - ✓ let the learner know you do not judge them but you do not feel you can give them your best for reasons in your own life
 - ✓ help them find someone (another facilitator, a health professional) who could listen
- let the person tell you what they are feeling or what the issue is
- concentrate on what the person is saying, not what you need to say
- verbally recognize the issue:
 - I hear you saying that ...
- use open and accepting body gestures: eye contact, arms at your sides, nodding
- demonstrate empathy:
 - That must be hard to deal with.
- use open-ended questions:
 - Tell me more about that.
- express respect and confidence in their ability to understand and manage their own life and experiences:
 - It sounds like you are self-aware and you work to figure out what you need.
- be conscious of judgments that come to mind and remember that you

cannot truly understand another person's experience

- avoid moral statements or statements of right and wrong
- ✓ **do not argue or give advice**

Sometimes a person experiencing mental health issues will say things that aren't empirically true but rather reflect how they feel or what they perceive right now. It may be difficult not to contradict them in an effort to help, and tell them that what they are experiencing is not real.

For example, a person in a depressive episode cannot see beyond what they are experiencing. They may tell you they feel worthless. As much as it seems right to contradict them, arguing or disagreeing, even if well-meaning, can make things worse, as it may make it seem you do not care how they feel.

Avoid being drawn into argument about what another person experiences. The nature of mental health conditions and disorders includes intensified or altered feelings and perceptions. To the person experiencing them, these sensations are very real. Telling them that what they are experiencing is not real negates their felt experience and decreases their confidence in themselves and their trust in you.

Similarly, giving advice does not help and can cause harm. For example, telling a person experiencing depression to try a more positive attitude, or try an approach to the blues that worked for you, can make things worse, as it may seem you are minimizing the overwhelming nature of what they are sensing at this time.

Advice about treatment options may undercut the person's confidence in managing their condition, as well as carry the risk that your advice will prove unhelpful or even harmful. Instead, it is best to gently suggest that a learner get information from a trained health professional to help to make decisions regarding their care and treatment.

- ✓ **validate what the learner is going through**

What can help instead of advice is to validate what the person is experiencing (they are experiencing it, so in that way it is real). You don't need to agree with them or say you understand, but simply that you hear them and empathize.

Words to try could include:

- I hear that you feel
- That must be hard to deal with.

Validation shows you care and are making a genuine effort to understand what they are going through. It may seem counterintuitive, but validating a learner's feelings or thoughts can bolster confidence and allow you to help them re-direct their attention back to recovery and to their school work.

Encourage the learner to get information, and give any information you can

- ✓ **gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed**

Encouraging seeking information/help is different from offering advice. Advice suggests you may know what is best for a person. Encouraging seeking help says that you want the person to have more information and support.

If a learner brings up an issue, you can use what they have told you to gently encourage they seek help. Here are some words to try:

- I don't want you to have to deal with this issue alone.
- I would like to see you getting help with this so you can keep up with your studies.

If a learner shows signs of experiencing mental health issues but hasn't brought up their symptoms, it is a harder situation to approach. You cannot suggest a diagnosis, but you can mention what you have noticed. Here are some words to try:

- I noticed (behaviour): for example, "you seem sad a lot of the time."
- Have you noticed that too?
- I want you to feel healthy and able to come to class.
- Have you thought about asking your doctor (or health care provider) about that?
- I would like to see you get some help with that.

Suggesting seeking help shows you care about the learner and want them to get assistance from a source who can provide information and treatment options.

If medications are causing uncomfortable, unmanageable, or distracting side-effects, encourage the learner to see their doctor, but encourage them not to stop taking their medication without a doctor's advice.

- ✓ **offer what information about mental health services you have**

You can provide information to learners about mental health services in your area to assist them in learning about certain conditions, or in finding the help or treatment they need.

In rural areas a family doctor is the usual first step to seeking information and treatment. In urban areas, a family doctor can be the first step, or the Canadian Mental Health Association can be contacted directly for information. Hotlines

can also provide information.

You can ask the learner if they want your help to make a phone call, or if they would like you to make the call for them. It's important that you make any information-seeking calls with the learner present so they can be assured that their privacy is not being compromised.

✓ **do not diagnose**

When you notice distinctive symptoms it is natural to think you may recognize a certain mental health issue. You may be right, but only those trained to diagnose can be sure, and even in the hands of a trained health care professional some issues are difficult to diagnose accurately, especially if more than one disorder is present.

Avoid labelling a learner's behaviours or feelings with medical terminology unless a learner tells you they have a condition or diagnosis. Learners look up to you as a source of trustworthy information and might believe you have diagnosed them.

Use your observations of what is happening, and the learner's reports of the learning challenges they are encountering in the classroom, to guide your use of helping strategies.

✓ **avoid promises about the effectiveness of treatment**

While it may be helpful to encourage a learner to seek help or treatment, it can be harmful to predict the effectiveness of treatment. Treatments work differently for each individual, so a therapy or medication that worked for one person may not necessarily work in the same way for another. Also, it is best to avoid suggesting that treatment results in recovery. The word "recovery" carries different meanings in different contexts. Some conditions can be managed but not cured.

You can encourage a learner to find out what is available and get help to choose what is best for them.

Here are some words to try:

- There are treatments available for these types of issues.
- A health care professional could tell you what treatments are available and help you decide if one might be right for you.
- Everyone is different, so treatments work differently for everyone, but they are developed to help people feel better.

Support the learner in the classroom

✓ **recognize learner strengths and potential, and accept their challenges**

People living with mental health issues are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, you can use your knowledge of learning styles (visual, auditory, kinesthetic) to informally assess a learner's areas of strength and to try teaching methods that might work best for an individual learner.

Every learner brings potential to the classroom. Learners living with mental health issues are developing strength and resiliency to help them meet new challenges.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks.

Although it may prove challenging at first, learners living with mental health issues who can develop ways to achieve in class often find that attending school helps with recovery. The satisfaction of completing steps towards a goal can increase self-esteem and help to spark a more positive outlook for the future.

✓ **help the learner assess their ability to be in class**

A learner's ability to function in the adult education classroom can vary over time. Involve the learner in this decision-making process and encourage them to self-manage these decisions and communicate with you about their attendance and their reasons for not attending.

• **at intake:**

If a learner reports a mental health issue at intake, you can use this starting point to candidly discuss where they are on their recovery path and whether they feel they can manage the class responsibilities and expectations at this time. Sometimes the time is right to pursue this new goal, and sometimes the right time is coming up 6 months or a year from now.

Discussing readiness and class expectations with a learner ready to disclose their mental health issues can help them make an informed decision and save everyone frustration.

Some words you might try:

- What are your current symptoms?
- Do you have any other challenges that might affect coming to class?
- How able are you to get up and get going in the morning?
- Do you feel you'll be able to attend class and to focus at this time?
- What are the strengths you'll bring to your school work?

Discuss attendance expectations with every learner and create an attendance agreement together including any conditions that may result in a missed class. If a learner reveals a mental health issue you could use this agreement to have them outline what might constitute a reason to miss class or a reason to leave class.

Ask the learner if you can use this agreement to check in with them if they say they feel they cannot attend.

- **when reviewing attendance or self-initiated breaks from class (for example, leaving early):**

You can use the agreement you have created together with the learner to check in to see if the learner might be able to carry on with encouragement, or if they need to try again another day. For example, if the learner says they must leave early due to anxiety, you could refer to the agreement and ask if they are experiencing one of the conditions they outlined, or if they think they could take a short break and try again.

- **when disruptions or challenges occur:**

Sometimes you can see that a person is not at their best or is struggling to cope with just being in class. This is a situation when having a previous agreement can help you approach the learner and gently suggest they sign out for today and try again tomorrow. You can use the agreement to bring up what you have observed that seems to fit the conditions under which they said they would not be able to be in class.

For example, if a learner is having a great deal of trouble staying in their seat or is fidgeting so much they can not concentrate and are distracting others, and you have tried the related learning strategies without success, you could try these words:

- I notice you moving around a lot.
- Do you feel this is one of those days you mentioned in our attendance agreement?
- I'm thinking maybe we should try again tomorrow.

You can make use of the handout provided in this guide to help you create agreements with your learners.

You can also consider deciding on a code word, phrase, or non-verbal signal you can use together to signal privately when the learner feels, or you observe, that a condition in the agreement has been reached.

Although you can encourage the learner experiencing mental health issues to attend or to stay in class, making it clear that you understand they know their own condition best will help to build the learner's trust in you and their

confidence in their own ability to manage their learning path.

✓ **help the learner use strategies to maximize what they can achieve**

This guide provides strategies to try to support learning. You may have developed strategies that have worked in the past, and the learner may come prepared with strategies that have worked for them.

Whenever possible, involve the learner in trying and adapting strategies to maximize what they can achieve.

Finding ways for the learner to self-manage learning strategies builds confidence and builds skills that can transfer to other situations, such as employment.

✓ **tailor learning activities to the individual learner**

The practice of adapting learning tasks and assessment to the individual learner's needs is probably already happening in your classroom. However, this practice can be of special benefit to those living with mental health issues.

Because mental health issues present in ways unique to every person, learning needs will also be unique. A strategy that works in one case may not work for another.

Some ways to tailor learning might include:

Accommodations/Strategies:

- with the learner's input, try various strategies to accommodate learning needs and challenges
- help and encourage the learner to assess the effectiveness of the strategies
- help the learner decide which strategies to continue based on their assessment

Multiple modalities:

- try various teaching/learning modalities: one on one instruction, partner work, small group work, large group instruction, online tasks
- informally assess through observation which learning modality works best for the learner
- keep in mind that one modality might work for one subject matter but not another, or one modality might work best at a certain time of day
- involve the learning in decision-making about which modalities work best

Differentiated instruction (DI):

- create more than one method to teach/assess the same information based

on the learning needs in the classroom

- choose a method for the learner based on your observations of what has worked previously
- modify the expectation for a learner, for example, alter the task used to assess this skill, or alter the amount or type of information that needs to be learned and assessed
- or, have each learner try all methods, using stations if appropriate
- or, have learners self-select which method they will use

For example, to teach/assess understanding of the Pythagorean theorem, you might provide a variety of methods:

- worksheets providing information and questions
- whiteboard for displaying the answers to questions using drawings
- video lessons from www.khanacademy.org, with verbal assessment
- numbered triangle cut-outs and fill in the blank charts to display results
- measuring tapes, protractors, scissors, and cardstock to create a display of information

Allow learners to represent their understanding of course material using alternative or creative methods, such as:

- journals, artwork, poetry, collage
- video or audio recording
- brochure, poster, advertisement
- report, presentation
- PowerPoint presentation, digital display

✓ **modify learning expectations**

In some cases, learners may not have the ability to meet the same learning expectations as peers. You may consider modifying tasks or assessments to accommodate a learner's ability. Examples might include:

- shorten the task or assessment
- decrease the volume of information the learner must work with; for example, expect three points to prove an argument rather than six
- allow use of assistive technologies to complete certain tasks or

assessments

- allow “open-book” assessments, or study notes that can be used during assessments
- give extra time for tasks or assessments

✓ **raise awareness of mental health in the classroom**

Raise awareness of mental health in the classroom and work to decrease stigma by talking openly about mental health, using preferred language, and giving all learners the opportunity to learn more about mental health.

All learners can benefit from increased awareness of mental health and from access to information about mental wellness and mental health issues.

To support mental health awareness in the classroom, you can:

- give all learners opportunities to learn more about mental health by providing information on mental health, including books, websites, brochures, or posters
- speak openly about mental health, mental health issues, and maintaining mental wellness, using preferred language, in the same information-based way we talk about physical health (read on for suggestions on **Talking about mental health with learners, and preferred language**)
- listen without judgement to those who share their stories
- engage a speaker on the topic of mental health
- create/offer a unit on mental health for learners, using online and other resources
- hold a mental health awareness day, using any of the suggestions above
- do what you can to support those living with mental health issues

Resources on mental health for learners, or for your use in the classroom:

Mindsight

Excellent information about mental health, including units with videos and quizzes, are available at Mindsight. You will need to create an account.

<http://mymindsight.uoit.ca/>

Centre for Addiction and Mental Health (CAMH)

Talking about mental illness: A guide for developing an awareness program for youth (2001)

CAMH has developed a program on mental health for secondary school students which could be used for adult learners. The teacher’s guide to implementing the

program is available here:

https://www.camh.ca/en/education/Documents/www.camh.net/education/Resources_teachers_schools/TAMI/tami_teachersall.pdf

Information for learners on mental health is also available from:

Canadian Mental Health Association

<http://www.cmha.ca/>

and

Mental Health Commission of Canada

<http://www.mentalhealthcommission.ca/English/>

Public awareness campaigns such as World Health Organization’s World Mental Health Day and Bell Canada’s Let’s Talk Day can also provide an opportunity to open a discussion about mental health awareness in the classroom.

Talking about mental health with learners, and preferred language

Changes in the cultural attitude toward mental health result in changes to the language used to refer to mental health issues. New language reflects a new awareness of the broader concept of mental health and a new understanding of the harmful effects of stigma.

For example, in the past, mental health might often be referred to only in reference to a problem. Now, the added term “mental wellness” reflects a broader understanding of mental health in which mental health care and preventative measures can help everyone maintain healthy functioning.

Changes in language include:

- eliminating words that put people down or insult
- replacing words that carry hurtful connotations
- placing the person first
- replacing words that assume an intimate understanding of another’s experience

Words we are habitually exposed to become entrenched and slip out, which is normal, not wrong or bad. Like any change in habit, this change takes place along with increasing awareness, over time, and with repeated efforts. Making changes isn’t shameful, but reflects a growing awareness and a desire to show respect to others.

Examples of replacement terms:

Former term	Replacement term
committed suicide	died by suicide
on drugs	living with a substance-related disorder
drug addict	person living with a substance-related disorder
suffering with	living with, experiencing
mental health problem	mental health disorder, condition, issue
nuts	confusing, complicated

You could consider hosting a “the changing language of mental health” discussion with your learners and create a class agreement together on the language you will strive to use.

- **eliminating words that put people down or insult**

The idea of refraining from using words that put people down or insult may seem obvious, but many words in common use were originally intended as derogatory labels for those living with mental health issues. Some examples of words we can change include mental, nuts, psycho, retarded, deranged, looney. Even if these words are used to describe situations, not people (for example, “that’s nuts”), we can usually find more accurate ways to say what we mean.

In the adult education classroom, you can model making these changes by correcting yourself openly and kindly.

For example, you catch yourself saying: “that’s nuts.” You could then say aloud:

- Oh, I don’t like that word. I’m going to use another word instead.

With others, you can gently explain why, as a group, you will try to catch these words and replace them. For example, you could say:

- That word is one we’ve all used before, but we’re trying to replace words that can hurt people living with mental health issues. What could we replace it with?

- **replacing words that carry hurtful connotations**

Some of the words used to refer to and describe mental health issues carry hurtful connotations due to associations with past stigma. New terms reflect new understanding of mental health issues. For example, “committed suicide” recalls a time when suicide was illegal in Canada, and this suggestion of crime is hurtful to the families of those lost.

- **placing the person first**

A person experiencing a mental health issue is a person first and the issue reflects

only part of their experience and make-up. Language has shifted to describing the person first, then describing the issue. For example, referring to an “autistic person” has been replaced with “a person living with autism.”

- **replacing words that assume an intimate understanding of another’s experience**

The words used to describe living with a mental health issues often include assumptions about a person’s experience or feelings. New language attempts to illustrate what is known.

For example, people living with mental health issues are often described as “suffering.” But they may or may not feel they are suffering. Like a person with a physical disability, they may view this reality as simply part of who they are. Using the word “suffering” can put a negative slant on the issue, implying that it is wrong or bad. The negative implication can extend to the individual themselves and cause decreased self-esteem.

Often the person themselves will use their preferred language, and you can ask them what terms they use. Asking shows your awareness of changing attitudes and your desire to respect their experience.

Seek help for critical issues or crises

Critical situations or crises in mental health issues can happen. Examples of critical situations or crises in mental health issues include severe emotional or perceptual symptoms, panic attacks, and imminent plans of suicide, as well as the remote possibility of violence towards others (mental health issues are far more likely to lead to violence toward the self, or violence from others).

Although these situations may be unlikely to occur, it is best to be prepared with a plan which includes getting help when needed:

- have emergency telephone numbers on hand or on automatic dial and be prepared to use them
- prepare an emergency folder with the names of the learners in the class and emergency contact information
- post the address and telephone number of your class near the telephone and the door, including words to say to emergency responders:
- “We are at (address) and need help immediately,” and make all learners aware of this information
- have a communication plan to call on another facilitator or worker in your building for immediate support
- if you are alone with learners in your building, make a plan to contact

someone in a nearby building for immediate support

- discuss with learners what to do in the event of an emergency: for example, discuss exit routes
- make a plan to evacuate the learners from your class if it became necessary (in the rare event of violent behaviour, evacuating others can be the safest way to eliminate the threat of harm)
- share with learners a signal to evacuate, such as a fire alarm or other auditory + visual warning (for example, lights flash and you call out certain words)
- explain to learners that you will expect them to wait outside in a designated area (not leave entirely) so you can check that everyone has been successfully evacuated

If a crisis were to occur, your primary responsibility is for your own safety and the safety of the learners in your class. If you feel that safety could be compromised, take steps to gain safety as quickly as possible.

If a learner acts in a violent manner:

- remain calm
- remove yourself and the other learners to a safe place
- call 911 if necessary

If you feel a learner is experiencing a mental health crisis (non-violent):

- remain calm
- follow the mental health first aid five basic steps: ALGEE (for more information, please refer to the **Mental Health First Aid** section of this guide)
- don't argue with what they say they are experiencing
- reassure the person that they are not alone
- make a plan for them to get help: give information about a mental health care provider or hotline and make a plan to call – or call right away

If you feel a learner is planning suicide imminently:

- tell the learner you are calling 911 and help is on the way
- call 911
- tell the paramedics you are dealing with a mental health crisis

- ask the learner to hold off action and explain that when help arrives, the helpers will know what to do
- wait with the learner and reassure them they are not alone until help arrives

For more information on what to do in the case of a mental health crisis, please refer to the **Mental Health First Aid** section of this guide.

Practice self-care

- ✓ **take action to maintain mental wellness, and model these actions for your learners**

Actively and openly taking action to maintain mental wellness can help you continue to give your best to your learners, and can help all learners think about ways to care for themselves.

What mental wellness looks like may differ from person to person. However, these are some actions adults take to stay mentally healthy:

- monitor stress
- take breaks or holidays from work
- prioritize adequate sleep and proper nutrition
- make time for physical exercise and relaxation
- develop a support system of caring friends and family
- seek help when you need it

By taking steps to maintain mental wellness, and talking openly about what you do to care for yourself, you become a role model for learners.

- ✓ **recognize that supporting others comes with challenges**

Supporting learners living with mental health conditions can be stressful. It is natural to feel stressed by another's negative life conditions and by your limited ability to help. Making accommodations for a variety of needs and issues can be confusing, and you may frequently feel uncertain that you are doing the right thing. These situations can take a toll on you and deplete the reserves you need to support your learners.

Some challenges you may experience as you support learners living with mental health issues could include:

- creating and reinforcing a code of conduct for the class
- seeing the class mood affected by the individual's restlessness, mood, or obvious signs of stress or distress

- feeling frustration at a learner's seemingly irrational or illogical thoughts or fears
- feeling frustration at a learner's challenges with attention or with interruptions
- trying to help a learner distracted by the side-effects of medication or coping with the effects of medication that is not yet working optimally
- feeling helpless to fix things
- feeling concerned you are spending too much time helping one individual
- feeling compassion fatigue
- deciding how to deal with critical issues or crises
- ✓ **seek the support you need**

Seeking support can help you to strengthen your own confidence and resilience so you can continue to serve your learners. Self-care can be more than the usual actions we take to maintain mental wellness. When you are supporting others, you need to ensure that you, too, have support. Support can include anything you do that replenishes your energy and draws from your environment or from others. Some examples:

- tell a supervisor when you are dealing with a lot of learner needs, and ask for suggestions or help as needed
- talk with others who understand: co-workers or others practicing in your field
- monitor your own mental health and actively pursue methods of restoring balance such as counselling, energy work, or meditation
- do things that relax you or soothe your spirit: spend time in nature or enjoy a hobby

Sometimes, despite our efforts to practice self-care, supporting those living in extreme circumstances can feel like too much. Compassion fatigue describes a state in which the stress of helping those experiencing misfortune begins to affect your ability to function. This condition means you care, and caring lets you give your best to your learners, but compassion fatigue will limit what you can give and could harm your health and mental health.

The Compassion Fatigue Awareness Project (2015) defines compassion fatigue as follows:

Caring too much can hurt. When caregivers focus on others without practicing self-care, destructive behaviors can surface. Apathy, isolation, bottled up emotions and substance abuse head a long list of symptoms associated with the

secondary traumatic stress disorder now labeled: Compassion Fatigue.

Compassion fatigue can arise from listening to or witnessing the effects of adverse life circumstances on those with whom you work. You can also be exposed to trauma through another person's trauma experience.

Compassion fatigue may manifest as typical signs of stress: anxiety, tiredness, or difficulty concentrating. But this condition can also masquerade behind feelings of anger or even apathy. Sometimes those experiencing compassion fatigue begin to blame the people they are helping for their own problems, or, alarmingly, become "jaded" or desensitized to the struggles of others.

If you recognize signs of compassion fatigue, you can take steps to heal and to help yourself separate from your learners' circumstances:

- accept where you are right now – it is OK to feel this way
- continue to practice self-care
- discuss your specific situation with your supervisor: sharing your feelings can help, and you do not have to deal with everything alone
- ask directly for what you need from your supervisor or co-workers (listening ear, suggestions for referrals, etc)
- work on clarifying boundaries; for example, limit your time listening to, thinking about, or doing things to help a learner to a certain time frame, then re-focus on others in the program
- do something concrete, such as make a referral for the learner to find support
- Recognize your contribution to help a learner; no matter how desperate the situation, just by being there you have given the learner a piece of the help they need to move forward
- consider taking a break if needed

Compassion fatigue can be healed, and supporting yourself will ultimately add to your resiliency and increase your ability to serve others.

Steps for mending compassion fatigue were drawn from The Compassion Fatigue Awareness Project website. For more information, please visit:

<http://www.compassionfatigue.org/index.html>

For more information about secondary trauma in the classroom, please see Students First Project:

School and Classroom Strategies: Trauma Related Concerns

<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-Trauma-Strategies-for-teachers-2.24.14.pdf>

Chapter 3 References

General Information:

American Psychiatric Association (2016)

<https://www.psychiatry.org/>

Canadian Mental Health Association (2016)

<http://www.cmha.ca/>

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012)

Centre for Addiction and Mental Health CAMH (2012)

<http://www.camh.ca/en/hospital/Pages/home.aspx>

Cognitive Behaviour Therapy (2012)

https://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/CBT/Pages/default.aspx

Compassion Fatigue Awareness Project (2015)

<http://www.compassionfatigue.org/index.html>

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Government of Canada

The Human Face of Mental Health and Mental Illness in Canada (2006)

<http://www.phac-aspc.gc.ca/publicat/human-humain06/index-eng.php>

Meek, Fiona. (2013). *A Comprehensive Mental Health Training Format for Adult Education Teachers*. Electronic Thesis and Dissertation Repository. (1181)

Mental Health Commission of Canada

Mental Health First Aid Guide (2011)

Mental Health Commission of Canada (2016)

<http://www.mentalhealthcommission.ca/English/>

Mental Health Foundation (UK)

Learning for Life: Adult Learning, mental health and wellbeing (2011)

<http://www.eaea.org/media/policy-advocacy/ae-and-health/learning-for-life.pdf>

Mindsight, University of Ontario Institute of Technology (2010)
<http://mymindsight.uoit.ca/>

Stanyon, Wendy. (2014). *Presentation: Mental Health Awareness A Life Skill*.
University of Ontario Institute of Technology.

Students First Project
<http://studentsfirstproject.org/>

The Learning & Teaching Office, Ryerson University
Engaging Adult Learners by Michelle Schwartz (2016)
<http://www.ryerson.ca/lt/>

Quotations and in-text citations:

Khan Academy (2016)
<https://www.khanacademy.org/>

Mindsight (2016)
<http://mymindsight.uoit.ca/>

Canadian Mental Health Association (2016)
<http://www.cmha.ca/>

Centre for Addiction and Mental Health (CAMH)
Talking about mental illness: A guide for developing an awareness program for youth
(2001)
https://www.camh.ca/en/education/Documents/www.camh.net/education/Resources_teachers_schools/TAMI/tami_teachersall.pdf

Mental Health Commission of Canada (2016)
<http://www.mentalhealthcommission.ca/English/>

Bell Canada (2016)
<http://letstalk.bell.ca/en/>

World Health Organization (2016)
http://www.who.int/mental_health/world-mental-health-day/en/

Compassion Fatigue Awareness Project (2015)
<http://www.compassionfatigue.org/index.html>

Students First Project (2016)
School and Classroom Strategies: Trauma Related Concerns
<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-Trauma-Strategies-for-teachers-2.24.14.pdf>

Chapter 4: Mental Health First Aid

The Mental Health Commission of Canada has created Mental Health First Aid, a system for training members of the public to help an individual experiencing a mental health issue or crisis, in a similar way to which various health agencies offer training in first aid for physical health emergencies. The information in this section was created by the **Mental Health Commission of Canada** (2011) for their training programs.

The five basic actions of Mental Health First Aid are summarized in the acronym **ALGEE**. These steps represent guidelines to remember when supporting an individual experiencing a mental health situation or crisis.

As an adult education facilitator, your area of expertise is education, and you are not expected to fill the role of a mental health practitioner. However, these steps can help anyone to assess and respond to mental health situations or emergencies.

These actions do not have to be followed in the order presented.

A = Assess the risk of suicide or harm:

- ensure your own safety, by removing yourself from possible acts of violence (for example, scan for a means, step back if a person seems to act aggressively)
- assist others to ensure their safety
- ask if the person is thinking of suicide
- if yes, ask them if they have a plan for suicide
- arrange for help

If the person has thoughts of suicide but no plan, there is a risk of suicide, although it may not be imminent. You must tell them that you cannot maintain confidentiality because you believe they might harm themselves and you must help them to seek help. Call mental health services together; for example, you could call their doctor, a hotline, mental health services that are near, or 911, depending on the situation.

If the person has a plan you must ensure they are not left alone and call 911. Stay with them and/or call a friend to stay with them while waiting for emergency responders or to take them to the emergency room. Tell the person you are calling 911 and help is on the way. If you have removed yourself from the situation due to danger or harm, you will call without consulting them.

Tell the responder that you are dealing with a mental health crisis.

If there is no risk of suicide or harm, continue with the basic actions.

L = Listen non-judgementally:

- allow the person to tell you what is wrong and how they are feeling
- do not interrupt
- avoid making judgements or giving advice

G = Give reassurance and information:

- reassure the person that they have a medical condition that can be treated
- let the person know there is help available

E = Encourage the person to get appropriate professional help:

- encourage the person to access professional help, perhaps by offering to stay with them while they make a call to get information or book an appointment

E = Encourage other supports:

- although professional help is needed, encourage the person to reach out to family, friends, and others for support

These five steps can be used by anyone to ensure the safety and support for a person experiencing a mental health issue.

Chapter 4 References

Mental Health Commission of Canada

Mental Health First Aid (2011)

<http://www.mentalhealthcommission.ca/English/focus-areas/mental-health-first-aid>

Chapter 5: Mental Health Conditions and Disorders

Mental health conditions and disorders affect thoughts, feelings, and actions in ways that limit daily functioning. Understanding more about mental health conditions and disorders can help you support learners living with these issues.

As it would be for anyone, when a learner living with a mental health issue finds their thoughts, feelings, and actions disrupted beyond their control, they face challenges.

- it can be hard to accept what is happening
- loss of control can be confusing or frightening and can result in uncharacteristic behaviours
- recovery may involve treatments, including therapy and medications, that can be daunting
- on top of these challenges, they may have been repeatedly told that they are to blame for their own problem, that their issues are false or “all in their head,” or that they are inferior to others

The emotional highs and lows associated with the onset or persistence of a mental illness can feel like you are on a roller coaster ride.

*Canadian Mental Health Association,
Grand River Branch (2012)*

These challenges can affect learning and functioning in the classroom.

For someone who has never experienced a mental health condition or disorder, it can be difficult to understand the enormity of symptoms, treatments, and stigma, and difficult to imagine the fear and shame that can result.

Your compassion and efforts to support these learners will help them perhaps more than you can understand.

Learner first

A learner living with a mental health issue is a learner first; their personality, interests, and dreams do not change because of an illness.

Each learner arrives in your class with a unique history and with unique strengths and needs. Mental health issues are another factor that can make up that uniqueness. Your recognition of your learners as people first will help them gather the confidence to pursue their goals.

Types of Mental Health Conditions or Disorders

The American Psychiatric Association (2014) has created the Diagnostic and Statistical Manual of Mental Disorders (DSM), a comprehensive listing of all known disorders which is updated periodically. Mental health organizations and health professionals use this manual to access the most current information on mental health disorders.

Mental health issues can be classified into groupings according to the symptoms they share. For this guide, these groupings will include:

Core Mental Health conditions and disorders:

- mood conditions or disorders
- anxiety disorders
- substance-related disorders
- psychotic disorders

This guide will also include a brief overview of the following categories of disabilities or disorders, as these can impact learning and managing in the classroom. Some of the disorders below are now included in DSM classifications, and some can be related to mental health issues.

Other conditions and disorders

- Attention Deficit/Hyperactivity Disorder (ADHD)
- Autism Spectrum Disorder
- developmental disorders
- behavioural disorders
- personality disorders
- physical illness or brain injury
- learning disabilities

All of these disorders can affect learning.

General effects of mental health conditions or disorders on the individual

Although mental health disorders vary in their symptoms and in the path of treatment and recovery, there are recognized ways in which mental health issues typically affect an individual:

- lack of energy or fatigue
- anxiety, worry, stress
- lowered concentration, attention span, or ability to make decisions
- difficulty with organization
- trouble with memory
- mood swings
- self-criticism or pessimism
- frustration or anger
- sensitivity to environmental factors
- side effects from medication

These effects can adversely impact an individual's ability to learn, to attend school, and to carry out the expectations of the adult education classroom. However, those living with mental health issues are often well able to use strategies to effectively participate in class.

As well, all symptoms of mental health issues can change over time, or vary from day to day or even hour to hour, and individuals can learn to track and make use of their most productive times. Medications used to treat mental health issues can also affect learning, affect symptoms, and affect how an individual manages their symptoms.

This guide will provide strategies to help you, together with the learner, to plan their activities in the classroom.

Causes of mental health conditions and disorders

Mental health issues have many causes, or may result from a combination of causes. It is natural for a person living with a disorder to want to know and to speculate on the cause, but often the cause cannot be identified with certainty, and it is not always necessary to know the cause in order for an illness to be treated.

The causes of these conditions and disorders can be difficult to sort out partly because there so many possible causes, and the causes are not usually visible, as they are seated in the brain. Causes may include:

- genetic predisposition or heredity
- reaction to environmental or situational factors such as living conditions, stress, life experiences, or trauma

- entrenched thought or behaviour patterns
- imbalances in brain chemistry or hormones
- physical illness, chronic pain, or brain injury
- certain medications or substance abuse
- a combination of these causes

People living with mental health issues are often assumed to be acting out on purpose to be disruptive or provocative, but it is never a person's choice to develop a mental health issue or to live with the uncertainty and negative feelings and repercussions it creates. Remembering that causes are complicated and beyond the person's control can help to keep the challenges of supporting learners living with mental health issues in perspective.

This guide will list possible causes with each category of disorder for your information, but regardless of cause, your role as a facilitator remains to help the learner focus their attention on their learning, and on the learning strategies they can use to work with, or work around, their symptoms.

Diagnosis of mental health conditions and disorders

Mental health issues are diagnosed by trained medical professionals. Learners may report symptoms and suspected diagnoses, but only a health professional can accurately assess and diagnose.

Those experiencing symptoms of a mental health issue must ask their doctor for an assessment. They may receive assessment or be referred to a psychologist or other specialist for testing and counselling. If living in an urban area, learners can also contact the Canadian Mental Health Association directly for information.

Thea Trussler, former Referral Coordinator of Employment Services at the Canadian Mental Health Association in Waterloo, Ontario, gives the following information (personal communication, November 30, 2016):

Each CMHA has different access to assessments. An initial informal assessment may be available depending on that CMHA chapter's resources, or they will provide information on where to get help, usually beginning with their doctor.

Unfortunately attaining an accurate diagnosis and effective treatment plan can take time, partly because symptoms can be ambiguous (related to more than one health issue) and can come and go. Seeking help as soon as possible, and being prepared with details of the symptoms, their severity, and when they were noticed, can improve the speed of diagnosis, treatment, and recovery.

Those experiencing a mental health crisis (such as overwhelming sadness,

panic attack, dangerous mania, hallucinations, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

Receiving a diagnosis can be both shattering and validating to the individual and their loved ones. It can be confusing and frightening to hear the label for a mental health issue in reference to oneself. On the other hand, an adult living with a mental health disorder may have spent a lifetime feeling something was not right, hiding their symptoms, and yearning for help. A diagnosis can bring much-needed options and resources for recovery, but it can require a great deal of bravery to take the steps needed to know for sure. Those pursuing assessment and diagnosis need understanding and support.

Treatments for mental health conditions and disorders

Not all mental health issues require treatment. But when daily functioning becomes limited, treatment can help to manage symptoms and regain wellness. Due to increased awareness and declining stigma, there are more treatments available for mental health issues than ever before, including:

- therapy
- medications
- support groups
- training programs
- alternative therapies

Learning more about mental health, and learning self-advocacy skills, can significantly increase the effectiveness of any treatment program and the potential for recovery.

Treatment options for each mental health condition or disorder can be found in each of the following chapters.

Costs of treatment

Individuals may avoid assessment because they believe they can not afford the cost of treatment. However, some treatment options are covered by OHIP in Ontario. Some treatment options may be offered on a sliding scale depending on ability to pay.

Thea Trussler, former Referral Coordinator of Employment Services at the Canadian Mental Health Association in Waterloo, Ontario, gives the following information (personal communication, November 30, 2016):

When an individual experiencing a mental health issue enters the medical care system through an emergency room at a hospital, many initial costs are covered under OHIP.

Emergency room costs that are covered via OHIP include emergency room assessment, onsite medication at ER, admission to a psychiatric ward, referral and assessment to an emergency psychiatric assessment (no follow up relationship is guaranteed), and outpatient follow up services at a psychiatric day hospital facility. There is a fee for ambulance service.

Psychological assessments outside this system are paid for by the patient, but a psychologist can be a source of knowledge about local resources including free options.

If an individual accesses the health care system through their GP, they may receive referrals to a psychiatrist for prescribing medication, a social worker for counselling, and a nurse for monitoring and follow-up. The psychiatrist fee is covered under OHIP, but this appointment does not include counselling. Counselling with a social worker may or may not be covered depending on the GP's relationship with other care providers.

In rural and remote regions of Ontario there is access to OCAN, a secure communications avenue for face to face counselling services online. A patient must be in a doctor's office to use this service to ensure confidentiality and access to proper equipment and support.

Through CMHA, clinician services are free for 6-8 sessions and do not require a doctor's note. Not all CMHA's have clinicians on staff, but the chapter would know treatment options within a community.

Therapy avenues that do not have sliding scale for service are available in many communities. Alternative therapies, such as acupuncture, herbal or naturopathic remedies, light therapy, aromatherapy, yoga or tai chi, massage or chiropractic therapy, are usually offered on a pay-per-visit basis. As well, a growing area of practice suggests methods to "re-program" the brain's functions, but the effects of these methods are not yet proven and are currently offered through private clinics.

The benefits of treatment

Treatment can often profoundly improve functioning and help the person gain stability in their lives, but many mental health issues go untreated. Usually the biggest barrier to treatment is a person's reluctance to disclose their symptoms and seek help. Sometimes individuals simply do not know that attitudes and treatments have improved, or do not understand that treatments are available. Word-of-mouth stories about treatments may also serve to discourage a person from pursuing treatment. Information can help an individual start on the path to recovery or seek help if they need further treatment.

Success of treatments can vary greatly between individuals and situations. At one end of a spectrum, a mental health issue can sometimes be "cured," which means

signs of the condition or disorder disappear and stay away indefinitely, or recovery can be reached, which means the person regains the level of functioning they had before the disorder. At the other end, symptoms can come and go over a lifetime and are managed with treatments or medications, possibly including periods of hospitalization. What happens for one person, and works for one person, may not work for someone else, even if they share the same disorder. Treatment decisions are individual and outcomes are unpredictable, but seeking help brings information, options, and support.

All decisions about treatment must be made with the help of information from a trained health care professional. As an adult education facilitator, you can only encourage the learner to seek help, give information about where help can be found, and support the learner in doing what works for them.

However, your support can be of real importance to recovery. **Achievements at school can boost confidence and create hope for the future, which can be crucial steps on the path to wellness.**

Who can be affected

Anyone can be affected by mental health issues. People of every race, culture, gender, age, education level, and economic status experience mental health conditions and disorders. However, certain “risk factors” are known to increase the odds of developing mental health issues.

Adult learners and increased risk

The life circumstances that often bring adults to continue their education can mean that adult learners are at increased risk for mental health conditions and disorders. For example, lack of educational opportunity can lead to low literacy and poverty, and these situations can bring a host of other life challenges leading to known risk factors. Therefore, there is a high likelihood that some adult learners will be living with mental health issues.

Risk factors

These factors increase the likelihood of experiencing mental health conditions or

Recovery from mental illness is unique to each individual. It emphasizes the journey an individual will take to become in control of their condition. Recovery may include self-help, feelings of empowerment, an understanding of the mental illness, social networks, sense of hope, a meaningful role in society and a positive personal identity. Learning is one way to improve wellbeing by addressing each of the aforementioned aspects of recovery. Those working in education have long recognised the benefits of lifelong learning. The Foresight report identified it as one of five ways to improve mental wellbeing.

Mental Health Foundation UK (2011)

disorders:

- job loss, unemployment, or poverty
- accidents, physical disability, or long-term illness
- being a care-giver for someone with a long-term disability or illness
- being a victim of crime, sexual assault, social discrimination, bullying, or harassment
- past or childhood trauma such as abuse or neglect
- life-threatening events, severe injury, witnessing injury or death, or exposure to natural disaster or war
- loss, such as the death of a loved one, end of a relationship, divorce
- substance abuse or dependence
- having a baby
- having a close relative who has experienced a mental health issue
- brain injury or injury at birth

Cultural risk factors

Certain cultural groups can have an increased risk of mental health issues due to experiences they share which lead to fear, instability, and lowered self-esteem. Individuals will carry a higher likelihood of mental health problems if their culture has experienced:

- systematic oppression, colonialism
- discrimination or racism
- war, genocide
- evacuation, displacement, encampment
- immigration and settlement
- generational poverty

Also, cultural attitudes and beliefs about mental health can affect an individual's ability to seek support and to find ways to move toward wellness.

Generational poverty

Generational poverty occurs when poverty is “passed” from generation to generation due to life circumstances. Poverty brings other risk factors for mental illness including:

- low literacy
- poor living conditions
- limited opportunities
- discrimination
- inadequate access to health care or health information
- inadequate access to healthy food, clothing, and proper housing

In addition to these obstacles, generational poverty can create a poverty “mind-set” as children watch parents struggle with barriers, and come to believe that poverty is their inevitable future. This mind-set itself can contribute to mental health problems.

Those living with generational poverty are at increased risk of mental illness, as life circumstances may not support mental wellness.

Information on generational poverty adapted from:

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Anyone can be affected

Being aware of these risk factors can increase understanding of mental health. However, mental health issues can happen to anyone regardless of their experiences.

What you can do:

Learners living with various mental health issues will experience some of the same challenges. Although their issues may differ, there are a few key ways you can approach supporting these learners in general.

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement

- ✓ don't argue or give advice
- ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

General learning strategies for learners living with mental health conditions and disorders

Learners living with mental health conditions and disorders typically share

certain challenges, and certain strategies may benefit all of these learners. The learning challenges and strategies listed below are shared by more than one of the four core groupings of mental health disorders examined in this guidebook. You will find these strategies repeated in the chapters pertaining to those groups of disorders, as well as in later chapters.

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. Learners living with mental health conditions and disorders who can develop ways to achieve in class often find that attending school helps with recovery. The satisfaction of completing steps towards a goal can increase self-esteem and help the learner regain a positive focus.

As an adult education facilitator you are never expected to diagnose a mental health issue. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For lack of energy or fatigue	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	

For lack of energy or fatigue	Notes
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Create a class schedule for work time and break time.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Seat the learner near others who share similar interests or with whom they have a positive relationship.</p>	

For lack of energy or fatigue	Notes
Work with the learner one on one.	
Help the learner set short-term, achievable goals.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Allow grazing on healthy snacks throughout the day where possible.	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Give opportunity to self-initiate short rest times when needed.	

For lack of energy or fatigue	Notes
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	
<p>Provide opportunities to use computer or other technology tools as part of instruction.</p>	
<p>Reduce homework or extend deadlines as needed.</p>	
<p>Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.</p>	

For lack of energy or fatigue	Notes
Have the learner record instructions (using an audio player) so they can listen again as needed.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Assess the learner on their effort rather than their grade, where appropriate.	
Deliver directions in a clear, concise, and supportive way.	
Encourage the learner to discover and draw on their own gifts and talents.	
If possible, alter the learner's schedule to start school later in the day.	

For anxiety, worry, stress	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with." (Handout # 6)</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Create a class schedule for work time and break time.</p>	

For anxiety, worry, stress	Notes
<p>With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	

For anxiety, worry, stress	Notes
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day. Encourage the learner to stick to the routine.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	

For anxiety, worry, stress	Notes
Encourage the learner to develop a support network of trusted family or friends.	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For anxiety, worry, stress	Notes
Give opportunity to self-initiate a short break when needed.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Reduce opportunities for competition or comparison of learner work.	
Reduce homework or extend deadlines as needed.	

For anxiety, worry, stress	Notes
Help the learner understand that it is OK to leave unfinished work for next time.	

For lowered concentration, attention span, or ability to make decisions	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)	
Seat the learner in a brightly lit area close to the center of instruction.	

For lowered concentration, attention span, or ability to make decisions	Notes
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Keep tasks short and structured. Include a variety of question types within a task.	
Make noise-cancelling headphones or ear plugs available.	
Create a class schedule for work time and break time.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>During instruction, present main points first.</p>	
<p>Design tasks so the learner must actively respond, for example, write on the board.</p>	
<p>Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Informally assess the learner's strengths in learning styles: auditory, visual, kinesthetic. Use the results to plan lessons and assessment.	
Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Use verbal rather than written assessment where possible, if appropriate.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	

For lowered concentration, attention span, or ability to make decisions

Notes

<p>Use concrete examples, or examples meaningful to the learner, for instruction or assessment.</p>	
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner's most alert time of day.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	

**For lowered concentration,
attention span, or ability
to make decisions**

Notes

<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.</p>	
<p>Provide written instructions that match verbal instructions.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	
Provide immediate positive feedback on comprehension-related activities.	
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Have the learner answer a question “in their head,” or jot down what they want to say, before responding.	
Use verbal questions about content to re-focus the learner on their task: “Remind me of the conflict in that story?”	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Provide the learner with test-taking strategies to help with multiple choice assessments. (Handout # 7)	
Reduce opportunities for competition or comparison of learner work.	
Encourage the learner to discover and draw on their own gifts and talents.	

For lowered concentration, attention span, or ability to make decisions	Notes
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Provide a study carrel or screen for reducing distractions during individual work time.	

For difficulty with organization	Notes
Provide a class calendar or schedule handout to remind learners of class times.	
Make use of phone calls or messaging to remind learners of class times.	
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	

For difficulty with organization	Notes
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	

For difficulty with organization	Notes
Provide all learners with information on time management skills. (Handout # 11)	
Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.	
Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.	

For difficulty with organization	Notes
<p>Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.</p>	
<p>Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.</p>	
<p>Encourage the learner to schedule time for completing unfinished work.</p>	
<p>Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.</p>	
<p>Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.</p>	
<p>Post group assignments and homework on the board and give enough time for learners to copy details.</p>	
<p>Provide positive feedback on all efforts and successes in organization.</p>	

For difficulty with organization	Notes
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For trouble with memory	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to remember information.	
Break work into definable, manageable chunks to avoid overload and confusion.	

For trouble with memory	Notes
Provide short, structured tasks.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
During instruction present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Informally assess auditory vs visual learning and memory skills. Use the results to plan lessons and assessment.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	

For trouble with memory	Notes
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to memorize.	
Try both massed and distributed practice for memory retention. Massed: have the learner work to memorize a piece of information until they know it. Distributed: work to memorize information in 15 minute bursts repeated throughout the day.	

For trouble with memory	Notes
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Try over-learning: continue to review the information regularly after it has been memorized.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	

For trouble with memory	Notes
Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout #12)	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	

For trouble with memory	Notes
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	
Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.	
Have the learner self-evaluate which memorization strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For mood swings	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	

For mood swings	Notes
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Stay calm and speak in a calm tone.	
Give instructions and directives in a supportive and respectful manner.	
When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."	
Give opportunity to self-initiate a short break when needed.	

For mood swings	Notes
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid taking the learner's words or behaviour personally.	

For self-criticism or pessimism	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Discuss appropriate outlets for feelings, such as writing in a journal.	
Provide evidence of ability: past successes or physical reminders of completed tasks.	

For self-criticism or pessimism	Notes
<p>Have the learner keep a record of accomplishments and successes. Help the learner plan to review it when feeling uncertain.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Discuss how feeling pessimistic is natural but public display of pessimism needs to be limited for the morale of all, as we all support one another.</p>	
<p>Avoid inadvertently rewarding the self-critical or pessimistic behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Encourage the learner to recognize that everyone has strengths and weaknesses. Model this attitude in your own self-reflection or self-evaluation.</p>	

For self-criticism or pessimism	Notes
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	

For self-criticism or pessimism	Notes
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Seat the learner away from others who share or feed into the pessimistic mood.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	

For frustration or anger	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."</p>	
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	
<p>Seat the learner near others who will help to maintain a positive tone.</p>	

For frustration or anger	Notes
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	
Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	

For frustration or anger	Notes
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Find ways to model using problem-solving strategies, perhaps as a group: "What can we do to make sure everyone has time on the computer?"	

For frustration or anger	Notes
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.</p>	

For frustration or anger	Notes
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.</p>	
<p>Give instructions and directives in a supportive and respectful manner.</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide the learner with an extra set of books or copies of work to take home.</p>	

For frustration or anger	Notes
Help the learner understand that it is OK to leave unfinished work for next time.	
Avoid taking the learner's words or behaviour personally.	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	
Use background music if it helps with focus.	
Place desks/seats far enough apart to allow for interpersonal space.	

For sensitivity to environmental factors	Notes
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	

For sensitivity to environmental factors	Notes
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For lateness or unexplained absences	Notes
Speak to the learner and find out what is going on: "I've noticed you've been late/absent lately. Is there something keeping you from attending class?"	
Discuss the importance of being on time and being reliable, for school and in the workplace – do not assume the learner inherently understands these middle-class expectations.	
Work with the learner to find ways to solve a problem that may be limiting attendance.	

For lateness or unexplained absences	Notes
<p>Make use of phone calls or messaging to remind learners of class times.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Take time to get to know the learner to develop rapport and build trust.</p>	
<p>Discuss how they can prepare for leaving home in the morning and help decide on a leaving time that will allow them to arrive on time.</p>	
<p>Create clear expectations for class participation. Have the learner track and document their own attendance, and set goals.</p>	

For lateness or unexplained absences	Notes
Develop and agree together on a contract for attendance expectations.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Ensure that learner tasks are neither too easy nor too hard.	
Begin the day with short tasks in which the learner can feel success.	
Reduce opportunities for competition or comparison of learner work.	
Reinforce attendance by accepting the learner back and helping them get started again after periods of absence.	

For lateness or unexplained absences	Notes
If the learner speaks openly about medication, discuss how the medication affects attendance and if it might be possible to time taking the medication to promote attendance (for example at night instead of in the morning).	
Do not force the learner to work with others with whom they may feel uncomfortable.	
Give the learner adequate time to complete tasks.	
Help the learner understand that it is OK to leave unfinished work for next time.	
If the learner must take a break to manage mental health, make it clear you will be ready to work with them when they are ready, and encourage them to come back.	

For side-effects of medication	Notes
Speak to the learner and find out what is going on: "Are you feeling OK?"	

For side-effects of medication	Notes
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Encourage the learner to keep track of difficult side-effects and check with their doctor.</p>	
<p>Ensure the learner has water available to drink.</p>	
<p>Ensure the learner has unlimited access to the washroom.</p>	
<p>Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.</p>	
<p>In case of blurred vision:</p> <ul style="list-style-type: none"> • use big print • use coloured paper (yellow recommended) • provide magnifying glass or suggest discount reading glasses • provide the learner with audio materials that replace or correspond to written materials 	

For side-effects of medication	Notes
<p>In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Allow the learner to occasionally take assignments home when side effects become too distracting.</p>	
<p>Reduce homework or extend deadlines as needed.</p>	
<p>Consider a shortened day or modified class schedule as necessary.</p>	

Chapter 5 References

General Information:

American Psychiatric Association (2016)

<https://www.psychiatry.org/>

Canadian Mental Health Association (2016)

<http://www.cmha.ca/>

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012)

Centre for Addiction and Mental Health CAMH (2012)

<http://www.camh.ca/en/hospital/Pages/home.aspx>

Cognitive Behaviour Therapy (2012)

https://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/CBT/Pages/default.aspx

Compassion Fatigue Awareness Project (2015)

<http://www.compassionfatigue.org/index.html>

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Government of Canada

The Human Face of Mental Health and Mental Illness in Canada (2006)

<http://www.phac-aspc.gc.ca/publicat/human-humain06/index-eng.php>

Meek, Fiona. (2013). *A Comprehensive Mental Health Training Format for Adult Education Teachers*. Electronic Thesis and Dissertation Repository. (1181)

Mental Health Commission of Canada

Mental Health First Aid Guide (2011)

Mental Health Commission of Canada (2016)

<http://www.mentalhealthcommission.ca/English/>

Mental Health Foundation (UK)

Learning for Life: Adult Learning, mental health and wellbeing (2011)

<http://www.eaea.org/media/policy-advocacy/ae-and-health/learning-for-life.pdf>

Mindsight, University of Ontario Institute of Technology (2010)

<http://mymindsight.uoit.ca/>

Stanyon, Wendy. (2014). *Presentation: Mental Health Awareness A Life Skill*.
University of Ontario Institute of Technology

Students First Project

<http://studentsfirstproject.org/>

The Learning & Teaching Office, Ryerson University

Engaging Adult Learners by Michelle Schwartz (2016)

<http://www.ryerson.ca/lt/>

Quotations and in-text citations:

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties page 9 (January 2012)

American Psychiatric Association (2016)

<https://www.psychiatry.org/>

Mental Health Foundation (UK)

Learning for Life: Adult Learning, mental health and wellbeing (2011)

<http://www.eaea.org/media/policy-advocacy/ae-and-health/learning-for-life.pdf>

Page 83

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc., page 49.

Learning Strategies adapted from the following sources:

British Columbia Ministry of Education

Teaching Students with Mental Health Disorders, Volume 2: Depression (2001)

https://www.bced.gov.bc.ca/specialed/docs/depression_resource.pdf

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners*. *New Directions for student services*, Wiley Periodicals, Inc. (no. 102).
<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013).
<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

LiveBinders by Mindprint Learning

Instructional strategies to support attention (2016)
<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014). *Pre-referral intervention manual (PRIM): The most common learning and behaviour problems encountered in the educational environment*, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Students First Project

School and Classroom Strategies (2016)
<http://studentsfirstproject.org/>

Chapter 6: Mood Conditions and Disorders

Mood conditions and disorders can be described as living with feelings – lows and highs – that can limit daily functioning. Everyone experiences a variety of emotions, sometimes for no known reason, sometimes as a result of a life change, or a disappointment, loss, or tragedy. But those experiencing mood conditions or disorders are living with a different set of sensations and symptoms than the typical or expected feelings that accompany the ups and downs of life.

People with mood disorders experience moods outside the normal range that are longer in duration with more severe symptoms.

Mental Health Commission of Canada (2011)

For someone who has not experienced a mood condition or disorder, it can be hard to understand. People living with these mental health issues are often told to “snap out of it” or “think positively.” It’s important to remember that this mental health issue is beyond an individual’s sole control. Mood conditions or disorders most often require treatment.

According to Statistics Canada, mood disorders affect 7.8% of our population (2014). The Canadian Mental Health Association states that 36% of Canadians report experiencing depression or anxiety at some point in their lives (2002-2003).

There is a high likelihood that some adult learners will be living with these issues.

Types of Mood Conditions or Disorders

There are two types of mood conditions or disorders – depressive and bipolar.

Depressive conditions or disorders

The word “depressed” has been popularized to describe a person simply having a down day. But depression as a medical term refers to a mental health condition which produces a severely low mood that can not be easily shifted or does not change with an improvement in minor circumstances. Depressive conditions or disorders can be triggered by life situations, or may appear without relation to life events.

Depressive conditions and disorders are categorized into types: dysthymia, depression (sometimes called major depression), postpartum depression, and seasonal affective disorder.

Dysthymia and depression share similar symptoms.

Dysthymia refers to a persistent, mild depression of long duration. A person experiencing dysthymia may feel they have always felt low. This condition, especially if untreated, can grow into an episode of severe depression. When a person living with a mild chronically low mood develops a depressive episode, this disorder is sometimes referred to as “double depression,” as one set of symptoms layers on another. People who experience dysthymia are more prone to developing a depressive disorder.

Depression, major depression, depressive disorder, or major depressive disorder all refer to a severely low mood accompanied by a loss of interest or enjoyment in most or all daily activities. This mental health disorder may include feelings of sadness, instability or uncertainty, anxiety, anger, hopelessness, guilt or worthlessness, thoughts of death, or thoughts or plans of suicide. Severity of symptoms varies, but all of these terms describe a feeling of sadness or very low mood that lasts more than 2 weeks.

Depression is sometimes described as “unipolar,” meaning that this low feeling is not punctuated or followed by an accompanying higher mood.

Postpartum Depression refers to a severe depressive episode after childbirth. This disorder includes the standard symptoms of depression and can also include obsessive thoughts about the baby’s health or thoughts of harming the child.

Seasonal Affective Disorder (SAD) refers to depression that occurs in a cyclical pattern related to seasons, usually occurring in colder climates when daylight hours become shorter. It shares similar symptoms with other depressive conditions or disorders.

Bipolar disorder

Once called manic depression, bipolar disorder or bi-polar affective illness refers to a mental health disorder in which a person experiences extreme mood highs and lows.

In both conditions, a person can have a low or irritable mood, a decrease in pleasure, and a loss of energy. They feel ... unmotivated and disengaged from the world. Appetite and weight can increase or decrease. The person may sleep too much or have trouble sleeping. He or she may have difficulty concentrating. The person may be indecisive and pessimistic and have a poor self-image.

*Harvard School of Medicine
2010 - 2016*

During the high mood, referred to as a “manic” state, a person experiences hyperactivity accompanied by racing thoughts and little need for sleep. The individual may feel a heightened sense of self-importance, leading to careless acts such as shopping sprees or uncharacteristic sexual relationships, or a sense of invincibility or believing they have special powers, leading to more drastic, physically dangerous, life threatening, or illegal acts. A manic state can produce an altered sense of what is real, including delusional thoughts or hearing voices that do not exist for others.

A person living with bipolar disorder will experience both this elevated, manic state as well as episodes of severe depression with the same symptoms as other depressive disorders. The two

states can follow one another closely or there can be a long time gap between one state and the other. A person experiencing this mental health disorder might switch unpredictably or rapidly from one emotional state to another, making it impossible to follow routine or gain stability in daily functioning. The person may not be able to recognize or acknowledge the condition, especially in the manic state.

In the medical world, the switching back and forth between depression and mania is called ‘cycling’ and can be different from person to person. There can be several episodes of mania and one of depression, or the opposite. Cycles can happen at different rates ... depending on stress, medication, and other environmental factors.

*Canadian Mental Health Association
Grand River, Guelph (2012)*

Causes of mood conditions and disorders

Mood conditions and disorders can have many causes, including genetics; environmental or situational factors such as living conditions, life experiences, or trauma; entrenched thought or behaviour patterns; imbalances in brain chemistry or hormones; certain medications; or substance dependence.

Diagnosis of mood conditions and disorders

Those experiencing symptoms of depression or mania can ask their doctor for an assessment. In urban centres some Canadian Mental Health Association branches conduct informal assessment, or can give information on mental health services in the area. Unfortunately attaining an accurate diagnosis and effective treatment plan can take time, especially for bipolar disorder, in part because a person might only feel the need to find help during a depressive episode. Seeking help as soon as possible, and being prepared with details of the symptoms,

their severity, and when they were noticed, can improve the speed of diagnosis, treatment, and recovery.

Those experiencing a mental health crisis (such as overwhelming sadness, dangerous mania, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

Treatments for mood conditions and disorders

Treatments for mood conditions and disorders include Cognitive Behavioural Therapy (CBT), support groups, light therapy, and medications. A combination of treatments is often prescribed. Individuals can sometimes regain full functioning after a mood disorder, or may live with their condition or disorder long-term, requiring ongoing treatment.

Cognitive Behavioural Therapy (CBT), sometimes known as “talk” therapy, is a counselling method that helps an individual recognize, monitor, and gain control of symptoms from, or recover from, a mood condition. This therapy can help a person to determine the triggers or causes for situational depression and help them make changes to their situation, or to develop new ways of responding to life challenges.

The idea that “simply talking” to a therapist could help or cure a mood issue seems to suggest that the person was simply needing to be “talked out of it” or that mood conditions could be controlled or cured if a person just tried harder to think positive thoughts. Also, when people react differently to similar situations – for example, a divorce causes depression in one person but not another – it can lead to the idea that the depressed person just needs to “buck up.” These misconceptions can be very harmful to those living with mood conditions and disorders.

Sometimes mood conditions can be resolved by a change in thoughts and behaviour patterns, but that doesn’t mean the individual was being stubborn or weak. Those living with mental health conditions cannot control their illness simply by thinking their way out of it. A variety of factors contribute to the reasons why a person experiences depression or bipolar disorder, and a variety of factors affect recovery. Individuals often need help to recognize and treat their condition.

(CBT) teaches you how your thoughts, feelings, and behaviours work together. It also teaches important skills like solving problems, managing stress, realistic thinking, and relaxation. CBT is often the first treatment to try if you experience mild or moderate problems with depression.

Canadian Mental Health Association (2012)

Cognitive Behavioural Therapy is a recognized system of treatment that must be administered by a trained, licensed provider.

Support Groups

Mood conditions and disorders can be difficult to recognize, live with, and acknowledge, and can result in social withdrawal or isolation. Support groups offer a safe space to talk about feelings and challenges with others who can truly understand. Support groups can help individuals recognize and manage symptoms and relapses, get suggestions for health care services and treatment options, and/or recover from a mood disorder.

Light Therapy

Light therapy may reduce or eliminate depressive symptoms for those experiencing Seasonal Affective Disorder (SAD).

Medications

Mood conditions or disorders may improve or completely resolve with behavioural or social therapies, but more severe or persistent disorders often require medication. Bipolar disorder usually requires medication to control symptoms.

While medication can help with some symptoms, they can't get rid of the thinking patterns or beliefs that can drive mood problems. Most people use a combination of medication and counselling.

Canadian Mental Health Association (2012)

Antidepressants are the type of medication most frequently prescribed for depression. These drugs act on the chemistry of the brain.

Mood stabilizers that even out extreme states are used to treat bipolar disorder. Sometimes individuals living with bipolar disorder are first diagnosed with a unipolar depressive condition, perhaps because the accompanying manic state is not obvious yet, or because the person, at least at first, feels the manic state is their baseline state, or a positive state not requiring treatment. Antidepressants can make the symptoms of bipolar disorder worse, so the person may experience a frustrating time of confusing or frightening symptoms until they receive proper diagnosis and treatment.

Medications do not have the ability to cure a mental health condition or disorder. Medications are prescribed to alleviate symptoms so the person can gain stability in their life and pursue activities leading to recovery, and so other treatments can have more chance of success.

All medications used to treat mood disorders produce side effects.

Side effects of antidepressants can include:

- fatigue
- weight loss
- trouble sleeping
- headaches
- blurred vision
- dry mouth

Side effects of mood stabilizing medications used to treat bipolar disorder can include:

- drowsiness
- nausea
- weight gain
- headache
- dizziness
- memory loss
- blurred vision
- thirst

Finding the right type and dosage of medication is often a matter of trial and error, and takes patience. All medications have some sort of side effect and everyone responds differently.

*Canadian Mental Health Association
Grand River, Guelph (2012)*

Sometimes side effects take time to develop. Sometimes the initial side effects will wear off over time. Keeping track of side effects can help the health care professional to alter the medication as necessary to find an effective type or dose.

Starting a new and powerful medication can be stressful, and if it doesn't seem to work, or produces worrying side-effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medications for a mood disorder needs careful and regular monitoring by a health care professional.

Concurrent disorders, co-occurring disorders, and other risks

Substance related disorder

A person living with a mood condition or disorder may also live with a substance related disorder. When a mental health disorder combines with a substance related disorder they are termed concurrent disorders. People living with mood

disorders may use alcohol or drugs to help them alleviate painful feelings or unmanageable symptoms – an act known as “self-medicating” – or those who use substances may develop mood conditions or disorders.

Anxiety disorders

A person living with a mood condition or disorder may also experience an anxiety disorder. Anxiety can be a symptom of depression.

Suicide

People experiencing mood conditions can experience thoughts of suicide or may plan, attempt, or enact death by suicide. Those living with bipolar disorder can be more likely to die by suicide during an episode of mania than an episode of depression, as a manic state can lead to dangerous or life-threatening acts while feeling a sense of invincibility. All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Anyone can be affected by these mental health issues, but **according to the Mental Health Commission of Canada (2011)**, these factors increase the odds of experiencing mood conditions or disorders:

- the end of a relationship, divorce
- having a baby
- job loss, unemployment, or poverty
- accidents, physical disability, or long-term illness
- being a care-giver for someone with a long-term disability or illness
- being a victim of crime, social discrimination, bullying, or harassment
- death of a loved one, either recently or in the past
- having a close relative who has experienced a mood disorder
- being female (women are twice as likely to experience depression as men)
- having greater sensitivity or heightened awareness of emotions

What you might notice

Living with depression or bipolar disorder can be a difficult road, and talking about these issues can be overwhelmingly hard, partly because depression often produces extremely low self-esteem. When a person feels a crushing sense of worthlessness, it can be impossible to recognize their condition or talk about their feelings, and not within their capability to ask for the help they need to

manage in their daily tasks or to seek treatment. In all likelihood they blame their negative feelings on themselves, and the stigma attached to these disorders – the idea that the person could get over it if they only tried harder – only adds to their shame and embarrassment.

An adult learner living with a mood condition or disorder may report a diagnosis or suspected diagnosis, or the symptoms they experience. In many cases, however, they may not report their issues or not be aware of them.

No matter how much information you have, you always have what you observe.

The learner experiencing depression might:

- appear lethargic, sad, or emotionless
- become discouraged easily and express helplessness: “I can’t do it”
- say they are a failure, they are worthless, or that everything is their fault
- express giving up on everything: “what’s the point”
- say no one likes them

The learner experiencing a manic state might:

- show increased energy or hyperactivity
- act on top of the world, feel happy or high
- report sleeping less or not at all
- speak more quickly, make quick mental leaps
- express grandiose thoughts or delusions
- act in dangerous or irrational ways
- exhibit extreme ups and downs

Keep in mind that symptoms you observe can result from a disorder or from a medication used to treat the disorder.

Supporting learners living with mood conditions or disorders

Mood issues can range from mild to severe, and can occur for a variety of reasons, abruptly or gradually, and for varying lengths of time. You may observe that

We may not perceive crisis as a way to grow, yet experience shows that people are incredibly resilient and crises can become powerful opportunities for creating change.

Canadian Mental Health Association
Grand River, Guelph (2012)

symptoms come and go, and a learner's symptoms may be managed or partially managed with treatments.

Strengths

People living with mood issues are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a strong visual learner might benefit from using graphic organizers. Regardless of possible or reported mental health issues, you can use your knowledge of learning styles and strategies to support any learner.

Those on a journey of mental health recovery often have increased compassion or understanding for the situations of others. The learner living with a mood condition or disorder might be able and willing to help others in the class. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Those living with issues of depression often experience a crisis which compels them to make changes in their lives. Pursuing treatment and recovery can be a powerful impetus for positive change, growth, and learning. People living with mental health issues are developing strength and resiliency. Everyone can learn from someone who lives with mental health issues and is taking steps to overcome challenges.

Your strength in supporting learners living with mental health issues will come in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Challenges

Learners living with mood conditions or disorders may face the following challenges in the classroom:

- sadness or mood sensitivity, crying, or expression of “no one likes me”
- lethargy or depression
- anxiety, worry, stress
- self-criticism or pessimism
- lack of energy or chronic fatigue
- lowered concentration, attention span, or ability to make decisions
- trouble with memory

- difficulty with organization
- lack of attention to personal hygiene
- lack of interest in class work
- lateness or unexplained absences
- mood swings between irritability and euphoria
- hyperactivity
- frustration or anger (especially in men experiencing depression)
- sensitivity to environmental factors
- side effects from medication

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment

- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with mood conditions or disorders

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate moods or emotions but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with mood disorders who can develop ways to achieve in class often find that attending school helps with recovery.** The satisfaction of completing steps towards a goal can increase self-esteem and, when the learner is ready, help to spark a more positive outlook for the future.

As an adult education facilitator you are never expected to diagnose a mental health issue. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Validate the learner’s feelings: “It’s OK to feel that way.” “That’s a lot to deal with.”	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Discuss appropriate outlets for feelings, such as writing in a journal.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Begin the day with short tasks in which the learner can feel success.	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Check in frequently to monitor progress and give encouragement.	
Discuss how crying is natural but public display of emotion needs to be limited to an appropriate length of time.	
Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.	
Give opportunity to self-initiate a short break when needed.	
Keep a positive tone; use humour if appropriate. Avoid sarcasm.	
Find opportunities to share humour as a class, for example with a daily cartoon.	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Do something fun as a class, such as a lunchtime game.	
Create an inviting classroom. Display motivational posters or quotes.	
Do not assume that others are treating them nicely. There may be truth in their concern. Take time to review class policies of inclusiveness and mutual support with all learners as a group.	
Seat the learner near others who will help to maintain a positive tone.	
Have the learner work with another who will demonstrate patience and kindness.	
Talk privately about what might be limiting social success while avoiding being drawn into “always” or “never” thinking. Perhaps an inadvertent behaviour puts people off: “Is it possible that people sometimes misinterpret your social cues?” Provide the learner with information on social skills. (Handout # 15)	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Consider offering information to all learners about developing and growing social skills. (Handout # 15)	
Encourage the learner to develop a support network of trusted family or friends.	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Show enthusiasm for accomplishments or positive events in the learner’s life.	
Point out that attendance in itself is an accomplishment.	
Design tasks so the learner must actively respond, for example, write on the board.	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Reduce homework or extend deadlines as needed. Mood disorders can make ordinary tasks appear insurmountable.	

For lethargy or depression	Notes
Validate the learner’s feelings: “It’s OK to feel that way.” “That’s a lot to deal with.”	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
If possible, alter the learner’s schedule to start school later in the day.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Begin the day with short tasks in which the learner can feel success.	

For lethargy or depression	Notes
Check in frequently to monitor progress and give encouragement.	
Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.	
Seat the learner near others who will help to maintain a positive tone.	
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Give opportunity to self-initiate a short break when needed.	

For lethargy or depression	Notes
<p>Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.</p>	
<p>Work with the learner one on one.</p>	
<p>Help the learner set short-term, achievable goals.</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner's most alert time of day.</p>	
<p>Allow grazing on healthy snacks throughout the day where possible.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	

For lethargy or depression	Notes
Provide opportunities to use computer or other technology tools as part of instruction.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Assess the learner on their effort rather than their grade, where appropriate.	

For lethargy or depression	Notes
Design tasks so the learner must actively respond, for example, write on the board.	
Deliver directions in a clear, concise, and supportive way.	
Encourage the learner to discover and draw on their own gifts and talents.	
Show enthusiasm for accomplishments or positive events in the learner's life.	
Point out that attendance in itself is an accomplishment.	

For anxiety, worry, stress	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with." (Handout # 6)	

For anxiety, worry, stress	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Discuss appropriate outlets for feelings, such as writing in a journal.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Begin the day with short tasks in which the learner can feel success.	
Check in frequently to monitor progress and give encouragement.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.	

For anxiety, worry, stress	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	

For anxiety, worry, stress	Notes
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day. Encourage the learner to stick to the routine.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	

For anxiety, worry, stress	Notes
Encourage the learner to develop a support network of trusted family or friends.	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For anxiety, worry, stress	Notes
Give opportunity to self-initiate a short break when needed.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Reduce opportunities for competition or comparison of learner work.	
Reduce homework or extend deadlines as needed.	

For anxiety, worry, stress	Notes
<p>Help the learner understand that it is OK to leave unfinished work for next time.</p>	

For self-criticism or pessimism	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	
<p>Provide evidence of ability: past successes or physical reminders of completed tasks.</p>	
<p>Have the learner keep a record of accomplishments and successes. Help the learner plan to review it when feeling uncertain.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	

For self-criticism or pessimism	Notes
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Discuss how feeling pessimistic is natural but public display of pessimism needs to be limited for the morale of all, as we all support one another.</p>	
<p>Avoid inadvertently rewarding the self-critical or pessimistic behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Encourage the learner to recognize that everyone has strengths and weaknesses. Model this attitude in your own self-reflection or self-evaluation.</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	

For self-criticism or pessimism	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	

For self-criticism or pessimism	Notes
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Seat the learner away from others who share or feed into the pessimistic mood.</p>	
<p>Make use of videos and handouts that offer tips to deal with school-related anxiety. One resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	

For lack of energy or chronic fatigue	Notes
<p>Validate the learner’s experience: “I know this is difficult for you right now.”</p>	

For lack of energy or chronic fatigue	Notes
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Create a class schedule for work time and break time.</p>	

For lack of energy or chronic fatigue	Notes
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Seat the learner near others who share similar interests or with whom they have a positive relationship.</p>	
<p>Work with the learner one on one.</p>	
<p>Help the learner set short-term, achievable goals.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Allow grazing on healthy snacks throughout the day where possible.</p>	

For lack of energy or chronic fatigue	Notes
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner's most alert time of day.</p>	
<p>Give opportunity to self-initiate short rest times when needed.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	
<p>Provide opportunities to use computer or other technology tools as part of instruction.</p>	

For lack of energy or chronic fatigue	Notes
Reduce homework or extend deadlines as needed.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	
Have the learner record instructions (using an audio player) so they can listen again as needed.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	

For lack of energy or chronic fatigue	Notes
Assess the learner on their effort rather than their grade, where appropriate.	
Deliver directions in a clear, concise, and supportive way.	
Encourage the learner to discover and draw on their own gifts and talents.	
If possible, alter the learner's schedule to start school later in the day.	

For lowered concentration, attention span, or ability to make decisions	Notes
Validate the learner's experience: "I know this is difficult for you right now."	

**For lowered concentration,
attention span, or ability
to make decisions**

Notes

<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.</p>	
<p>Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.</p>	
<p>Keep tasks short and structured. Include a variety of question types within a task.</p>	
<p>Make noise-cancelling headphones or ear plugs available.</p>	
<p>Create a class schedule for work time and break time.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Break work into definable, manageable chunks to avoid overload and confusion.	
During instruction, present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Informally assess the learner's strengths in learning styles: auditory, visual, kinesthetic. Use the results to plan lessons and assessment.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Use verbal rather than written assessment where possible, if appropriate.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.</p>	
<p>Use concrete examples, or examples meaningful to the learner, for instruction or assessment.</p>	
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	

For lowered concentration, attention span, or ability to make decisions	Notes
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	

For lowered concentration, attention span, or ability to make decisions	Notes
Provide immediate positive feedback on comprehension-related activities.	
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Use verbal questions about content to re-focus the learner on their task: “Remind me of the conflict in that story?”</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Provide the learner with test-taking strategies to help with multiple choice assessments. (Handout # 7)	
Reduce opportunities for competition or comparison of learner work.	
Encourage the learner to discover and draw on their own gifts and talents.	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For lowered concentration, attention span, or ability to make decisions	Notes
Provide a study carrel or screen for reducing distractions during individual work time.	

For trouble with memory	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to remember information.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide short, structured tasks.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	

For trouble with memory	Notes
During instruction present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Informally assess auditory vs visual learning and memory skills. Use the results to plan lessons and assessment.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For trouble with memory	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to memorize.	
Try both massed and distributed practice for memory retention. Massed: have the learner work to memorize a piece of information until they know it. Distributed: work to memorize information in 15 minute bursts repeated throughout the day.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Try over-learning: continue to review the information regularly after it has been memorized.	

For trouble with memory	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	
<p>Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	

For trouble with memory	Notes
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	

For trouble with memory	Notes
<p>Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.</p>	
<p>Have the learner self-evaluate which memorization strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.</p>	

For difficulty with organization	Notes
<p>Provide a class calendar or schedule handout to remind learners of class times.</p>	
<p>Make use of phone calls or messaging to remind learners of class times.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	

For difficulty with organization	Notes
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Provide all learners with information on time management skills. (Handout # 11)</p>	

For difficulty with organization	Notes
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.</p>	
<p>Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.</p>	
<p>Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.</p>	

For difficulty with organization	Notes
Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.	
Encourage the learner to schedule time for completing unfinished work.	
Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.	
Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.	
Post group assignments and homework on the board and give enough time for learners to copy details.	
Provide positive feedback on all efforts and successes in organization.	
Provide the learner with an extra set of books or copies of work to take home.	

For difficulty with organization	Notes
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For lack of attention to personal hygiene	Notes
Set hygiene rules or decide as a group on hygiene rules for the class.	
Draw learner aside and candidly discuss that when working in a group there is a standard of hygiene to follow.	
Provide time for learners to clean up before beginning class.	
Provide basic emergency hygiene supplies such as toothbrushes, wipes, combs.	

For lack of attention to personal hygiene	Notes
Provide information for all learners on expectations for personal hygiene in class and in the workplace.	
Make a health unit available that includes hygiene for all to learn more about caring for oneself. One resource to try from Haldimand Norfolk Health Unit: https://hnhu.org/health-topic/hygiene/	
Set an example.	
Comment positively on progress: "You look neat and ready to work today."	

For lack of interest in class work	Notes
Speak to the learner and find out what is going on: "I sense the class work isn't doing a very good job of holding your interest – is that happening?"	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	

For lack of interest in class work	Notes
Present tasks in an attractive and interesting way, such as in a folio, display, or video.	
Present tasks appealing to multiple senses, using written instructions, illustrations or cartoons, audio components, or videos.	
Find ways to demonstrate how course content relates to real-world applications.	
Engage guest speakers to visit and talk about real-world applications for course content.	
Provide the learner with reliable links to websites for research in their course content area.	
Give the learner opportunities to help other learners.	
Encourage the learner to discover and draw on their own gifts and talents.	

For lack of interest in class work	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Seat the learner near others who share similar interests or with whom they have a positive relationship.	
Provide opportunities to use computer or other technology tools as part of instruction.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	
Use storytelling to approach instruction or tasks.	
Provide the learner with an extra set of books or copies of work to take home.	

For lack of interest in class work	Notes
Offer an appropriate online course related to course content.	
Have the learner create their own visual and tactile reward system for tasks completed, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.	

For lateness or unexplained absences	Notes
Speak to the learner and find out what is going on: "I've noticed you've been late/absent lately. Is there something keeping you from attending class?"	
Discuss the importance of being on time and being reliable, for school and in the workplace – do not assume the learner inherently understands these middle-class expectations.	
Work with the learner to find ways to solve a problem that may be limiting attendance.	
Make use of phone calls or messaging to remind learners of class times.	

For lateness or unexplained absences	Notes
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Take time to get to know the learner to develop rapport and build trust.	
Discuss how they can prepare for leaving home in the morning and help decide on a leaving time that will allow them to arrive on time.	
Create clear expectations for class participation. Have the learner track and document their own attendance, and set goals.	
Develop and agree together on a contract for attendance expectations.	

For lateness or unexplained absences	Notes
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Reinforce attendance by accepting the learner back and helping them get started again after periods of absence.</p>	
<p>If the learner speaks openly about medication, discuss how the medication affects attendance and if it might be possible to time taking the medication to promote attendance (for example at night instead of in the morning).</p>	

For lateness or unexplained absences	Notes
Do not force the learner to work with others with whom they may feel uncomfortable.	
Give the learner adequate time to complete tasks.	
Help the learner understand that it is OK to leave unfinished work for next time.	
If the learner must take a break to manage mental health, make it clear you will be ready to work with them when they are ready, and encourage them to come back.	

For mood swings between irritability and euphoria	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	

For mood swings between irritability and euphoria	Notes
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Stay calm and speak in a calm tone.	
Give instructions and directives in a supportive and respectful manner.	
When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."	

For mood swings between irritability and euphoria	Notes
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid taking the learner's words or behaviour personally.	

For hyperactivity	Notes
Ask the learner what strategies they already know work best for them to get started and to stay on task.	

For hyperactivity	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Talk with the learner and remind them of the importance of their work and putting in their best efforts.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Schedule more complex or important tasks for times when attention is more likely to be high, for example, one hour after medication.	
Discuss the optimal seating plan with the learner. Sitting apart from others may reduce distractions.	
Seat the learner away from visual distractions such as a window.	

For hyperactivity	Notes
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.</p>	
<p>Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.</p>	
<p>Avoid learning methods where the learner must listen for an extended period of time.</p>	

For hyperactivity	Notes
Design tasks so the learner must actively respond, for example, write on the board.	
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
Encourage the learner to develop a mantra to repeat before engaging in listening or in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Have the learner use the computer for tasks where applicable and appropriate.	
Provide the learner with information on strategies for concentration. (Handout # 5)	

For hyperactivity	Notes
Use hands-on activities where possible, including flash-cards, games such as Sudoku or crosswords, and manipulatives for practicing math concepts.	
Give verbal instructions before handing out written materials. Provide both verbal and written instructions.	
Gain the learner's attention before giving verbal instructions. Speak slowly.	
Praise the learner for their efforts to stay in their seat and stay on task.	
Give instructions and directives in a supportive and respectful manner.	
Present one concept at a time. Check for understanding before presenting the next concept.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	

For hyperactivity	Notes
Check in frequently to monitor progress and give encouragement.	
Give verbal instructions close at hand rather than from across the room.	
Establish steps for effective listening: stop working, remove hands from materials, look at the source of instructions, wait until all the instructions are done before asking questions or beginning work.	
Establish steps for asking questions: listen to instructions first, repeat instructions to yourself, develop questions, write down questions, ask questions, record needed reminders, begin task.	
Demonstrate the task for the learner as you give verbal instructions.	
Encourage the learner to try one step of the task first before asking for help, if appropriate.	
Ask the learner to repeat instructions back to you.	

For hyperactivity	Notes
<p>Comment positively on efforts to listen effectively: "You did a great job with repeating every step that time."</p>	
<p>Have the learner record instructions (using an audio player) so they can listen again as needed.</p>	
<p>When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."</p>	
<p>Allow the learner to occasionally take assignments home when the class atmosphere is too distracting.</p>	
<p>Consider a shortened day or modified class schedule as necessary.</p>	
<p>Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.</p>	
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	

For hyperactivity	Notes
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For frustration or anger	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	

For frustration or anger	Notes
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	
<p>Seat the learner near others who will help to maintain a positive tone.</p>	
<p>Give the learner opportunities to help other learners.</p>	
<p>Explain the reasoning behind course content or task requirements.</p>	
<p>Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	

For frustration or anger	Notes
Ensure that learner tasks are neither too easy nor too hard.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	

For frustration or anger	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Find ways to model using problem-solving strategies, perhaps as a group: "What can we do to make sure everyone has time on the computer?"	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."	

For frustration or anger	Notes
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.</p>	
<p>Give instructions and directives in a supportive and respectful manner.</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	

For frustration or anger	Notes
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide the learner with an extra set of books or copies of work to take home.</p>	
<p>Help the learner understand that it is OK to leave unfinished work for next time.</p>	
<p>Avoid taking the learner's words or behaviour personally.</p>	

For sensitivity to environmental factors	Notes
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.</p>	

For sensitivity to environmental factors	Notes
Use background music if it helps with focus.	
Place desks/seats far enough apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	

For sensitivity to environmental factors	Notes
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side-effects of medication	Notes
Speak to the learner and find out what is going on: "Are you feeling OK?"	

For side-effects of medication	Notes
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Encourage the learner to keep track of difficult side-effects and check with their doctor.	
Ensure the learner has water available to drink.	
Ensure the learner has unlimited access to the washroom.	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
<p>In case of blurred vision:</p> <ul style="list-style-type: none"> • use big print • use coloured paper (yellow recommended) • provide magnifying glass or suggest discount reading glasses • provide the learner with audio materials that replace or correspond to written materials 	

For side-effects of medication	Notes
<p>In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Allow the learner to occasionally take assignments home when side effects become too distracting.</p>	
<p>Reduce homework or extend deadlines as needed.</p>	
<p>Consider a shortened day or modified class schedule as necessary.</p>	

Chapter 6 References

General Information:

Bipolar Happens

Bipolar Medication and Side Effects by Julie A. Fast (2016)
<http://www.bipolarhappens.com/bipolar-medication-side-effects/>

British Columbia Ministry of Education

Teaching Students with Mental Health Disorders, Volume 2: Depression (2001)
https://www.bced.gov.bc.ca/specialed/docs/depression_resource.pdf

Canadian Mental Health Association

Mood Disorders (2016)
<http://www.cmha.ca/mental-health/understanding-mental-illness/mood-disorders/>

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012)

Drugwatch

Antidepressants and SSRIs (2016)
<https://www.drugwatch.com/ssri/>

Harvard School of Medicine

Dysthymia: What is it? (September 2000)
www.health.harvard.edu/depression/dysthymia

Johnstone, Matthew. (2006). *Living with a black dog: His name is depression*. Kansas City, MO: Andres McMeel Publishing.

Mental Health Commission of Canada

Mental Health First Aid Guide (2011)
and
<http://www.mentalhealthcommission.ca/English/>

Psych Congress Network

How to Differentiate Bipolar Disorder from Unipolar Depression, July 8, 2013
<http://www.psychcongress.com/article/how-differentiate-bipolar-disorder-unipolar-depression-12483>

Quotations and information cited in-text:

Mental Health Commission of Canada

What is a Mood Disorder? Mental Health First Aid Guide, page 3:1 (2011).

Statistics Canada

Mood disorders by age group and sex (2014)

<http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/health113b-eng.htm>

Canadian Mental Health Association

The effects of depression and anxiety on Canadian society (2002 – 2003)

http://www.cmha.ca/public_policy/the-effects-of-depression-and-anxiety-on-canadian-society/#.WBDLuegrLIU

Harvard School of Medicine

Dysthymia (2010 – 2016)

www.health.harvard.edu/depression/dysthymia

Canadian Mental Health Association Grand River Branch, Guelph

Understanding Bipolar Disorder. Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 26 (January 2012).

Canadian Mental Health Association

Depression and Bipolar Disorder (2012)

http://www.cmha.ca/mental_health/facts-about-depression-and-bipolar-disorder/#.WQY3WNLythF

Canadian Mental Health Association

Understanding Mental Illness: Mood Disorders (2012)

<http://www.cmha.ca/mental-health/understanding-mental-illness/mood-disorders/>

Canadian Mental Health Association Grand River Branch, Guelph

Points to remember about all medications. Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 111 (January 2012)

Canadian Mental Health Association Grand River Branch, Guelph

Coping with crisis. Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 37 (January 2012)

Mental Health Commission of Canada

Risk Factors. Mental Health First Aid Guide, page 3:5 (2011)

Learning Strategies adapted from the following sources:

British Columbia Ministry of Education

Teaching Students with Mental Health Disorders, Volume 2: Depression (2001)

https://www.bced.gov.bc.ca/specialed/docs/depression_resource.pdf

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners*. *New Directions for student services*, Wiley Periodicals, Inc. (no. 102).
<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)
<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

International Bipolar Foundation

Accommodations for students with bipolar disorder and related disabilities (2016)
<http://ibpf.org/article/accommodations-students-bipolar-disorder-and-related-disabilities>

LiveBinders by Mindprint Learning

Instructional strategies to support attention (2016)
<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014). *Pre-referral intervention manual (PRIM): The most common learning and behaviour problems encountered in the educational environment*, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Students First Project

School and Classroom Strategies: Bipolar Disorder (2016)
<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-Bipolar-Strategies-2.24.14.pdf>

School and Classroom Strategies: Depression (2016)
<http://studentsfirstproject.org/wp-content/uploads/School-and-Classroom-Depression-Strategies-2.24.14.pdf>

Chapter 7: Anxiety Disorders

When we feel threatened or out of control of our surroundings, these stressors produce anxiety. Anxiety consists of mental symptoms of fear, as well as physical changes that allow the body to put all of its resources into getting ready to face the threat or run from danger.

Everyone experiences anxiety, which is in fact a helpful mechanism that allows us to recognize and avoid danger, and spurs us to solve problems. Usual anxiety lasts for a short time and is appropriate to a fearful situation. But the fear produced by an anxiety disorder affects a person's feelings, thoughts, and actions in ways that do not serve a useful purpose and that limit their full participation in life.

An anxiety disorder causes unexpected or unhelpful anxiety that seriously impacts our lives, including how we think, feel, and act.

Canadian Mental Health Association (2016)

Anxiety disorders produce severe and long-lasting symptoms out of proportion to the situation or circumstances. The body prepares for a threat that does not exist, although to the individual, the fear is very real. Left untreated, anxiety disorders can result in other bodily illnesses, mental health issues such as depression, or thoughts or acts of suicide.

Severe anxiety is a very uncomfortable, unwanted feeling. Symptoms can range from anxious thoughts, sweating and shakiness, to a full panic attack which feels frighteningly similar to a heart attack. People who live with anxiety disorders do not have sole control over their symptoms and are not acting out to seek attention or to avoid work or responsibilities. Anxiety disorders often require treatment to control symptoms or to resolve.

According to the Canadian Mental Health Association (2016), anxiety disorders are the most common mental health issue in Canada. The Mental Health Commission of Canada (2011) states that more than 1 in 10 Canadians live with an anxiety disorder.

There is a high likelihood that some adult learners will be living with these issues simply because of the rate at which we now know these issues occur in the general population, but as well because many of the risk factors for anxiety disorders correspond with lack of educational opportunities, poverty, or unemployment. Since adult learners often experience these issues, they may be at increased risk.

Types of Anxiety Disorders

There are several types of anxiety disorders: Generalized Anxiety Disorder (GAD), Panic Attack or Panic Disorder, Phobia Disorders including Social Anxiety Disorder, Obsessive Compulsive Disorder (OCD), and Acute Stress Disorder or Post-Traumatic Stress Disorder (PTSD).

Generalized Anxiety Disorder (GAD)

Generalized anxiety disorder describes an overwhelming, long-lasting, and persistent feeling of anxiety. A person living with GAD will experience more days filled with anxiety than days without, over a period of more than 6 months.

Panic Attack or Panic Disorder

A panic attack describes the sudden onset of feelings of intense fear or terror, which culminate in a peak of distressing physical symptoms within a span of 10 minutes. A person experiencing a panic attack may experience a combination of these symptoms:

- pounding heart
- chest pain or discomfort
- trouble breathing
- a feeling of choking
- chills, tingling or burning skin
- nausea or stomach problems
- shaking
- sweating
- fear of dying or losing control

Panic disorder has a severe impact on day-to-day life. On a daily basis, people with a panic disorder function at a much lower level than people with other chronic illnesses, such as diabetes, heart disease and arthritis.

Mental Health Commission of Canada (2011)

If severe and frightening panic attacks occur frequently over a period of at least 3 weeks, a person may be experiencing a panic disorder. The fear of the next attack can produce a secondary condition known as “anticipatory anxiety” which in itself can bring on another attack.

Phobia Disorders

A phobia is a persistent, irrational fear of an object or situation. This term has been popularized and often characterized by media as a humorously exaggerated

response. But acute phobias can bring symptoms that drastically diminish a person's participation in and enjoyment of life.

There are several types of phobias: Agoraphobia, Specific Phobia Disorder, and Social Anxiety Disorder or Social Phobia.

Agoraphobia was until recently misunderstood as a fear of leaving one's home or fear of the outdoors. Mental Health professionals now understand that agoraphobia refers to an entrenched fear of dealing with anxiety issues in public. A person living with agoraphobia might fear having a panic attack or other anxiety reactions in a place where their symptoms will be publicly displayed, they cannot gain control of what is happening to them, or they cannot get help.

Specific Phobia disorder refers to an irrational fear of an object or a situation, leading a person to do almost anything to avoid that trigger for anxiety symptoms. The most common phobias are fears of spiders, snakes, or heights, but there is a long list and a wide range of objects or situations that cause these disorders. Specific phobia disorders are very common and relatively easily treated, but, as with most mental health issues, many do not seek treatment but simply live with the limits imposed by the phobia.

Social Anxiety Disorder or Social Phobia refers to an extreme fear of being scrutinized, criticized, or judged by others, or of embarrassing or humiliating oneself in front of others. **According to the Mental Health Commission of Canada (2011), this very common phobia affects over 8% of Canadians at some time in their lives.** This phobia compels people to avoid social situations which unfortunately limits life choices and opportunities from which they might benefit.

Obsessive-Compulsive Disorder (OCD)

Obsessive-compulsive disorder consists of two components: obsessions and compulsions.

Obsession: recurrent, unwanted thought(s) or mental image(s).

Compulsion: action(s) performed in response to obsession(s), most often in an attempt to reduce anxiety produced by obsession(s).

This term (OCD) has been popularized and the symptoms of this disorder portrayed in the media as a common and quirky way to maintain control of one's behaviour or surroundings. But as a mental health disorder, OCD interferes with or limits a person's ability to function. The unwanted and unmanageable thoughts and images of an obsession can be frightening, disturbing, or inappropriate. The compulsion, typically begun as a working method to reduce the anxiety of living with an obsession, can take over day-to-day life and become a problem in and of itself. The most common compulsions include cleaning (the hands, the body, the house), touching things in a certain order, and counting, hoarding, or rearranging objects. These acts do not seem distressing but it is the

fact that the person cannot control repeating the acts, and the amount of time spent repeating them, which become distressing and disabling.

Acute Stress Disorder and Post-Traumatic Stress Disorder (PTSD)

Acute Stress Disorder and Post-Traumatic Stress Disorder arise as a result of a traumatic or catastrophic event. These mental health disorders can be caused by life-threatening experiences, severe physical injury, or by witnessing injury or death. The symptoms of the stress created by these events may include:

- uncontrollable flashbacks or memories of the traumatic event
- feelings of anxiety in situations that remind the person of the event
- numbed emotions
- lowered interest in others and in life
- irritability
- increased awareness of surroundings including excessive readiness to respond to threats, watchfulness or jumpiness
- outbursts of anger or rage
- inability to sleep

Acute Stress Disorder is characterized by anxiety symptoms which resolve within one month. Those living with PTSD experience the same symptoms but for a longer period of time. People living with PTSD have a higher risk of dying by suicide, often because re-living the trauma over and over becomes intolerable.

Many obsessive thoughts are about fear of contamination or harm. Common obsessive thought include physical and religious preoccupation, symmetry, numbers and concerns about safety.

Mental Health Commission of Canada (2011)

Causes of anxiety disorders

Anxiety disorders are often caused by experiences or traumas in childhood or adolescence. Other causes include brain chemistry; use of caffeine, alcohol, or drugs; medications; genetic predisposition; and traumatic events such as death, war, and natural disasters or catastrophic events. An anxiety disorder might also develop as a result of a combination of these causes.

Diagnosis of anxiety disorders

Those experiencing symptoms of anxiety can ask their doctor for an assessment. In urban centres some Canadian Mental Health Association branches conduct informal assessment, or can give information on mental health services in the area. It can take time to get an accurate diagnosis for an anxiety disorder, in part because in trying to identify and treat physical illnesses brought on by anxiety, the anxiety itself may be overlooked. The range of usual anxious behaviours can vary from person to person and between family or cultural groups, but an issue is diagnosed as a disorder based on the extent to which it interferes with daily functioning.

Unfortunately, many people who live with anxiety disorders do not seek treatment, sometimes because they do not realize that treatment is available and can help, and sometimes due to shame at disclosing what they are going through.

Those experiencing a mental health crisis (such as debilitating fear or panic, extreme, dangerous, or life-threatening obsessive thoughts or compulsions, and suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

Treatments for anxiety disorders

Treatments for anxiety disorders include Cognitive Behavioural Therapy (CBT), medications, and support groups. A combination of treatments often works best. Individuals can sometimes recover fully from anxiety disorders, or may live with a disorder long-term, requiring ongoing treatment.

Cognitive Behavioural Therapy (CBT), sometimes known as “talk” therapy, is a counselling method that helps an individual learn about how anxiety works, learn relaxation techniques or ways to control symptoms, and develop assertiveness or increase self-esteem. This therapy can help a person identify anxiety triggers, change unwanted thoughts, or learn to accept a feared situation through gradual exposure in a safe environment. Confronting deep seated fears on one’s own is not recommended. Cognitive Behavioural Therapy is a recognized system of treatment that must be administered by a trained, licensed provider.

Sometimes anxiety disorders can be resolved by a change in thoughts and behaviour patterns, or by a program of gradual supported exposure to the thought, object, or situation that causes anxiety. The fact that some disorders can resolve through “talk therapy” does not mean the individual was simply needing to

Healthy lifestyle choices in diet, exercise, relaxation and stress reduction techniques; limiting caffeine, sugar and nicotine (all stimulants) [can be] helpful in managing anxiety.

*Canadian Mental Health Association
Grand River, Guelph (2012)*

be “talked out of it,” taking their symptoms too seriously, or being silly or weak. Those living with anxiety disorders need the help of trained professionals to resolve symptoms.

Medications

Anti-anxiety or anti-depressant medications can be used to treat anxiety disorders.

Anti-anxiety medications have varying success rates. When used long-term these medications can lead to drug dependence, and the anxiety can return when the drug is discontinued.

Alternatively, anti-depressant medications are sometimes prescribed for disabling anxiety symptoms or to improve day-to-day functioning when living with an anxiety disorder.

Medications do not have the ability to cure a mental health condition or disorder. Medications are prescribed to alleviate symptoms so the person can gain stability in their life and pursue activities leading to recovery, and so other treatments can have more chance of success.

Medications often produce side-effects. The side effects of anti-anxiety medications may include:

- drowsiness
- blurred vision
- slurred speech or clumsy movements
- problems with memory

Sometimes side effects take time to develop. Sometimes the initial side effects will wear off over time. Keeping track of side effects can help the health care professional to alter the medication as necessary to find an effective type or dose.

Starting a new and powerful medication can be stressful, and if it does not seem to work, or produces worrying side effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medication

Not all symptoms of the mental illness disappear when someone is taking medication.

The purpose of medication is to stabilize the symptoms of the illness, not to “cure” someone.

*Canadian Mental Health Association
Grand River, Guelph (2012)*

for an anxiety disorder needs careful and regular monitoring by a health care professional.

Often a combination of CBT and medication is prescribed to treat an anxiety disorder.

Support Groups

Anxiety disorders can be very difficult to live with and can result in social withdrawal or isolation. Support groups offer a safe space to talk about feelings and challenges with others who can truly understand. Support groups can help individuals find ways to manage symptoms, get suggestions for health care services and treatment options, and/or recover from an anxiety disorder.

Concurrent disorders, co-occurring disorders, and other risks

Substance related disorder

A person living with an anxiety disorder may also live with a substance related disorder. People living with anxiety disorders sometimes use alcohol or drugs to help them relax and reduce unmanageable symptoms. Substance use cannot control or eliminate anxiety in the long term and may contribute to increased anxiety over time as the person now has to cope with another disorder on top of the anxiety.

Although alcohol can act quickly to relieve feelings of anxiety, long-term alcohol abuse and acute alcohol withdrawal often create problems that increase anxiety levels. This can lead people into a destructive cycle of increasing alcohol use. This leads to additional stress, which in turn can cause or contribute to anxiety.

Mental Health Commission of Canada (2011)

Depression

People living with anxiety disorders often develop depression. As well, anxiety is a symptom of depression that may worsen over time.

Suicide

People experiencing anxiety disorders may have thoughts of suicide or may plan, attempt, or enact death by suicide. **The PTSD Association of Canada explains that in particular, PTSD results in an increased risk of death by suicide.** All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Anyone can be affected by these mental health issues, but **according to the**

Mental Health Commission of Canada (2011), these factors increase the odds of experiencing anxiety disorders:

- experiencing a trauma or very stressful life event (abuse, crime)
- childhood history of shyness
- having a family history of anxiety, or having had a very anxious parent
- being female (women more likely to experience anxiety than men)
- living with depression or other mental health problems

What you might notice

An adult learner living with an anxiety disorder may report a diagnosis or suspected diagnosis, or may report the symptoms they experience. In other cases they may not report their issues or not be aware of them. No matter how much information you have, you always have what you observe.

The learner experiencing anxiety might:

- express feelings of fear or worry they or another will be harmed
- exhibit nervousness
- have trouble sitting still or staying in the classroom
- have trouble concentrating
- show low self-esteem, self-criticism, perfectionism about school work
- show irritability or anger
- express fatigue
- report physical symptoms: upset stomach, headache or sore neck, shallow breathing, or pounding heart
- touch or rearrange objects over and over

Supporting learners living with anxiety disorders

Strengths

People living with anxiety disorders are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a strong auditory learner might benefit from using recorded materials. Regardless of possible or reported mental health issues, you can use your knowledge of learning styles and strategies to support any learner.

Those on a journey of mental health recovery often have increased compassion or understanding for the situations of others. The learner living with an anxiety disorder might be protective and sympathetic to others in the class. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Those living with issues of depression often experience a crisis which compels them to make changes in their lives. Pursuing treatment and recovery can be a powerful impetus for positive change, growth, and learning. People living with mental health issues must be or become strong and resilient. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges.

Challenges

Learners living with anxiety disorders may face the following challenges in the classroom:

- anxiety, worry, stress
- lateness or unexplained absences
- test-taking anxiety
- separation anxiety or excessive checking on others (relative, child)
- recovery from trauma (PTSD)
- discomfort or nervousness being around others
- self-criticism or perfectionism about school work
- restlessness, leaving seat or room, or repeated patterns of movements
- lack of energy or fatigue
- lowered concentration or attention span, or “mind going blank”
- difficulty with organization
- trouble with memory
- irritability or anger
- distracting physical symptoms, such as headache, stomach upset, tight neck or chest
- sensitivity to environmental factors
- side effects from medication

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with anxiety disorders

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Inevitably, a classroom setting provides some potentially stressful situations. Learning new things, being assessed, and working in a room with others can all produce stress. A learner experiencing anxiety issues may fear being judged or not fitting in. You cannot eliminate all stress, and in fact some amount of stress is part of learning: learning takes place in a state of some discomfort or uncertainty about the unknown, and stress motivates us to try our best. But you can use classroom strategies to create instructional plans and a learning environment that provides each learner, as much as possible, with an optimal chance of success.

As an adult education facilitator you are never expected to diagnose a mental health issue. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For anxiety, worry, stress	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with." (Handout # 6)</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Create a class schedule for work time and break time.</p>	

For anxiety, worry, stress	Notes
<p>With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	

For anxiety, worry, stress	Notes
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day. Encourage the learner to stick to the routine.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	

For anxiety, worry, stress	Notes
Encourage the learner to develop a support network of trusted family or friends.	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For anxiety, worry, stress	Notes
Give opportunity to self-initiate a short break when needed.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Reduce opportunities for competition or comparison of learner work.	
Reduce homework or extend deadlines as needed.	

For anxiety, worry, stress	Notes
Help the learner understand that it is OK to leave unfinished work for next time.	

For lateness or unexplained absences	Notes
Speak to the learner and find out what is going on: "I've noticed you've been late/absent lately. Is there something keeping you from attending class?"	
Discuss the importance of being on time and being reliable, for school and in the workplace – do not assume the learner inherently understands these middle-class expectations.	
Work with the learner to find ways to solve a problem that may be limiting attendance.	
Make use of phone calls or messaging to remind learners of class times.	
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	

For lateness or unexplained absences	Notes
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Take time to get to know the learner to develop rapport and build trust.</p>	
<p>Discuss how they can prepare for leaving home in the morning and help decide on a leaving time that will allow them to arrive on time.</p>	
<p>Create clear expectations for class participation. Have the learner track and document their own attendance, and set goals.</p>	
<p>Develop and agree together on a contract for attendance expectations.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	

For lateness or unexplained absences	Notes
Ensure that learner tasks are neither too easy nor too hard.	
Begin the day with short tasks in which the learner can feel success.	
Reduce opportunities for competition or comparison of learner work.	
Reinforce attendance by accepting the learner back and helping them get started again after periods of absence.	
If the learner speaks openly about medication, discuss how the medication affects attendance and if it might be possible to time taking the medication to promote attendance (for example at night instead of in the morning).	
Do not force the learner to work with others with whom they may feel uncomfortable.	

For lateness or unexplained absences	Notes
Give the learner adequate time to complete tasks.	
Help the learner understand that it is OK to leave unfinished work for next time.	
If the learner must take a break to manage mental health, make it clear you will be ready to work with them when they are ready, and encourage them to come back.	

For test-taking anxiety	Notes
Speak to the learner and find out what is going on: "It looks like you might be getting nervous about the test. Can we talk that through?"	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	

For test-taking anxiety	Notes
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7)</p> <p>Another resource to try from Innovative Educators:</p> <p>https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Discuss pressures outside the classroom. Encourage the learner to recognize that it is natural for adults to have life responsibilities and concerns that they must work within to the best of their ability.</p>	
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Discuss healthy practices that might combat anxiety: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Encourage the learner to avoid stimulants (caffeine and sugar) before test time.</p>	
<p>Develop alternative methods of assessment. Ask the learner to self-identify which one might work best.</p>	

For test-taking anxiety	Notes
<p>Encourage the learner to develop a mantra to repeat before testing, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Create practice tests to try. Help the learner schedule practice times.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>Provide a private or quiet space for test-taking, if possible.</p>	

For test-taking anxiety	Notes
Provide extra time for completing the test, if possible.	
Discuss the value of the test other than the grade. How will the test help with skill building and learning? How will completing this step help the learner reach their goal?	
Be open and direct about the value of the assessment's grade, for example, it is worth 30% of the course grade.	
Explain the reasoning behind the need to be assessed.	
Provide all learners with information about test-taking skills they can develop and practice. (Handout # 7)	
Encourage the learner to read through the test and answer the questions they feel most confident with first.	
Encourage the learner to stop "all or nothing" thinking, for example, "I will fail," or, "I will ace it." Ask the learner to focus on doing everything they can to the best of their ability.	

For test-taking anxiety	Notes
Be open and direct about test rules, for example, what questions you can answer or assistance you can give.	
Provide all learners with information on study skills they can develop and practice.	
Encourage the learner to plan study time by pursuing effective study practices for a limited time, rather than by number of hours spent studying.	
Provide the learner with suggested methods for coping with distractions in the classroom during test time. Help the learner recognize that distractions are inevitable.	
Praise the learner for their efforts to manage test-taking anxiety.	

For separation anxiety or excessive checking on others (relative, child)	Notes
Speak to the learner and find out what is going on: "I notice you're preoccupied. Is there something going on I need to know about?"	

For separation anxiety or excessive checking on others (relative, child)	Notes
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Establish class rules for use of cell phones.</p>	
<p>Encourage all learners to limit necessary calls and messages to break times, where possible.</p>	
<p>Create a schedule for check-in times, for example, once per hour.</p>	
<p>Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	

For separation anxiety or excessive checking on others (relative, child)	Notes
<p>Talk with the learner and remind them of the importance of their work and putting in their best efforts.</p>	
<p>Provide the learner with suggested methods for coping with distractions from outside the classroom. Help the learner recognize that distractions are inevitable.</p>	
<p>Help the learner set short-term, achievable goals.</p>	
<p>Encourage the learner to work on identifying thought patterns.</p>	
<p>Encourage the learner to keep track of time of check-ins, results of check-ins, perhaps in a journal.</p>	
<p>Discuss the need to focus on work for the allotted class time.</p>	

For separation anxiety or excessive checking on others (relative, child)	Notes
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	

For recovery from trauma (PTSD)	Notes
<p>Validate the learner's feelings: "That's a lot to deal with."</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Create a class environment of acceptance and caring.</p>	
<p>Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.</p>	
<p>Begin each day with a review of the day's schedule.</p>	

For recovery from trauma (PTSD)	Notes
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.	
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	
Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	

For recovery from trauma (PTSD)	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Provide evidence of ability: past successes or physical reminders of completed tasks.</p>	
<p>Have the learner keep a record of accomplishments and successes. Help the learner plan to review it when feeling uncertain.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	

For recovery from trauma (PTSD)	Notes
Break work into definable, manageable chunks to avoid overload and confusion.	
Check in frequently to monitor progress and give encouragement.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	

For recovery from trauma (PTSD)	Notes
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day. Encourage the learner to stick to the routine.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.</p>	

For recovery from trauma (PTSD)	Notes
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Give the learner time to respond to verbal communication.</p>	
<p>Modify course expectations if necessary.</p>	
<p>Reduce homework or extend deadlines as needed.</p>	
<p>Provide the learner with an extra set of books or copies of work to take home.</p>	
<p>Give the learner opportunities to help other learners.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	

For recovery from trauma (PTSD)	Notes
Provide the learner with choices for learning activities and tasks.	
Avoid content which may remind the learner of the trauma.	
Stress from trauma can cause disruptive behaviours to emerge. Intervene early before behaviour escalates: "I know you'll remember the class expectations, and thank you for getting back to work."	
If the learner wants to talk about the trauma often, provide specific times that you are available to listen.	
Encourage the learner to discover and draw on their own gifts and talents.	

For discomfort or nervousness being around others	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	

For discomfort or nervousness being around others	Notes
Provide the learner with a quiet space to work if possible, while helping them recognize that some interaction will be required.	
Do not force the learner to work with others with whom they may feel uncomfortable.	
Seat the learner near others who will help to maintain a positive tone.	
Give the learner opportunities to help other learners.	
Provide the learner with choices for learning activities and tasks.	
Reduce opportunities for competition or comparison of learner work.	

For discomfort or nervousness being around others	Notes
<p>Have the learner work with another who will demonstrate patience and kindness.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	

For discomfort or nervousness being around others	Notes
During group instruction, ask the learner questions that can be answered with yes or no.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Check in frequently to monitor progress and give encouragement.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For self-criticism or perfectionism about school work	Notes
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	

For self-criticism or perfectionism about school work	Notes
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	

For self-criticism or perfectionism about school work	Notes
<p>Avoid inadvertently rewarding the self-critical or pessimistic behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Encourage the learner to recognize that everyone has strengths and weaknesses. Model this attitude in your own self-reflection or self-evaluation.</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Teach the learner to self-evaluate their work in a realistic, constructive way – what they did well, what they are still learning to do, what they will plan to do next time.</p>	

For self-criticism or perfectionism about school work	Notes
<p>Require the learner to create and submit rough drafts as they complete a task. Help them recognize their learning process and improvement.</p>	
<p>Consider how deadlines are used in the class. Allow more time for work unless this strategy feeds perfectionism.</p>	
<p>Find ways to praise the learner for finishing a task within the allotted time rather than using too much time striving for perfection.</p>	
<p>Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.</p>	
<p>Praise all learners' process and creativity. Point out the positive aspects of every learner completing tasks from their unique perspective.</p>	
<p>Provide the learner with opportunities to share their opinion on a content topic.</p>	

For self-criticism or perfectionism about school work	Notes
<p>Break work into definable chunks to avoid rushing. Ask the learner to submit each chunk before assigning the next one.</p>	
<p>If the learner claims they already know all course content, reinforce the value and purpose of reviewing it and developing study notes.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Avoid using the learner's work as an exemplar.</p>	
<p>Seat the learner away from others who share or feed into a self-critical attitude.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	

For self-criticism or perfectionism about school work	Notes
Help the learner understand that it is OK to leave unfinished work for next time.	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
Speak to the learner and explain what is not working and why: "I'm seeing you're moving around a lot. What can we do to make it more manageable for you to sit with your work?"	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Create an inviting classroom.	
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
Talk with the learner and remind them of the importance of their work and putting in their best efforts.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Schedule more complex or important tasks for times when attention is more likely to be high, for example, after a break.	
Discuss the optimal seating plan with the learner. Sitting apart from others may reduce distractions.	
Seat the learner away from visual distractions such as a window.	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block.	
Give opportunity to self-initiate a short break when needed.	
Encourage the learner to engage in physical exercise (such as a walk) before entering the class.	
Provide the learner with suggestions for body calming steps: shoulders loose, deep breath, feet flat on floor.	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	
Avoid learning methods in which the learner must read/listen for an extended period of time.	
Design tasks so the learner must actively respond, for example, write on the board.	
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
Encourage the learner to develop a mantra to repeat before engaging in listening or in a task, such as: "It's work time, it's work time." (Handout # 9)	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
Have the learner use the computer for tasks where applicable and appropriate.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Ensure the learner has gathered all materials needed before beginning a task.	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
<p>Encourage the learner to use breaks for washroom visits, if appropriate.</p>	
<p>Give instructions and directives in a supportive and respectful manner.</p>	
<p>Present one concept at a time. Check for understanding before presenting the next concept.</p>	
<p>Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Give the learner tasks with fewer steps. Gradually increase the number of steps.</p>	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Praise the learner for their efforts to stay in their seat and stay on task.</p>	
<p>Provide the learner with suggestions for self-control techniques for restlessness, for example counting to 10.</p>	
<p>Encourage the learner to store pencils, paper clips, and other small items where they cannot fidget with them.</p>	
<p>Encourage the learner to replace annoying or sound-producing nervous habits with other ones, for example, use of a stress ball.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Comment positively on efforts to listen effectively: "You did a great job with repeating every step that time."</p>	
<p>Have the learner record instructions (using an audio player) so they can listen again as needed.</p>	
<p>When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."</p>	
<p>Allow the learner to occasionally take assignments home when the class atmosphere is too distracting.</p>	
<p>Consider a shortened day or modified class schedule as necessary.</p>	

For restlessness, leaving seat or room, or repeated patterns of movements	Notes
Have the learner create their own visual and tactile reward system for tasks completed, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.	
Provide the learner with information on strategies for concentration. (Handout # 5)	

For lack of energy or chronic fatigue	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Begin the day with short tasks in which the learner can feel success.	

For lack of energy or chronic fatigue	Notes
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Create a class schedule for work time and break time.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Seat the learner near others who share similar interests or with whom they have a positive relationship.</p>	

For lack of energy or chronic fatigue	Notes
Work with the learner one on one.	
Help the learner set short-term, achievable goals.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Allow grazing on healthy snacks throughout the day where possible.	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	

For lack of energy or chronic fatigue	Notes
Give opportunity to self-initiate short rest times when needed.	
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Provide opportunities to use computer or other technology tools as part of instruction.	
Reduce homework or extend deadlines as needed.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	

For lack of energy or chronic fatigue	Notes
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.</p>	
<p>Have the learner record instructions (using an audio player) so they can listen again as needed.</p>	
<p>Have the learner highlight or underline important titles, instructions, or information in written materials.</p>	
<p>Assess the learner on their effort rather than their grade, where appropriate.</p>	
<p>Deliver directions in a clear, concise, and supportive way.</p>	

For lack of energy or chronic fatigue	Notes
Encourage the learner to discover and draw on their own gifts and talents.	
If possible, alter the learner’s schedule to start school later in the day.	

For lowered concentration or attention span, or “mind going blank”	Notes
Validate the learner’s experience: “That can be frustrating.” “Everyone feels that way sometimes.”	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	

For lowered concentration or attention span, or “mind going blank”	Notes
Break work into definable, manageable chunks to avoid overload and confusion.	
Seat the learner in a brightly lit area close to the center of instruction.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
During instruction, present main points first.	

For lowered concentration or attention span, or “mind going blank”	Notes
Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)	
Design tasks so the learner must actively respond, for example, write on the board.	
Make noise-cancelling headphones or ear plugs available.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
Have the learner answer a question “in their head,” or jot down what they want to say, before responding.	
Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)	

For lowered concentration or attention span, or “mind going blank”	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.</p>	
<p>Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Provide written instructions that match verbal instructions.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	

For lowered concentration or attention span, or “mind going blank”	Notes
<p>Create a 1, 2, 3 step plan for all tasks. Give the learner one task, or one step, to focus on at a time.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	

For lowered concentration or attention span, or “mind going blank”	Notes
<p>Help the learner build a system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes.</p>	
<p>Use verbal rather than written assessment where possible.</p>	
<p>Use multiple choice rather than close, short answer, or essay format for assessment where possible.</p>	
<p>Provide the learner with test-taking strategies to help with multiple choice assessments. (Handout # 7)</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Encourage the learner to discover and draw on their own gifts and talents.</p>	

For difficulty with organization	Notes
Provide a class calendar or schedule handout to remind learners of class times.	
Make use of phone calls or messaging to remind learners of class times.	
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	
Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Begin each day with a review of the day's schedule.	

For difficulty with organization	Notes
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Provide all learners with information on time management skills. (Handout # 11)</p>	
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	

For difficulty with organization	Notes
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.</p>	
<p>Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.</p>	
<p>Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.</p>	
<p>Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.</p>	
<p>Encourage the learner to schedule time for completing unfinished work.</p>	
<p>Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.</p>	

For difficulty with organization	Notes
Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.	
Post group assignments and homework on the board and give enough time for learners to copy details.	
Provide positive feedback on all efforts and successes in organization.	
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For trouble with memory	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to remember information.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide short, structured tasks.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
During instruction present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	

For trouble with memory	Notes
Informally assess auditory vs visual learning and memory skills. Use the results to plan lessons and assessment.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	

For trouble with memory	Notes
<p>Work with the learner to find a method of organizing information that makes sense to them before they attempt to memorize.</p>	
<p>Try both massed and distributed practice for memory retention. Massed: have the learner work to memorize a piece of information until they know it. Distributed: work to memorize information in 15 minute bursts repeated throughout the day.</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Try over-learning: continue to review the information regularly after it has been memorized.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	

For trouble with memory	Notes
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)	
Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)	
Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	

For trouble with memory	Notes
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	
Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.	
Have the learner self-evaluate which memorization strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For irritability or anger	Notes
<p>Validate the learner's experience: "I know this is difficult for you right now."</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	

For irritability or anger	Notes
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.	
Give instructions and directives in a supportive and respectful manner.	

For irritability or anger	Notes
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."	

For irritability or anger	Notes
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Avoid taking the learner’s words or behaviour personally.	
Help the learner understand that it is OK to leave unfinished work for next time.	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
Validate the learner’s experience: “That can be frustrating.”	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Talk with the learner and remind them of the importance of their work and putting in their best efforts.</p>	
<p>Create a class schedule for work time and break time.</p>	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Schedule more complex or important tasks for times when attention is more likely to be high and physical symptoms low.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Employ frequent breaks. Suggest a physical activity such as a walk around the block.</p>	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
Give opportunity to self-initiate a short break when needed.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	
Ensure the learner has water available to drink.	
Ensure the learner has unlimited access to the washroom.	
Avoid learning methods where the learner must listen for an extended period of time.	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
Design tasks so the learner must actively respond, for example, write on the board.	
Give instructions and directives in a supportive and respectful manner.	
Give verbal instructions before handing out written materials. Provide both verbal and written instructions.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Check in frequently to monitor progress and give encouragement.	
Gain the learner’s attention before giving verbal instructions.	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
<p>Give verbal instructions close at hand rather than from across the room.</p>	
<p>Demonstrate the task for the learner as you give verbal instructions.</p>	
<p>Present one concept at a time. Check for understanding before presenting the next concept.</p>	
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Have the learner record instructions (using an audio player) so they can listen again as needed.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Encourage the learner to develop a mantra to repeat before engaging in listening or in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
Provide the learner with choices for learning activities and tasks.	
Consider a shortened day or modified class schedule as necessary.	
Allow the learner to occasionally take assignments home when physical symptoms become too distracting.	

For distracting physical symptoms, such as headache, stomach upset, tight neck or chest	Notes
<p>Encourage the learner to discover and draw on their own gifts and talents.</p>	

For sensitivity to environmental factors	Notes
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.</p>	
<p>Use background music if it helps with focus.</p>	
<p>Place desks/seats far enough apart to allow for interpersonal space.</p>	

For sensitivity to environmental factors	Notes
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	

For sensitivity to environmental factors	Notes
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side effects of medication	Notes
Speak to the learner and find out what is going on: "Are you feeling OK?"	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ensure the learner has water available to drink.	

For side effects of medication	Notes
<p>Ensure the learner has unlimited access to the washroom.</p>	
<p>Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.</p>	
<p>In case of blurred vision:</p> <ul style="list-style-type: none"> • use big print • use coloured paper (yellow recommended) • provide magnifying glass or suggest discount reading glasses • provide the learner with audio materials that replace or correspond to written materials 	
<p>In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	
<p>Encourage the learner to avoid stimulants (caffeine and sugar) before and during class.</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	

For side effects of medication	Notes
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Check in frequently to monitor progress and give encouragement.	
Allow the learner to occasionally take assignments home when side effects become too distracting.	
Reduce homework or extend deadlines as needed.	
Consider a shortened day or modified class schedule as necessary.	

Chapter 7 References

General Information:

Canadian Mental Health Association

Understanding Anxiety Disorders (2016)

http://www.cmha.ca/mental_health/understanding-anxiety-disorders/#.WBDpr-grLIU

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012).

[Drugs.com](http://www.drugs.com)

What is Xanax? (2000 – 2016)

<https://www.drugs.com/xanax.html>

Harvard Medical School

Anxiety and Physical Illness (2010 – 2016)

http://www.health.harvard.edu/staying-healthy/anxiety_and_physical_illness

Mental Health Commission of Canada

Mental Health First Aid Guide (2011)

and

<http://www.mentalhealthcommission.ca/English/> (2016)

Students First Project

Anxiety Quick Fact Sheet (2016)

<http://studentsfirstproject.org/wp-content/uploads/anxiety-quick-fact-sheet-for-parents-and-school-personnel.pdf>

Quotations and information cited in-text:

Canadian Mental Health Association

Understanding Anxiety Disorders (2016)

http://www.cmha.ca/mental_health/understanding-anxiety-disorders/#.WBDpr-grLIU

Mental Health Commission of Canada

What is an Anxiety Disorder? Mental Health First Aid Guide, page 4:1 (2011)

Mental Health Commission of Canada

Panic Disorder with or without Agoraphobia. Mental Health First Aid Guide, page 4:4 (2011)

Mental Health Commission of Canada

Social Anxiety Disorder. Mental Health First Aid Guide, page 4:4 (2011)

Mental Health Commission of Canada

Obsessive-Compulsive Disorder (OCD). *Mental Health First Aid Guide*, page 4:4 (2011)

Canadian Mental Health Association Grand River Branch, Guelph

Ways to be supportive when the person has an anxiety disorder. Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 30 (January 2012)

Canadian Mental Health Association Grand River Branch, Guelph

Points to remember about all medications. Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 111 (January 2012)

Mental Health Commission of Canada

Anxiety Disorders and substance use. Mental Health First Aid Guide, page 4:6 (2011)

PTSD Association of Canada

Suicide Prevention for Veterans (2014 – 2016)
<http://www.ptsdassociation.com/for-armed-forces/>

Mental Health Commission of Canada

Risk Factors, Mental Health First Aid Guide, page 4:5 (2011)

Learning Strategies adapted from the following sources:

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners. New Directions for student services*, Wiley Periodicals, Inc. (no. 102).

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)

<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

Innovative Educators: Student Lingo

Reduce Test Anxiety (2010, 2014)

<https://www.studentlingo.com/workshop/reducetestanxiety/>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014). *Pre-referral intervention manual (PRIM): The most common learning and behaviour problems encountered in the educational environment*, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Students First Project

School and Classroom Strategies: Anxiety (2016)

<http://studentsfirstproject.org/wp-content/uploads/Anxiety-Quick-Fact-Sheet-Strategies-2.24.14.pdf>

School and Classroom Strategies: Trauma Related Concerns (2016)

<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-Trauma-Strategies-for-teachers-2.24.14.pdf>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)

<http://www.studygs.net/adhd/index.htm>

Chapter 8: Substance-Related Disorders

The term substance-related disorder refers to more than one mental health issue that can develop as a result of the use of alcohol, drugs, or medications. In the past these disorders have often been characterized as behavioural problems and not mental health disorders. Substance-related disorders are now recognized as medical conditions with available treatments. New understanding of these disorders shows that substance-related disorders often develop as a person's attempt to reduce or manage the symptoms of another mental health disorder.

People of all ages and from all walks of life use substances, legal or illegal.

Substances can include caffeine, alcohol, nicotine, “street” drugs, and prescription or over-the-counter medications, and people use them for a wide variety of reasons: to become more alert, to lift moods, to relax, as treatment for a physical or mental health condition, or as a social activity.

Substance use is not the same as a substance-related disorder.

A substance-related disorder is a mental health issue that impacts an individual's ability to function in relationships, work, and life. The diagnosis of a substance-related disorder depends on the degree to which a person's life is limited by the use of the substance.

Substances affect the body and the mind: substances can change physiological processes or alter moods. Not everyone has the same physical and psychological reactions to a substance; they affect each person differently. Using certain substances regularly may result in substance dependence, a disorder in which the person experiences reduced functioning without the substance.

Substance-related disorders often occur alongside another mental health disorder, perhaps because the person uses the substance to help alleviate symptoms, or because the mental health disorder is being caused by a substance. If a person is experiencing both a mental health disorder and a substance-related disorder, they are termed concurrent disorders.

It can be hard to understand and

Substance use is a problem when use continues despite physical, mental, social, legal and/or financial consequences.

Mental Health Commission of Canada (2011)

Substance use can be hard to change. One thing that makes change so difficult is that the immediate effects of substance use tend to be positive. The problems caused by substance use might not be obvious for some time.

Canadian Centre for Addiction and Mental Health (2012)

sympathize with substance-related disorders. When we can see a person pick up and use something that ultimately hurts them, it can seem the person is at fault by continuing to use the substance. Those living with or near a person living with a substance-related disorder may feel angry or resentful that the person cannot just quit. This feeling is a normal reaction. But, like other mental health disorders, substance-related disorders are not entirely within a person's control. Support and treatment are usually needed for recovery.

There is a high likelihood that some adult learners will be living with these mental health issues simply because of the rate at which we now know these issues occur in the general population, but as well because many of the risk factors for substance-related disorders correspond with lack of educational opportunities, poverty, or unemployment. Since adult learners often experience these issues, they may be at increased risk.

While every effort may be made to have adult learners adhere to a code of conduct in the classroom, their lives outside the classroom might include substance abuse. As well, some learners may be recovering from a substance-related disorder. Both of these conditions can affect their ability to attend class and to learn.

Types of substance-related disorders

There are two types of substance-related disorders – substance use disorders and substance-induced disorders.

Substance use disorders

A substance use disorder can include two possible situations: substance abuse and substance dependence.

Substance abuse refers to a situation in which a person continues to use a substance despite negative effects on their life, over a period of one year or more. If a person finds they cannot meet their obligations at work, school, or home, they are using the substance despite health concerns or instances of reduced functioning, or that by using the substance they are putting the safety of themselves or others at risk, they may be living with substance abuse.

Substance dependence or addiction refers to substance abuse that results in physical or psychological dependence on the substance.

Physical dependence results in body changes that mean the person needs the substance to physically function. If they stop taking the substance,

Substance abuse is a pattern of drug and alcohol use that results in negative social consequences such as legal problems, financial issues or failure to meet social obligations.

*Canadian Mental Health Association
Grand River, Guelph (2012)*

they experience uncomfortable or even severe physical symptoms known as withdrawal.

Substance withdrawal symptoms can include:

- anxiety
- insomnia
- headache
- nausea and vomiting
- irritability
- fatigue
- trouble concentrating or thinking clearly
- muscle aches

Psychological dependence occurs when many of a person's emotions, thoughts, and activities are tied to the substance. A person can develop an emotional attachment to and reliance on the mood-altering effects of a substance. They come to believe they need the substance in order to function.

In both physical and psychological dependence, a person develops a higher tolerance for the substance, which means the person needs to use more and more of the substance in order to get the same physical or psychological effect.

Substance-induced conditions and disorders

A substance-induced disorder refers to a mental health disorder caused by the use of a substance; for example, some prescription medications can result in delirium, and some street drugs can cause temporary hallucinations. People under thirty are most vulnerable to a psychosis that can be triggered by a substance such as cannabis or other hallucinogens. If a mental health issue that occurs after ingesting a substance cannot be explained by another mental health disorder, it may be substance-induced. Substance-induced disorders will usually resolve within 3 days, but if not, may result in a diagnosis including psychotic disorders. Early treatment at the first sign of psychosis is essential for lessening the severity of what can result in a life-long disorder.

Types of Substances

Substances can be ingested in many ways: pill, liquid, powder, or patch form, and either swallowed, inhaled, smoked, injected, or absorbed through the skin. A person's reaction to the substance can be affected by the way it is ingested.

Substances can be broadly characterized as depressants, stimulants, and hallucinogens.

Depressants

Depressants refer to a group of substances that slow down the nervous system, which, when ingested in small quantities, can result in calm, relaxation, drowsiness, or euphoria. Depressants include:

- alcohol
- barbiturates, such as Amytal or phenobarbital
- benzodiazepines, such as Valium or Ativan
- inhalants, such as glue, sprays, paint thinner, gasoline, medical gases
- opiates, such as heroine, codeine, morphine, demerol, oxycodone, fentanyl

Depressant medications are prescribed for relaxation, sleep problems, anxiety, or pain. Some prescription medications can create a feeling of well-being or euphoria and can be sold illegally. Depressant use carries a risk, in some cases a high risk, of dependence. If ingested in large quantities, or if combined with other drugs or alcohol, depressants can cause unconsciousness, coma, or death.

Stimulants

Stimulants refers to a group of substances that speed up the nervous system, which, when ingested in small quantities, can result in heightened alertness or endurance, or feelings of well-being or euphoria. Stimulants include:

- Cocaine
- Amphetamines, such as Adderall, Dexedrine, speed, methamphetamine
- Methylphenidates, such as Ritalin, Concerta
- Levodopa, such as Sinemet
- Caffeine, such as tea, coffee, chocolate, cola, medication
- Nicotine such as cigarettes, cigars, pipe, chewing tobacco, snuff

Stimulant medications are prescribed for certain health conditions such as Parkinson's disease and Attention Deficit Disorder (ADD). Some stimulants are illegal substances used to produce a feeling of well-being or euphoria. Stimulant use carries a risk, in some cases a high risk, of dependence. If ingested in large quantities, or if combined with other drugs or alcohol, depressants can cause hallucinations, unconsciousness, coma, or death.

Hallucinogens

Hallucinogens refer to a group of substances that affect mental processes. When ingested in small quantities they create altered perceptions and emotions. Stimulants include:

- LSD (lysergic acid diethylamide) also known as acid
- PCP (Phencyclidine)
- psychedelic mushrooms
- Cannabis

In the past hallucinogens were used experimentally to treat psychiatric disorders, but they are no longer used for medical purposes. Hallucinogens are illegal substances used to produce feelings of well-being or euphoria and altered perceptions or hallucinations. Sometimes hallucinogens can have similar effects to depressants, including relaxation or drowsiness. If ingested in large quantities, or if combined with other drugs or alcohol, hallucinogens can cause disturbing hallucinations and physical symptoms such as jaw clenching and sweating. Since hallucinogens result in altered perceptions, hallucinogen use carries an increased risk of injury or death by accidents or suicide.

People who use a substance regularly are more likely to use another one. When substances are used together, it can alter the effects of each.

Causes of substance-related disorders

Substance use disorders are not usually the result of definable causes, but some people are more vulnerable to developing these disorders (see **Who can be affected**, below). Substance-induced disorders are caused by the use of a substance, usually a drug or medication, that creates a mental health disorder.

Diagnosis of substance-related disorders

Those experiencing symptoms of substance-related disorders can ask their doctor for an assessment. In urban centres some Canadian Mental Health Association branches conduct informal assessment, or can give information on mental health services in the area. Seeking help as soon as possible can reduce health risks and other risks, and can speed diagnosis, treatment, and recovery.

Those experiencing a mental health crisis (such as overwhelming perceptions or emotions, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency. If an overdose or alcohol poisoning is suspected, resulting in vomiting, slowed breathing, bluish skin, seizures, or unconsciousness, place the person in the recovery position (on their side, to avoid choking on vomit) and call 911.

Treatments for substance-related disorders

Treatments for substance-related disorders include therapy with a drug and alcohol counsellor, support groups, and medications. A combination of treatments is often prescribed. Individuals can recover from a substance-related disorder but sometimes require ongoing treatment.

Therapy with a drug and alcohol counsellor helps an individual understand the facts of substance abuse and dependence, recognize their motivation for seeking help, and decide what treatment methods might work best for them. There are several types of therapy the counsellor could employ, which might include helping the individual explore the situations or beliefs that could contribute to substance abuse. The counsellor might help the person through cognitive-behavioural therapy, interpersonal therapy, or motivational therapy designed to determine the present-day triggers for substance use, the motivation for recovery, and the ways they might change their life situation or their responses to life challenges in order to reach their goal of recovery.

The idea that “simply talking” to a therapist can cure a substance-related disorder seems to suggest that the person was simply needing to be reprimanded or that the impulse to abuse a substance could be controlled if a person just applied themselves. This misconception can create unnecessary shame for a person seeking recovery. Those who seek recovery from these mental health issues do not want to live this way and usually cannot gain control of their symptoms without treatment.

Therapy for substance-related disorders must be administered by a trained and licensed professional counsellor or psychologist.

Support Groups

Substance-related disorders can be very difficult to live with and acknowledge.

People experiencing these disorders often avoid others for fear of being judged, and frequently feel rejected by friends and family members who are frustrated or angry about their condition. Support groups offer a safe space to talk about feelings and challenges with others who can truly understand. These groups usually guide recovery by providing 12-step behaviour systems and mentors who will be on call to re-route impulse behaviour and remind the person of their goal. Support groups can help individuals recognize and manage symptoms and relapses, get suggestions for health care services and treatment options, and recover from a substance-related disorder. Support groups are also available for friends and family of individuals living with substance-related disorders.

It's important to actually listen to what people are saying. Much of the time, the words people hear trigger a reaction in their own minds. This means that they have often switched off what the other person is really saying and are following their own train of thought. They might listen to the words but they may not really hear what the other person is actually trying to say.

Mental Health Commission of Canada (2011)

Medications

Substance-related disorders may resolve with behavioural or social therapies, but more severe or persistent disorders can require medication, usually in combination with therapy and/or a support group.

More than one type of prescription medication is available to treat substance-related disorders, and different medications have different effects. The choice of medication depends on a person's individual circumstances and needs.

Medication can:

- diminish the craving for the substance
- reduce the body's ability to absorb alcohol
- diminish the desired effects of substance use (the "high" feeling)
- create uncomfortable symptoms when a person ingests the substance, or ingests a certain quantity of the substance (for example, after more than 2 alcoholic drinks)
- lessen withdrawal symptoms

Medications do not cure a substance-related disorder. They are designed to make behavioural changes possible so the person can gain stability in their life and pursue activities leading to recovery, and so other treatments can have more chance of success.

Medications for substance-related disorders produce side-effects. Sometimes the effects are intended to create discomfort when the substance is ingested. For example, the medication Antabuse creates flushing, nausea, and palpitations if even a small amount of alcohol is ingested. A person prescribed this medication can misunderstand these effects and assume the medication is bad for their health and needs to be discontinued.

Other side-effects from medications used to treat substance-related disorders include:

- fatigue
- mood swings
- nausea

Starting a new and powerful medication can be stressful and confusing. People sometimes need help and monitoring at home (for example, from a family member) in order to continue with one of these treatment options. Counselling and support groups can also help an individual to understand and adapt to medications for substance-related disorders.

Anyone starting, taking, or discontinuing medications for a substance-related disorder needs careful and regular monitoring by a health care professional.

Keeping track of side-effects can help the health care professional to alter the medication as necessary to find an effective type or dose.

Concurrent disorders and other risks

A concurrent disorder refers to a situation in which a person living with another mental health disorder also lives with a substance-related disorder. There is typically no clear causal path or indication of which disorder “came first” or “caused” the other. However, substance-related disorders often appear in persons living with other disorders, perhaps because they have found some relief of symptoms through substance use.

According to the Canadian Centre for Addiction and Mental Health (2012, and based on Buckley et al, 2009, and Rush et al, 2008), those living with a mental health disorder are up to twice as likely to experience a substance-related disorder at some point in their lives. At least 20%, and for some disorders up to 50%, of those living with a mental health disorder also have a substance-related disorder.

Depressive disorders

Those living with depressive disorders may also exhibit a substance-related disorder, perhaps because the person uses the substance to alleviate painful feelings or unmanageable symptoms (known as self-medicating). Also, those who use alcohol or drugs may develop depressive conditions or disorders.

Anxiety disorders

A person living with an anxiety disorder may exhibit a substance-related disorder, perhaps because the person uses the substance to alleviate anxious feelings (known as self-medicating) or to enable them to participate in social situations. Alcohol can relax inhibitions and temporarily reduce anxiety. Opiates or cannabis can create a feeling of well-being and relaxation. But anxiety can also develop from the use of alcohol or drugs, because long-term use of these substances can create problems that contribute to anxiety.

Some drugs can cause anxiety or similar symptoms. Stimulants such as caffeine, cocaine, and amphetamines can cause symptoms similar to anxiety because these substances act to speed up the nervous system, which can create sleep disturbances, palpitations, or panic attacks. Consumed in large amounts, cannabis or other hallucinogens can produce anxiety or symptoms that can create anxiety, such as confusion, paranoia, or hallucinations.

Overdose or Alcohol Poisoning

Substances affect critical systems in the body that support life. Ingesting more of a substance than the body can process can result in lasting harm or death. An drug overdose or a large quantity of alcohol, consumed quickly, can result in depression of the nervous system reflexes that control breathing and prevent

choking. This dangerous condition can result in unconsciousness or death. Alcohol can continue to enter the bloodstream from the stomach even after a person has vomited or has passed out due to alcohol intake. Signs of overdose or alcohol poisoning include vomiting, slow or irregular breathing, bluish skin, unconsciousness, or seizures. If an overdose or alcohol poisoning is suspected, place the person on their side in the recovery position (to prevent choking on vomit) and call 911.

Suicide

Substance-related disorders can increase the risk of death by suicide. Certain medications, drugs, or alcohol ingested in large quantities can result in death, so substances may be used to attempt death by suicide. Substances can reduce inhibitions and create altered perceptions, both of which may make an individual more likely to attempt death by suicide. All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Anyone can be affected by these mental health issues, but **according to the Mental Health Commission of Canada (2011), these factors increase the odds of experiencing substance-related disorders:**

- genetic predisposition
- age: seniors may be at increased risk as the body processes alcohol differently with age
- alcohol sensitivity: those less sensitive to alcohol may drink more and so have increased risk of developing a disorder
- childhood trauma
- significant loss such as death, loss of a relationship, or job loss
- physical disability, injury, or illness: prescription medications, or substances used to self-medicate, can carry the risk of dependence
- being a victim of violence
- social factors including the attitudes and beliefs of family and friends about what kinds of substance use are acceptable

What you might notice

An adult learner living with or recovering from a substance-related disorder may report their condition or their recovery path. In other cases they may not report or acknowledge an issue. No matter how much information you have, you always have what you observe.

A person living with a substance-related disorder may express certain indicators, summarized using the acronym CAGE (first introduced by Ewing and Rouse, 1970):

C = cut down, control. If an individual frequently mentions needing to cut down on or control their use of a substance, they may be living with a substance-related disorder.

A = angry, annoyed. If an individual typically gets angry or annoyed when talking about their substance use, they may be living with a substance-related disorder.

G = guilty. If an individual often expresses guilt over their substance use, they may be living with a substance-related disorder.

E = eye opener. If an individual regularly mentions needing a “wake up” substance to alleviate the effects of night-before substance use, or to avoid withdrawal, they may be living with a substance-related disorder.

A person living with a substance-related disorder might also refer to a substance by its “street name.” Substances used for producing a desired psychological or physical effect are sometimes called by short forms or “street” names; for example, wine is sometimes called ‘vino.’ Street names may be used as cover words for illegal transactions of prescription medications. Examples of street names include tranks, downers, percs, smack (depressants), uppers, meth, coke, crack (stimulants), and angel dust, shrooms, and weed (hallucinogens). There are too many street names to list or remember, but common street names can be found on websites pertaining to substance abuse. If a person refers to a substance by its street name it is possible that they use, or have used, this substance.

The learner living with or recovering from a substance-related disorder might also exhibit the following signs or symptoms. Keep in mind that some symptoms can be caused by medications used to treat substance-related disorders.

The learner might:

- appear lethargic or slowed down
- appear drowsy
- seem depressed
- exhibit disturbances in motor activity: unnecessary body and facial movements, agitation, slumping
- exhibit speech disturbance
- have trouble with memory
- seem irritable or restless

- show agitation, or become increasingly agitated leading up to breaks or end of class
- appear relaxed, content, or euphoric
- show increased energy or hyperactivity
- act on top of the world, feel happy or high
- report sleeping less or not at all
- use “street” names for drugs or prescription medications
- experience nausea, sweating, palpitations, dizziness
- experience visual disturbances, delusions, hallucinations
- express anxiety or paranoia
- smell like a substance: alcohol, cannabis

Supporting learners living with substance-related disorders

Strengths

People living with substance-related disorders are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a kinesthetic learner might benefit from using computer games to practice math skills. Regardless of possible or reported mental health issues, you can use your knowledge of learning styles and strategies to support any learner.

We have a great deal of control over how we respond to different situations, even when we think we don't. Just consider that the way you frame a situation in your mind will help determine your response.

*Canadian Mental Health Association
Grand River, Guelph (2012)*

Those on a journey of mental health recovery often have increased compassion or understanding for the situations of others. The learner living with a substance-related disorder, or recovering from a substance-related disorder, might be able and willing to help others in the class. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Those living with substance-related disorders often experience a crisis which

compels them to make changes in their lives. Pursuing treatment and recovery can be a powerful impetus for positive change, growth, and learning. People living with mental health issues develop strength and resiliency. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges.

Challenges

Learners living with substance-related disorders or recovering from substance-related disorders may face the following challenges in the classroom:

- fatigue
- lowered concentration, attention span, or ability to make decisions
- anxiety, worry, stress
- trouble with memory
- difficulty with organization
- lack of attention to personal hygiene
- lack of interest in class work
- lateness or unexplained absences
- sadness
- mood swings between irritability and euphoria
- hyperactivity
- frustration or anger
- distracting physical symptoms such as headache, nausea
- sensitivity to environmental factors
- side effects from medication

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance

- ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with substance-related disorders

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will not be to cure their disorder. Rather, you will work together within what is happening to build strategies needed to attend class and complete required tasks. **Although it may prove challenging at times, learners living with or recovering from substance-abuse disorders who can develop ways to achieve in class often find that attending school helps with recovery.** Learners come to see that they can make a goal and take positive steps toward completing that goal, which can increase confidence in their ability to navigate the recovery process.

As an adult education facilitator you are never expected to diagnose a mental health issue. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For fatigue	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Help the learner assess their ability to participate in class.	

For fatigue	Notes
<p>Create a pre-arranged plan with the learner for an instance in which they appear under the influence of a substance: "I need you to agree that if you were to arrive in class under the influence, our plan is for me to remind you to leave and come back another day when you can participate." Refer to the pre-arranged plan if needed. Do not try to make a plan with the learner when they are under the influence.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Create an inviting classroom. Where possible, include natural elements such as plants, rocks, or shells.</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	

For fatigue	Notes
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Work with the learner one on one.	
Help the learner set short-term, achievable goals.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Allow grazing on healthy snacks throughout the day where possible.	
Give opportunity to self-initiate short rest times when needed.	

For fatigue	Notes
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	
<p>Provide opportunities to use computer or other technology tools as part of instruction.</p>	
<p>Reduce homework or extend deadlines as needed.</p>	
<p>Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.</p>	

For fatigue	Notes
Assess the learner on their effort rather than their grade, where appropriate.	
Deliver directions in a clear, concise, and supportive way.	
Encourage the learner to discover and draw on their own gifts and talents.	
If possible, alter the learner's schedule to start school later in the day.	

For lowered concentration, attention span, or ability to make decisions	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.</p>	
<p>Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.</p>	
<p>Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Keep tasks short and structured. Include a variety of question types within a task.	
Make noise-cancelling headphones or ear plugs available.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
Break work into definable, manageable chunks to avoid overload and confusion.	

For lowered concentration, attention span, or ability to make decisions	Notes
During instruction, present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Informally assess the learner's strengths in learning styles: auditory, visual, kinesthetic. Use the results to plan lessons and assessment.	
Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	

For lowered concentration, attention span, or ability to make decisions	Notes
Use verbal rather than written assessment where possible, if appropriate.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.	
Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.	

For lowered concentration, attention span, or ability to make decisions

Notes

<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner's most alert time of day.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.</p>	
<p>Provide written instructions that match verbal instructions.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.</p>	
<p>Provide immediate positive feedback on comprehension-related activities.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Use verbal questions about content to re-focus the learner on their task: “Remind me of the conflict in that story?”</p>	
<p>Use multiple choice rather than close, short answer, or essay format for assessment where possible.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Provide the learner with test-taking strategies to help with multiple choice assessments. (Handout # 7)	
Reduce opportunities for competition or comparison of learner work.	
Encourage the learner to discover and draw on their own gifts and talents.	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Provide a study carrel or screen for reducing distractions during individual work time.	

For anxiety, worry, stress	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with." (Handout # 6)</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Create a class schedule for work time and break time.</p>	

For anxiety, worry, stress	Notes
<p>With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	

For anxiety, worry, stress	Notes
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day. Encourage the learner to stick to the routine.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	

For anxiety, worry, stress	Notes
Encourage the learner to develop a support network of trusted family or friends.	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For anxiety, worry, stress	Notes
Give opportunity to self-initiate a short break when needed.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Reduce opportunities for competition or comparison of learner work.	
Reduce homework or extend deadlines as needed.	

For anxiety, worry, stress	Notes
Help the learner understand that it is OK to leave unfinished work for next time.	

For trouble with memory	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to remember information.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide short, structured tasks.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	

For trouble with memory	Notes
During instruction present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Informally assess auditory vs visual learning and memory skills. Use the results to plan lessons and assessment.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For trouble with memory	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to memorize.	
Try both massed and distributed practice for memory retention. Massed: have the learner work to memorize a piece of information until they know it. Distributed: work to memorize information in 15 minute bursts repeated throughout the day.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Try over-learning: continue to review the information regularly after it has been memorized.	

For trouble with memory	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	
<p>Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	

For trouble with memory	Notes
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	

For trouble with memory	Notes
<p>Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.</p>	
<p>Have the learner self-evaluate which memorization strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.</p>	

For difficulty with organization	Notes
<p>Provide a class calendar or schedule handout to remind learners of class times.</p>	
<p>Make use of phone calls or messaging to remind learners of class times.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	

For difficulty with organization	Notes
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Provide all learners with information on time management skills. (Handout # 11)</p>	

For difficulty with organization	Notes
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.</p>	
<p>Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.</p>	
<p>Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.</p>	

For difficulty with organization	Notes
Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.	
Encourage the learner to schedule time for completing unfinished work.	
Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.	
Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.	
Post group assignments and homework on the board and give enough time for learners to copy details.	
Provide positive feedback on all efforts and successes in organization.	
Provide the learner with an extra set of books or copies of work to take home.	

For difficulty with organization	Notes
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For lack of attention to personal hygiene	Notes
Set hygiene rules or decide as a group on hygiene rules for the class.	
Draw learner aside and candidly discuss that when working in a group there is a standard of hygiene to keep up.	
Provide time for learners to clean up before beginning class.	
Provide basic emergency hygiene supplies such as toothbrushes, wipes, combs.	

For lack of attention to personal hygiene	Notes
Provide information for all learners on expectations for personal hygiene in class and in the workplace.	
Make a health unit available that includes hygiene for all to learn more about caring for oneself. One resource to try from Haldimand Norfolk Health Unit: https://hnhu.org/health-topic/hygiene/	
Set an example.	
Comment positively on progress: "You look neat and ready to work today."	

For lack of interest in class work	Notes
Speak to the learner and find out what is going on: "I sense the class work isn't doing a very good job of holding your interest – is that happening?"	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	

For lack of interest in class work	Notes
Present tasks in an attractive and interesting way, such as in a folio, display, or video.	
Present tasks appealing to multiple senses, using written instructions, illustrations or cartoons, audio components, or videos.	
Find ways to demonstrate how course content relates to real-world applications.	
Engage guest speakers to visit and talk about real-world applications for course content.	
Provide the learner with reliable links to websites for research in their course content area.	
Give the learner opportunities to help other learners.	
Encourage the learner to discover and draw on their own gifts and talents.	

For lack of interest in class work	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Seat the learner near others who share similar interests or with whom they have a positive relationship.	
Provide opportunities to use computer or other technology tools as part of instruction.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	
Use storytelling to approach instruction or tasks.	
Provide the learner with an extra set of books or copies of work to take home.	

For lack of interest in class work	Notes
Offer an appropriate online course related to course content.	
Have the learner create their own visual and tactile reward system for tasks completed, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.	

For lateness or unexplained absences	Notes
Speak to the learner and find out what is going on: "I've noticed you've been late/absent lately. Is there something keeping you from attending class?"	
Discuss the importance of being on time and being reliable, for school and in the workplace – do not assume the learner inherently understands these middle-class expectations.	
Work with the learner to find ways to solve a problem that may be limiting attendance.	
Make use of phone calls or messaging to remind learners of class times.	

For lateness or unexplained absences	Notes
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Take time to get to know the learner to develop rapport and build trust.</p>	
<p>Discuss how they can prepare for leaving home in the morning and help decide on a leaving time that will allow them to arrive on time.</p>	
<p>Create clear expectations for class participation. Have the learner track and document their own attendance, and set goals.</p>	
<p>Develop and agree together on a contract for attendance expectations.</p>	

For lateness or unexplained absences	Notes
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Reinforce attendance by accepting the learner back and helping them get started again after periods of absence.</p>	
<p>If the learner speaks openly about medication, discuss how the medication affects attendance and if it might be possible to time taking the medication to promote attendance (for example at night instead of in the morning).</p>	

For lateness or unexplained absences	Notes
Do not force the learner to work with others with whom they may feel uncomfortable.	
Give the learner adequate time to complete tasks.	
Help the learner understand that it is OK to leave unfinished work for next time.	
If the learner must take a break to manage mental health, make it clear you will be ready to work with them when they are ready, and encourage them to come back.	

For sadness	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	

For sadness	Notes
Discuss appropriate outlets for feelings, such as writing in a journal.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Begin the day with short tasks in which the learner can feel success.	
Check in frequently to monitor progress and give encouragement.	
Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.	
Give opportunity to self-initiate a short break when needed.	
Keep a positive tone; use humour if appropriate. Avoid sarcasm.	

For sadness	Notes
Find opportunities to share humour as a class, for example with a daily cartoon.	
Do something fun as a class, such as a lunchtime game.	
Create an inviting classroom. Display motivational posters or quotes.	
Seat the learner near others who will help to maintain a positive tone.	
Have the learner work with another who will demonstrate patience and kindness.	
Consider offering information to all learners about developing and growing social skills. (Handout # 15)	
Encourage the learner to develop a support network of trusted family or friends.	

For sadness	Notes
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For sadness	Notes
Show enthusiasm for accomplishments or positive events in the learner's life.	
Point out that attendance in itself is an accomplishment.	
Design tasks so the learner must actively respond, for example, write on the board.	

For mood swings between irritability and euphoria	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	

For mood swings between irritability and euphoria	Notes
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>Stay calm and speak in a calm tone.</p>	
<p>Give instructions and directives in a supportive and respectful manner.</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	

For mood swings between irritability and euphoria	Notes
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid taking the learner's words or behaviour personally.	

For hyperactivity	Notes
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	

For hyperactivity	Notes
Talk with the learner and remind them of the importance of their work and putting in their best efforts.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Schedule more complex or important tasks for times when attention is more likely to be high, for example, one hour after medication.	
Discuss the optimal seating plan with the learner. Sitting apart from others may reduce distractions.	
Seat the learner away from visual distractions such as a window.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	

For hyperactivity	Notes
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Give opportunity to self-initiate a short break when needed.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	
Avoid learning methods where the learner must listen for an extended period of time.	
Design tasks so the learner must actively respond, for example, write on the board.	

For hyperactivity	Notes
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in listening or in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner use the computer for tasks where applicable and appropriate.</p>	
<p>Provide the learner with information on strategies for concentration. (Handout # 5)</p>	
<p>Use hands-on activities where possible, including flash-cards, games such as Sudoku or crosswords, and manipulatives for practicing math concepts.</p>	

For hyperactivity	Notes
Give verbal instructions before handing out written materials. Provide both verbal and written instructions.	
Gain the learner's attention before giving verbal instructions. Speak slowly.	
Praise the learner for their efforts to stay in their seat and stay on task.	
Give instructions and directives in a supportive and respectful manner.	
Present one concept at a time. Check for understanding before presenting the next concept.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Check in frequently to monitor progress and give encouragement.	

For hyperactivity	Notes
Give verbal instructions close at hand rather than from across the room.	
Establish steps for effective listening: stop working, remove hands from materials, look at the source of instructions, wait until all the instructions are done before asking questions or beginning work.	
Establish steps for asking questions: listen to instructions first, repeat instructions to yourself, develop questions, write down questions, ask questions, record needed reminders, begin task.	
Demonstrate the task for the learner as you give verbal instructions.	
Encourage the learner to try one step of the task first before asking for help, if appropriate.	
Ask the learner to repeat instructions back to you.	
Comment positively on efforts to listen effectively: "You did a great job with repeating every step that time."	

For hyperactivity	Notes
<p>Have the learner record instructions (using an audio player) so they can listen again as needed.</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Allow the learner to occasionally take assignments home when the class atmosphere is too distracting.</p>	
<p>Consider a shortened day or modified class schedule as necessary.</p>	
<p>Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.</p>	
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	

For frustration or anger	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."</p>	
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	
<p>Seat the learner near others who will help to maintain a positive tone.</p>	

For frustration or anger	Notes
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	
Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	

For frustration or anger	Notes
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Find ways to model using problem-solving strategies, perhaps as a group: "What can we do to make sure everyone has time on the computer?"	

For frustration or anger	Notes
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.</p>	

For frustration or anger	Notes
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.</p>	
<p>Give instructions and directives in a supportive and respectful manner.</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide the learner with an extra set of books or copies of work to take home.</p>	

For frustration or anger	Notes
Help the learner understand that it is OK to leave unfinished work for next time.	
Avoid taking the learner's words or behaviour personally.	

For distracting physical symptoms, such as headache, nausea	Notes
Validate the learner's experience: "That can be frustrating."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	

For distracting physical symptoms, such as headache, nausea	Notes
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Talk with the learner and remind them of the importance of their work and putting in their best efforts.</p>	
<p>Create a class schedule for work time and break time.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Schedule more complex or important tasks for times when attention is more likely to be high and physical symptoms low.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	

For distracting physical symptoms, such as headache, nausea	Notes
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block.	
Give opportunity to self-initiate a short break when needed.	
Ensure the learner has water available to drink.	
Ensure the learner has unlimited access to the washroom.	

For distracting physical symptoms, such as headache, nausea	Notes
Avoid learning methods where the learner must listen for an extended period of time.	
Design tasks so the learner must actively respond, for example, write on the board.	
Give instructions and directives in a supportive and respectful manner.	
Give verbal instructions before handing out written materials. Provide both verbal and written instructions.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Check in frequently to monitor progress and give encouragement.	

For distracting physical symptoms, such as headache, nausea

Notes

<p>Gain the learner's attention before giving verbal instructions.</p>	
<p>Give verbal instructions close at hand rather than from across the room.</p>	
<p>Demonstrate the task for the learner as you give verbal instructions.</p>	
<p>Present one concept at a time. Check for understanding before presenting the next concept.</p>	
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Have the learner record instructions (using an audio player) so they can listen again as needed.</p>	

For distracting physical symptoms, such as headache, nausea	Notes
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Encourage the learner to develop a mantra to repeat before engaging in listening or in a task, such as: "breathe and focus, breathe and focus." (Handout # 9)	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	

For distracting physical symptoms, such as headache, nausea	Notes
Provide the learner with choices for learning activities and tasks.	
Consider a shortened day or modified class schedule as necessary.	
Allow the learner to occasionally take assignments home when physical symptoms become too distracting.	
Encourage the learner to discover and draw on their own gifts and talents.	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	

For sensitivity to environmental factors	Notes
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	
Use background music if it helps with focus.	
Place desks/seats far enough apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	

For sensitivity to environmental factors	Notes
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Develop a caring, supportive attitude in the classroom.</p>	
<p>Greet learners individually and initiate conversation at arrival, break, and exit times.</p>	
<p>Maintain natural interactions that show your interest in the learner is genuine.</p>	
<p>Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.</p>	
<p>Praise learners for supporting one another.</p> <p>Encourage all learners to avoid talking about alcohol or other substances in the classroom setting out of respect for those who might be in recovery.</p>	

For side effects of medication	Notes
<p>Speak to the learner and find out what is going on: "I notice you seem to be physically uncomfortable. Is everything OK?"</p>	
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Ensure the learner has water available to drink.</p>	
<p>Ensure the learner has unlimited access to the washroom.</p>	
<p>Provide the learner with sensory tools for relieving restlessness or anxiety, such as a stress ball to squeeze.</p>	
<p>For anxiety, create a structured schedule to increase predictability, and/or create a visual schedule. (Handout # 2)</p>	
<p>For dizziness or visual disturbance, make use of lessons or instructions with audio components.</p>	

For side effects of medication	Notes
<p>In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Allow the learner to occasionally take assignments home when side effects become too distracting.</p>	

Chapter 8 References

General Information:

American Addiction Centers

Drug withdrawal symptoms, timelines & treatment (2016)

<http://americanaddictioncenters.org/withdrawal-timelines-treatments/>

Canadian Centre for Addictions

Individual Addiction Counselling for Patients (2016)

<http://canadiancentreforaddictions.org/program/individual-counselling/>

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, (January 2012)

Centre for Addiction and Mental Health (2012)

<http://www.camh.ca/en/hospital/Pages/home.aspx>

Addiction (2012)

http://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/drug-use-addiction/Pages/addiction.aspx

What are concurrent disorders? (2012)

http://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/concurrent_disorders/concurrent_substance_use_and_mental_health_disorders_information_guide/Pages/what_are_cd_infoguide.aspx

Drugabuse.com

The effects of methadone use (2016)

<http://drugabuse.com/library/the-effects-of-methadone-use/>

Drugs.com

Topamax Side Effects (2000 – 2016)

<https://www.drugs.com/sfx/topamax-side-effects.html>

Campral Side Effects (2000 – 2016)

<https://www.drugs.com/sfx/campral-side-effects.html>

Everyday health

What is Naltrexone? (2016)

<http://www.everydayhealth.com/drugs/naltrexone>

Homewood Health Centre (2016)

<http://www.homewoodhealth.com/health-centre>

Mental Health Commission of Canada

Mental Health First Aid Guide (2011)

and

<http://www.mentalhealthcommission.ca/English/>

RXlist.com

Antabuse Side Effects (2016)

<http://www.rxlist.com/antabuse-side-effects-drug-center.htm>

WebMD.com

Fighting Alcoholism with medications (2005 – 2016)

<http://www.webmd.com/mental-health/addiction/features/fighting-alcoholism-with-medications>

Quotations and information cited in-text:

Mental Health Commission of Canada

What is a Substance-Related Disorder? *Mental Health First Aid Guide*, page 2:1 (2011)

Centre for Addiction and Mental Health

Addiction (2012)

http://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/drug-use-addiction/Pages/addiction.aspx

Canadian Mental Health Association Grand River Branch, Guelph

Substance abuse and substance dependence. Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 91 (January 2012)

Mental Health Commission of Canada

Tips for non-judgemental listening. *Mental Health First Aid Guide*, page 2:10 (2011)

Centre for Addiction and Mental Health

Mental Illness and Addictions: Facts and Statistics (2012)

http://www.camh.ca/en/hospital/about_camh/newsroom/for_reporters/Pages/addictionmentalhealthstatistics.aspx

Also in reference to:

Buckley et al (2009). Psychiatric comorbidities and schizophrenia. *Schizophrenia*

Bulletin, 35: 383-402. <http://schizophreniabulletin.oxfordjournals.org/content/35/2/383.full.pdf+html>

Rush et al (2008). Prevalence of co-occurring substance use and other mental disorders in the Canadian population. *Canadian Journal of Psychiatry*, 53:

800-9. <http://cpa.sagepub.com/content/53/12/800.full.pdf+html>

Mental Health Commission of Canada

Risk Factors, Mental Health First Aid Guide, page 2:8 (2011)

The JAMA Network

The cage questionnaire for detection of alcoholism (2008)

By Charles P. O'Brien, MD, PhD

<http://jamanetwork.com/journals/jama/fullarticle/182810>

Canadian Mental Health Association Grand River Branch, Guelph

Coping with Crisis. Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 37 (January 2012)

Learning Strategies adapted from the following sources:

Black Dog Institute

The Core Assessment of psychomotor change (1996)

<http://www.blackdoginstitute.org.au/docs/COREbooklet.pdf>

Fairchild, Ellen E. (2003). Multiple Roles of Adult Learners. *New Directions for student services*, Wiley Periodicals, Inc. (no. 102).

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)

<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

LiveBinders by Mindprint Learning

Instructional strategies to support attention

<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014). *Pre-referral intervention manual (PRIM): The most common learning and behaviour problems encountered in the educational environment*, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Students First Project

Quick Facts: Substance Abuse (2016)

http://studentsfirstproject.org/wp-content/uploads/Substance-abuse-booklet_with-home-strategies.pdf

Chapter 9: Psychotic Disorders

Psychotic Disorders create disturbances in thought processes, language, communication, perception, and actions which can greatly affect a person's ability to care for themselves, function in everyday tasks, maintain relationships, or fulfill responsibilities of school and work. Psychotic disorders are less common than other mental health issues but psychotic symptoms, or psychosis, can appear more commonly as a one-time episode or can occur as part of other mental health disorders. Psychotic disorders generally cycle through phases, with more or less functionality depending on the phase.

A number of ambiguous symptoms can accompany a developing psychotic disorder, so these conditions can be difficult to recognize and diagnose. Early symptoms (the prodromal phase) may include a lack of energy, direction, or motivation; loss of interest in usual activities; depression or anxiety; mood swings or anger; difficulty with memory, or irrationality; difficulty sleeping, agitation, or trouble with concentration; and social withdrawal. Since symptoms most often begin in the teenage or early adult years, sometimes they are confused with adolescent changes in behaviour, and since these symptoms do not always progress to a psychotic episode or disorder, diagnosis and treatment is often delayed.

Psychotic disorders usually are not recognized until symptoms worsen. More severe symptoms (the acute phase) include major personality changes; suspicions or paranoia; saying words that make no sense; or extreme fixations on certain topics: the body, religion, philosophy. A person may experience delusions: tenacious beliefs not shared by others; or hallucinations: seeing or hearing things that do not exist. The most common hallucination is hearing voices, which sometimes say negative things about the person or contain disturbing messages or commands. To the individual experiencing the delusions or hallucinations, their thoughts and perceptions are very real, and their actions may come from fear and a desire to protect themselves or others from perceived threats.

Since people experiencing psychotic disorders are typically unaware that their sense of reality is altered, they often cannot recognize a developing disorder or be convinced to seek treatment.

Psychotic disorders can be very disturbing and frightening for the person experiencing them as well as for their loved ones.

Psychotic disorders can consist of ongoing symptoms, or of psychotic episodes with relatively functional spaces of time between.

There are numerous disorders in which a person can experience psychosis or a psychotic episode including schizophrenia, depression, bipolar disorder, delirium and drug withdrawal or intoxication.

Mental Health Commission of Canada (2011)

Psychotic episodes describe a defined period of time – hours, days, or even months or years – in which a person experiences psychotic symptoms, possibly including delusions and hallucinations. Psychotic episodes can occur as one of the symptoms of psychotic disorders, or on their own. Some individuals will only experience one acute phase in their lifetime. After a psychotic episode a person may enter a period of stability with possibly somewhat reduced functionality (the remission or recovery phase). Experiencing recovery does not necessarily mean that acute symptoms will never return.

Because these mental health issues are less common, there is less likelihood that adult learners will be living with psychotic disorders, but risk factors indicate that stresses such as those that many adult learners face can mean they are more vulnerable to all mental health problems, including psychosis. As well, psychosis can more commonly appear as a symptom of mood disorders or substance abuse.

Psychotic disorders are sometimes confused with personality disorders, but they are distinct issues. For more information refer to the section on personality disorders in this guide.

Types of Psychotic Disorders

Psychotic disorders include schizophrenia, psychotic depression, schizoaffective disorder, and substance-induced psychosis.

Schizophrenia

The Schizophrenia Society of Canada (2016) states that 1% of people worldwide will develop schizophrenia at some point in their lives, or 1 in 100 will develop schizophrenia by age 55. Schizophrenia has been misunderstood as a person experiencing split or multiple personalities, perhaps because the word derives from Greek words meaning ‘split mind.’ The split referred to is actually the mind’s split with reality. People living with schizophrenia experience difficulty with recognizing what is real or relevant, and trouble with daily functioning, concentration, and memory. They may undergo major changes in personality, take on intense preoccupations, and withdraw from others almost completely. Their emotions may seem diminished or flat, or inappropriate to the situation. They may experience one or many psychotic episodes which may include delusions and hallucinations.

Those living with schizophrenia have an increased risk of dying by suicide.

Psychotic Depression

This term refers to a depression so intense that the brain chemistry changes dramatically and can initiate a psychotic episode.

Schizoaffective Disorder

Schizoaffective disorder refers to a situation in which a person shows symptoms of both a mood disorder – depression or bipolar – and schizophrenia. For

example, a person might experience delusions or hallucinations within an episode or mania.

Substance-induced Psychotic Disorder

A psychotic disorder can start as a result of substance use, either during or after substance use. The symptoms of substance-induced psychotic disorder usually include hallucinations, disorientation, and problems with memory. People under thirty are most vulnerable to a psychosis that can be triggered by a substance such as cannabis or other hallucinogens. Early treatment at the first sign of psychosis is essential for lessening the severity of what can result in a life-long disorder.

Causes of psychotic disorders

Psychotic disorders are complex mental health issues and their causes are not yet fully understood. The main cause is thought to be discernable differences in the chemistry of the brain. Those with a parent or close family member with a similar condition are more likely to develop these disorders, as well as those living with stress or substance abuse. Stress is not seen as a cause for psychosis but a trigger for those vulnerable to developing psychosis. Substance abuse can cause a temporary psychosis or trigger the beginning of a disorder.

Diagnosis of psychotic disorders

A person experiencing disturbances in thought processes, language, communication, and/or perception for 6 months or more may be diagnosed with a psychotic disorder. But any psychotic episode must be taken seriously and requires medical attention.

Those experiencing symptoms of psychosis can ask their doctor for an assessment. In urban centres some Canadian Mental Health Association branches conduct informal assessment, or can give information on mental health services in the area. Unfortunately attaining an accurate diagnosis and effective treatment plan can take time, in part because a person might not recognize their symptoms and seek treatment. Medications used to treat psychotic disorders work best if started as soon as possible after symptoms become apparent, so seeking help as soon as possible, and being prepared with details of the symptoms, can improve the speed of

A person may experience only one acute phase in her/his life ... This makes schizophrenia hard to treat because people in the remission phase may feel well enough to stop taking their drugs in order to avoid the unpleasant side effects. This may cause the acute phase to reappear.

Howard Davidson, Just Ask! (1993)

diagnosis, treatment, and recovery.

Those experiencing a mental health crisis (such as disorientation, delusions, hallucinations, a psychotic episode, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

Treatments for psychotic disorders

Treatments for psychotic disorders include a combination of medication, Cognitive Behavioural Therapy (CBT), and community support services. Sometimes a person living with a psychotic disorder needs support services to help them manage self-care such as housing and finances. Individuals can recover from psychosis and lead full and active lives with few or no symptoms. In other cases, a person may live with a disorder long-term, requiring ongoing treatment and sometimes hospitalizations.

Medications

Anti-psychotic medications are used to treat chemical imbalances in the brain that are thought to cause psychotic disorders. These medications work to sedate the senses in order to block hallucinations and delusions and to help with thought disturbances.

Side effects of anti-psychotic medications include:

- dizziness
- blurred vision
- weight gain
- dry mouth
- tremor – unintentional rhythmic movements, most commonly of the hands

Early Intervention programs have been initiated throughout Ontario, offering early identification and treatment of psychosis, holistic person-centered planning for recovery, and re-integration into the community.

Canadian Mental Health Association Grand River, Guelph (2012)

Anti-psychotic medications carry the risk of other serious health problems and severe side-effects including a disabling movement disorder. New medications with less serious side-effects are being developed. Anyone starting, taking, or discontinuing anti-psychotic medications needs frequent monitoring by a health-care professional. Keeping track of side-effects can help the health care professional to alter the medication as necessary to find an effective type or dose.

Medications do not have the ability to cure a mental health disorder. Medications are prescribed to alleviate symptoms so the person can gain stability in their life and pursue activities leading to recovery, and so other treatments can have more

chance of success.

Cognitive Behavioural Therapy (CBT), a type of “talk” therapy, is most effective for depression and anxiety, but may be adapted for use in cases involving psychosis.

CBT is a counselling method that can help an individual recognize psychotic symptoms and learn ways to recognize and counter their altered perceptions and disrupted thinking patterns. This therapy can help a person make a plan to manage their self-care and improve relationships and daily functioning.

CBT is a recognized system of treatment that must be administered by a trained, licensed provider.

Community Support Services

Psychotic disorders are very difficult to live with, and support services are often required to help an individual gain stability. Some individuals may be able to regain their former level of functioning once treatment is in place, and others may need help with securing and maintaining housing arrangements and managing finances, as well as ongoing help with maintaining health and taking medications. Mental health services in the individual’s area can provide information about available supports.

Concurrent disorders, co-occurring disorders, and other risks

Substance related disorder

A person living with a psychotic disorder may also live with a substance-related disorder. When a mental health disorder combines with a substance related disorder they are termed concurrent disorders. People living with psychotic disorders may use alcohol or drugs to help them alleviate disturbing symptoms – a situation known as “self-medicating,” or, those who use substances may develop psychosis or a psychotic episode (substance-induced psychotic disorder).

Mood disorders

Psychosis can co-occur with depression (psychotic depression or schizoaffective disorder) or bipolar disorder (schizoaffective disorder).

Suicide

People experiencing psychosis can experience thoughts of suicide or may plan, attempt, or enact death by suicide. **The Canadian Mental Health Association Grand River Branch (2012) states that 10 percent of those living with schizophrenia will die by suicide.** All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Threats of violence

A person experiencing psychosis may act in ways that appear threatening or aggressive, or, rarely, may overtly threaten violence. Those experiencing psychosis are more likely to be the victims of violence than to enact it; however, standard precautions should be taken to protect the safety of all concerned.

Who can be affected

Anyone can be affected by these mental health issues, but **according to the Mental Health Commission of Canada** (2011), these factors increase the odds of experiencing psychosis:

- having a parent or close relative who has experienced a psychotic disorder
- stress
- head injury or injury at birth
- substance abuse

What you might notice

Living with any form of psychosis can be extremely disruptive, and talking about these issues can be impossible as the person may not recognize their symptoms. If a person has sought help and received a diagnosis, they may be reluctant to disclose their symptoms or disorder due to the misunderstandings and stigma they may face.

An adult learner living with psychosis might report a diagnosis or suspected diagnosis, or the symptoms they experience. In many cases, however, they may not report their issues or not be aware of them.

No matter how much information you have, you always have what you observe. For example, irrational beliefs may alert you to possible disruptions in thinking patterns.

Keep in mind that symptoms you observe can result from a disorder or from a medication used to treat the disorder.

The learner living with psychosis might:

- appear emotionless or flat,

Delusions, hallucinations, thought disorders, and the other characteristics of schizophrenia usually do not cause someone to lose all touch with reality. For example, students hearing voices can continue to study. However, when the disturbances become what psychiatrists call 'florid' ... they can interfere with daily activity. For example, in class a student 'hears' a voice and he begins talking to it. Another person in the room gets angry because the student is 'talking to himself' and tension develops. This can make it very difficult for the hallucinating student to take control of her/his situation.

Howard Davidson, Just Ask! (1993)

or express emotions inappropriate to the situation

- lack facial expression, have trouble making eye contact
- speak in a monotone voice
- avoid social interaction
- exhibit symptoms of depression, anxiety, mood swings
- express suspicions or paranoia
- report unusual physical ailments
- use words that do not make sense
- ignore personal hygiene

The learner experiencing a psychotic episode might:

- appear agitated, restless, irritable, or angry
- report sleeping less or not at all
- report altered perceptions such as intensified colours or smells
- express that they “can’t turn off” certain thoughts or imaging
- express sudden intense attention to certain ideas or beliefs
- report delusions or hallucinations

Supporting learners living with psychotic disorders

Psychotic symptoms range from mild to severe. A person living with severe psychosis is unlikely to be able to pursue adult education until their symptoms are controlled. Milder psychotic symptoms can vary widely in severity, and can occur for a variety of reasons, abruptly or gradually, and for varying lengths of time. You may observe that symptoms come and go, and a learner’s symptoms may be managed or partially managed with treatments.

If a learner exhibits signs of a experiencing a psychotic episode in the classroom, you can follow the steps outlined in the section **Mental Health First Aid**. If medical attention is required, call 911.

Strengths

People living with psychosis are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a strong kinesthetic learner might do well working on digital devices. Regardless of possible or reported mental health issues, you can use your knowledge of learning styles and

strategies to support any learner.

Those on a journey of mental health recovery can over time develop resiliency which can inspire others. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Those who have experienced psychosis have often lived through a crisis which changed the way they understand themselves and others. Pursuing treatment and recovery can be a positive learning experience that leads to increased self-acceptance and understanding. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges.

Your strength in supporting learners living with mental health issues will come in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Challenges

Learners living with psychotic disorders may face the following challenges in the classroom:

- anxiety, suspicions, paranoia
- lethargy or depression
- mood swings
- social withdrawal or aversion to social situations
- lowered concentration, attention span, or ability to make decisions
- trouble with memory
- difficulty with organization
- reduced ability in abstract thought processes
- disturbed and distracting thoughts, delusions, hallucinations
- agitation and restlessness
- lack of attention to personal hygiene
- lack of interest in class work
- lateness or unexplained absences
- irritability or anger

- sensitivity to environmental factors
- side effects from medication

Keep in mind that learning challenges can result from a disorder or from a medication used to treat the disorder.

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with psychotic disorders

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with mild psychosis who can develop ways to achieve in class often find that attending school helps with recovery.** The satisfaction of completing steps towards a goal can increase self-esteem and help the learner regain a positive focus.

As an adult education facilitator you are never expected to diagnose a mental health issue. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For anxiety, suspicions, paranoia	Notes
<p>Validate the learner's feelings without agreeing with suspicions: "That sounds hard to deal with."</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Create a class schedule for work time and break time.</p>	

For anxiety, suspicions, paranoia	Notes
<p>With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	

For anxiety, suspicions, paranoia	Notes
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Encourage the learner to develop a support network of trusted family or friends.</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	

For anxiety, suspicions, paranoia	Notes
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	

For anxiety, suspicions, paranoia	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Reduce opportunities for competition or comparison of learner work.	
Reduce homework or extend deadlines as needed.	
Help the learner understand that it is OK to leave unfinished work for next time.	

For lethargy or depression	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>If possible, alter the learner's schedule to start school later in the day.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	

For lethargy or depression	Notes
Seat the learner near others who will help to maintain a positive tone.	
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Give opportunity to self-initiate a short break when needed.	
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	
Work with the learner one on one.	

For lethargy or depression	Notes
Help the learner set short-term, achievable goals.	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Allow grazing on healthy snacks throughout the day where possible.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Provide opportunities to use computer or other technology tools as part of instruction.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	

For lethargy or depression	Notes
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Assess the learner on their effort rather than their grade, where appropriate.</p>	
<p>Design tasks so the learner must actively respond, for example, write on the board.</p>	
<p>Deliver directions in a clear, concise, and supportive way.</p>	

For lethargy or depression	Notes
Encourage the learner to discover and draw on their own gifts and talents.	
Show enthusiasm for accomplishments or positive events in the learner's life.	
Point out that attendance in itself is an accomplishment.	

For mood swings	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	

For mood swings	Notes
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Stay calm and speak in a calm tone.	
Give instructions and directives in a supportive and respectful manner.	
When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."	
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	

For mood swings	Notes
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Avoid taking the learner's words or behaviour personally.</p>	

For social withdrawal or aversion to social situations	Notes
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Provide the learner with a quiet space to work if possible, while helping them recognize that some interaction will be required.</p>	
<p>Do not force the learner to work with others with whom they may feel uncomfortable.</p>	
<p>Seat the learner near others who will help to maintain a positive tone.</p>	

For social withdrawal or aversion to social situations	Notes
Provide the learner with choices for learning activities and tasks.	
Reduce opportunities for competition or comparison of learner work.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Consider offering information to all learners about developing and growing social skills. (Handout # 15)	
As a group, agree on a quick social protocol for minor irritations. For example, agree on the term “excuse me” for any unintentional interruptions.	
Encourage supportive behaviours between learners by publicly recognizing effort and perseverance together.	

For social withdrawal or aversion to social situations	Notes
Praise helpful and supportive behaviours.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Identify one facilitator as this learner’s go-to person for check-ins, instructions, and help.	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Check in frequently to monitor progress and give encouragement.	

For social withdrawal or aversion to social situations	Notes
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Gain the learner’s attention before giving verbal instructions. Speak slowly.	
Give the learner time to respond to verbal communication.	
For difficulty expressing knowledge verbally, have the learner express information using a chart, spreadsheet, or map.	

For lowered concentration, attention span, or ability to make decisions	Notes
Validate the learner’s experience: “I know this is difficult for you right now.”	

**For lowered concentration,
attention span, or ability
to make decisions**

Notes

<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.</p>	
<p>Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.</p>	
<p>Keep tasks short and structured. Include a variety of question types within a task.</p>	
<p>Make noise-cancelling headphones or ear plugs available.</p>	
<p>Create a class schedule for work time and break time.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Break work into definable, manageable chunks to avoid overload and confusion.	
During instruction, present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Informally assess the learner's strengths in learning styles: auditory, visual, kinesthetic. Use the results to plan lessons and assessment.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Use verbal rather than written assessment where possible, if appropriate.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.</p>	
<p>Use concrete examples, or examples meaningful to the learner, for instruction or assessment.</p>	
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	

For lowered concentration, attention span, or ability to make decisions

Notes

Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	

For lowered concentration, attention span, or ability to make decisions	Notes
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	

For lowered concentration, attention span, or ability to make decisions	Notes
Provide immediate positive feedback on comprehension-related activities.	
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	

For lowered concentration, attention span, or ability to make decisions	Notes
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Have the learner answer a question “in their head,” or jot down what they want to say, before responding.	
Use verbal questions about content to re-focus the learner on their task: “Remind me of the conflict in that story?”	

For lowered concentration, attention span, or ability to make decisions	Notes
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Provide the learner with test-taking strategies to help with multiple choice assessments. (Handout # 7)	
Reduce opportunities for competition or comparison of learner work.	
Encourage the learner to discover and draw on their own gifts and talents.	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For lowered concentration, attention span, or ability to make decisions	Notes
Provide a study carrel or screen for reducing distractions during individual work time.	

For trouble with memory	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to remember information.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide short, structured tasks.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or http://www.livebinders.com/play/play?id=1982354#anchor	

For trouble with memory	Notes
During instruction present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Informally assess auditory vs visual learning and memory skills. Use the results to plan lessons and assessment.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For trouble with memory	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to memorize.	
Try both massed and distributed practice for memory retention. Massed: have the learner work to memorize a piece of information until they know it. Distributed: work to memorize information in 15 minute bursts repeated throughout the day.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Try over-learning: continue to review the information regularly after it has been memorized.	

For trouble with memory	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	
<p>Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	

For trouble with memory	Notes
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	

For trouble with memory	Notes
<p>Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.</p>	
<p>Have the learner self-evaluate which memorization strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.</p>	

For difficulty with organization	Notes
<p>Provide a class calendar or schedule handout to remind learners of class times.</p>	
<p>Make use of phone calls or messaging to remind learners of class times.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	

For difficulty with organization	Notes
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Provide all learners with information on time management skills. (Handout # 11)</p>	

For difficulty with organization	Notes
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.</p>	
<p>Create an individual structured schedule based on educational goals and review with the learner. For a learner living with a psychotic disorder, structure may work better than choice.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.</p>	
<p>Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.</p>	

For difficulty with organization	Notes
<p>Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.</p>	
<p>Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.</p>	
<p>Help the learner to schedule time for completing unfinished work.</p>	
<p>Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.</p>	
<p>Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.</p>	
<p>Post group assignments and homework on the board and give enough time for learners to copy details.</p>	
<p>Provide positive feedback on all efforts and successes in organization.</p>	

For difficulty with organization	Notes
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For reduced ability in abstract thought processes	Notes
Use concrete examples in course material and assessments.	
Reduce the need to compare and contrast two examples or texts.	
Present one concept at a time. Check for understanding before presenting the next concept.	

For reduced ability in abstract thought processes	Notes
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	

For disturbed and distracting thoughts, delusions, hallucinations	Notes
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Avoid being drawn into argument about whether thoughts are real.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	

For disturbed and distracting thoughts, delusions, hallucinations	Notes
Use course materials requiring low emotional engagement.	
Help the learner learn to encapsulate thoughts to be dealt with at a later time.	
Re-direct the learner to the task using concrete questions: "What was your answer for question 2?"	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	

For agitation and restlessness	Notes
Speak to the learner and explain what is not working and why: "I'm seeing you're moving around a lot. What can we do to make it more manageable for you to sit with your work?"	

For agitation and restlessness	Notes
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Talk with the learner and remind them of the importance of their work and putting in their best efforts.</p>	
<p>Create a class schedule for work time and break time.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Schedule more complex or important tasks for times when attention is more likely to be high, for example, after a break.</p>	
<p>Discuss the optimal seating plan with the learner. Sitting apart from others may reduce distractions.</p>	

For agitation and restlessness	Notes
Seat the learner away from visual distractions such as a window.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block.	
Give opportunity to self-initiate a short break when needed.	
Encourage the learner to engage in physical exercise (such as a walk) before entering the class.	
Provide the learner with suggestions for body calming steps: shoulders loose, deep breath, feet flat on floor.	

For agitation and restlessness	Notes
<p>Help the learner develop self check-in strategies such as: “Am I on task? What should I be doing right now?”</p>	
<p>Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.</p>	
<p>Avoid learning methods where the learner must listen for an extended period of time.</p>	
<p>Design tasks so the learner must actively respond, for example, write on the board.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in listening or in a task, such as: “It’s work time, it’s work time.” (Handout # 9)</p>	
<p>Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.</p>	

For agitation and restlessness	Notes
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	
<p>Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.</p>	
<p>Ensure the learner has gathered all materials needed before beginning a task.</p>	
<p>Encourage the learner to use breaks for washroom visits if appropriate.</p>	
<p>Give instructions and directives in a supportive and respectful manner.</p>	
<p>Present one concept at a time. Check for understanding before presenting the next concept.</p>	

For agitation and restlessness	Notes
<p>Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Give the learner tasks with fewer steps. Gradually increase the number of steps.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Praise the learner for their efforts to stay in their seat and stay on task.</p>	
<p>Provide the learner with suggestions for self-control techniques for restlessness, for example counting to 10.</p>	
<p>Encourage the learner to store pencils, paper clips, and other small items where they cannot fidget with them.</p>	

For agitation and restlessness	Notes
Encourage the learner to replace annoying or sound-producing nervous habits with other ones, for example, use of a stress ball.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Ask the learner to repeat instructions back to you.	
Comment positively on efforts to listen effectively: "You did a great job with repeating every step that time."	
Have the learner record instructions (using an audio player) so they can listen again as needed.	
When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."	
Allow the learner to occasionally take assignments home when the class atmosphere is too distracting.	

For agitation and restlessness	Notes
Consider a shortened day or modified class schedule as necessary.	
Have the learner create their own visual and tactile reward system for tasks completed, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.	

For lack of attention to personal hygiene	Notes
Set hygiene rules or decide as a group on hygiene rules for the class.	
Draw learner aside and candidly discuss that when working in a group there is a standard of hygiene to follow.	
Provide time for learners to clean up before beginning class.	
Provide basic emergency hygiene supplies such as toothbrushes, wipes, combs.	

For lack of attention to personal hygiene	Notes
Provide information for all learners on expectations for personal hygiene in class and in the workplace.	
Make a health unit available that includes hygiene for all to learn more about caring for oneself. One resource to try from Haldimand Norfolk Health Unit: https://hnhu.org/health-topic/hygiene/	
Set an example.	
Comment positively on progress: "You look neat and ready to work today."	

For lack of interest in class work	Notes
Speak to the learner and find out what is going on: "I sense the class work isn't doing a very good job of holding your interest – is that happening?"	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	

For lack of interest in class work	Notes
Present tasks in an attractive and interesting way, such as in a folio, display, or video.	
Present tasks appealing to multiple senses, using written instructions, illustrations or cartoons, audio components, or videos.	
Find ways to demonstrate how course content relates to real-world applications.	
Engage guest speakers to visit and talk about real-world applications for course content.	
Provide the learner with reliable links to websites for research in their course content area.	
Give the learner opportunities to help other learners.	
Encourage the learner to discover and draw on their own gifts and talents.	

For lack of interest in class work	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Seat the learner near others who share similar interests or with whom they have a positive relationship.	
Provide opportunities to use computer or other technology tools as part of instruction.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story telling, posters, collages, reports, brochures, displays.	
Use storytelling to approach instruction or tasks.	
Provide the learner with an extra set of books or copies of work to take home.	

For lack of interest in class work	Notes
Offer an appropriate online course related to course content.	
Have the learner create their own visual and tactile reward system for tasks completed, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.	

For lateness or unexplained absences	Notes
Speak to the learner and find out what is going on: "I've noticed you've been late/absent lately. Is there something keeping you from attending class?"	
Discuss the importance of being on time and being reliable, for school and in the workplace – do not assume the learner inherently understands these middle-class expectations.	
Work with the learner to find ways to solve a problem that may be limiting attendance.	
Make use of phone calls or messaging to remind learners of class times.	

For lateness or unexplained absences	Notes
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Take time to get to know the learner to develop rapport and build trust.	
Discuss how they can prepare for leaving home in the morning and help decide on a leaving time that will allow them to arrive on time.	
Create clear expectations for class participation. Have the learner track and document their own attendance, and set goals.	
Develop and agree together on a contract for attendance expectations.	

For lateness or unexplained absences	Notes
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Reinforce attendance by accepting the learner back and helping them get started again after periods of absence.</p>	
<p>If the learner speaks openly about medication, discuss how the medication affects attendance and if it might be possible to time taking the medication to promote attendance (for example at night instead of in the morning).</p>	

For lateness or unexplained absences	Notes
Do not force the learner to work with others with whom they may feel uncomfortable.	
Give the learner adequate time to complete tasks.	
Help the learner understand that it is OK to leave unfinished work for next time.	
If the learner must take a break to manage mental health, make it clear you will be ready to work with them when they are ready, and encourage them to come back.	

For irritability or anger	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	

For irritability or anger	Notes
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	

For irritability or anger	Notes
Ensure that learner tasks are neither too easy nor too hard.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.	
Give instructions and directives in a supportive and respectful manner.	
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	

For irritability or anger	Notes
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	

For irritability or anger	Notes
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Avoid taking the learner's words or behaviour personally.	
Help the learner understand that it is OK to leave unfinished work for next time.	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	
Use background music if it helps with focus.	

For sensitivity to environmental factors	Notes
Place desks/seats far enough apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	

For sensitivity to environmental factors	Notes
Greet learners individually and initiate conversation at arrival, break, and exit times.	
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side effects of medication	Notes
Speak to the learner and find out what is going on: "I notice you seem to be physically uncomfortable. Is everything OK?"	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	

For side effects of medication	Notes
<p>Ensure the learner has water available to drink.</p>	
<p>Ensure the learner has unlimited access to the washroom.</p>	
<p>Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.</p>	
<p>In case of blurred vision:</p> <ul style="list-style-type: none"> • use big print • use coloured paper (yellow recommended) • provide magnifying glass or suggest discount reading glasses • provide the learner with audio materials that replace or correspond to written materials 	
<p>In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	

For side effects of medication	Notes
<p>There is no simple solution for the tremors that sometimes occur as a side-effect to antipsychotic drugs, but it may be useful to provide the learner with sensory tools, such as a stress ball to squeeze. This symptom can come and go and can lessen with distraction.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Allow the learner to occasionally take assignments home when side effects become too distracting.</p>	
<p>Reduce homework or extend deadlines as needed.</p>	

For side effects of medication	Notes
Consider a shortened day or modified class schedule as necessary.	

Chapter 9 References

General Information

BC Early Psychosis Intervention Program

Symptoms of Psychosis (2016)

<http://www.earlypsychosis.ca/pages/curious/symptoms-of-psychosis>

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties (January 2012)

Centre for Addiction and Mental Health CAMH

Cognitive Behaviour Therapy (2012)

http://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/CBT/Pages/default.aspx

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

[MedicineNet.com](http://www.medicinenet.com)

Tremors (1996-2016)

<http://www.medicinenet.com/tremor/page4.htm>

Mental Health Commission of Canada

Mental Health First Aid Guide (2011)

and

<http://www.mentalhealthcommission.ca/English/>

National Institute of Neurological Disorders and Stroke

What is Tremor? (2016)

http://www.ninds.nih.gov/disorders/tremor/detail_tremor.htm

Psych Central

Coping with atypical antipsychotic side effects by Jane Collingwood (2016)

<http://psychcentral.com/lib/coping-with-atypical-antipsychotic-side-effects/>

Schizophrenia Society of Canada

Learn More About Schizophrenia (2016)

http://www.schizophrenia.ca/learn_more_about_schizophrenia.php#4

Quotations and information cited in-text:

Mental Health Commission of Canada

What is a Psychotic Disorder? *Mental Health First Aid Guide*, page 5:1 (2011)

Schizophrenia Society of Canada (2016)

http://www.schizophrenia.ca/learn_more_about_schizophrenia.php#4

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd. Page 2.

Canadian Mental Health Association Grand River Branch, Guelph

Journey of Recovery: A mental health guidebook for Waterloo Region, Wellington and Dufferin Counties, page 22 (January 2012)

Mental Health Commission of Canada

Risk Factors. Mental Health First Aid Guide, page 5:4/5 (2011)

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd. Page 3.

Learning Strategies adapted from the following sources:

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

Fairchild, Ellen E. (2003). Multiple Roles of Adult Learners. *New Directions for student services*, Wiley Periodicals, Inc. (no. 102).

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)

<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

International Bipolar Foundation

Accommodations for students with bipolar disorder and related disabilities

<http://ibpf.org/article/accommodations-students-bipolar-disorder-and-related-disabilities>

LiveBinders by Mindprint Learning

Instructional strategies to support attention

<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014). *Pre-referral intervention manual (PRIM): The most common learning and behaviour problems encountered in the educational environment*, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Students First Project

School and Classroom Strategies: Bipolar Disorder (2016)

<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-Bipolar-Strategies-2.24.14.pdf>

School and Classroom Strategies: Depression (2016)

<http://studentsfirstproject.org/wp-content/uploads/School-and-Classroom-Depression-Strategies-2.24.14.pdf>

School and Classroom Strategies: Anxiety (2016)

<http://studentsfirstproject.org/wp-content/uploads/Anxiety-Quick-Fact-Sheet-Strategies-2.24.14.pdf>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)

<http://www.studygs.net/adhd/index.htm>

Chapter 10: Attention Deficit/ Hyperactivity Disorder (ADHD)

Attention Deficit/Hyperactivity disorders (ADHD) has traditionally been classified as a behavioural, neurobiological, or developmental disorder. The American Psychiatric Association (2013) states that the DSM now also recognizes ADHD as a mental health disorder. This disorder appears before the age of twelve and can continue through adolescence into adulthood. ADHD creates difficulties with paying attention or focusing, managing physical restlessness or hyperactivity, and controlling impulses.

ADHD has been popularized as a catch-all label for any restless or distracted behaviour, but this term refers to a disorder that can severely interfere with ability and well-being. Most people can relate to the experience of trouble with paying attention or sitting still at times in their lives or in one particular type of situation, but those living with

ADHD experience an extreme level and persistence of symptoms across activities that significantly impairs functioning in daily life. Information about ADHD in childhood typically focuses on difficulties in school, but increasing information on how this disorder affects adults reveals that these mental health issues can impact every aspect of life. Problems such as being unable to remember and keep appointments, take medications on time, or drive safely, can compromise health and safety.

ADHD can be difficult to understand for those who have always been able to regulate and control their ability to focus and to follow social expectations. The behaviours associated with this disorder are sometimes deemed careless, rude, or defiant. It's important to remember that this mental health issue is beyond an individual's sole control. Treatment is often needed to manage ADHD.

In the past, research on ADHD has focused on the prevalence and effects of ADHD in children. As more is known about ADHD, recognition that adults also live with this disorder has prompted more research on adult ADHD.

The Canadian Mental Health Association British Columbia Division (2014) explains that this disorder never develops in adulthood; it always begins in childhood, so an adult experiencing ADHD has been living with these symptoms a long time.

Everyone has some of these symptoms occasionally, but those with adult ADHD have more of these symptoms consistently and to a level of impairment. These symptoms may be fairly consistent, vary according to the situation or fluctuate without control.

*Heidi Bernhardt, RN
Centre for ADHD Awareness, Canada (2016)*

According to the Canadian ADHD Resource Alliance (2014), ADHD affects up to 12% of children, and of those, at least 60% will have symptoms that continue into adulthood. ADHD affects an estimated 4.4 % of adults.

There is a high likelihood that some adult learners will be living with these issues, as adults who seek to further their education often left school early, frequently because of learning or behavioural challenges that may have included ADHD.

Types of ADHD

ADHD creates certain sets of core symptoms. How these symptoms are grouped can vary from agency to agency.

The Centre for ADHD Awareness Canada (2016) provides the following information on how the types of ADHD are classified.

ADHD creates three sets of core symptoms. The types of ADHD are classified around these sets of symptoms:

1. Inability to focus or pay attention when required:
 - has trouble concentrating and organizing
 - forgetful
 - makes careless mistakes
2. Hyperactivity, or inability to control the urge for physical activity:
 - finds it hard to sit still
 - fidgets
 - externally or internally restless
3. Inability to control impulsive actions or words:
 - difficulty controlling urges
 - acts before thinking
 - interrupts or blurts out
 - reacts in irritation or anger often
 - takes risks
 - quit jobs or makes similar snap decisions
 - has financial troubles – addictions to gambling or shopping
 - gets in car accidents more often than others

- may live with substance abuse

Three types of Attention Deficit/Hyperactivity Disorder (ADHD):

ADHD combined inattentive and hyperactive-impulsive

In the most common form of ADHD, the individual experiences all three sets of symptoms: inattention, hyperactivity, and impulsivity.

ADHD inattentive (formerly referred to as Attention Deficit Disorder or ADD)

In the next most common form of ADHD, the individual primarily experiences difficulties with attention.

ADHD hyperactive-impulsive

In this rare form of ADHD, the individual experiences only difficulties with hyperactivity and impulsivity.

Other symptoms of ADHD

The Centre for ADHD Awareness Canada (2016) lists other symptoms for adults living with ADHD, and the ways in which their experiences may differ from childhood symptoms.

Adults living with ADHD may also experience:

- difficulty with breaking focus or prioritizing focus
- weak executive functioning (the ability to oversee your plans and organize or regulate yourself to get things done) including difficulties in regulating emotions, planning

[ADHD] tends to get better with age but can continue into adulthood. The over-activity usually gets less, but impulsivity, poor concentration and risk-taking can get worse. These can interfere with your work, learning and how you get on with other people. Depression, anxiety feelings of low self-esteem and drug misuse are more common in adults with ADHD.

Royal College of Psychiatrists (2016)

Recently, deficits in executive function have emerged as key factors affecting academic and career success. Executive function is the brain's ability to prioritize and manage thoughts and actions. This ability permits individuals to consider the long-term consequences of their actions and guide their behavior across time more effectively. Individuals who have issues with executive functioning may have difficulties completing tasks or may forget important things.

CHADD: Children and Adults Living with ADHD (2016)

or organizing, solving problems, making decisions, and learning from mistakes.

- deficit in working memory (the ability to hold knowledge in your mind and work with it at the same time)
- slower processing speed (for information intake and output)

Symptoms in adults are sometimes hard to detect, and can change with age.

Adults living with ADHD:

- may have learned to work around or hide some symptoms

For example, they may choose a fast-paced job where they are constantly on the move.

- seem to experience symptoms internally that they once may have acted on externally

For example, an adult who experienced hyperactivity as a child may now experience internal rather than external restlessness.

Causes of ADHD

The causes of ADHD are not completely understood, but the most likely cause has been identified as heredity, as this disorder runs in families. A gene relating to dopamine in the brain is suspected to be one part of the puzzle. Researchers speculate that other factors may play a role, such as environmental circumstances in childhood or in utero – substance use or stress in pregnancy, brain injury, or injury at birth – but these suppositions require more research to confirm.

Diagnosis of ADHD

Adults living with ADHD may have received a diagnosis in childhood, but in years past less was known and understood about this disorder, so the opportunity for a diagnosis and treatment may not have been available.

Adults sometimes are not aware of their disorder. They may have been told they were simply a hyperactive child, and have learned to live with or cover up their symptoms. Often adults are diagnosed when they seek help for their own child's symptoms.

A diagnosis of ADHD may still be made in adulthood provided that the adult has been experiencing the symptoms since childhood, since there is no evidence for adult-onset ADHD. If an adult develops symptoms of ADHD that were not present in childhood, they may have another disorder that mimics ADHD.

Those experiencing symptoms of ADHD can ask their doctor for an assessment. They may be referred to a specialist who will administer tests and use a checklist

for symptoms. Diagnosis depends on the number of symptoms they experience and on the degree to which the symptoms interfere with daily functioning. Unfortunately attaining an accurate diagnosis can be tricky, as other mental health disorders can also result in problems of inattention and hyperactivity, and other mental health disorders often co-occur with ADHD. Being prepared with details of the symptoms, their severity, and when they were first noticed, can improve the speed of diagnosis, treatment, and recovery.

Those experiencing a mental health crisis (such as overwhelming anxiety or depression, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

Treatments for ADHD

Treatments for ADHD include a combination of Cognitive Behavioural Therapy, (CBT), self-help behavioural modification strategies, and medications.

Cognitive Behavioural Therapy (CBT), sometimes known as “talk” therapy, is a counselling method that teaches the individual how their feelings, thoughts, and behaviours work together. This therapy is adapted for many types of mental health issues. CBT can help by providing information about ADHD and assisting the person to cope with symptoms, make changes to their behaviour, replace negative behaviours with positive ones, and improve relationships. Families can benefit from attending counselling with the individual to learn more about this disorder.

Less than 20 percent of adults with ADHD have been diagnosed or treated, and only about one-quarter of those adults seek help.

Anxiety and Depression Association of America (2010 – 2016)

Self-Help Behavioural Modification Strategies

Individuals living with ADHD can benefit greatly by learning strategies to accommodate symptoms and to organize and manage daily tasks. For example, to-do lists or calendars and firm routines for checking these aids can help the person to manage appointments and responsibilities. Self-help behavioural strategies may be developed with the help of a CBT therapist or other counsellor, a mental health professional, or a

Adults are often treated with the same kind of stimulant and non-stimulant ADHD medication as children.

Canadian Mental Health Association British Columbia Division (2016)

doctor.

Medications

Medications for ADHD help to improve attention and reduce impulsivity. These medications have been developed for children but may be prescribed for adults. Although it seems counterintuitive, the most common type of medication prescribed is a stimulant, as these medications seem to help control symptoms. Non-stimulant medications, similar to antidepressants, have also been developed to treat ADHD, as sometimes a stimulant is not the preferred choice; however, these medications take longer to begin to take effect and can produce more side effects. The choice of medication prescribed depends on the symptoms and on the person's other health and mental health issues. For example, those experiencing ADHD often also live with an anxiety disorder, and since some medications used to treat ADHD can make anxiety worse, this factor would be considered in the treatment plan. Also, some ADHD medications can create complications for those with health problems such as high blood pressure or heart disease, so those factors would be considered.

Newer ADHD stimulant medications require the individual to take their medication only once per day, typically in the morning, with effects wearing off overnight. This schedule helps those who do not want to reveal their condition, as they do not need breaks from school or work to take medication.

Medications do not have the ability to cure a mental health condition or disorder. ADHD medications are prescribed to alleviate symptoms so the person can gain stability in their life.

Medications used to treat ADHD produce side-effects such as:

- nausea
- headaches
- dizziness
- moodiness
- trouble sleeping

Keeping track of side-effects can help the health care professional to alter the medication as necessary to find an effective type or dose.

Starting a new and powerful medication can be stressful, and if it does not seem to work, or produces worrying side effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medications for ADHD needs careful and regular monitoring by a health care professional.

Concurrent disorders, co-occurring disorders, and other risks

A person living with ADHD has a significantly increased likelihood of having or developing another mental health disorder. **Canadian Mental Health Association British Columbia division (2014) asserts that ¾ of adults living with ADHD also have another mental health disorder.** One checkpoint in ADHD diagnosis includes symptoms severe enough to seriously impair daily functioning, which can lead to anxiety, depression, and other symptoms.

The high incidence of co-occurring disorders in ADHD make treatment decisions more complex.

Anxiety disorders

The Anxiety and Depression Association of America (2010 - 2016) states that 50% of adults living with ADHD also live with an anxiety disorder. During treatment planning, the cause of anxiety may be considered to determine if the anxiety results from the life-disrupting symptoms of ADHD or from other causes, in order to better treat both disorders. For example, if the anxiety is caused by ADHD, treating the ADHD first may help improve anxiety symptoms. Often the disorder treated first is the one that impairs function the most. Sometimes the decision is made to treat both conditions simultaneously.

Mood disorders

ADHD can also co-occur with depression or bipolar disorder, which may develop from the challenges of living with ADHD.

Autism Spectrum Disorder (ASD)

ADHD and Autism Spectrum can co-occur. **The American Psychiatric Association (2013) states that these disorders share some symptoms.**

Behavioural Disorders

ADHD is sometimes classified as a Behavioural Disorder (or Disruptive Behaviour Disorder). **The Children and Adults with Attention Deficit/Hyperactivity Disorders (CHADD) organization (2016) states that ADHD sometimes co-occurs with Oppositional Defiance Disorder (ODD) or Conduct Disorder (CD).**

Substance related disorder

A person living with ADHD may also live with a substance related disorder. When a mental health disorder combines with a substance related disorder they are termed concurrent disorders. People living with ADHD may use alcohol or drugs to help them alleviate painful feelings or unmanageable symptoms – a situation known as “self-medicating.” Adults living with ADHD sometimes claim caffeine

helps their symptoms, although stimulants (other than prescribed medications) such as coffee can also make ADHD symptoms worse.

Suicide

Since ADHD is linked to depression and bipolar disorder, there is a higher than usual likelihood of death by suicide. All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Those with a parent who has ADHD are at increased risk for the disorder. However, since diagnosis of this disorder is relatively recent, adults often realize they have lived with the disorder all their lives only when they seek information for their child.

Those living with other mental health disorders are more likely to also exhibit ADHD.

Men and women are affected equally. **The Center for ADHD Awareness Canada (2016) explains that in adulthood, men and women are equally affected**, but incidence in childhood shows more boys diagnosed than girls. Since this disorder begins in childhood, the assumption is that symptoms in girls are being missed until they are older.

What you might notice

Living with ADHD can be overwhelming and deeply frustrating. Plans made are missed, goals remain unfulfilled as efforts repeatedly lead to frustration, and other conditions such as anxiety, depression, and decreased self-esteem mount up. Adults with ADHD have probably experienced a long history of disappointments and sometimes conflicts with authority figures, especially teachers and school personnel. Relationships suffer and support for adults can be hard to find outside of a clinical or school setting. Adding to these challenges, cultural attitudes sometimes discount ADHD as a “real” condition. Those living with this disorder can be accused of malingering or making up their symptoms to receive preferential accommodations in school or in the workplace.

An adult learner living with ADHD may report a diagnosis or suspected diagnosis, or the symptoms they experience. In many cases, however, they may not report their issues or not be aware of them.

No matter how much information you have, you always have what you observe. For example, a learner with ADHD might experience repeated frustrations with organizing their thoughts to complete a task although they seem intellectually capable.

The learner experiencing ADHD might:

- talk a lot, interrupt, blurt answers out, talk on and on in response to an open-ended question
- continue to talk as though they are being understood, missing social cues that indicate otherwise
- fidget, make restless movements
- display difficulty concentrating on a group lesson or on individual work, get distracted easily
- have trouble sitting still, leave their seat or leave the classroom frequently
- immediately “forget” verbal instructions, or remember parts but not other parts
- get “stuck” on a minor incident, seem unable to re-focus
- display emotions inappropriate to the situation, react with irritability or anger
- miss appointments, deadlines
- show weaknesses in auditory processing, reading comprehension, and/or written output
- can think quickly, for example in an emergency, but may show delayed processing speed
- exhibit creativity and flexible thinking
- mention impulsive behaviours such as sudden trips, shopping sprees
- report a history of difficulties in school and troubles with authority figures, such as teachers

Supporting learners living with ADHD

ADHD symptoms can range from mild to severe, and can vary over the course of a day or a week. A learner’s symptoms may be managed or partially managed with treatments, and the time they take their medication can affect their participation in class.

Strengths

People living with ADHD are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a learner that shows creative abilities can benefit from being given the option to represent their learning in alternative ways: journals, collages, posters, brochures, videos, or displays.

Those on a journey of mental health recovery often have increased compassion or understanding for the situations of others. The learner living with ADHD might be able and willing to help others in the class.

People living with mental health issues are developing strength and resiliency. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Your strength in supporting learners living with mental health issues will come in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Keep in mind that symptoms you observe can result from the disorder or from a medication used to treat the disorder.

Challenges

Learners living with ADHD may face the following challenges in the classroom:

- trouble with attention or concentration
- trouble processing verbal instructions
- constraints on working memory
- difficulty with organization
- impulsivity
- restlessness or hyperactivity
- anxiety, worry, stress
- talking during quiet times or creating distractions for others
- interrupting or blurting out answers
- frustration or irritation
- slower processing speed for information intake and output
- weak writing output
- sensitivity to environmental factors
- side effects from medication

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders**:

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with ADHD

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with ADHD who can develop ways to achieve in class often find that attending school helps with learning to manage their condition in other parts of their lives such as the workplace. Also, the satisfaction of completing steps towards a goal can increase confidence and self-esteem needed to pursue further education or transition to employment.**

As an adult education facilitator you are never expected to diagnose ADHD. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For trouble with attention or concentration	Notes
Validate the learner's experience: "I know this is difficult for you right now."	

For trouble with attention or concentration	Notes
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)</p>	
<p>Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.</p>	

For trouble with attention or concentration	Notes
Allow the use of background music if it helps improve the ability to focus.	
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Keep tasks short and structured.	
Make a class contract regarding cell phone use. Have the learner put the cell phone away to reduce distraction.	
Make noise-cancelling headphones or ear plugs available.	

For trouble with attention or concentration	Notes
Create a class schedule for work time and break time.	
Provide a study carrel or screen for reducing distractions during individual work time.	
Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Encourage the learner to self-monitor their routine.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or http://www.livebinders.com/play/play?id=1982354#anchor	
Break work into definable, manageable chunks to avoid overload and confusion.	

For trouble with attention or concentration	Notes
During instruction, present main points first.	
Give one direction at a time.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Have the learner use the computer for tasks where applicable and appropriate.	
<p>Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For trouble with attention or concentration	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner's most alert time of day.</p>	
<p>Use concrete examples, or examples meaningful to the learner, for instruction or assessment.</p>	
<p>Seat the learner away from visual distractions such as a window.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	

For trouble with attention or concentration	Notes
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Give opportunity to self-initiate a short break when needed.	
Place desks/seats further apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	

For trouble with attention or concentration	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	
Develop a discreet way for the learner to find out missed instructions, such as a self-serve handout bank.	

For trouble with attention or concentration	Notes
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Try over-learning: continue to review information or instructions regularly.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	

For trouble with attention or concentration	Notes
Provide immediate positive feedback on comprehension-related activities.	
Introduce a timer for the learner to set a specific length of time to focus on work, with a planned break following.	
Using a timer, help the learner estimate time needed for a task, record actual time needed, and check against estimate. Help the learner adjust time-management plans as needed.	
Encourage quality of work over quantity.	
Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.	
Make use of an online time-tracking system to help with managing tasks.	

For trouble with attention or concentration	Notes
Teach the learner key words and features to recognize in tasks and assessments.	
Allow the learner to use study notes or fact sheets to check during tasks, assignments, or assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	

For trouble with attention or concentration	Notes
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Have the learner answer a question “in their head,” or jot down what they want to say, before responding.	
Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.	
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	

For trouble with attention or concentration	Notes
Reduce opportunities for competition or comparison of learner work.	
Encourage the learner to discover and draw on their own gifts and talents.	
Encourage the learner to maintain a short daily study routine on weekends or holiday breaks. Provide worksheets or textbooks for home as needed.	
Allow extra time for assignment completion and test taking.	
Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.	
Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.	

For trouble with attention or concentration	Notes
Consider a shortened day or modified class schedule as necessary.	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	

For trouble processing verbal instruction	Notes
Validate the learner’s experience: “I know this is not one of your easier methods for learning.”	
Seat the learner in a brightly lit area close to the center of instruction.	

For trouble processing verbal instruction	Notes
Ask the learner what strategies they already know work best for them to listen and process.	
Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.	
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	
Encourage focusing exercises before listening, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	

For trouble processing verbal instruction	Notes
Break work into definable, manageable chunks to avoid overload and confusion.	
During instruction, present main points first.	
Give one direction at a time.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Use concrete examples, or examples meaningful to the learner.	

For trouble processing verbal instruction	Notes
Seat the learner away from visual distractions such as a window.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Employ frequent breaks. Schedule breaks during direct instruction, and remind the learners of the upcoming break. Ask learners to try to wait until the break for any needs that require them to leave their seat.	
Place desks/seats further apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	

For trouble processing verbal instruction	Notes
Use auditory signals to gain group attention or indicate transition times such as wind chimes or rain stick.	
Use alternative methods for delivering instructions: PowerPoint presentations, cue cards.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	
Develop a discreet way for the learner to signal that they need you to repeat an instruction during group lessons.	

For trouble processing verbal instruction	Notes
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Try over-learning: continue to review information or instructions even after the learners seems to understand.	
Structure lessons to include short bursts of listening interspersed with answering written questions, group discussion, or small group activities.	
Call on the learner for yes/no or true/false questions you think they will be prepared to answer.	

For trouble processing verbal instruction	Notes
Provide immediate positive feedback on answers to verbal questions.	
Introduce a timer for the learner to see how much listening time remains, with a planned break following.	
Teach the learner key words to recognize in lectures or group lessons.	
Allow the learner to preview and use lecture notes or fact sheets while listening to group instruction.	
Provide handouts that match lesson content.	
Have the learner highlight or underline important titles, instructions, or information in handout materials as they listen.	

For trouble processing verbal instruction	Notes
<p>Ask the learner about their interests or have the learner fill out an interest survey. Use information about learner interests when preparing lectures.</p>	
<p>Check in frequently to ensure that all learners are following and understanding direct instruction content.</p>	
<p>Incorporate multiple senses in instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Give the learner time to respond to verbal communication.</p>	
<p>Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.</p>	

For trouble processing verbal instruction	Notes
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Reduce opportunities for competition or comparison of learner abilities.	
Allow extra time for responding to questions verbally.	

For constraints on working memory	Notes
Validate the learner's experience: "I know this is not one of your easier tasks."	
Ask the learner what strategies they already know work best for them to remember and use information.	
Together with the learner, develop an individual learner profile reflecting learner strengths and weaknesses.	

For constraints on working memory	Notes
<p>Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.</p>	
<p>Let the learner know that it is OK to use strategies to aid working memory, for example, fact sheets, study notes, and colour-coded systems.</p>	
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner’s most alert time of day.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	

For constraints on working memory	Notes
Provide short, structured tasks.	
During instruction, present main points first.	
Give one direction at a time.	
During reading or listening activities have the learner stop often and summarize in writing what they understand or remember.	
Check in frequently to ensure that all learners are following and understanding direct instruction content.	
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes.</p> <p>Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For constraints on working memory	Notes
<p>Help the learner develop a system for notes storage, using colour-coding and/or dividers. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Make use of devices to set and send reminder signals for certain tasks. For example, a tablet timer set to signal at intervals can remind the learner to review certain information.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Allow the learner to preview and use lecture notes or fact sheets while listening to group instruction.</p>	
<p>Provide handouts that match lesson content.</p>	

For constraints on working memory	Notes
Teach the learner to create their own fact sheets or study guides to aid with tasks where memory is required.	
Have the learner highlight or underline important titles, instructions, or information in handout materials as they listen.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, charts, graphics, or videos.	

For constraints on working memory	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to complete a task requiring working memory.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	
Use storytelling to approach instruction or tasks.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	

For constraints on working memory	Notes
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Have the learner verbally explain their steps before starting a task.</p>	
<p>Try over-learning: continue to review the information regularly after it has been processed.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	

For constraints on working memory	Notes
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Make use of assistive technologies such as voice recognition or talking word processor, organization programs, reading or writing software.</p>	
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	

For constraints on working memory	Notes
Have the learner create their own visual and tactile reward system for following their routine, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)	
Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)	
Encourage the learner to use visualization to remember information or lists of items when possible.	

For constraints on working memory	Notes
Provide the learner with information about working memory – what it is and how it works.	
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)	
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Give opportunity to self-initiate a short break when needed.	

For constraints on working memory	Notes
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Provide immediate positive feedback on comprehension-related activities.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	

For constraints on working memory	Notes
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Reduce opportunities for competition or comparison of learner abilities.	
Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.	
Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.	
Have the learner self-evaluate which working memory strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide the learner with an extra set of books or copies of work to take home.	

For constraints on working memory	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Reduce homework or extend deadlines as needed.	

For difficulty with organization	Notes
Provide a class calendar or schedule handout to remind learners of class times.	
Make use of phone calls or messaging to remind learners of class times.	
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	
Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)	

For difficulty with organization	Notes
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Provide all learners with information on time management skills. (Handout # 11)</p>	

For difficulty with organization	Notes
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.</p>	
<p>Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.</p>	
<p>Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.</p>	

For difficulty with organization	Notes
Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.	
Encourage the learner to schedule time for completing unfinished work.	
Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.	
Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.	
Post group assignments and homework on the board and give enough time for learners to copy details.	
Provide positive feedback on all efforts and successes in organization.	
Provide the learner with an extra set of books or copies of work to take home.	

For difficulty with organization	Notes
<p>Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i>: only handle it once.</p>	
<p>Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.</p>	

For impulsivity	Notes
<p>Together with learners, create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	
<p>Discuss as a group social responsibility and what this means in the classroom: "We are all responsible to support each other's efforts and to respect what others need to do their best."</p>	
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Develop a classroom routine that everyone can understand and follow.</p>	

For impulsivity	Notes
<p>Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	
<p>Begin each day with a review of the day’s schedule.</p>	
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	

For impulsivity	Notes
Establish steps for effective listening: stop working, remove hands from materials, look at the source of instructions, wait until all the instructions are done before asking questions or beginning work.	
Establish steps for asking questions: listen to instructions first, repeat instructions to yourself, develop questions, write down questions, ask questions, record needed reminders, begin task.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Check in frequently to monitor progress and give encouragement.	
Ask the learner to repeat instructions back to you.	
Have the learner answer a question "in their head," or jot down what they want to say, before responding.	
Use verbal questions about content to re-focus the learner on their task: "Remind me of the conflict in that story?"	

For impulsivity	Notes
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.	
Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.	
Recognize and praise efforts to be patient: "Thank you for your patience."	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Provide the learner with sensory tools for helping with focus, such as a stress ball to squeeze.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	

For impulsivity	Notes
Have the learner work with a partner who is likely to model staying on task.	
Praise efforts to stay on task and to use strategies to manage impulsive behaviours.	

For restlessness or hyperactivity	Notes
Speak to the learner and explain what is not working and why: "I'm seeing you're moving around a lot. What can we do to make it more manageable for you to sit with your work?"	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Talk with the learner and remind them of the importance of their work and putting in their best efforts.	

For restlessness or hyperactivity	Notes
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Schedule more complex or important tasks for times when attention is more likely to be high, for example, one hour after medication.	
Discuss the optimal seating plan with the learner. Sitting apart from others may reduce distractions.	
Seat the learner away from visual distractions such as a window.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	

For restlessness or hyperactivity	Notes
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Give opportunity to self-initiate a short break when needed.	
Encourage the learner to engage in physical exercise (such as a walk) before entering the class.	
Provide the learner with suggestions for body calming steps: shoulders loose, deep breath, feet flat on floor.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	
Avoid learning methods in which the learner must read/listen for an extended period of time.	

For restlessness or hyperactivity	Notes
Design tasks so the learner must actively respond, for example, write on the board.	
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
Encourage the learner to develop a mantra to repeat before engaging in listening or in a task, such as: "It's work time, it's work time." (Handout # 9)	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
Have the learner use the computer for tasks where applicable and appropriate.	
Establish steps for effective listening: stop working, remove hands from materials, look at the source of instructions, wait until all the instructions are done before asking questions or beginning work.	
Establish steps for asking questions: listen to instructions first, repeat instructions to yourself, develop questions, write down questions, ask questions, record needed reminders, begin task.	

For restlessness or hyperactivity	Notes
Demonstrate the task for the learner as you give verbal instructions.	
Encourage the learner to try one step of the task first before asking for help, if appropriate.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	
Use hands-on activities where possible, including flash-cards, games such as Sudoku or crosswords, and manipulatives for practicing math concepts.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Gain the learner's attention before giving verbal instructions. Speak slowly.	
Ensure the learner has gathered all materials needed before beginning a task.	

For restlessness or hyperactivity	Notes
Encourage the learner to use breaks for washroom visits, if appropriate.	
Give instructions and directives in a supportive and respectful manner.	
Present one concept at a time. Check for understanding before presenting the next concept.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Check in frequently to monitor progress and give encouragement.	
Give verbal instructions close at hand rather than from across the room.	
Give the learner tasks with fewer steps. Gradually increase the number of steps.	

For restlessness or hyperactivity	Notes
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Praise the learner for their efforts to stay in their seat and stay on task.	
Provide the learner with suggestions for self-control techniques for restlessness, for example counting to 10.	
Encourage the learner to store pencils, paper clips, and other small items where they cannot fidget with them.	
Encourage the learner to replace annoying or sound-producing nervous habits with other ones, for example, use of a stress ball.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Ask the learner to repeat instructions back to you.	

For restlessness or hyperactivity	Notes
<p>Comment positively on efforts to listen effectively: "You did a great job with repeating every step that time."</p>	
<p>Have the learner record instructions (using an audio player) so they can listen again as needed.</p>	
<p>When giving constructive feedback, avoid using "you." Comment on the work and what steps can improve it: "This part could be improved by ..."</p>	
<p>Allow the learner to occasionally take assignments home when the class atmosphere is too distracting.</p>	
<p>Consider a shortened day or modified class schedule as necessary.</p>	
<p>Have the learner create their own visual and tactile reward system for tasks completed, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	

For restlessness or hyperactivity	Notes
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Provide the learner with information on strategies for concentration. (Handout # 5)	

For anxiety, worry, stress	Notes
Validate the learner’s feelings: “It’s OK to feel that way.” “That’s a lot to deal with.” (Handout # 6)	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Discuss appropriate outlets for feelings, such as writing in a journal.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	

For anxiety, worry, stress	Notes
Begin the day with short tasks in which the learner can feel success.	
Check in frequently to monitor progress and give encouragement.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.	
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	

For anxiety, worry, stress	Notes
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day. Encourage the learner to stick to the routine.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	

For anxiety, worry, stress	Notes
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	
<p>Encourage the learner to develop a support network of trusted family or friends.</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	

For anxiety, worry, stress	Notes
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.</p>	

For anxiety, worry, stress	Notes
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Reduce homework or extend deadlines as needed.</p>	
<p>Help the learner understand that it is OK to leave unfinished work for next time.</p>	

For talking during quiet times or creating distractions for others	Notes
<p>Speak with the learner about what is not working and why: "It's a social asset to like to talk, but most learners need quiet times to get certain kinds of work done."</p>	
<p>Together with learners, create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	

For talking during quiet times or creating distractions for others	Notes
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Model respecting quiet work periods. Avoid talking and use this time for reading or marking learner work. If working one on one with learners during quiet periods, use low voices or move away from others.</p>	
<p>Do not accept ADHD as an excuse for poor social behaviour. While being mindful that the learner is working to manage their impulses, explain that the class is a place to practice and learn to follow social expectations and you expect their best efforts.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus on their work.</p>	
<p>Provide the learner with sensory tools for helping with focus, such as a stress ball to squeeze.</p>	
<p>Have the learner ask a question “in their head,” or jot down what they want to say, before asking for help.</p>	

For talking during quiet times or creating distractions for others	Notes
Make noise-cancelling headphones or ear plugs available.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Reduce the need to ask questions by providing clear, concise instructions in both verbal and written form.	
Check in frequently to monitor progress and give encouragement.	
Provide the learner with information on strategies for concentration. (Handout # 5)	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For talking during quiet times or creating distractions for others	Notes
Include some highly talkative activities in the class program if feasible.	
Ensure the learner has gathered all materials needed before beginning a task.	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.	
Recognize and praise efforts to be patient: "Thank you for your patience."	

For talking during quiet times or creating distractions for others	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Give the learner opportunities to help other learners.	
Reduce opportunities for competition or comparison of learner work.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	

For interrupting or blurting out answers	Notes
Speak with the learner about what is not working and why: "It's great that you know the answer, but it's important for everyone to have a chance to answer. We're going to take turns answering one at a time."	
Together with learners, create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.	

For interrupting or blurring out answers	Notes
Establish social rules such as quiet vs talking periods and seating arrangements for each period.	
Establish social rules for back and forth communications and not interrupting. Create a class initiative to hear each other out fully before responding.	
Consider offering information to all learners about developing and growing social skills. (Handout # 15)	
Model listening skills. Avoid interrupting others. Demonstrate how to get someone's attention without interrupting.	
If they interrupt as you help another learner, frame your request that they wait as a positive: "I know you'll be patient while I finish here and then I'll be all yours."	
In group sharing situations consider using a "talking stick" approach in which each person has a designated turn to speak without interruption.	

For interrupting or blurring out answers	Notes
<p>Do not accept ADHD as an excuse for poor social behaviour. While being mindful that the learner is working to manage their impulses, explain that the class is a place to practice and learn to follow social expectations and you expect their best efforts.</p>	
<p>Call on the learner to answer when you think they can respond, so they can see they will be provided with turns for answering.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to control the impulse to blurt out answers.</p>	
<p>Have the learner develop physical methods to remind themselves not to blurt questions or answers, for example, lace fingers together while waiting for their turn to speak.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Establish steps for effective listening: stop working, remove hands from materials, look at the source of instructions, wait until all the instructions are done before asking questions or beginning work.</p>	

For interrupting or blurting out answers	Notes
Establish steps for asking questions: listen to instructions first, repeat instructions to yourself, develop questions, write down questions, ask questions, record needed reminders, begin task.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Reduce the need to ask questions by providing clear, concise instructions in both verbal and written form.	
Check in frequently to monitor progress and give encouragement.	
Have the learner lead a small group activity or discussion using a method for everyone to have a chance to respond, such as a talking stick.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For interrupting or blurting out answers	Notes
<p>Include some highly talkative activities in the class program if feasible.</p>	
<p>Ensure the learner has gathered all materials needed before beginning a task.</p>	
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.</p>	
<p>Recognize and praise efforts to be patient: "Thank you for your patience."</p>	

For interrupting or blurting out answers	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Give the learner opportunities to help other learners.	
Reduce opportunities for competition or comparison of learner work.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	

For frustration or irritation	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	

For frustration or irritation	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner near others who will help to maintain a positive tone.	
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	

For frustration or irritation	Notes
<p>Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	

For frustration or irritation	Notes
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Find ways to model using problem-solving strategies, perhaps as a group: "What can we do to make sure everyone has time on the computer?"	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	

For frustration or irritation	Notes
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with frustration and other emotions.</p>	
<p>Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.</p>	

For frustration or irritation	Notes
Give instructions and directives in a supportive and respectful manner.	
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide the learner with an extra set of books or copies of work to take home.	
Help the learner understand that it is OK to leave unfinished work for next time.	
Avoid taking the learner's words or behaviour personally.	

For slower processing speed for information intake and output	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Seat the learner in a brightly lit area close to the center of instruction.	
Seat the learner away from visual distractions such as a window.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	

For slower processing speed for information intake and output	Notes
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.	
Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.	
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	

For slower processing speed for information intake and output	Notes
Check in frequently to monitor progress and give encouragement.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Pre-teach relevant vocabulary and content, and provide the learner with pre-view materials to review, before a lesson.	
Have the learner take jot notes as they listen or read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such as these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Gain the learner's attention before giving verbal instructions. Speak slowly.	

For slower processing speed for information intake and output	Notes
Provide written instructions that match verbal instructions.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Provide immediate positive feedback on comprehension-related activities.	
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Use verbal questions about content to re-focus the learner on their task: "Remind me of the conflict in that story?"	

For slower processing speed for information intake and output	Notes
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Give the learner time to respond to verbal communication.	
Allow more time for the learner to complete assignments and assessments.	
Reduce homework or extend deadlines as needed.	
Make use of assistive technologies such as voice recognition or talking word processor, organization programs, reading or writing software.	

For weak writing output	Notes
Provide sentence starters, writing prompts, or visual writing prompts.	

For weak writing output	Notes
<p>Help the learner develop a bank of descriptive and useful words for various types of writing tasks.</p>	
<p>Use visual tools to plan written assignments, for example, graphic organizers, outlines, or story webs. Teach the learner how to use these tools.</p>	
<p>Overtly teach the concept of brainstorming and practise brainstorming activities using the same type of graphic organizer each time, for example, story web. Start expectation with 2 ideas and increase as the skill is practiced.</p>	
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Provide short, structured tasks.</p>	
<p>Have the learner use the computer for tasks where applicable and appropriate.</p>	
<p>Make use of assistive technologies such as talking word processor or other writing software.</p>	

For weak writing output	Notes
Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.	
Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.	
Provide immediate positive feedback on written work.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Offer detailed feedback and praise on written work: "I like the way this part uses these descriptive words to help me understand."	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	

For sensitivity to environmental factors	Notes
<p>Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.</p>	
<p>Use background music if it helps with focus.</p>	
<p>Place desks/seats far enough apart to allow for interpersonal space.</p>	
<p>Put tennis balls on chair feet to reduce noise distractions.</p>	
<p>Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.</p>	
<p>Make noise-cancelling headphones or ear plugs available.</p>	

For sensitivity to environmental factors	Notes
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side effects from medication	Notes
<p>Speak to the learner and find out what is going on: "Are you feeling OK?"</p>	
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Allow the learner to occasionally take assignments home when side effects become too distracting.</p>	

For side effects from medication	Notes
Reduce homework or extend deadlines as needed.	
Consider a shortened day or modified class schedule as necessary.	

Chapter 10 References

General Information:

American Psychiatric Association

Attention Hyperactive Deficit Disorder (2013)

<http://www.dsm5.org/documents/adhd%20fact%20sheet.pdf>

Anxiety and Depression Association of America

Adult ADHD (Attention Deficit Hyperactive Disorder) (2010 - 2016)

<https://www.adaa.org/understanding-anxiety/related-illnesses/other-related-conditions/adult-adhd>

Canadian ADHD Resource Alliance (2013)

<http://www.caddra.ca/>

Canadian Mental Health Association British Columbia Division

Attention Deficit/Hyperactivity Disorder in adults (2016)

<https://www.cmha.bc.ca/documents/attention-deficithyperactivity-disorder-in-adults-2/>

Centre for ADHD Awareness, Canada

Symptoms of Adult ADHD, by Heidi Bernhardt, RN (2016)

<http://www.caddac.ca/cms/page.php?80>

CHADD: Children and Adults with Attention-Deficit/Hyperactivity Disorder *Understanding ADHD: For Adults* (2016)

<http://www.chadd.org/Understanding-ADHD/For-Adults.aspx>

Professional Learning Board

What are the strengths of students with ADHD? (2016)

<http://k12teacherstaffdevelopment.com/tlb/what-are-the-strengths-of-students-with-adhd/>

Royal College of Psychiatrists

Attention Deficit Hyperactivity Disorder (ADHD) in adults (2016)

<http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/adhdinadults.aspx>

WebMD

Tips to ease ADHD drug side effects in adults (2005 – 2016)

<http://www.webmd.com/add-adhd/guide/tips-reduce-adult-adhd-medication-side-effects#1>

Quotations and information cited in-text:

American Psychiatric Association

Attention Hyperactive Deficit Disorder (2013)

<http://www.dsm5.org/documents/adhd%20fact%20sheet.pdf>

Centre for ADHD Awareness, Canada

Symptoms of Adult ADHD, by Heidi Bernhardt, RN (2016)

<http://www.caddac.ca/cms/page.php?80>

Canadian Mental Health Association British Columbia Division

Attention Deficit/Hyperactivity Disorder in adults (2016)

<https://www.cmha.bc.ca/documents/attention-deficithyperactivity-disorder-in-adults-2/>

Canadian ADHD Resource Alliance (2013)

<http://www.caddra.ca/>

Centre for ADHD Awareness, Canada

Symptoms of Adult ADHD, by Heidi Bernhardt, RN (2016)

<http://www.caddac.ca/cms/page.php?80>

Royal College of Psychiatrists

Attention Deficit Hyperactivity Disorder (ADHD) in adults (2016)

<http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/adhdinadults.aspx>

Centre for ADHD Awareness, Canada

Symptoms of Adult ADHD, by Heidi Bernhardt, RN (2016)

<http://www.caddac.ca/cms/page.php?80>

CHADD: Children and Adults with Attention-Deficit/Hyperactivity Disorder (2016)

<http://www.chadd.org/Understanding-ADHD/For-Adults.aspx>

Canadian Mental Health Association British Columbia Division

Attention Deficit/Hyperactivity Disorder in adults (2016)

<https://www.cmha.bc.ca/documents/attention-deficithyperactivity-disorder-in-adults-2/>

Anxiety and Depression Association of America

Adult ADHD (Attention Deficit Hyperactive Disorder) (2010 - 2016)

<https://www.adaa.org/understanding-anxiety/related-illnesses/other-related-conditions/adult-adhd>

Canadian Mental Health Association British Columbia Division

Attention Deficit/Hyperactivity Disorder in adults (2016)

<https://www.cmha.bc.ca/documents/attention-deficithyperactivity-disorder-in-adults-2/>

Anxiety and Depression Association of America

Adult ADHD (Attention Deficit Hyperactive Disorder) (2010 - 2016)

<https://www.adaa.org/understanding-anxiety/related-illnesses/other-related-conditions/adult-adhd>

American Psychiatric Association

Attention Hyperactive Deficit Disorder (2013)

<http://www.dsm5.org/documents/adhd%20fact%20sheet.pdf>

CHADD: Children and Adults with Attention-Deficit/Hyperactivity Disorder (2016)

<http://www.chadd.org/Understanding-ADHD/For-Adults.aspx>

Centre for ADHD Awareness, Canada

Symptoms of Adult ADHD, by Heidi Bernhardt, RN (2016)

<http://www.caddac.ca/cms/page.php?80>

Learning Strategies adapted from the following sources:

Autism Speaks

Autism Speaks Family Services school community toolkit (2012)

http://studentsfirstproject.org/wp-content/uploads/school_community_tool_kit.pdf

Canadian ADHD Resource Alliance

Specific issues in the management of ADHD in adults (November 2014)

<http://www.caddra.ca/pdfs/caddraGuidelines2011Chapter05.pdf>

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners. New Directions for student services*, Wiley Periodicals, Inc. (no. 102).

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013).

<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

LiveBinders by Mindprint Learning

Instructional strategies to support attention (2016)

<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014). *Pre-referral intervention manual (PRIM): The most common learning and behaviour problems encountered in the educational environment*, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Professional Learning Board

What are the strengths of students with ADHD? (2016)

<http://k12teacherstaffdevelopment.com/tlb/what-are-the-strengths-of-students-with-adhd/>

Royal College of Psychiatrists

Attention Deficit Hyperactivity Disorder (ADHD) in adults (2016)

<http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/adhdinadults.aspx>

Students First Project

School and Classroom Strategies: ADHD (2016)

<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-ADHD-Strategies-2.24.14.pdf>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)

<http://www.studygs.net/adhd/index.htm>

Chapter 11: Autism Spectrum Disorders (ASD)

Autism Spectrum Disorders (ASD) were once classified solely as neurobiological disorders or developmental disabilities. **The American Psychiatric Association (2013) states that the DSM recognizes ASD as a mental health disorder, and has grouped previously divided disorders into this single category which represents a spectrum or range of disorders and effects.**

Those living with any of the disorders on the autism spectrum can experience a wide range of symptoms, abilities, and challenges which change over the course of a lifetime. Symptoms may be similar but can vary widely between and within disorders. For example, those diagnosed with ASD typically experience limits on language skill development, but limits can vary from severe to mild, and, in the case of Asperger Syndrome, a person could experience above-average language skills in some areas. As well, language skills can change greatly over the course of a lifetime, and interventions can increase language skills development.

Autism Spectrum Disorders appear in childhood and continue through adolescence into adulthood. In general, ASD can create:

- challenges in communication and comprehension
- impairments or differences in intellectual or cognitive functioning
- problems with social skills
- repetitive movements or actions
- rigid and limiting maintaining of routines
- intense preoccupations or extreme focus on limited interests
- physical symptoms such as gastro-intestinal conditions, or sensory issues
- difficulties managing emotions and behaviours

A child with autism may be non-verbal, may have trouble putting words together, may repeat words, or may use unusual words or sounds. As they mature they may learn to speak more effectively but may use a robotic tone and may be unable to use expected eye contact, facial expressions, and gestures to accompany their words, making understanding them more difficult. People living with ASD often take all verbal communication literally, which limits comprehension of subtle meanings. They often show skill at decoding and spelling words but frequently experience challenges with reading comprehension.

ASD can affect intellectual ability, again along a wide range of possibilities. Those living with Autism can display what seems to be intellectual impairment or disability in some cases, although sometimes difficulties communicating are

mistaken for intellectual impairment. Those living with Asperger Syndrome may display high cognitive functioning in many areas. People diagnosed on the Autism Spectrum sometimes show unique and extraordinary abilities in certain skill areas such as math, art, or technology.

School tasks and employment responsibilities can constitute challenges for individuals living with ASD because of limits in executive functioning – the skills and abilities that allow organization, planning, and carrying out plans. Often individuals with ASD need to be overtly taught “unwritten rules” that others take for granted as common knowledge.

Those with ASD typically experience social difficulties, partly because of communication and comprehension issues. They often fail to understand social cues, expressions, and gestures, and take others’ words too literally. They may have trouble understanding another’s feelings or responding in an emotionally appropriate way. They often have challenges with initiating conversation or with understanding or maintaining back-and-forth turn-taking in conversation.

Some living with ASD may exhibit repetitive movements or actions such as hand flapping or rocking. They often create and follow rigid routines which may limit their full participation in everyday activities. Both of these symptoms can also interfere with social interactions and therefore with social development. As well, ASD can result in intense preoccupations or interests which limit participation in everyday activities and interfere with social interactions. The person may talk about one topic to the exclusion of any other topic, and have trouble showing interest in another person’s ideas.

Symptoms of autism, and their severity, vary considerably in each individual on the autism spectrum. The functional areas of communication, social interaction, and repetitive behaviors are viewed as the ‘core’ symptoms of autism.

Autism Speaks (2012)

Autism Spectrum Disorders are often accompanied by health issues such as gastrointestinal conditions, allergies, sleep disturbances, or pain. Sometimes difficulties with communication cause or contribute to health issues; for example, a person living with ASD might not report their symptoms in a way that helps a health professional make an accurate diagnosis. Those with these disorders may experience sensory input more intensely or not as strongly as usual; for example, they may find the texture of a shirt too distracting, or be injured but not process or express pain in a way that is recognizable to others. ASD can also affect a person’s ability to manage emotions and behaviours in socially acceptable ways, perhaps in part because behaviours may be used to communicate needs and emotions where words have failed. As well, those living with ASD have an increased likelihood of living with or developing another disorder such as ADHD, anxiety, and depression.

When depicted in popular media, Autism Spectrum Disorders are typically shown as Asperger Syndrome, in which a person experiences some symptoms but at a “high functioning” level that allows them to maintain relationships and employment, usually accompanied by high cognitive functioning or exceptional abilities. In reality, many of those living with ASD experience limits on daily functioning. Interventions and treatments designed to teach individuals how to manage communication and social interaction as well as learning strategies targeted to specific learning needs, especially if started at a young age, can expand functioning and increase school success, and can help those with ASD live full lives. However, some adults may require community supports or assisted living.

Much of the available information on ASD relates to children. Incidence of diagnosis in children has risen dramatically over recent years. The causes for this increase are not known, with increasing numbers only partly the result of more information being available about symptoms to look for, more access to diagnosis, and increased awareness of how symptoms might affect school success. **Autism Speaks stated in 2012 that the prevalence of Autism was increasing by 10% to 17% annually, and that 1 in 88 children would be diagnosed with Autism that year. In 2016, Autism Speaks states that currently 1 in 68 children will be diagnosed with ASD.**

We do know that these disorders are life long. These statistics suggest that in coming years more adults living with ASD will be entering adult education and the workforce. Larger effort is now being put toward research on ASD in adults.

Types of Autism Spectrum Disorders

Autism Spectrum Disorders were previously viewed as separate, though similar, brain disorders. These disorders are now categorized in a range or spectrum known as Autism Spectrum Disorders. They include Autistic Disorder, Childhood Disintegrative Disorder, Pervasive Developmental Disorder - Not Otherwise Specified (PDD-NOS), and Asperger Syndrome.

These disorders share similar symptoms with a few key differences.

Autism Disorder, sometimes referred to as “classic” Autism, results in a range of typical symptoms. Adults may experience significant challenges in maintaining relationships and employment.

Childhood Disintegrative Disorder is a rare illness in which children who had previously been meeting developmental milestones show drastic reversals and loss of language skills. Skills are not regained and these individuals usually require assisted living in the long term.

Pervasive Developmental Disorder - Not Otherwise Specified refers to a mild level of autism in which some of the usual diagnostic criteria are met and some are not; for example, an individual may show normal language skills

development but lagging social skills development.

Asperger Syndrome refers to a “high functioning” form of Autism in which an individual will show some of the typical symptoms of Autism along with possibly high cognitive abilities and exceptional abilities in some areas. As adults these individuals can usually maintain relationships and employment.

Causes of Autism Spectrum Disorders

The causes of Autism Spectrum Disorders are not known. Suspected causes include a genetic predisposition coupled with an environmental exposure or event either in utero or at birth. Because there is such variation in the types and symptoms of ASD, a combination of causes is probable, or the variation might be caused by differences in the timing of an environmental influence. Research is being conducted to determine possible causes.

With so many ‘aging-out’ of services by age 21 it is important to remember that like everyone else, those on the spectrum will continue to experience changes, triumphs, challenges, victories and difficulties. Without information, compassion and support it cannot be expected that people with ASD will reach their full and optimal potential.

Autism Canada (2016)

Diagnosis of Autism Spectrum Disorder

Adults living with ASD may have received a diagnosis in childhood, but in years past less was known and understood about these disorders, so the opportunity for a diagnosis and treatment may not have been available.

Adults sometimes are not aware of their disorder. Their symptoms may have been mistaken for ADHD, and they may have learned to work around and cover up their symptoms. There is no evidence for adult-onset ASD, but many individuals aren’t diagnosed until adulthood, particularly women.

Those experiencing symptoms of ASD can ask their doctor for an assessment. They may be referred to a specialist who will administer tests and use a checklist for symptoms. Diagnosis depends on the number of symptoms they experience and on the degree to which the symptoms interfere with communication, learning, or employment. Unfortunately attaining an accurate diagnosis can take time, as other mental health disorders can also result in similar symptoms, and other mental health disorders often co-occur with ASD. Being prepared with details of the symptoms, their severity, and when they were first noticed, can improve the speed of diagnosis, treatment, and recovery.

Those experiencing a mental health crisis (such as overwhelming anxiety or depression, suicidal thoughts or imminent suicide plans) can call 911 or go to the

emergency room and state that they are experiencing a mental health emergency.

Treatments for Autism Spectrum Disorders

A wide range of treatments and therapies are available for children diagnosed with ASD, as early intervention can greatly improve a child's outcome for living a functional life. Many services are offered only to children and teens, but as numbers diagnosed grow, more adult services and treatments are becoming available. Treatments for adults living with ASD include a combination of Cognitive Behavioural Therapy, (CBT), support programs, and medications.

However, as awareness of ASD grows, resistance to treatment for ASD by those living with Asperger Syndrome has gained attention in some health fields. "High functioning" individuals reject the notion that their characteristics need to be treated or cured, and profess pride in their unique personalities and exceptional abilities. In response, health professionals have become more aware than ever of the need to tailor treatments to unique symptoms and needs and in accordance with the level of dysfunction the individual experiences.

Cognitive Behavioural Therapy (CBT), sometimes known as "talk" therapy, is a counselling method adapted for many types of mental health issues. CBT can help the individual learn social skills and gain control over emotions, obsessions, and repetitive behaviours.

Support Programs

In many areas, group programs are available to help adults living with ASD to learn and practice social skills in a safe, supportive group setting.

Medications

There is no one type of medication to address the symptoms of ASD. Adults living with ASD can sometimes be helped by antidepressant or antipsychotic medications, depending on their symptoms and the severity of symptoms. Stimulants may also be used to treat co-occurring disorders: ADHD, anxiety, and depression.

All of these medications may be accompanied by side-effects such as

- nausea
- headaches

Operate on "Asperger time." This means, "Twice as much time, half as much done." Students with Asperger Syndrome often need additional time to complete assignments, gather materials, and orient themselves during transitions.

Organization for Autism Research (2010)

- dizziness
- moodiness
- trouble sleeping
- dry mouth
- blurred vision

Keeping track of symptoms can help the health care professional to alter the medication as necessary to find an effective type or dose.

Medications do not have the ability to cure a mental health condition or disorder. Medications are prescribed to alleviate symptoms so the person can gain stability in their life.

Starting a new and powerful medication can be stressful, and if it does not seem to work, or produces worrying side effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medications for a mental health disorder needs careful and regular monitoring by a health care professional.

Co-occurring disorders and other risks

A person living with ASD has a significantly increased likelihood of having or developing another mental health disorder, or experiencing other challenges that can affect functioning in school or at work.

Learning Disabilities

Those with ASD show a higher incidence of learning disabilities. Facilitators can employ strategies for learning disabilities in conjunction with strategies to support those with ASD. ¹

Seizure Disorders

Autism Speaks (2012) states that over a third of those living with ASD also live with a seizure disorder. These disorders may be treated with a wide variety of anti-epileptic medications, depending on the type of seizure.

Genetic Disorders

Those with ASD have an increased likelihood of also having a genetic disorder. Genetic disorders represent a wide range of disorders caused by an abnormality in DNA.

Sensory Processing Disorders

ASD can create hyper or hypo-sensitivity to environmental stimuli.

Health issues such as allergies, gastrointestinal disorders, pain, Pica

Those living with ASD commonly exhibit allergies, often food allergies, which can be related to increased likelihood of gastrointestinal disorders or pain. Pica refers to a disorder in which an individual is compelled to eat substances that are not food, such as chalk or dirt, and may be linked to ASD because of the prevalence of food allergies.

ADHD, Anxiety Disorder, Mood Disorder

Adults living with ASD are often also living with ADHD and are at increased risk for anxiety disorders or depression. Anxiety or depression may develop in adulthood as those living with ASD become more aware of their communication challenges. These co-occurring disorders can also carry increased risks of behavioural disorders and suicide.

All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Males are more likely to experience ASD than females, although girls seem more apt to have the ability to hide symptoms and so are sometimes not diagnosed until they are older and choose to express their history of symptoms. Other risk factors are not known, but ongoing research on the causes of ASD may reveal more information about who is likely to be affected.

What you might notice

Living with ASD can be confusing, frustrating, and isolating. Daily tasks that others take for granted can be fraught with challenges. Social interactions do not seem to add up, and frequently result in misunderstandings or unintended conflict. Relationships suffer and support for adults can be hard to find outside of a clinical or school setting. Adults with ASD may have experienced disappointments in school and frustration at not being able to pursue goals. Adding to these challenges, cultural attitudes often result in rejection or suspicion of this person who seems “different.”

An adult learner living with ASD may report a diagnosis or suspected diagnosis, or the symptoms they experience. In many cases, however, they may not report their issues or not be aware of them.

You can not diagnose a condition. But you can try using the learning strategies if you suspect a disorder. No matter how much information you have, you always have what you observe. For example, a learner with ASD might take great pains to establish repetitive routines for carrying out school related tasks.

Note that the indicators below, as well as the suggestions and strategies for supporting adult learners in the classroom, relate to individuals at

the higher functioning end of the Autism Spectrum, and to those with Asperger's Syndrome, as these are the individuals you may work with.

The learner experiencing ASD might:

- have trouble making eye contact
- have trouble maintaining regular back-and-forth interaction – talk too much or not answer when expected
- speak in a robotic tone, repeat words, or use unusual vocalizations
- speak with a lack of facial expressions that typically accompany speech
- understand words in a literal way while missing social cues that would tell them otherwise, miss sarcasm or innuendo altogether
- focus intently on a task to the exclusion of everything else
- focus intently on the part rather than the whole: for example, the font of the text rather than the assignment
- show a narrow range of interests or one interest, show intense preoccupations, talk all the time about one pet topic
- appear overly sensitive to textures, sounds, stimuli that may seem minor
- stare into space, or become very distracted by small stimuli
- create rigid routines and follow them repeatedly and meticulously, or repeat actions
- appear jangled by changes to routine or transitions from one part of the day to the next
- lack awareness of personal hygiene or clothing choices
- lack awareness of unwritten rules – for example, not be aware that they are expected to sit at a table when they arrive
- show exceptional abilities in some areas and weaknesses in others
- show strengths in visual processing, computer skills, and hands-on activities
- easily figure out how devices or mechanisms work
- struggle with reading comprehension even though they can decode and spell words easily
- exhibit strong memory skills for lists of facts, but struggle with tasks

requiring working memory (the ability to hold information in your mind and work with it at the same time, such as instructions)

- exhibit advanced computer and technology skills

Supporting learners living with higher functioning ASD/Asperger's Syndrome

ASD symptoms can range from mild to severe, and the abilities of these individuals also vary within a wide range. Those living with ASD may exhibit uneven strengths and weaknesses, sometimes with unlooked-for exceptionalities. Assessment across all skill areas is necessary to meet these individuals where they are. Some individuals will already have received help in earlier school settings and may know strategies that you can use together to support learning.

Strengths

People living with ASD are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a learner that shows strong visual awareness might struggle to list geographical facts but be able to display their knowledge on a map.

Those living with Asperger's Syndrome are often keen to share their knowledge base. A learner living with Asperger's Syndrome might be able to help others in the class, particularly in an area of interest where they excel, or even lead a group lesson on a particular topic.

People living with mental health issues are developing strength and resiliency. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Your strength in supporting learners living with mental health issues will come in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Challenges

Learners living with higher functioning ASD/Asperger's Syndrome may face the following challenges in the classroom:

- extreme need for routines, difficulty with flexibility

- difficulty with problem solving or generating ideas if requiring flexible thinking
- sensory issues
- trouble with attention or concentration
- intense focus on a preferred activity, with difficulty breaking focus, or staring into space
- lack of understanding of basic concepts or “unwritten rules”
- trouble processing verbal instructions
- constraints on working memory
- difficulty with organization
- anxiety, worry, stress
- lack of attention to personal hygiene
- communication and social skills challenges
- talking or creating distractions for others
- frustration or irritation
- slower processing speed for information intake and output
- weak writing output
- difficulty with reading comprehension
- repetitive behaviours leading to faulty or partial understanding
- sensitivity to environmental factors
- side effects from medication

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment

- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with ASD

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with Autism Spectrum Disorder who can develop ways to achieve in class often find that attending school helps them learn strategies to allow them to function more fully and productively in all aspects of their lives, including employment.**

As an adult education facilitator you are never expected to diagnose ASD. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For extreme need for routines, difficulty with flexibility	Notes
Develop a classroom routine that everyone can understand and follow.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Begin each day with a review of the day's schedule.	

For extreme need for routines, difficulty with flexibility	Notes
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.</p>	
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Warn the learner ahead of any foreseen changes in class schedule.</p>	
<p>Create very concise emergency procedures and review them with the learner. Discuss with the learner the fact that emergencies are one instance when you cannot forewarn the class.</p>	

For extreme need for routines, difficulty with flexibility	Notes
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	
Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)	
Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
Let the learner know about “surprise” tests ahead of time.	
Teach the learner to create their own fact sheets or study guides for assessments, and/or supply study guides ahead of time.	

For difficulty with problem solving or generating ideas if requiring flexible thinking	Notes
<p>Overtly teach the concept of brainstorming and practice brainstorming activities using the same type of graphic organizer each time, for example, a story web. Start expectation with 2 ideas and increase as the skill is practiced.</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Work with the learner to generate more than one solution to a problem. Praise efforts to brainstorm and meet protests that only one option is relevant with information on the value of brainstorming.</p>	
<p>Overtly teach methods for approaching tasks; for example, teach how to write a paragraph step by step, including steps that seem “obvious.”</p>	
<p>Teach study skills and test-taking skills. (Handout # 7)</p>	

For difficulty with problem solving or generating ideas if requiring flexible thinking	Notes
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	

For sensory issues	Notes
Ask the learner about specific environmental factors they might find distracting or stressful. For example: “Do you find it easier to work in complete silence or with some background noise?” Use answers to plan sensory boundaries together.	
Seat the learner away from sensory distractions such as fans, heat vents, appliances that may hum.	

For sensory issues	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Allow the use of background music if it helps improve the ability to focus.	
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Keep tasks short and structured.	
Make a class contract regarding cell phone use. Have the learner put the cell phone away to reduce distraction.	
Make noise-cancelling headphones or ear plugs available.	

For sensory issues	Notes
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.</p>	
<p>Seat the learner away from visual distractions such as a window.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Provide a study carrel or screen for reducing distractions during individual work time.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Employ frequent breaks. Suggest a physical activity such as a walk around the block.</p>	

For sensory issues	Notes
Give opportunity to self-initiate a short break when needed.	
Place desks/seats further apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	

For trouble with attention or concentration	Notes
Validate the learner’s experience: “I know this is difficult for you right now.”	

For trouble with attention or concentration	Notes
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)</p>	
<p>Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.</p>	

For trouble with attention or concentration	Notes
Allow the use of background music if it helps improve the ability to focus.	
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Keep tasks short and structured.	
Make a class contract regarding cell phone use. Have the learner put the cell phone away to reduce distraction.	
Make noise-cancelling headphones or ear plugs available.	

For trouble with attention or concentration	Notes
Create a class schedule for work time and break time.	
Provide a study carrel or screen for reducing distractions during individual work time.	
Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Encourage the learner to self-monitor their routine.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
Break work into definable, manageable chunks to avoid overload and confusion.	

For trouble with attention or concentration	Notes
During instruction, present main points first.	
Give one direction at a time.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Have the learner use the computer for tasks where applicable and appropriate.	
<p>Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For trouble with attention or concentration	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner’s most alert time of day.</p>	
<p>Use concrete examples, or examples meaningful to the learner, for instruction or assessment.</p>	
<p>Seat the learner away from visual distractions such as a window.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	

For trouble with attention or concentration	Notes
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Give opportunity to self-initiate a short break when needed.	
Place desks/seats further apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For trouble with attention or concentration	Notes
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	
<p>Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Develop a discreet way for the learner to find out missed instructions, such as a self-serve handout bank.</p>	
<p>Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.</p>	

For trouble with attention or concentration	Notes
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Try over-learning: continue to review information or instructions regularly.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	
Provide immediate positive feedback on comprehension-related activities.	

For trouble with attention or concentration	Notes
<p>Introduce a timer for the learner to set a specific length of time to focus on work, with a planned break following.</p>	
<p>Using a timer, help the learner estimate time needed for a task, record actual time needed, and check against estimate. Help the learner adjust time-management plans as needed.</p>	
<p>Encourage quality of work over quantity.</p>	
<p>Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.</p>	
<p>Make use of an online time-tracking system to help with managing tasks.</p>	
<p>Teach the learner key words and features to recognize in tasks and assessments.</p>	

For trouble with attention or concentration	Notes
Allow the learner to use study notes or fact sheets to check during tasks, assignments, or assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	

For trouble with attention or concentration	Notes
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.</p>	
<p>Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	

For trouble with attention or concentration	Notes
Encourage the learner to discover and draw on their own gifts and talents.	
Encourage the learner to maintain a short daily study routine on weekends or holiday breaks. Provide worksheets or textbooks for home as needed.	
Allow extra time for assignment completion and test taking.	
Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.	
Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	

For trouble with attention or concentration	Notes
Consider a shortened day or modified class schedule as necessary.	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Begin each day with a review of the day's schedule.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
<p>Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	
<p>Use visual reminders about content to re-focus the learner on their task. For example, point to the question on the page, or the time on their schedule.</p>	
<p>Make noise-cancelling headphones or ear plugs available.</p>	
<p>Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.</p>	
<p>Affix a sensory tool to the underside of the table, for example a strip of Velcro, as a touch point for renewing mindfulness.</p>	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Provide a textured inflatable seat cushion to induce involuntary movements that aid alertness.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Use hands-on activities where possible, including flash-cards, games such as Sudoku or crosswords, and manipulatives for practicing math concepts.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Find ways to demonstrate how course content relates to real-world applications.	
Engage guest speakers to visit and talk about real-world applications for course content.	
Provide the learner with reliable links to websites for research in their course content area.	
Provide the learner with information on strategies for concentration. (Handout # 5)	
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	
Reduce the number of information sources or stimuli the learner must attend to, as intense focus may be a method to drown out sensory input.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Have the learner take jot notes as they listen or read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Present one concept at a time. Check for understanding before presenting the next concept.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Avoid learning methods where the learner must listen for an extended period of time.	
Design tasks so the learner must actively respond, for example, write on the board.	
Have the learner record instructions (using an audio player) so they can listen again as needed.	
Provide written instructions that match verbal instructions.	
Seat the learner away from visual distractions such as a window.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Provide a study carrel or screen for reducing distractions during individual work time.	
Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Praise the learner for efforts to manage focus to suit the situation.	
Allow the use of background music if it helps improve the ability to focus.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Employ frequent breaks. Suggest a physical activity such as a walk around the block.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Make use of absorbing special interests by assigning tasks based on books or videos in the interest area.	
Make use of audio books by having the learner read and listen at the same time.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Provide immediate positive feedback on assignments.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Introduce a tally sheet for the learner to use to self-monitor loss of focus (times they catch themselves staring into space), and encourage them to work toward increased focus.	
Have the learner create a chart to monitor on-task behaviour.	
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	

For intense focus on a preferred activity, with difficulty breaking focus, or staring into space	Notes
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For lack of understanding of basic concepts or “unwritten rules”	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Develop a classroom routine that everyone can understand and follow.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Begin each day with a review of the day’s schedule.	

For lack of understanding of basic concepts or “unwritten rules”	Notes
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	
<p>Where necessary, explain reasoning behind class expectations that may seem obvious: “Quiet is expected when the instructor talks so everyone can hear what they need to know.”</p>	
<p>Where possible, use graphics to display class expectations; for example, post a picture above each area to depict what activity takes place there.</p>	
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Overtly teach methods for approaching tasks; for example, teach how to write a paragraph step by step, including steps that seem “obvious.”</p>	
<p>Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips. http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Pre-teach key concepts or vocabulary needed for lesson comprehension.</p>	
<p>Give pre-information before reading, such as summary or predictions.</p>	
<p>Make use of video lessons to teach basic concepts.</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
Do not assume knowledge of abstract concepts such as cultural beliefs. Provide information to support concepts the learner needs to understand to complete a task.	
Pre-teach key concepts or vocabulary needed for lesson comprehension.	
Give pre-information before reading, such as summary or predictions.	
Give the learner opportunity to demonstrate or teach something in their area of expertise to another learner or a small group.	
Make use of video lessons to teach basic concepts.	
Use concrete language and avoid expressions that are not meant to be taken literally.	

For trouble processing verbal instruction	Notes
<p>Validate the learner’s experience: “I know this is not one of your easier methods for learning.”</p>	
<p>Seat the learner in a brightly lit area close to the center of instruction.</p>	
<p>Ask the learner what strategies they already know work best for them to listen and process.</p>	
<p>Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.</p>	
<p>Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.</p>	
<p>Encourage focusing exercises before listening, such as mindfulness or meditation practices.</p>	

For trouble processing verbal instruction	Notes
<p>Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>During instruction, present main points first.</p>	
<p>Give one direction at a time.</p>	
<p>Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.</p>	

For trouble processing verbal instruction	Notes
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes.</p> <p>Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Use concrete examples, or examples meaningful to the learner.</p>	
<p>Seat the learner away from visual distractions such as a window.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.</p>	
<p>Employ frequent breaks. Schedule breaks during direct instruction, and remind the learners of the upcoming break. Ask learners to try to wait until the break for any needs that require them to leave their seat.</p>	

For trouble processing verbal instruction	Notes
Place desks/seats further apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals to gain group attention or indicate transition times such as wind chimes or rain stick.	
Use alternative methods for delivering instructions: PowerPoint presentations, cue cards.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	

For trouble processing verbal instruction	Notes
Ask the learner to repeat instructions back to you.	
Develop a discreet way for the learner to signal that they need you to repeat an instruction during group lessons.	
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Try over-learning: continue to review information or instructions even after learners seem to understand.	

For trouble processing verbal instruction	Notes
Structure lessons to include short bursts of listening interspersed with answering written questions, group discussion, or small group activities.	
Call on the learner for yes/no or true/false questions you think they will be prepared to answer.	
Provide immediate positive feedback on answers to verbal questions.	
Introduce a timer for the learner to see how much listening time remains, with a planned break following.	
Teach the learner key words to recognize in lectures or group lessons.	
Allow the learner to preview and use lecture notes or fact sheets while listening to group instruction.	

For trouble processing verbal instruction	Notes
Provide handouts that match lesson content.	
Have the learner highlight or underline important titles, instructions, or information in handout materials as they listen.	
Ask the learner about their interests or have the learner fill out an interest survey. Use information about learner interests when preparing lectures.	
Check in frequently to ensure that all learners are following and understanding direct instruction content.	
Incorporate multiple senses in instruction: photos or maps, dry erase boards, audio, or videos.	
Have the learner answer a question “in their head,” or jot down what they want to say, before responding.	

For trouble processing verbal instruction	Notes
Give the learner time to respond to verbal communication.	
Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.	
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Reduce opportunities for competition or comparison of learner abilities.	
Allow extra time for responding to questions verbally.	

For constraints on working memory	Notes
Validate the learner's experience: "I know this is not one of your easier tasks."	

For constraints on working memory	Notes
<p>Ask the learner what strategies they already know work best for them to remember and use information.</p>	
<p>Together with the learner, develop an individual learner profile reflecting learner strengths and weaknesses.</p>	
<p>Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.</p>	
<p>Let the learner know that it is OK to use strategies to aid working memory, for example, fact sheets, study notes, and colour-coded systems.</p>	
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	

For constraints on working memory	Notes
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide short, structured tasks.	
During instruction, present main points first.	
Give one direction at a time.	
During reading or listening activities have the learner stop often and summarize in writing what they understand or remember.	

For constraints on working memory	Notes
<p>Check in frequently to ensure that all learners are following and understanding direct instruction content.</p>	
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Help the learner develop a system for notes storage, using colour-coding and/or dividers. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion such as those suggested here: Handout # 4, or:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Make use of devices to set and send reminder signals for certain tasks. For example, a tablet timer set to signal at intervals can remind the learner to review certain information.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	

For constraints on working memory	Notes
Allow the learner to preview and use lecture notes or fact sheets while listening to group instruction.	
Provide handouts that match lesson content.	
Teach the learner to create their own fact sheets or study guides to aid with tasks where memory is required.	
Have the learner highlight or underline important titles, instructions, or information in handout materials as they listen.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	

For constraints on working memory	Notes
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, charts, graphics, or videos.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to complete a task requiring working memory.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	

For constraints on working memory	Notes
Use storytelling to approach instruction or tasks.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Have the learner verbally explain their steps before starting a task.	

For constraints on working memory	Notes
<p>Try over-learning: continue to review the information regularly after it has been processed.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Make use of assistive technologies such as voice recognition or talking word processor, organization programs, reading or writing software.</p>	
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	

For constraints on working memory	Notes
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Have the learner create their own visual and tactile reward system for following their routine, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	

For constraints on working memory	Notes
Encourage the learner to use visualization to remember information or lists of items when possible.	
Provide the learner with information about working memory – what it is and how it works.	
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)	
Give opportunity to self-initiate a short break when needed.	

For constraints on working memory	Notes
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Provide immediate positive feedback on comprehension-related activities.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	

For constraints on working memory	Notes
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Reduce opportunities for competition or comparison of learner abilities.	
Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.	
Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.	

For constraints on working memory	Notes
Have the learner self-evaluate which working memory strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Reduce homework or extend deadlines as needed.	

For difficulty with organization	Notes
Provide a class calendar or schedule handout to remind learners of class times.	
Make use of phone calls or messaging to remind learners of class times.	

For difficulty with organization	Notes
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	

For difficulty with organization	Notes
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Provide all learners with information on time management skills. (Handout # 11)</p>	
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.</p>	

For difficulty with organization	Notes
Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.	
Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.	
Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.	
Encourage the learner to schedule time for completing unfinished work.	
Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.	
Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.	
Post group assignments and homework on the board and give enough time for learners to copy details.	

For difficulty with organization	Notes
Provide positive feedback on all efforts and successes in organization.	
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For anxiety, worry, stress	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with." (Handout # 6)	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	

For anxiety, worry, stress	Notes
Discuss appropriate outlets for feelings, such as writing in a journal.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Begin the day with short tasks in which the learner can feel success.	
Check in frequently to monitor progress and give encouragement.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	

For anxiety, worry, stress	Notes
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day. Encourage the learner to stick to the routine.</p>	

For anxiety, worry, stress	Notes
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	
<p>Encourage the learner to develop a support network of trusted family or friends.</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	

For anxiety, worry, stress	Notes
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	

For anxiety, worry, stress	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Reduce opportunities for competition or comparison of learner work.	
Reduce homework or extend deadlines as needed.	
Help the learner understand that it is OK to leave unfinished work for next time.	

For lack of attention to personal hygiene	Notes
Set hygiene rules or decide as a group on hygiene rules for the class.	
Draw learner aside and candidly discuss that when working in a group there is a standard of hygiene to keep up.	
Provide time for learners to clean up before beginning class.	
Provide basic emergency hygiene supplies such as toothbrushes, wipes, combs.	
Provide information for all learners on expectations for personal hygiene in class and in the workplace.	
Make a health unit available that includes hygiene for all to learn more about caring for oneself. One resource to try from Haldimand Norfolk Health Unit: https://hnhu.org/health-topic/hygiene/	

For lack of attention to personal hygiene	Notes
Set an example.	
Comment positively on progress: "You look neat and ready to work today."	

For communication and social skills challenges	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Provide the learner with a quiet space to work if possible, while helping them recognize that some interaction will be required.	
Do not force the learner to work with others with whom they may feel uncomfortable.	
Seat the learner near others who will help to maintain a positive tone.	

For communication and social skills challenges	Notes
Provide the learner with choices for learning activities and tasks.	
Reduce opportunities for competition or comparison of learner work.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Consider offering information to all learners about developing and growing social skills. (Handout # 15)	
As a group, agree on a quick social protocol for minor irritations. For example, agree on the term “excuse me” for any unintentional interruptions.	
Encourage supportive behaviours between learners by publicly recognizing effort and perseverance together.	

For communication and social skills challenges	Notes
Praise helpful and supportive behaviours.	
If the learner repeats what you say rather than answering, prompt them with a sentence starter, making it clear that you are doing so: "Your answer might start like this ..."	
For verbal responses to questions in group lessons, prompt the learner with choices for answers, or direct their attention to the choices.	
Place boundaries on the time you are free to listen to the learner talk about their intense interests. Plan a time to talk and use a timer or other method of measuring this time: "I'm interested in that. Remember we have time to talk at our 2 pm break."	
Show interest when the learner talks about topics other than an intense preoccupation: "It's great to see you have several interests."	
Where appropriate, use cartoons to depict social expectations. For example, a poster with a caption or thought bubble could show a learner waiting to speak to the instructor while he/she helps another learner.	

For communication and social skills challenges	Notes
<p>When social expectations shift with shifting activities, explain the expectations to all learners, including the “unwritten rules:” “We’ll move to the computers now, and as you’ll remember, we’re quiet so as not to disturb others who are working.”</p>	
<p>Seat the learner next to others who will model appropriate social skills.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Identify one facilitator as this learner’s go-to person for check-ins, instructions, and help.</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	

For communication and social skills challenges	Notes
Check in frequently to monitor progress and give encouragement.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
Gain the learner's attention before giving verbal instructions. Speak slowly.	
Provide written instructions that match verbal instructions.	
Give the learner time to respond to verbal communication.	

For communication and social skills challenges	Notes
<p>Help the learner develop a bank of useful words for various types tasks, using a notebook or cue cards.</p>	
<p>If, when answering multiple choice questions, the learner consistently chooses the last answer in the list, limit choices to two and gradually increase with practice.</p>	
<p>Have the learner track emotions through the day using an emoticon chart. Help the learner look for patterns, for example, mood variation at certain times, and alter the schedule if required.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Model interactions making eye contact in usual ways – some eye contact but not continuously – as you speak to the learner and others in the class.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	

For communication and social skills challenges	Notes
<p>Check with the learner that they understand what break time activities are appropriate. If necessary help the learner create a routine for break time.</p>	
<p>Notice and build on social strengths; for example, if humour is a strength, group lessons could be introduced with a cartoon.</p>	
<p>For difficulty expressing knowledge verbally, have the learner express information using a chart, spreadsheet, or map.</p>	
<p>Teach the learner that it is OK to say: “I don’t know” or “let me think about that for a bit,” in response to a question.</p>	

For talking during quiet times or creating distractions for others	Notes
<p>Speak with the learner about what is not working and why: “It’s a social asset to like to talk, but most learners need quiet times to get certain kinds of work done.”</p>	
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	

For talking during quiet times or creating distractions for others	Notes
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Model respecting quiet work periods. Avoid talking and use this time for reading or marking learner work. If working one on one with learners during quiet periods, use low voices or move away from others.</p>	
<p>Do not accept ADHD as an excuse for poor social behaviour. While being mindful that the learner is working to manage their impulses, explain that the class is a place to practice and learn to follow social expectations and you expect their best efforts.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus on their work.</p>	
<p>Provide the learner with sensory tools for helping with focus, such as a stress ball to squeeze.</p>	
<p>Have the learner ask a question “in their head,” or jot down what they want to say, before asking for help.</p>	

For talking during quiet times or creating distractions for others	Notes
Make noise-cancelling headphones or ear plugs available.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Reduce the need to ask questions by providing clear, concise instructions in both verbal and written form.	
Check in frequently to monitor progress and give encouragement.	
Provide the learner with information on strategies for concentration. (Handout # 5)	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For talking during quiet times or creating distractions for others	Notes
<p>Include some highly talkative activities in the class program if feasible.</p>	
<p>Ensure the learner has gathered all materials needed before beginning a task.</p>	
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.</p>	
<p>Recognize and praise efforts to be patient: "Thank you for your patience."</p>	

For talking during quiet times or creating distractions for others	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Give the learner opportunities to help other learners.	
Reduce opportunities for competition or comparison of learner work.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	

For frustration or irritation	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	

For frustration or irritation	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner near others who will help to maintain a positive tone.	
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	

For frustration or irritation	Notes
<p>Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	

For frustration or irritation	Notes
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Find ways to model using problem-solving strategies, perhaps as a group: "What can we do to make sure everyone has time on the computer?"	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	

For frustration or irritation	Notes
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with frustration and other emotions.</p>	
<p>Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.</p>	

For frustration or irritation	Notes
Give instructions and directives in a supportive and respectful manner.	
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide the learner with an extra set of books or copies of work to take home.	
Help the learner understand that it is OK to leave unfinished work for next time.	
Avoid taking the learner's words or behaviour personally.	

For slower processing speed for information intake and output	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Seat the learner in a brightly lit area close to the center of instruction.	
Seat the learner away from visual distractions such as a window.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	

For slower processing speed for information intake and output	Notes
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.	
Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.	
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	

For slower processing speed for information intake and output	Notes
Check in frequently to monitor progress and give encouragement.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Pre-teach relevant vocabulary and content, and provide the learner with pre-view materials to review, before a lesson.	
Have the learner take jot notes as they listen or read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Gain the learner's attention before giving verbal instructions. Speak slowly.	

For slower processing speed for information intake and output	Notes
Provide written instructions that match verbal instructions.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Provide immediate positive feedback on comprehension-related activities.	
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Use verbal questions about content to re-focus the learner on their task: "Remind me of the conflict in that story?"	

For slower processing speed for information intake and output	Notes
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Give the learner time to respond to verbal communication.	
Allow more time for the learner to complete assignments and assessments.	
Reduce homework or extend deadlines as needed.	
Make use of assistive technologies such as voice recognition or talking word processor, organization programs, reading or writing software.	

For weak writing output	Notes
Provide sentence starters, writing prompts, or visual writing prompts.	

For weak writing output	Notes
<p>Help the learner develop a bank of descriptive and useful words for various types of writing tasks.</p>	
<p>Use visual tools to plan written assignments, for example, graphic organizers, outlines, or story webs. Teach the learner how to use these tools.</p>	
<p>Overtly teach the concept of brainstorming and practice brainstorming activities using the same type of graphic organizer each time, for example, a story web. Start expectation with 2 ideas and increase as the skill is practiced.</p>	
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Provide short, structured tasks.</p>	
<p>Have the learner use the computer for tasks where applicable and appropriate.</p>	
<p>Make use of assistive technologies such as talking word processor or other writing software.</p>	

For weak writing output	Notes
Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.	
Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.	
Provide immediate positive feedback on written work.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Offer detailed feedback and praise on written work: "I like the way this part uses these descriptive words to help me understand."	

For difficulty with reading comprehension	Notes
Give pre-information before reading, such as summary or predictions.	

For difficulty with reading comprehension	Notes
Use visuals to accompany reading selections if available.	
Tie reading selections to the learner's interests or to real-world issues.	
Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Pair the learner with a partner or have them work in a small group to discuss the reading at intervals.	
Use alternative methods for delivering instructions or content: PowerPoint presentations, cue cards.	
Where possible, make use of online readings including graphics, videos, or other visual cues.	

For difficulty with reading comprehension	Notes
Have the learner highlight or underline important details as they read.	
Make use of audio books by having the learner read and listen at the same time.	
Make use of assistive technologies that will read text on a screen aloud to the learner.	
Make use of assistive technologies that can scan a document and reproduce it on a screen.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Provide immediate positive feedback on comprehension-related activities.	

For repetitive behaviours leading to faulty or partial understanding	Notes
Check the learner's understanding of the whole rather than exclusively the parts. For example, check understanding of what long division is needed for, not simply how to perform each step.	
Watch for over-learning: in this case it can become an outlet for repetitive behaviour. Once a concept is learned, ensure the learner moves on to the next step.	
Teach skills carefully the first time and check for understanding. It can be difficult for the learner to un-learn a faulty habit once started.	
Use concrete examples in course material and assessments.	
Find ways to demonstrate how course content relates to real-world applications.	
When answering multiple choice questions, the learner may choose the last answer in the list because that one feels familiar. Limit choices to two and gradually increase with practice.	

For repetitive behaviours leading to faulty or partial understanding	Notes
Check in frequently to monitor progress and give encouragement.	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	
Use background music if it helps with focus.	
Place desks/seats far enough apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	

For sensitivity to environmental factors	Notes
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	
Maintain natural interactions that show your interest in the learner is genuine.	

For sensitivity to environmental factors	Notes
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side effects of medication	Notes
Speak to the learner and find out what is going on: "Are you feeling OK?"	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ensure the learner has water available to drink.	
Ensure the learner has unlimited access to the washroom.	

For side effects of medication	Notes
<p>Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.</p>	
<p>In case of blurred vision:</p> <ul style="list-style-type: none"> • use big print • use coloured paper (yellow recommended) • provide magnifying glass or suggest discount reading glasses • provide the learner with audio materials that replace or correspond to written materials 	
<p>In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	
<p>Help the learner develop self check-in strategies such as: “Am I on task? What should I be doing right now?”</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	

For side effects of medication	Notes
Allow the learner to occasionally take assignments home when side effects become too distracting.	
Reduce homework or extend deadlines as needed.	
Consider a shortened day or modified class schedule as necessary.	

Chapter 11 References

General Information:

American Psychiatric Association

Autism Spectrum Disorder (2013)

<http://www.dsm5.org/Documents/Autism%20Spectrum%20Disorder%20Fact%20Sheet.pdf>

Autism Canada (2016)

<http://autismcanada.org/>

Autism Canada

Autism through the lifespan (2016)

<http://autismcanada.org/living-with-autism/autism-through-the-lifespan/>

Autism Ontario

<http://www.autismontario.com/client/aso/ao.nsf/Durham/Teens+&+Adults?OpenDocument>

Autism Speaks Canada

What is Autism? (2016)

<http://www.autismspeaks.ca/about-autism/what-is-autism/>

How is Autism Treated? (2016)

<http://www.autismspeaks.ca/about-autism/treatment/>

Autism Speaks

Autism Speaks Family Services school community toolkit (2012).

http://studentsfirstproject.org/wp-content/uploads/school_community_tool_kit.pdf

Autism Spectrum Australia

Positive Behaviour Support (2016)

<https://www.autismspectrum.org.au/pbs>

Encyclopedia of Mental Disorders

Childhood Disintegrative Disorders (2016)

<http://www.minddisorders.com/Br-Del/Childhood-disintegrative-disorder.html>

Epilepsy Society

List of anti-epileptic drugs (2016)

<https://www.epilepsysociety.org.uk/list-anti-epileptic-drugs#.WBt1YOgrLIV>

Research Autism

6 steps to success for Asperger syndrome (2010)

<http://www.researchautism.org/educators/aspergersteps/index.asp>

Students First Project

A parent's guide to Autism (2011)

http://studentsfirstproject.org/wp-content/uploads/a_parents_guide_to_autism.pdf

Students First Project

Autism Spectrum Disorder (2016).

<http://studentsfirstproject.org/disorders-strategies/asperger-syndrome/>

Quotations and information cited in-text:

American Psychiatric Association

Autism Spectrum Disorder (2013)

<http://www.dsm5.org/Documents/Autism%20Spectrum%20Disorder%20Fact%20Sheet.pdf>

Autism Speaks

Autism Speaks Family Services school community toolkit (2012)

http://studentsfirstproject.org/wp-content/uploads/school_community_tool_kit.pdf

Autism Speaks Canada

What is Autism? (2016)

<http://www.autismspeaks.ca/about-autism/what-is-autism/>

Autism Canada

Autism through the lifespan (2016)

<http://autismcanada.org/living-with-autism/autism-through-the-lifespan/>

Organization for Autism Research

6 steps to success for Asperger syndrome (2010)

<http://www.researchautism.org/educators/aspergersteps/index.asp>

Learning Strategies adapted from the following sources:

Autism Speaks

Autism Speaks Family Services school community toolkit (2012)

http://studentsfirstproject.org/wp-content/uploads/school_community_tool_kit.pdf

Autism Speaks

Transition Toolkit, (2016)

<https://www.autismspeaks.org/family-services/tool-kits/transition-tool-kit>

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners. New Directions for student services*, Wiley Periodicals, Inc. (no. 102).

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

LiveBinders by Mindprint Learning

Instructional strategies to support attention (2016)

<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014).

Pre-referral intervention manual: The most common learning and behaviour

problems encountered in the educational environment, 4th ed. Columbia, MO:
Hawthorne Educational Services Inc.

Research Autism

6 steps to success for Asperger syndrome (2010)

<http://www.researchautism.org/educators/aspergersteps/index.asp>

Students First Project

Autism Spectrum Disorder (2016)

<http://studentsfirstproject.org/disorders-strategies/asperger-syndrome/>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)

<http://www.studygs.net/adhd/index.htm>

Chapter 12: Developmental Disorders

Developmental Disorders (sometimes referred to as Developmental Disabilities) are disorders that begin because of impairment or injury to development of the brain and body either in utero, at birth, or in childhood. This term represents a range of disorders that may limit functioning in two major areas:

1. intellectual functioning:

- learning
- reasoning
- problem-solving

2. adaptive behaviour:

- conceptual skills: understanding money, time
- social skills: language and interpersonal skills, obeying laws, avoiding victimization
- practical (life) skills: using transportation, using the telephone, maintaining health care, following schedules

Limits on daily functioning can range from mild to severe.

These disorders are present from birth or appear before the age of 18, and are lifelong. They are understood to be caused by genetic factors and in some cases in part by an environmental factor or illness either before birth or early in life which alters the course of usual development in the body and/or brain.

People with developmental disabilities often require more help to learn, understand, or use information than others.

Developmental Services Ontario (2016)

According to the **Centers for Disease Control and Prevention (2016), as many as 1 in 6 children may be affected by some form of developmental disorder worldwide.**

Those living with developmental disorders are at greater risk for other health and mental health problems. Interventions and treatments, especially if begun early, can significantly improve health, functioning, and quality of life.

Types of Developmental Disorders

There are many types of developmental disorders including the following

disorders which do not necessarily share the same symptoms, but which can affect learning:

- Intellectual Disability
- Down Syndrome
- Cerebral Palsy
- fragile X syndrome
- ADHD (falls under more than one classification: for more information please see Chapter 10)
- Autism Spectrum Disorder (ASD) (falls under more than one classification: for more information please see Chapter 11)
- Fetal Alcohol Spectrum Disorder (FASD)

Intellectual Disability:

- a range of cognitive impairments caused by a number of factors
- affects intellectual functioning and adaptive behaviour

Intellectual disability (formerly known as mental retardation or MR) is the currently preferred term to describe symptoms ranging from mild intellectual disability (MID) to severe cognitive impairment.

Down Syndrome:

- a genetic condition marked by the presence of an extra chromosome which causes cellular changes
- results in facial abnormalities
- can cause intellectual disability, health problems, developmental delays, learning disabilities

Cerebral Palsy:

- muscle control and nervous system function affected by injury to the brain during development
- can affect intellectual ability, learning, and communication (for example, slurred speech because of lack of muscle/nerve control)

ADHD:

- a behavioural, neurobiological, and mental health disorder resulting from heredity and other unconfirmed developmental causes

- results in deficits in attention, hyperactivity, and/or impulsivity

Autism Spectrum Disorder:

- neurobiological disorders and mental health disorder thought to be the result of unconfirmed developmental causes
- affects communication, social interaction, and behaviour

fragile X syndrome:

- genetic condition caused by a mutation in a gene that affects synapses
- can result in facial abnormalities
- results in developmental delays, intellectual disability, learning disabilities

Fetal Alcohol Spectrum Disorders (FASD):

- a range of developmental disorders caused by exposure to alcohol in utero
- can result in facial abnormalities
- affects language and communication, learning, and adaptive behaviours

Fetal Alcohol Spectrum Disorder represents a range of disorders which result in mild to severe impairments in daily functioning. Individuals living with FASD often have high expressive language skills which hide impairments. Key symptoms of FASD include:

- uneven maturity levels across activities
- difficulty understanding consequences
- low life skills/planning skills – although they may appear competent they may need to live with parents or others in order to use money, follow schedules, etc
- low language processing skills
- low reading comprehension skills
- health problems

Those living with FASD may also experience:

- mental health disorders
- trouble with the law
- victimization

According to the Public Health Agency of Canada (2014), 1% of Canadians

live with FASD.

Causes of Developmental Disorders

Some developmental disorders such as Down Syndrome and fragile X syndrome are the result of evident genetic causes. FASD is known to be the result of maternal alcohol use during pregnancy which interferes with development. Other developmental disorders arise from a number of possible environmental factors in utero, at birth, or in early childhood; for example, maternal illness or exposure to a toxin during pregnancy, oxygen deprivation at birth, or early serious illnesses, can cause changes in development. Some disorders are thought to have an environmental component combined with a genetic predisposition. Research on developmental disorders continues to attempt to clarify causes.

Diagnosis of Developmental Disorders

Adults living with developmental disorders may have received a diagnosis in childhood, but in years past less was known and understood about these disorders, so the opportunity for a diagnosis and treatment may not have been available.

Adults sometimes are not aware of their disorder. They may have simply been labeled “slow” or have been assumed to be defiant. Adults may become aware of a problem when adult relationships and responsibilities prove difficult to navigate. Challenges related to managing adult expectations without support can result in anxiety and depression.

Those experiencing symptoms of a developmental disorder can ask their doctor for an assessment. They may be referred to a specialist who may also test for ADHD and other mental health disorders. Being prepared with details of the symptoms, their severity, and when they were first noticed, can improve the speed of diagnosis and treatment.

Those experiencing a mental health crisis (such as overwhelming anger, anxiety, or depression, suicidal thoughts or imminent suicide plans) can call 911 or go

As individuals with FASD enter adulthood, they and their family members and caregivers face additional challenges. Adults are increasingly vulnerable to the secondary disabilities associated with FASD such as trouble with the law, mental health problems, an inability to live independently, and victimization. Adults are more likely to be unemployed and often struggle to manage the money in their possession.

National Organization on Fetal Alcohol Syndrome (2016)

to the emergency room and state that they are experiencing a mental health emergency.

Treatments for Developmental Disorders

Treatments for developmental disorders may include a combination of both treatments for the symptoms of the disorder and the for symptoms of other health and mental health issues that accompany the disorder. The goal of treatment is to alleviate symptoms and build skills to maximize health, well-being, and daily functioning. Treatments can include therapy, life skills training, social skills training, speech therapy, occupational therapy or physical therapy, and medications. Interventions in school can help the individual develop strategies for learning and problem-solving. Early treatment and intervention significantly improve adult outcomes.

Therapy can help the individual set goals, make plans, and develop life skills. Sometimes therapy is used to find methods of coping with the emotions and frustrations of living with a disorder, or to develop self-advocacy skills. Therapy can also help an individual experiencing anxiety or depression as a result of living with a developmental disorder.

Social Skills Training

Developmental disorders can interfere with social development. Individuals often need to actively learn social skills such as communication and understanding social cues. Social skills training might take the form of group activities with others who experience similar challenges.

Speech Therapy

Developmental disorders often include communication and speech difficulties. Speech therapy guides the person through exercises to improve communication skills and enhance speech abilities.

Life Skills Training

Services throughout Ontario offer groups for adults living with developmental disorders to help with making friends, life planning, housing and transportation issues, finances, or other life skills needs.

Occupational Therapy or Physical Therapy

Occupational therapy seeks to help individuals find ways to perform necessary or desired tasks and manage daily responsibilities. For example, an occupational therapist might make recommendations for physical changes to a living space to make activities easier or more comfortable. Physical therapy or specific exercise programs can help an individual improve or maintain motor skills affected by their disorder.

Medications

ADHD can co-occur with other developmental disorders and may be treated with medication to improve attention and reduce hyperactivity or impulsivity. Anxiety and depression may also be treated with medication. Medications do not have the ability to cure a mental health condition or disorder. Medications are prescribed to alleviate symptoms so the person can gain stability in their life.

Medications used to treat ADHD, anxiety, or depression, can have side-effects such as:

- nausea
- headaches
- dizziness
- moodiness
- trouble sleeping
- fatigue
- weight loss
- blurred vision
- dry mouth
- drowsiness
- slurred speech or clumsy movements
- problems with memory

Keeping track of side-effects can help the health care professional to alter the medication as necessary to find an effective type or dose.

Starting a new and powerful medication can be stressful, and if it does not seem to work, or produces worrying side effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medications for any mental health disorder needs careful and regular monitoring by a health care professional.

Concurrent disorders, co-occurring disorders, and other risks

A person living with a developmental disorder may also be living with ADHD or another mental health disorder including an anxiety disorder, or depression.

Because of links to depression, those living with a developmental disorder may have a higher risk of death by suicide. All reports of thoughts or plans of suicide

must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Developmental disorders occur all over the world and in all groups of people. Because the origin of these disorders is often related to maternal health and childhood health, populations with increased health and mental health risks to these groups can be affected. For example, although FASD occurs in every socio-economic group, it may occur in those with a family history of poverty or lack of education, as poverty can lead to mental health disorders including substance abuse, and education can help families understand the health risks associated with alcohol during pregnancy.

What you might notice

Living with a developmental disorder can be frustrating, as these individuals often face discrimination and barriers to pursuing life goals. School may have been difficult, and although they may have received learning supports and interventions, they may have felt singled out for being “different.” Relationships can be hard to navigate and some individuals may be vulnerable to victimization. Supports for adults may be available for some but not all, and some may be unable to live independently.

An adult learner who reports a diagnosis of a developmental disorder has in all likelihood been diagnosed as a child and may have received therapies and interventions in earlier school settings. If so, they may seek your help to implement the strategies they already know work for them. Alternatively, learners may report the symptoms they experience. In many cases, however, they may not report their issues or not be aware of them.

No matter how much information you have, you always have what you observe. The learner experiencing a developmental disorder might:

- show gaps or uneven levels of maturity, or be unable to live independently
- struggle with life skills and self care
- have trouble with planning, organizing, schedules, routines
- show difficulties understanding responsibilities, consequences, laws
- have trouble managing emotions, show anger or irritation disproportionate with the situation
- experience difficulties in communication and social skills
- exhibit large gaps between strengths and weaknesses in learning skills, for example, abilities in certain areas, such as expressive or artistic skills, that do not seem to match limits in other areas

- exhibit facial abnormalities or differences in physical development and motor skills

The symptoms of developmental disorders can range from mild to severe, but are likely to be present across situations.

Supporting learners living with Developmental Disorders

Strengths

People living with developmental disorders are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a learner with highly expressive verbal skills might benefit from having the opportunity to create a video or recording as part of an assignment.

Try not to interrupt or cut off someone who speaks more slowly than you. Just because someone ... may take longer to get an idea out does not mean that their ideas are less important than yours.

Ontario Federation for Cerebral Palsy (2014)

People living with developmental disorders are developing strength and resiliency. A person living with a developmental disorder may learn to challenge the status quo and to develop unique ways of expressing themselves. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges. All learners in the class can learn and grow understanding by working with others who experience life challenges. The diversity in an adult education class can help learners prepare for or understand diversity in the workplace.

Your strength in supporting learners living with mental health issues will come in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Challenges

Developmental disorders can include Attention Deficit Hyperactivity Disorder (ADHD) and Autism Spectrum Disorder (ASD). Please consult the chapters on ADHD and ASD for more learning challenges and strategies. As well, these learners may face the following challenges in the classroom:

Developmental disorders learning challenges:

- communications and social skills challenges
- constraints on working memory
- difficulty with problem solving or generating ideas if requiring flexible thinking
- difficulty with organization
- difficulty with reading comprehension
- irritability, frustration, or anger
- lack of understanding of basic concepts or “unwritten rules”
- reduced ability in abstract thought processes
- slower processing speed for information intake and output
- trouble processing verbal instructions
- trouble with attention or concentration
- weak writing output
- sensitivity to environmental factors
- side-effects from medication

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:

- ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
- ✓ offer information about mental health services available
- ✓ don't diagnose
- ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with Developmental Disorders

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner’s goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with developmental disorders who can find ways to achieve in class often find that attending school helps them learn strategies for more effective and productive participation in all aspects of life, including employment.**

As an adult education facilitator you are never expected to diagnose a disorder. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a disorder or not, if they exhibit learning challenges, the related strategies may help.

For communication and social skills challenges	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Provide the learner with a quiet space to work if possible, while helping them recognize that some interaction will be required.	
Do not force the learner to work with others with whom they may feel uncomfortable.	
Seat the learner near others who will help to maintain a positive tone.	

For communication and social skills challenges	Notes
Provide the learner with choices for learning activities and tasks.	
Reduce opportunities for competition or comparison of learner work.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Consider offering information to all learners about developing and growing social skills. (Handout # 15)	
As a group, agree on a quick social protocol for minor irritations. For example, agree on the term “excuse me” for any unintentional interruptions.	
Encourage supportive behaviours between learners by publicly recognizing effort and perseverance together.	

For communication and social skills challenges	Notes
Praise helpful and supportive behaviours.	
If the learner repeats what you say rather than answering, prompt them with a sentence starter, making it clear that you are doing so: "Your answer might start like this ..."	
For verbal responses to questions in group lessons, prompt the learner with choices for answers, or direct their attention to the choices.	
Place boundaries on the time you are free to listen to the learner talk about their intense interests. Plan a time to talk and use a timer or other method of measuring this time: "I'm interested in that. Remember we have time to talk at our 2 pm break."	
Show interest when the learner talks about topics other than an intense preoccupation: "It's great to see you have several interests."	
Where appropriate, use cartoons to depict social expectations. For example, a poster with a caption or thought bubble could show a learner waiting to speak to the instructor while he/she helps another learner.	

For communication and social skills challenges	Notes
<p>When social expectations shift with shifting activities, explain the expectations to all learners, including the “unwritten rules:” “We’ll move to the computers now, and as you’ll remember, we’re quiet so as not to disturb others who are working.”</p>	
<p>Seat the learner next to others who will model appropriate social skills.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Identify one facilitator as this learner’s go-to person for check-ins, instructions, and help.</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	

For communication and social skills challenges	Notes
Check in frequently to monitor progress and give encouragement.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
Gain the learner’s attention before giving verbal instructions. Speak slowly.	
Provide written instructions that match verbal instructions.	
Give the learner time to respond to verbal communication.	

For communication and social skills challenges	Notes
<p>Help the learner develop a bank of useful words for various types tasks, using a notebook or cue cards.</p>	
<p>If, when answering multiple choice questions, the learner consistently chooses the last answer in the list, limit choices to two and gradually increase with practice.</p>	
<p>Have the learner track emotions through the day using an emoticon chart. Help the learner look for patterns (for example mood variation at certain times) and alter the schedule if required.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Model interactions making eye contact in usual ways – some eye contact but not continuously – as you speak to the learner and others in the class.</p>	
<p>Check with the learner that they understand what break time activities are appropriate. If necessary help the learner create a routine for break time.</p>	

For communication and social skills challenges	Notes
Notice and build on social strengths; for example, if humour is a strength, group lessons could be introduced with a cartoon.	
For difficulty expressing knowledge verbally, have the learner express information using a chart, spreadsheet, or map.	
Teach the learner that it is OK to say: "I don't know" or "let me think about that for a bit," in response to a question.	

For constraints on working memory	Notes
Validate the learner's experience: "I know this is not one of your easier tasks."	
Ask the learner what strategies they already know work best for them to remember and use information.	
Together with the learner, develop an individual learner profile reflecting learner strengths and weaknesses.	

For constraints on working memory	Notes
<p>Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.</p>	
<p>Let the learner know that it is OK to use strategies to aid working memory, for example, fact sheets, study notes, and colour-coded systems.</p>	
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner’s most alert time of day.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	

For constraints on working memory	Notes
Provide short, structured tasks.	
During instruction, present main points first.	
Give one direction at a time.	
During reading or listening activities have the learner stop often and summarize in writing what they understand or remember.	
Check in frequently to ensure that all learners are following and understanding direct instruction content.	
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For constraints on working memory	Notes
<p>Help the learner develop a system for notes storage, using colour-coding and/or dividers. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Make use of devices to set and send reminder signals for certain tasks. For example, a tablet timer set to signal at intervals can remind the learner to review certain information.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Allow the learner to preview and use lecture notes or fact sheets while listening to group instruction.</p>	
<p>Provide handouts that match lesson content.</p>	

For constraints on working memory	Notes
Teach the learner to create their own fact sheets or study guides to aid with tasks where memory is required.	
Have the learner highlight or underline important titles, instructions, or information in handout materials as they listen.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, charts or graphics, or videos.	

For constraints on working memory	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to complete a task requiring working memory.	
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	
Use storytelling to approach instruction or tasks.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	

For constraints on working memory	Notes
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Have the learner verbally explain their steps before starting a task.	
Try over-learning: continue to review the information regularly after it has been processed.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	

For constraints on working memory	Notes
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Make use of assistive technologies such as voice recognition or talking word processor, organization programs, reading or writing software.</p>	
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	
<p>Have the learner create their own visual and tactile reward system for following their routine, for example, add a band to a rubber band ball, a row of knitting to a scarf, a few knots to a bracelet.</p>	

For constraints on working memory	Notes
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	
<p>Encourage the learner to use visualization to remember information or lists of items when possible.</p>	
<p>Provide the learner with information about working memory – what it is and how it works.</p>	

For constraints on working memory	Notes
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)	
Give opportunity to self-initiate a short break when needed.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	

For constraints on working memory	Notes
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Provide immediate positive feedback on comprehension-related activities.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	

For constraints on working memory	Notes
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Reduce opportunities for competition or comparison of learner abilities.	
Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.	
Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.	
Have the learner self-evaluate which working memory strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide the learner with an extra set of books or copies of work to take home.	

For constraints on working memory	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Reduce homework or extend deadlines as needed.	

For difficulty with problem solving or generating ideas if requiring flexible thinking	Notes
Overtly teach the concept of brainstorming and practice brainstorming activities using the same type of graphic organizer each time, for example, a story web. Start expectation with 2 ideas and increase as the skill is practiced.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Find ways to model using problem-solving strategies, perhaps as a group: "What can we do to make sure everyone has time on the computer?"	

For difficulty with problem solving or generating ideas if requiring flexible thinking	Notes
Work with the learner to generate more than one solution to a problem. Praise efforts to brainstorm and meet protests that only one option is relevant with information on the value of brainstorming.	
Overtly teach methods for approaching tasks; for example, teach how to write a paragraph step by step, including steps that seem “obvious.”	
Teach study skills and test-taking skills. (Handout # 7)	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	

For difficulty with organization	Notes
Provide a class calendar or schedule handout to remind learners of class times.	
Make use of phone calls or messaging to remind learners of class times.	
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	
Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Begin each day with a review of the day's schedule.	

For difficulty with organization	Notes
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	
<p>Provide all learners with information on time management skills. (Handout # 11)</p>	
<p>Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	

For difficulty with organization	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.	
Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.	
Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.	
Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.	
Encourage the learner to schedule time for completing unfinished work.	
Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.	

For difficulty with organization	Notes
Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.	
Post group assignments and homework on the board and give enough time for learners to copy details.	
Provide positive feedback on all efforts and successes in organization.	
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For difficulty with reading comprehension	Notes
Give pre-information before reading, such as summary or predictions.	
Use visuals to accompany reading selections if available.	
Tie reading selections to the learner's interests or to real-world issues.	
<p>Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
Pair the learner with a partner or have them work in a small group to discuss the reading at intervals.	
Use alternative methods for delivering instructions or content: PowerPoint presentations, cue cards.	

For difficulty with reading comprehension	Notes
Where possible, make use of online readings including graphics, videos, or other visual cues.	
Have the learner highlight or underline important details as they read.	
Make use of audio books by having the learner read and listen at the same time.	
Make use of assistive technologies that will read text on a screen aloud to the learner.	
Make use of assistive technologies that can scan a document and reproduce it on a screen.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	

For difficulty with reading comprehension	Notes
Provide immediate positive feedback on comprehension-related activities.	

For irritability, frustration, or anger	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Create a set of class expectations including minimizing distractions, use of cell phones, supporting others and zero tolerance for obscene language or discrimination. Post the expectations in more than one spot in the room.	

For irritability, frustration, or anger	Notes
Teach the learner appropriate ways to verbalize needing a break due to frustration: "Please leave me alone for a few moments. I need a break."	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For irritability, frustration, or anger	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	

For irritability, frustration, or anger	Notes
Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.	
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	
Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.	
Give instructions and directives in a supportive and respectful manner.	

For irritability, frustration, or anger	Notes
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Develop agreed-upon protocols for difficult days or for behaviour that falls outside class expectations. For example, agree together that if they find themselves swearing even in a whisper, the learner must be responsible for apologizing briefly and excusing themselves from class.</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	

For irritability, frustration, or anger	Notes
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	

For irritability, frustration, or anger	Notes
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Avoid taking the learner’s words or behaviour personally.</p>	
<p>Help the learner understand that it is OK to leave unfinished work for next time.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Develop a classroom routine that everyone can understand and follow.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day’s schedule.</p>	
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	
<p>Where necessary, explain reasoning behind class expectations that may seem obvious: “Quiet is expected when the instructor talks so everyone can hear what they need to know.”</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
<p>Where possible, use graphics to display class expectations; for example, post a picture above each area to depict what activity takes place there.</p>	
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Overtly teach methods for approaching tasks; for example, teach how to write a paragraph step by step, including steps that seem “obvious.”</p>	
<p>Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
<p>Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips.</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Pre-teach key concepts or vocabulary needed for lesson comprehension.</p>	
<p>Give pre-information before reading, such as summary or predictions.</p>	
<p>Give the learner opportunity to demonstrate or teach something in their area of expertise to another learner or a small group.</p>	
<p>Make use of video lessons to teach basic concepts.</p>	
<p>Don't assume knowledge of abstract concepts such as cultural beliefs. Provide information to support concepts the learner needs to understand to complete a task.</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
Pre-teach key concepts or vocabulary needed for lesson comprehension.	
Give pre-information before reading, such as summary or predictions.	
Give the learner opportunity to demonstrate or teach something in their area of expertise to another learner or a small group.	
Make use of video lessons to teach basic concepts.	
Use concrete language and avoid expressions that are not meant to be taken literally.	

For reduced ability in abstract thought processes	Notes
Use concrete examples in course material and assessments.	

For reduced ability in abstract thought processes	Notes
Reduce the need to compare and contrast two examples or texts.	
Present one concept at a time. Check for understanding before presenting the next concept.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For slower processing speed for information intake and output	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Seat the learner in a brightly lit area close to the center of instruction.	

For slower processing speed for information intake and output	Notes
Seat the learner away from visual distractions such as a window.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	

For slower processing speed for information intake and output	Notes
<p>Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.</p>	
<p>Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.</p>	
<p>Provide the learner with an extra set of books or copies of work to take home.</p>	
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Schedule assessments and more challenging assignments for the learner's most alert time of day.</p>	

For slower processing speed for information intake and output	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Pre-teach relevant vocabulary and content, and, before a lesson, provide the learner with pre-view materials to review.	
Have the learner take jot notes as they listen or read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Gain the learner's attention before giving verbal instructions. Speak slowly.	
Provide written instructions that match verbal instructions.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	

For slower processing speed for information intake and output	Notes
Provide immediate positive feedback on comprehension-related activities.	
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Use verbal questions about content to re-focus the learner on their task: "Remind me of the conflict in that story?"	
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Give the learner time to respond to verbal communication.	

For slower processing speed for information intake and output	Notes
Allow more time for the learner to complete assignments and assessments.	
Reduce homework or extend deadlines as needed.	
Make use of assistive technologies such as voice recognition or talking word processor, organization programs, reading or writing software.	

For trouble processing verbal instruction	Notes
Validate the learner's experience: "I know this is not one of your easier methods for learning."	
Seat the learner in a brightly lit area close to the center of instruction.	
Ask the learner what strategies they already know work best for them to listen and process.	

For trouble processing verbal instruction	Notes
Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.	
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	
Encourage focusing exercises before listening, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
Break work into definable, manageable chunks to avoid overload and confusion.	

For trouble processing verbal instruction	Notes
During instruction, present main points first.	
Give one direction at a time.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes.</p> <p>Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
Use concrete examples, or examples meaningful to the learner.	
Seat the learner away from visual distractions such as a window.	

For trouble processing verbal instruction	Notes
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.</p>	
<p>Employ frequent breaks. Schedule breaks during direct instruction, and remind the learners of the upcoming break. Ask learners to try to wait until the break for any needs that require them to leave their seat.</p>	
<p>Place desks/seats further apart to allow for interpersonal space.</p>	
<p>Put tennis balls on chair feet to reduce noise distractions.</p>	
<p>Use auditory signals to gain group attention or indicate transition times such as wind chimes or rain stick.</p>	

For trouble processing verbal instruction	Notes
Use alternative methods for delivering instructions: PowerPoint presentations, cue cards.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	
Develop a discreet way for the learner to signal that they need you to repeat an instruction during group lessons.	
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	

For trouble processing verbal instruction	Notes
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Try over-learning: continue to review information or instructions even after learners seem to understand.	
Structure lessons to include short bursts of listening interspersed with answering written questions, group discussion, or small group activities.	
Call on the learner for yes/no or true/false questions you think they will be prepared to answer.	
Provide immediate positive feedback on answers to verbal questions.	

For trouble processing verbal instruction	Notes
Introduce a timer for the learner to see how much listening time remains, with a planned break following.	
Teach the learner key words to recognize in lectures or group lessons.	
Allow the learner to preview and use lecture notes or fact sheets while listening to group instruction.	
Provide handouts that match lesson content.	
Have the learner highlight or underline important titles, instructions, or information in handout materials as they listen.	
Ask the learner about their interests or have the learner fill out an interest survey. Use information about learner interests when preparing lectures.	

For trouble processing verbal instruction	Notes
<p>Check in frequently to ensure that all learners are following and understanding direct instruction content.</p>	
<p>Incorporate multiple senses in instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Give the learner time to respond to verbal communication.</p>	
<p>Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.</p>	
<p>Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.</p>	

For trouble processing verbal instruction	Notes
Reduce opportunities for competition or comparison of learner abilities.	
Allow extra time for responding to questions verbally.	

For trouble with attention or concentration	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)	

For trouble with attention or concentration	Notes
Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.	
Seat the learner in a brightly lit area close to the center of instruction.	
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	
Allow the use of background music if it helps improve the ability to focus.	
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	

For trouble with attention or concentration	Notes
Keep tasks short and structured.	
Make a class contract regarding cell phone use. Have the learner put the cell phone away to reduce distraction.	
Make noise-cancelling headphones or ear plugs available.	
Create a class schedule for work time and break time.	
Provide a study carrel or screen for reducing distractions during individual work time.	
Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Encourage the learner to self-monitor their routine.	

For trouble with attention or concentration	Notes
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>During instruction, present main points first.</p>	
<p>Give one direction at a time.</p>	
<p>Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.</p>	

For trouble with attention or concentration	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Have the learner use the computer for tasks where applicable and appropriate.	
Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	

For trouble with attention or concentration	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Seat the learner away from visual distractions such as a window.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block.	
Give opportunity to self-initiate a short break when needed.	

For trouble with attention or concentration	Notes
Place desks/seats further apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	

For trouble with attention or concentration	Notes
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Develop a discreet way for the learner to find out missed instructions, such as a self-serve handout bank.</p>	
<p>Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.</p>	
<p>Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.</p>	
<p>Provide written instructions that match verbal instructions.</p>	

For trouble with attention or concentration	Notes
Try over-learning: continue to review information or instructions regularly.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	
Provide immediate positive feedback on comprehension-related activities.	
Introduce a timer for the learner to set a specific length of time to focus on work, with a planned break following.	
Using a timer, help the learner estimate time needed for a task, record actual time needed, and check against estimate. Help the learner adjust time-management plans as needed.	

For trouble with attention or concentration	Notes
Encourage quality of work over quantity.	
Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.	
Make use of an online time-tracking system to help with managing tasks.	
Teach the learner key words and features to recognize in tasks and assessments.	
Allow the learner to use study notes or fact sheets to check during tasks, assignments, or assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	

For trouble with attention or concentration	Notes
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For trouble with attention or concentration	Notes
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.</p>	
<p>Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Encourage the learner to discover and draw on their own gifts and talents.</p>	
<p>Encourage the learner to maintain a short daily study routine on weekends or holiday breaks. Provide worksheets or textbooks for home as needed.</p>	

For trouble with attention or concentration	Notes
Allow extra time for assignment completion and test taking.	
Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.	
Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.	
Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Consider a shortened day or modified class schedule as necessary.	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For trouble with attention or concentration	Notes
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	

For weak writing output	Notes
Provide sentence starters, writing prompts, or visual writing prompts.	
Help the learner develop a bank of descriptive and useful words for various types of writing tasks.	
Use visual tools to plan written assignments, for example, graphic organizers, outlines, or story webs. Teach the learner how to use these tools.	
Overtly teach the concept of brainstorming and practice brainstorming activities using the same type of graphic organizer each time, for example, a story web. Start expectation with 2 ideas and increase as the skill is practiced.	

For weak writing output	Notes
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Provide short, structured tasks.</p>	
<p>Have the learner use the computer for tasks where applicable and appropriate.</p>	
<p>Make use of assistive technologies such as talking word processor or other writing software.</p>	
<p>Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.</p>	
<p>Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.</p>	
<p>Provide immediate positive feedback on written work.</p>	

For weak writing output	Notes
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Offer detailed feedback and praise on written work: "I like the way this part uses these descriptive words to help me understand."	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	
Use background music if it helps with focus.	
Place desks/seats far enough apart to allow for interpersonal space.	

For sensitivity to environmental factors	Notes
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	

For sensitivity to environmental factors	Notes
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side effects of medication	Notes
Speak to the learner and find out what is going on: "Are you feeling OK?"	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ensure the learner has water available to drink.	

For side effects of medication	Notes
Ensure the learner has unlimited access to the washroom.	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
<p>In case of blurred vision:</p> <ul style="list-style-type: none"> • use big print • use coloured paper (yellow recommended) • provide magnifying glass or suggest discount reading glasses • provide the learner with audio materials that replace or correspond to written materials 	
In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Give opportunity to self-initiate a short break when needed.	
Help the learner develop self check-in strategies such as: “Am I on task? What should I be doing right now?”	

For side effects of medication	Notes
Check in frequently to monitor progress and give encouragement.	
Allow the learner to occasionally take assignments home when side effects become too distracting.	
Reduce homework or extend deadlines as needed.	
Consider a shortened day or modified class schedule as necessary.	

Chapter 12 References

General Information:

American Academy of Pediatrics

Fetal Alcohol Spectrum Disorders (2016)

<https://www.healthychildren.org/English/health-issues/conditions/chronic/Pages/Fetal-Alcohol-Spectrum-Disorders.aspx>

American Association on Intellectual and Developmental Disabilities

Definition of Intellectual Disability (2013)

<http://aaidd.org/intellectual-disability/definition#.WCDZFWsrLIU>

American Psychiatric Association

Highlights of Changes from DSM-IV-TR to DSM-5 (2013)

<http://www.dsm5.org/documents/changes%20from%20dsm-iv-tr%20to%20dsm-5.pdf>

Centers for Disease Control and Prevention

Developmental Disabilities (2016)

<https://www.cdc.gov/ncbddd/developmentaldisabilities/facts.html>

Canadian Association for Community Living

Definitions and Terminology (2016)

<http://www.cacl.ca/about-us/definitions-terminology>

Canadian Association of Occupational Therapists

What is Occupational Therapy? (2003 - 2016)

<http://www.caot.ca/default.asp?pageid=3024>

Developmental Services Ontario

What is a Developmental Disability? (2016)

<https://www.dsontario.ca/whats-a-developmental-disability>

Down Syndrome Research Foundation

What is Down Syndrome? (2016)

<http://www.dsrf.org/information/what-is-down-syndrome/>

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners. New Directions for student services*, Wiley Periodicals, Inc. (no. 102).

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Healthy Place

Mild, Moderate, Severe Intellectual Differences (2000 - 2015)

<http://www.healthyplace.com/neurodevelopmental-disorders/intellectual-disability/mild-moderate-severe-intellectual-disability-differences/>

National Human Genome Research Institute

Specific Genetic Disorders (2016)

<https://www.genome.gov/10001204/specific-genetic-disorders/>

National Organization on Fetal Alcohol Syndrome

Adults living with FASD (2016)

<http://www.nofas.org/adults-living-with-fasd/>

Ontario Federation for Cerebral Palsy

What is Cerebral Palsy? (2015)

<http://ofcp.ca/wp-content/uploads/2016/05/what-is-CP-2015.pdf>

About Cerebral Palsy (2014)

<https://www.ofcp.ca/about-cerebral-palsy>

Public Health Agency of Canada

Fetal Alcohol Spectrum Disorder (2014)

<http://www.phac-aspc.gc.ca/hp-ps/dca-dea/prog-ini/fasd-etcaf/index-eng.php>

US Department of Health and Human Services

What are treatments for IDD? (2016)

<https://www.nichd.nih.gov/health/topics/idds/conditioninfo/Pages/cure.aspx>

US National Library of Medicine

fragile X syndrome (2016)

<https://ghr.nlm.nih.gov/condition/fragile-x-syndrome#diagnosis>

Quotations and information cited in-text:

Developmental Services Ontario

What is a Developmental Disability? (2016)

<https://www.dsontario.ca/whats-a-developmental-disability>

Centers for Disease Control and Prevention

Developmental Disabilities (2016)

<https://www.cdc.gov/ncbddd/developmentaldisabilities/facts.html>

Public Health Agency of Canada

Fetal Alcohol Spectrum Disorder (2014)

<http://www.phac-aspc.gc.ca/hp-ps/dca-dea/prog-ini/fasd-etcaf/index-eng.php>

National Organization on Fetal Alcohol Syndrome

Adults living with FASD (2016)

<http://www.nofas.org/adults-living-with-fasd/>

Ontario Federation for Cerebral Palsy

About Cerebral Palsy (2014)

<https://www.ofcp.ca/about-cerebral-palsy>

Learning Strategies adapted from the following sources:

Autism Speaks

Autism Speaks Family Services school community toolkit (2012)

http://studentsfirstproject.org/wp-content/uploads/school_community_tool_kit.pdf

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)

<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

LiveBinders by Mindprint Learning

Instructional strategies to support attention (2016).

<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014).

Pre-referral intervention manual: The most common learning and behaviour problems encountered in the educational environment, 4th ed. Columbia, MO:

Hawthorne Educational Services Inc.

National Organization on Fetal Alcohol Syndrome

Adults living with FASD (2016)

<http://www.nofas.org/adults-living-with-fasd/>

Students First Project

Autism Spectrum Disorder (2016)

<http://studentsfirstproject.org/disorders-strategies/asperger-syndrome/>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)

<http://www.studygs.net/adhd/index.htm>

Chapter 13: Behavioural Disorders

Behavioural Disorders, or Disruptive Behaviour Disorders, often appear in individuals living with Attention Deficit/Hyperactivity Disorders (ADHD). Like ADHD, these disorders begin in childhood and can continue into adulthood, but they are distinct disorders. A person living with a behavioural disorder exhibits hostile, defiant behaviour, particularly toward figures of authority (parents, teachers) that lasts longer than two weeks and continues for a period of months or years. The behaviours resulting from these disorders significantly impair a person's ability to participate fully in school or to maintain relationships or employment. In teens and adults, these disorders increase the likelihood of criminal behaviour. A strong need for control, or fear of loss of control, in every situation is understood to be the underlying trigger for the behaviours associated with these disorders.

Behavioural disorders can be confused with oppositional behaviour that originates from other causes. The differentiating indicators of a disorder are persistent, long-lasting symptoms across activities or situations, and the repeated patterns of social difficulties which interfere with daily activities, school, and work. Behavioural disorders can severely impact normal functioning over an extended period of time.

Types of Behavioural Disorders

Although more types are being recognized, two types of behavioural disorders are commonly found to co-occur with other mental health disorders: Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD).

Oppositional Defiant Disorder (ODD)

According to **The Children and Adults with Attention Deficit/Hyperactivity Disorders (CHADD) organization (2016), one third to one half of children diagnosed with ADHD will also exhibit or develop ODD.** This means that adults living with ADHD are at significantly increased risk of ODD. However, the symptoms of the adult counterpart of this disorder are not as clearly defined as the symptoms of ADHD.

The symptoms of ODD in adults may include:

- argues, is uncooperative or defiant
- resists following instructions from authority figures
- questions rules
- expresses negativity or pessimism repeatedly
- deliberately annoys others

- blames others for their problems or mistakes
- tries to control others
- shows a pattern of relationship difficulties

In adults, ODD often co-occurs with other mental health disorders.

ODD can develop into another behavioural disorder, Conduct Disorder.

Conduct Disorder (CD)

Conduct Disorder shares symptoms with ODD, but symptoms are more severe and can have greater consequences. In addition to the above, the symptoms of adults living with CD can include:

- threatening behaviour
- violence toward others, people or animals
- criminal behaviour: break and enter, shoplifting, stealing

Causes of Behavioural Disorders

The causes of behavioural disorders are not understood. Biological factors, psychological factors, and environmental factors are being studied as possible causes.

Diagnosis of Behavioural Disorders

Adults living with behavioural disorders may have received a diagnosis in childhood, but in years past less was known and understood about these disorders, so the opportunity for a diagnosis and treatment may not have been available.

Adults sometimes are not aware of their disorder. Their behaviour challenges may have been disregarded as “boys will be boys.” Adults may become aware of a problem when adult relationships and responsibilities prove difficult to navigate.

Disruptive behaviours must cause significant impairment in social or academic functioning or in the ability to gain and maintain employment in order to be diagnosed as a behavioural disorder. If disruptive behaviours only occur during an episode of another mental health disorder, behavioural disorders may be ruled out.

Those experiencing symptoms of a behavioural disorder can ask their doctor for an assessment. They may be referred to a specialist who may also test for ADHD and other mental health disorders. Attaining an accurate diagnosis can take time. Being prepared with details of the symptoms, their severity, and when they were first noticed, can improve the speed of diagnosis, treatment, and recovery.

Those experiencing a mental health crisis (such as overwhelming anger, compulsions to dangerous, violent, or criminal acts, debilitating anxiety or depression, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

Treatments for Behavioural Disorders

Treatments for behavioural disorders may include a combination of therapy, social skills training, and medications. When treatment is pursued in childhood with parents actively participating in treatment strategies, most behavioural disorders resolve before adulthood.

Psychotherapy or Collaborative Problem-Solving Therapy (CPS), are two of the possible therapies used to treat Behavioural Disorders. These therapies help the individual deal with feelings of frustration and negativity, develop problem-solving skills and flexible thinking, and find effective ways to manage their behaviour including anger management strategies. Family members may benefit from learning more about behavioural disorders and from coaching in strategies to reward flexible, cooperative behaviour and to ignore or disengage from argumentative behaviour.

Social Skills Training

Behavioural disorders interfere with social development. Individuals experiencing behavioural disorders often need to actively learn social skills such as communication, empathy, and understanding social cues.

Medications

Providing appropriate instructional supports in the classroom can ... lessen disruptive behavior. These include: creating an accepting and supportive classroom climate, promoting social and emotional skills, establishing clear rules and procedures, monitoring child behavior, utilizing rewards effectively, responding to mild problem behaviors consistently and effectively managing anger or aggressive behavior.

CHADD: Children and Adults with Attention-Deficit/Hyperactivity Disorder (2016)

As in children, these adults often have co-existing mental health conditions, including , antisocial or borderline [personality disorder](#), [anorexia](#) and [depression](#). More research is required to fully understand ODD in adults.

My Virtual Medical Centre (2016)

Behavioural disorders frequently co-occur with ADHD, and medications for ADHD can help to improve behavioural disorder symptoms, although research is still needed in this area. These medications have been developed for children but may be prescribed for adults. The choice of medication prescribed depends on the symptoms and on the person's other health and mental health issues. For example, those experiencing ADHD often also live with an anxiety disorder or another mental health disorder. Often the disorder treated first is the one that impairs function the most. Sometimes the decision is made to treat both conditions simultaneously.

Medications do not have the ability to cure a mental health condition or disorder. Medications are prescribed to alleviate symptoms so the person can gain stability in their life.

Medications used to treat ADHD and sometimes behavioural disorders, produce side-effects such as:

- nausea
- headaches
- dizziness
- moodiness
- trouble sleeping

Keeping track of side-effects can help the health care professional alter the medication as necessary in order to find an effective type or dose.

Starting a new and powerful medication can be stressful, and if it does not seem to work, or produces worrying side effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medications for any mental health disorder needs careful and regular monitoring by a health care professional.

Co-occurring disorders, concurrent disorders, and other risks

A person living with a behavioural disorder is likely to be living with ADHD or developing other mental health disorders including anxiety disorders, mood disorders, substance-related disorders, or Autism Spectrum Disorder (ASD).

Because of links to depression and bipolar disorder, ADHD and behavioural disorders carry a higher than usual risk of death by suicide. All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Behavioural disorders appear more frequently in individuals with a family history of instability, poverty, violence or abuse, or who have lived with violence in their community, or with bullying or rejection by peers. Boys are more likely to experience behavioural disorders than girls.

What you might notice

Living with a behavioural disorder can be extremely limiting for both the individual and their family or loved ones. Those living with a behavioural disorder become consumed in resisting authority, often missing out on developing and pursuing their own interests and goals as a result. School or work may become a source of disappointment and frustration, and conflicts with teachers or bosses diminish self-confidence and self-esteem. Adults living with behavioural disorders tend to gravitate toward self-employment. Relationships suffer and support can be hard to find outside of a clinical or school setting. Adding to these challenges, cultural attitudes sometimes discount behavioural disorders as “real” conditions. These disorders are often assumed to be simply a rationale for poor behaviour.

An adult learner who reports a diagnosis of a behavioural disorder has in all likelihood been diagnosed as a child or teen and may have received or begun treatment. If so, they may seek your help to implement the strategies they already know work for them. Alternatively, learners may report the symptoms they experience. In many cases, however, they may not report their issues or not be aware of them.

No matter how much information you have, you always have what you observe.

The learner experiencing a behavioural disorder might:

- persistently argue with, or question the reasoning behind, directives or instructions
- express negativity or pessimism in every situation
- blame cascading circumstances for why a task cannot be done: they forgot their book, another’s book will not work, they do not understand the story anyway
- blame others for their actions
- deliberately annoy others
- exhibit anger, irritation, frustration
- miss social cues

- exhibit an uncaring attitude toward others, vindictiveness, or revenge-based thinking

Supporting learners living with Behavioural Disorders

The symptoms of behavioural disorders can range from mild to severe, and can vary over the course of a day or a week. A learner's symptoms may be managed or partially managed with treatments, and the time they take their medication can affect their participation in class.

Strengths

People living with behavioural disorders are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a learner that shows strong verbal reasoning can use this skill to develop opinion-based tasks and arguments in social science assignments.

People living with mental health issues are developing strength and resiliency. A person living with or recovering from a behavioural disorder may learn to use their strong will to reach for their goals. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

That strong, stubborn spirit and tenacity can translate into the strength and drive it takes to survive and change the world.

Empowering Parents (2016)

Your strength in supporting learners living with mental health issues will come in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Keep in mind that symptoms you observe can result from the disorder or from a medication used to treat the disorder.

Challenges

Learners living with behavioural disorders are likely to be living with ADHD. Please consult the chapter on ADHD for more learning challenges and strategies. As well, these learners may face the following challenges in the classroom:

Behavioural disorders learning challenges:

- arguing with or contradicting you and others
- pessimism or negativity about school work
- difficulties with problem-solving, or multiple reasons why “I can’t do it,” or blaming others for their challenges
- irritability, frustration, or anger
- distracting others
- difficulty navigating social interactions
- sensitivity to environmental factors
- side-effects from medication

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders**:

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don’t argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don’t diagnose
 - ✓ avoid promises about the effectiveness of treatment

- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with Behavioural Disorders

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with behavioural disorders who can develop ways to achieve in class often find that attending school helps with recovery. The satisfaction of completing steps towards a goal can increase self-esteem and, when the learner is ready, help to spark a more positive outlook for the future.**

As an adult education facilitator you are never expected to diagnose a mental health issue. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For arguing with or contradicting you or others	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Create a class environment of acceptance and caring.	
Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.	
Express your belief in the learner's competence, even if they contradict you or seem to work against your efforts to help them succeed.	
Avoid being drawn into an argument. Continue to give instructions in a calm, concise manner.	

For arguing with or contradicting you or others	Notes
<p>With the learner, make plans for self-initiated time-outs when they need time to control frustration. Create a plan what the time-out will include (a rest in a quiet area, a walk).</p>	
<p>Create a rules-based plan for learning and for classroom expectations so that when an argument arises, you can defer to the rules, removing your authority from being the target of an argument: "The rule for this task is three written paragraphs."</p>	
<p>Create clear boundaries regarding what behaviour you will accept: "I will wait until you calm down to talk about this, as I always expect to be addressed with respect."</p>	
<p>Stay calm and speak in a calm tone.</p>	
<p>Model ways to deal with frustration: count to 10, deep breaths, short break.</p>	
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	

For arguing with or contradicting you or others	Notes
<p>Intervene early before behaviour escalates: “I know you’ll remember the class expectations, and thank you for getting back to work.”</p>	
<p>Accept that arguing is a coping mechanism for this learner. Make corrections to the behaviour quickly and concisely. Ignore undesirable behaviour where feasible.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Identify one facilitator as this learner’s go-to person for check-ins, instructions, and help.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	

For arguing with or contradicting you or others	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Provide two choices of tasks and have the learner pick one.	
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Praise efforts to cooperate and to take and follow instructions.	

For arguing with or contradicting you or others	Notes
Teach the learner appropriate ways to verbalize needing a break due to frustration: "Please leave me alone for a few moments. I need a break."	
Avoid taking the learner's words or behaviour personally.	

For pessimism or negativity about school work	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Provide evidence of ability: past successes or physical reminders of completed tasks.	
Have the learner keep a record of accomplishments and successes. Help the learner plan to review it when feeling uncertain.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For pessimism or negativity about school work	Notes
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	
Discuss how feeling pessimistic is natural but public display of pessimism needs to be limited for the morale of all, as we all support one another.	
Avoid inadvertently rewarding the pessimistic behaviour (by overly attending to it or by only interacting with the learner at that time).	
Encourage the learner to recognize that everyone has strengths and weaknesses. Model this attitude in your own self-reflection or self-evaluation.	
Explain that mistakes are OK and how to use them as learning opportunities.	

For pessimism or negativity about school work	Notes
Model accepting your own mistakes and using them as learning opportunities.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	

For pessimism or negativity about school work	Notes
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Seat the learner away from others who share or feed into the pessimistic mood.</p>	

For pessimism or negativity about school work	Notes
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators:</p> <p>https://www.studentlingo.com/workshop/reducetestanxiety/</p>	

For difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for challenges	Notes
<p>Encourage the learner to identify the problem using an “I need” statement, rather than complaining or blaming.</p>	
<p>Validate the learner’s needs even if they cannot be met: “I can see why you’d feel the need for a more updated software program.”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	

For difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for challenges

Notes

Work with the learner to generate more than one solution to a problem. Praise efforts to brainstorm and ignore protests that every solution is flawed.	
Encourage flexible thinking by assigning tasks in which shifting point of view must be incorporated.	
Present one concept at a time. Check for understanding before presenting the next concept.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Praise all efforts at finding solutions to problems or managing multiple instructions independently.	
Avoid being drawn into an argument. Continue to give instructions in a calm, concise manner.	

For difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for challenges	Notes
Ignore undesirable behaviour where feasible.	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Check in frequently to monitor progress and give encouragement.	

For irritability, frustration, or anger	Notes
Validate the learner’s experience: “I know this is difficult for you right now.”	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	

For irritability, frustration, or anger	Notes
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Together with learners, create a set of class expectations including minimizing distractions, use of cell phones, supporting others and zero tolerance for obscene language or discrimination. Post the expectations in more than one spot in the room.</p>	
<p>Teach the learner appropriate ways to verbalize needing a break due to frustration: "Please leave me alone for a few moments. I need a break."</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	

For irritability, frustration, or anger	Notes
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	

For irritability, frustration, or anger	Notes
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.	
Ensure that learner tasks are neither too easy nor too hard.	
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	

For irritability, frustration, or anger	Notes
<p>Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.</p>	
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.</p>	
<p>Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>Give instructions and directives in a supportive and respectful manner.</p>	

For irritability, frustration, or anger	Notes
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Develop agreed-upon protocols for difficult days or for behaviour that falls outside class expectations. For example, agree together that if they find themselves swearing even in a whisper, the learner must be responsible for apologizing briefly and excusing themselves from class.</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	

For irritability, frustration, or anger	Notes
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	

For irritability, frustration, or anger	Notes
Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Avoid taking the learner’s words or behaviour personally.	
Help the learner understand that it is OK to leave unfinished work for next time.	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	
Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.	

For distracting others	Notes
<p>Speak with the learner about what is not working and why: "It's a social asset to like to talk, but most learners need quiet times to get certain kinds of work done."</p>	
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Model respecting quiet work periods. Avoid talking and use this time for reading or marking learner work. If working one on one with learners during quiet periods, use low voices or move away from others.</p>	
<p>Do not accept ADHD as an excuse for poor social behaviour. While being mindful that the learner is working to manage their impulses, explain that the class is a place to practice and learn to follow social expectations and you expect their best efforts.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus on their work.</p>	

For distracting others	Notes
Provide the learner with sensory tools for helping with focus, such as a stress ball to squeeze.	
Have the learner ask a question “in their head,” or jot down what they want to say, before asking for help.	
Make noise-cancelling headphones or ear plugs available.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Reduce the need to ask questions by providing clear, concise instructions in both verbal and written form.	
Check in frequently to monitor progress and give encouragement.	
Provide the learner with information on strategies for concentration. (Handout # 5)	

For distracting others	Notes
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Include some highly talkative activities in the class program if feasible.	
Ensure the learner has gathered all materials needed before beginning a task.	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.	
Recognize and praise efforts to be patient: "Thank you for your patience."	

For distracting others	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Give the learner opportunities to help other learners.	
Reduce opportunities for competition or comparison of learner work.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	

For difficulty navigating social interactions	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Do not force the learner to work with others with whom they may feel uncomfortable.	

For difficulty navigating social interactions	Notes
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	
Provide all learners with information on developing social skills.	
Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Create clear boundaries regarding what behaviour you will accept: "I will wait until you calm down to talk about this, as I always expect to be addressed with respect."	

For difficulty navigating social interactions	Notes
As a group, agree on a quick social protocol for minor irritations. For example, agree on the term “excuse me” for any unintentional interruptions.	
Encourage supportive behaviours between learners by publicly recognizing effort and perseverance together.	
Encourage an understanding of empathy by creating opportunities for learners to imagine and express how others (a character, a person in a news story they are reading) might feel.	
Praise helpful and supportive behaviours.	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	

For sensitivity to environmental factors	Notes
Use background music if it helps with focus.	
Place desks/seats far enough apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	

For sensitivity to environmental factors	Notes
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side effects from medication	Notes
Speak to the learner and find out what is going on: "Are you feeling OK?"	

For side effects from medication	Notes
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: “Am I on task? What should I be doing right now?”	
Give opportunity to self-initiate a short break when needed.	
Check in frequently to monitor progress and give encouragement.	
Allow the learner to occasionally take assignments home when side effects become too distracting.	
Reduce homework or extend deadlines as needed.	

For side effects from medication	Notes
Consider a shortened day or modified class schedule as necessary.	

Chapter 13 References

General Information:

American Psychiatric Association

Disruptive, Impulse-control, and Conduct Disorders (2013)

<http://www.dsm5.org/documents/changes%20from%20dsm-iv-tr%20to%20dsm-5.pdf>

American Academy of Child and Adolescent Psychiatry

Oppositional Defiant Disorder (2016)

http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Children-With-Oppositional-Defiant-Disorder-072.aspx

CHADD: Children and Adults with Attention-Deficit/Hyperactivity Disorder

Disruptive Behavior Disorders (2016)

<http://www.chadd.org/Understanding-ADHD/About-ADHD/Coexisting-Conditions/Disruptive-Behavior-Disorders.aspx>

Children's Mental Health Ontario

Behaviour problems in children and adolescents (2016)

<http://www.kidsmentalhealth.ca/parents/behaviour.php>

Empowering Parents

When They Don't Leave at 18: Parenting an Adult Child with ODD (2016)

By Kim Abraham, LMSW and Marney Studaker-Cordner, LMSW

<https://www.empoweringparents.com/article/when-they-dont-leave-at-18-parenting-an-adult-child-with-odd/>

My Virtual Medical Centre

Oppositional Defiant Disorder (ODD) (2002 – 2016)

<http://www.myvmc.com/diseases/oppositional-defiant-disorder-odd/>

Psych Central

Oppositional Defiant Disorder Symptoms, by Steve Bressert, Ph.D. (1995 – 2016)

<http://psychcentral.com/disorders/oppositional-defiant-disorder-symptoms/>

Quotations and information cited in-text:

CHADD: Children and Adults with Attention-Deficit/Hyperactivity Disorder

Disruptive Behavior Disorders (2016)

<http://www.chadd.org/Understanding-ADHD/About-ADHD/Coexisting-Conditions/Disruptive-Behavior-Disorders.aspx>

CHADD: Children and Adults with Attention-Deficit/Hyperactivity Disorder
Disruptive Behavior Disorders (2016)
<http://www.chadd.org/Understanding-ADHD/About-ADHD/Coexisting-Conditions/Disruptive-Behavior-Disorders.aspx>

My Virtual Medical Centre
Oppositional Defiant Disorder (ODD) (2002 – 2016)
<http://www.myvmc.com/diseases/oppositional-defiant-disorder-odd/>

Empowering Parents
When They Don't Leave at 18: Parenting an Adult Child with ODD (2016)
By Kim Abraham, LMSW and Marney Studaker-Cordner, LMSW
<https://www.empoweringparents.com/article/when-they-dont-leave-at-18-parenting-an-adult-child-with-odd/>

Learning Strategies adapted from the following sources:

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners. New Directions for student services*, Wiley Periodicals, Inc. (no. 102).
<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario
Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)
<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

LiveBinders by Mindprint Learning
Instructional strategies to support attention (2016)
<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014).
Pre-referral intervention manual: The most common learning and behaviour problems encountered in the educational environment, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Professional Learning Board
What are the strengths of students with ADHD? (2016)
<http://k12teacherstaffdevelopment.com/tlb/what-are-the-strengths-of-students-with-adhd/>

Students First Project
School and Classroom Strategies: Oppositional Defiant Disorder (2016)
<http://studentsfirstproject.org/wp-content/uploads/School-and-Classroom-ODD-Strategies-2.24.14.pdf>

Study Guides and Strategies: an educational public service
Studying with ADHD (2016)
<http://www.studygs.net/adhd/index.htm>

Chapter 14: Personality Disorders

Personality disorders disrupt thoughts, emotions, and behaviours in ways that impact a person's ability to form a consistent self-image, to create and maintain personal relationships, and to manage interactions needed for every aspect of life including school or employment. These disorders are understood to be caused by a combination of genetic, biological, and environmental factors.

People living with personality disorders exhibit enduring, rigid patterns of thoughts and behaviours. They often cannot establish a stable or positive self-image; rather, their self-image may change dramatically depending on who they are with at the time. Some disorders seem to produce a severe level of intense emotions, or painful feelings that result in erratic behaviours. Those affected often act in impulsive, volatile, and manipulative ways, perhaps in an attempt to get emotional needs met. They may appear hostile in their interactions and fearful or paranoid in the way they approach every situation. They sometimes lack understanding of others' rights or empathy for others, making relationships extremely challenging. Although they may experience deep loneliness and fear of abandonment or separation, their behaviours may lead to the separation they fear. A person living with a personality disorder is often extremely self-critical and may use self-harming behaviours to alleviate emotional pain.

Personality disorders involve patterns of behaviour, mood, social interaction, and impulsiveness that cause distress to one experiencing them, as well as to other people in their lives.

Canadian Mental Health Association British Columbia (2004)

Everyone may experience some aspect of these symptoms at one time or another, but an individual with a personality disorder experiences symptoms at a severe and persistent level that interferes with daily functioning. Personality disorders can be extremely upsetting and disruptive to the person themselves and to their loved ones.

These disorders can appear in childhood or adolescence, and can continue into later life. Some symptoms may improve with age. In other cases, a disorder might appear in adulthood. They are often mistaken for other mental health disorders, or can co-occur with other mental health disorders. Symptoms can vary in severity but are usually consistently evident across situations or activities. Those experiencing personality disorders are often unaware of their disorder and so do not seek treatment.

Types of Personality Disorders

The Canadian Mental Health Association British Columbia Division

categorizes personality disorders based on three groupings of symptoms:

1. Fearful behaviour:
 - **Avoidant Personality Disorder:** appears extremely shy, feels inadequate, is very sensitive to criticism
 - **Dependent Personality Disorder:** needs to be taken care of, clings to others, has difficulty making decisions on their own
 - **Obsessive-Compulsive Personality Disorder:** needs order and control over surroundings
2. Social and interpersonal issues and social avoidance:
 - **Paranoid Personality Disorder:** mistrusts others, suspects others' motives
 - **Schizoid Personality Disorder:** cannot relate to others, exhibits narrow emotional range
 - **Schizotypal Personality Disorder:** feels uncomfortable in close relationships, experiences distorted thoughts or perceptions
3. Emotional, dramatic, or impulsive behaviour:
 - **Antisocial Personality Disorder:** ignores and violates the rights of others
 - **Histrionic Personality Disorder:** reacts with intense emotion in social situations
 - **Narcissistic Personality Disorder:** carries an inflated idea of their own importance, needs admiration, lacks empathy
 - **Borderline Personality Disorder:** exhibits intense mood changes, anxiety or panic, impulsivity, and rapidly shifting self-image

As well, another personality disorder is recognized by the American Psychiatric Association's DSM (2013):

- **Dissociative Identity Disorder** (sometimes called Multiple Personality Disorder): exhibits more than one distinct set of thought and behaviour patterns, shows severe gaps in memory of personal history or information

Causes of Personality Disorders

Personality disorders are understood to be caused by a combination of biology, genetics, and environment, but much more research is needed to clarify causes. Some evidence suggests that a part of the brain that controls emotional functioning may be impaired. Some genetic link may be possible as there is a higher likelihood of developing a personality disorder if a close family member is

affected. Environmental factors such as early abuse, separation, or abandonment may also play a part; however, these causes by themselves do not necessarily lead to developing a personality disorder.

Diagnosis of Personality Disorders

Personality disorders are usually not diagnosed until adulthood, when adult relationships and responsibilities prove difficult to navigate. Adults often are not aware of their disorder. People may have assumed they were being “difficult,” angry, and disrespectful. As well, those experiencing personality disorders often have a concurrent substance-related disorder or co-occurring mental health disorder, making symptoms difficult to isolate and identify. Sometimes a diagnosis is not made until an individual comes to the attention of law enforcement agencies.

Those experiencing symptoms of a personality disorder can ask their doctor for an assessment. They may be referred to a specialist who will provide tests and therapy to determine if a personality disorder or other mental health disorders are present. Being prepared with details of the symptoms, their severity, and when they were first noticed, can improve the speed of diagnosis and treatment.

Those experiencing a mental health crisis (such as overwhelming anger, anxiety, or depression, delusions or hallucinations, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

Treatments for Personality Disorders

Better recognition of these disorders has made treatments more available in recent years. Treatment can bring improvement, but long-term treatment is required to shift the inflexible thought and behaviour patterns typical of these disorders. Treatment can take the form of many possible types of therapy, including CBT (Cognitive Behaviour Therapy) in which a therapist helps the person understand the links between their thoughts, feelings, and behaviours, with a goal of changing these patterns to improve functioning. Although therapy is a necessary component in recovery, individuals often discontinue their therapy too soon, as difficulties managing interpersonal relationships can affect the individual’s ability to work with the therapist.

Most individuals with personality disorders lead pretty normal lives and often only seek psychotherapeutic treatment during times of increased stress or social demands.

John M. Grohol, Psy.D., Psych Central (2016)

Medication is sometimes used to treat the symptoms of these disorders or co-occurring disorders. Medications do not have the ability to cure a mental health

condition or disorder. Medications are prescribed to alleviate symptoms so the person can gain stability in their life.

Medications used to treat personality disorders, or co-occurring disorders such as anxiety disorders or depression, can have side-effects such as:

- nausea
- headaches
- dizziness
- moodiness
- trouble sleeping
- fatigue
- weight loss
- blurred vision
- dry mouth
- drowsiness
- slurred speech or clumsy movements
- problems with memory

Keeping track of side effects can help the health care professional to alter the medication as necessary in order to find an effective type or dose.

Starting a new and powerful medication can be stressful, and if it does not seem to work, or produces worrying side effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medications for any mental health disorder needs careful and regular monitoring by a health care professional.

Concurrent disorders, co-occurring disorders, and other risks

Substance-related disorders

Those experiencing a personality disorder may develop a concurrent substance-related disorder in order to cope with negative or painful thoughts and feelings.

Problem alcohol or drug use, mood disorders, certain anxiety or eating disorders, suicidal thoughts or attempts, and sexual problems often accompany personality disorders.

*Canadian Mental Health Association
British Columbia (2004)*

Mood disorders

A person living with a personality disorder may also be living with another mental health disorder including an anxiety disorder, or depression.

Self-harming

Self-harming behaviour occurs with more frequency in those living with personality disorders. Self-harming behaviours, such as cutting or burning with a cigarette, are understood to alleviate or focus painful feelings, or to awaken feeling in those that feel only numbness. Self-harming behaviours usually do not indicate suicidal thoughts or plans.

Suicide

Those living with a personality disorder have a higher risk of death by suicide. **For example, according to the Centre for Addiction and Mental Health (2012), 10% of those living with Borderline Personality Disorder die by suicide.** All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

The causes for personality disorders are not yet fully understood, so risk factors are not clear. There is speculation that early abuse, separation, or abandonment, or a history of physical or sexual abuse, coupled with biological and genetic predisposition, may increase the likelihood of developing a personality disorder.

What you might notice

Living with a personality disorder creates upset and instability. A person in this situation may seem to be always dealing with emotional upheaval. Because of extreme difficulties with interpersonal interactions, relationships may be fraught with conflicts. In other cases, a person may exhibit charm and draw others to them, but a lack of empathy can cause relationships to erode over time. Others around these individuals often cannot seem to win, as neither adjusting to nor resisting their patterns seem to interrupt the cycle of their behaviours. School and work can suffer in the face of self-criticism or social anxiety, made worse by the rejection they face when their socially unacceptable behaviour puts others off. In other cases determination and an ability to convince others to conform to their plans can result in success in the working world, but those living with personality disorders frequently report loneliness. These individuals are left feeling a lack of being grounded or belonging in the world, and often struggle to define themselves outside others. They are most often unaware of their disorder or that treatment could help them, and mistrust might lead them to resist help if it is offered.

No matter how much information you have, you always have what you observe. For example, a learner with a personality disorder might exhibit extreme

emotional states and instability, and seem always to be in crisis.

The learner experiencing a personality disorder might:

- exhibit short intense bursts of anger, anxiety, or sadness
- express a very negative self-image: “I’m no good”
- engage in impulsive or destructive behaviour
- show signs of substance abuse or self-harming
- seem to react irrationally; become agitated out of proportion with what seems like a normal interaction to others, create arguments where no conflict exists
- expect others to conform to their ideas
- shift quickly from idealizing to disliking another
- exhibit a changing self-image based on who they are with at the time
- show fear of being left or abandoned in relationships, yet push others away with anger, mistrust, or paranoia
- display manipulative behaviours: appear charmingly persuasive, or act angry or upset to get their way
- show a lack of understanding or empathy for others
- show difficulties understanding responsibilities, consequences, laws
- show extreme sensitivity to changes in their environment

Supporting learners living with Personality Disorders

Strengths

People living with personality disorders are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a learner with high emotional sensitivity can also lend passion to their projects and pursuits.

People living with personality disorders can and do find paths to changing their behaviour and improving the quality of their lives. Everyone can learn from someone who lives with mental health issues and takes steps to overcome challenges. Working with others who strive to overcome challenges can be a learning experience for everyone, and can help learners develop increased understanding for the diversity they encounter in the workplace.

Your strength in supporting learners living with mental health issues will come

in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Challenges

Learners living with personality disorders may face the following challenges in the classroom:

- communications and social skills challenges
- difficulty navigating social interactions
- arguing with or contradicting you or others
- difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for their challenges
- irritability, frustration, or anger
- impulsivity
- anxiety, suspicions, paranoia
- disturbed and distracting thoughts, delusions
- sadness or mood sensitivity, or expression of “no one likes me”
- self-criticism or pessimism
- social withdrawal or aversion to social situations
- talking during quiet times or creating distractions for others
- sensitivity to environmental factors
- side effects of medications

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders**:

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment

- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with Personality Disorders

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with personality disorders who can develop ways to achieve in class often find that attending school helps with recovery. The satisfaction of completing steps towards a goal can increase self-esteem and, when the learner is ready, help to spark a more positive outlook for the future.**

As an adult education facilitator you are never expected to diagnose a mental health issue. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. Whether a learner has a mental health issue or not, if they exhibit learning challenges, the related strategies may help.

For communication and social skills challenges	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Provide the learner with a quiet space to work if possible, while helping them recognize that some interaction will be required.	

For communication and social skills challenges	Notes
Do not force the learner to work with others with whom they may feel uncomfortable.	
Seat the learner near others who will help to maintain a positive tone.	
Provide the learner with choices for learning activities and tasks.	
Reduce opportunities for competition or comparison of learner work.	
Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)	
Consider offering information to all learners about developing and growing social skills. (Handout # 15)	

For communication and social skills challenges	Notes
<p>As a group, agree on a quick social protocol for minor irritations. For example, agree on the term “excuse me” for any unintentional interruptions.</p>	
<p>Encourage supportive behaviours between learners by publicly recognizing effort and perseverance together.</p>	
<p>Praise helpful and supportive behaviours.</p>	
<p>Teach the learner that it is OK to say: “I don’t know” or “let me think about that for a bit,” in response to a question.</p>	
<p>If the learner repeats what you say rather than answering, prompt them with a sentence starter, making it clear that you are doing so: “Your answer might start like this ...”</p>	
<p>For verbal responses to questions in group lessons, prompt the learner with choices for answers, or direct their attention to the choices.</p>	

For communication and social skills challenges	Notes
<p>Place boundaries on the time you are free to listen to the learner talk about their intense interests. Plan a time to talk and use a timer or other method of measuring this time: "I'm interested in that. Remember we have time to talk at our 2 pm break."</p>	
<p>Show interest when the learner talks about topics other than an intense preoccupation: "It's great to see you have several interests."</p>	
<p>Where appropriate, use cartoons to depict social expectations. For example, a poster with a caption or thought bubble could show a learner waiting to speak to the instructor while he/she helps another learner.</p>	
<p>When social expectations shift with changing activities, explain the expectations to all learners, including the "unwritten rules:" "We'll move to the computers now, and as you'll remember, we're quiet so as not to disturb others who are working."</p>	
<p>Seat the learner next to others who will model appropriate social skills.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	

For communication and social skills challenges	Notes
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Check in frequently to monitor progress and give encouragement.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	

For communication and social skills challenges	Notes
Gain the learner's attention before giving verbal instructions. Speak slowly.	
Provide written instructions that match verbal instructions.	
Give the learner time to respond to verbal communication.	
Help the learner develop a bank of useful words for various types tasks, using a notebook or cue cards.	
If, when answering multiple choice questions, the learner consistently chooses the last answer in the list, limit choices to two and gradually increase with practice.	
Have the learner track emotions through the day using an emoticon chart. Help the learner look for patterns (for example mood variation at certain times) and alter the schedule if required.	

For communication and social skills challenges	Notes
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Model interactions making eye contact in usual ways – some eye contact but not continuously – as you speak to the learner and others in the class.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Check with the learner that they understand what break time activities are appropriate. If necessary help the learner create a routine for break time.</p>	
<p>Notice and build on social strengths; for example, if humour is a strength, group lessons could be introduced with a cartoon.</p>	
<p>For difficulty expressing knowledge verbally, have the learner express information using a chart, spreadsheet, or map.</p>	

For difficulty navigating social interactions	Notes
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Do not force the learner to work with others with whom they may feel uncomfortable.</p>	
<p>Seat the learner near others who will help to maintain a positive tone.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	

For difficulty navigating social interactions	Notes
Identify one facilitator as this learner’s go-to person for check-ins, instructions, and help.	
Create clear boundaries regarding what behaviour you will accept: “I will wait until you calm down to talk about this, as I always expect to be addressed with respect.”	
As a group, agree on a quick social protocol for minor irritations. For example, agree on the term “excuse me” for any unintentional interruptions.	
Encourage supportive behaviours between learners by publicly recognizing effort and perseverance together.	
Encourage an understanding of empathy by creating opportunities for learners to imagine and express how others (a character, a person in a news story they are reading) might feel.	
Praise helpful and supportive behaviours.	

For arguing with or contradicting you or others	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Create a class environment of acceptance and caring.</p>	
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	
<p>Express your belief in the learner's competence, even if they contradict you or seem to work against your efforts to help them succeed.</p>	
<p>Avoid being drawn into an argument. Continue to give instructions in a calm, concise manner.</p>	

For arguing with or contradicting you or others	Notes
<p>With the learner, make plans for self-initiated time-outs when they need time to control frustration. Create a plan what the time-out will include (a rest in a quiet area, a walk).</p>	
<p>Create a rules-based plan for learning and for classroom expectations so that when an argument arises, you can defer to the rules, removing your authority from being the target of an argument: "The rule for this task is three written paragraphs."</p>	
<p>Create clear boundaries regarding what behaviour you will accept: "I will wait until you calm down to talk about this, as I always expect to be addressed with respect."</p>	
<p>Stay calm and speak in a calm tone.</p>	
<p>Model ways to deal with frustration: count to 10, deep breaths, short break.</p>	
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	

For arguing with or contradicting you or others	Notes
<p>Intervene early before behaviour escalates: “I know you’ll remember the class expectations, and thank you for getting back to work.”</p>	
<p>Accept that arguing is a coping mechanism for this learner. Make corrections to the behaviour quickly and concisely. Ignore undesirable behaviour where feasible.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	
<p>Identify one facilitator as this learner’s go-to person for check-ins, instructions, and help.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	

For arguing with or contradicting you or others	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Provide two choices of tasks and have the learner pick one.	
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Praise efforts to cooperate and to take and follow instructions.	

For arguing with or contradicting you or others	Notes
Teach the learner appropriate ways to verbalize needing a break due to frustration: "Please leave me alone for a few moments. I need a break."	
Avoid taking the learner's words or behaviour personally.	

For difficulties with problem-solving, multiple reasons why "I can't do it," or blaming others for challenges	Notes
Encourage the learner to identify the problem using an "I need" statement, rather than complaining or blaming.	
Validate the learner's needs even if they cannot be met. "I can see why you'd feel the need for a more updated software program."	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for challenges

Notes

Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”	
Work with the learner to generate more than one solution to a problem. Praise efforts to brainstorm and ignore protests that every solution is flawed.	
Encourage flexible thinking by assigning tasks in which shifting point of view must be incorporated.	
Present one concept at a time. Check for understanding before presenting the next concept.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Praise all efforts at finding solutions to problems or managing multiple instructions independently.	

For difficulties with problem-solving, multiple reasons why “I can’t do it,” or blaming others for challenges

Notes

<p>Avoid being drawn into an argument. Continue to give instructions in a calm, concise manner.</p>	
<p>Present one concept at a time. Check for understanding before presenting the next concept.</p>	
<p>Ignore undesirable behaviour where feasible.</p>	
<p>Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	

For irritability, frustration, or anger	Notes
<p>Validate the learner’s experience: “I know this is difficult for you right now.”</p>	
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others and zero tolerance for obscene language or discrimination. Post the expectations in more than one spot in the room.</p>	
<p>Teach the learner appropriate ways to verbalize needing a break due to frustration: “Please leave me alone for a few moments. I need a break.”</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	

For irritability, frustration, or anger	Notes
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner near others who will help to maintain a positive tone.	

For irritability, frustration, or anger	Notes
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	
Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.	
Ensure that learner tasks are neither too easy nor too hard.	

For irritability, frustration, or anger	Notes
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	
Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Stay calm and speak in a calm tone.	

For irritability, frustration, or anger	Notes
Give instructions and directives in a supportive and respectful manner.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Develop agreed-upon protocols for difficult days or for behaviour that falls outside class expectations. For example, agree together that if they find themselves swearing even in a whisper, the learner must be responsible for apologizing briefly and excusing themselves from class.	
Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”	
Give opportunity to self-initiate a short break when needed.	

For irritability, frustration, or anger	Notes
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	

For irritability, frustration, or anger	Notes
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Avoid taking the learner’s words or behaviour personally.</p>	
<p>Help the learner understand that it is OK to leave unfinished work for next time.</p>	
<p>Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.</p>	

For irritability, frustration, or anger	Notes
<p>Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.</p>	

For impulsivity	Notes
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	
<p>Discuss as a group social responsibility and what this means in the classroom: "We are all responsible to support each other's efforts and to respect what others need to be their best."</p>	
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Develop a classroom routine that everyone can understand and follow.</p>	
<p>Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	

For impulsivity	Notes
<p>Begin each day with a review of the day's schedule.</p>	
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Have the learner answer a question "in their head," or jot down what they want to say, before responding.</p>	
<p>Establish steps for effective listening: stop working, remove hands from materials, look at the source of instructions, wait until all the instructions are done before asking questions or beginning work.</p>	

For impulsivity	Notes
Establish steps for asking questions: listen to instructions first, repeat instructions to yourself, develop questions, write down questions, ask questions, record needed reminders, begin task.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Check in frequently to monitor progress and give encouragement.	
Ask the learner to repeat instructions back to you.	
Have the learner answer a question "in their head," or jot down what they want to say, before responding.	
Use verbal questions about content to re-focus the learner on their task: "Remind me of the conflict in that story?"	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	

For impulsivity	Notes
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.</p>	
<p>Recognize and praise efforts to be patient: "Thank you for your patience."</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Provide the learner with sensory tools for helping with focus, such as a stress ball to squeeze.</p>	
<p>Have the learner work with a partner who is likely to model staying on task.</p>	
<p>Praise efforts to stay on task and to use strategies to manage impulsive behaviours.</p>	

For anxiety, suspicions, paranoia	Notes
<p>Validate the learner's feelings without agreeing with suspicions: "That sounds hard to deal with."</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	
<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Create a class schedule for work time and break time.</p>	

For anxiety, suspicions, paranoia	Notes
<p>With the learner, create an individual schedule for tasks. Keep the schedule predictable or similar for every class.</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Create a signal or use a timer to warn the learner of an upcoming transition, for example, when break time is 10 minutes away.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.</p>	
<p>Point out that attendance in itself is an accomplishment.</p>	

For anxiety, suspicions, paranoia	Notes
<p>Help the learner develop a practice to build self-discipline in the face of stress. For example, choose a task such as reading one chapter and schedule it for the same time frame each day.</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	
<p>Encourage the learner to develop a support network of trusted family or friends.</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	

For anxiety, suspicions, paranoia	Notes
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	

For anxiety, suspicions, paranoia	Notes
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Provide the learner with sensory tools for reducing anxiety, such as a stress ball to squeeze.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Reduce opportunities for competition or comparison of learner work.	
Reduce homework or extend deadlines as needed.	
Help the learner understand that it is OK to leave unfinished work for next time.	

For disturbed and distracting thoughts, delusions	Notes
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Avoid being drawn into an argument about whether thoughts are real.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Use course materials requiring low emotional engagement.	
Help the learner learn to encapsulate thoughts to be dealt with at a later time.	
Re-direct the learner to the task using concrete questions: "What was your answer for question 2?"	

For disturbed and distracting thoughts, delusions	Notes
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Introduce a timer for the learner to use to set goals for work bursts. Build stamina by increasing the time.	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Validate the learner’s feelings: “It’s OK to feel that way.” “That’s a lot to deal with.”	
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Discuss appropriate outlets for feelings, such as writing in a journal.	

**For sadness or mood sensitivity,
crying, or expression of
“no one likes me”**

Notes

<p>Ask the learner what strategies they already know work best for them to get started and to stay on task.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Discuss how crying is natural but public display of emotion needs to be limited to an appropriate length of time.</p>	
<p>Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.</p>	
<p>Give opportunity to self-initiate a short break when needed.</p>	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Keep a positive tone; use humour if appropriate. Avoid sarcasm.	
Find opportunities to share humour as a class, for example with a daily cartoon.	
Do something fun as a class, such as a lunchtime game.	
Create an inviting classroom. Display motivational posters or quotes.	
Do not assume that others are treating them nicely. There may be truth in their concern. Take time to review class policies of inclusiveness and mutual support with all learners as a group.	
Seat the learner near others who will help to maintain a positive tone.	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
<p>Have the learner work with another who will demonstrate patience and kindness.</p>	
<p>Talk privately about what might be limiting social success while avoiding being drawn into “always” or “never” thinking. Perhaps an inadvertent behaviour puts people off: “Is it possible that people sometimes misinterpret your social cues?” Provide the learner with information on social skills. (Handout # 15)</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	
<p>Encourage the learner to develop a support network of trusted family or friends.</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Show enthusiasm for accomplishments or positive events in the learner’s life.	

For sadness or mood sensitivity, crying, or expression of “no one likes me”	Notes
Point out that attendance in itself is an accomplishment.	
Design tasks so the learner must actively respond, for example, write on the board.	
Reduce homework or extend deadlines as needed.	

For self-criticism or pessimism	Notes
Validate the learner’s feelings: “It’s OK to feel that way.” “That’s a lot to deal with.”	
Discuss appropriate outlets for feelings, such as writing in a journal.	
Provide evidence of ability: past successes or physical reminders of completed tasks.	

For self-criticism or pessimism	Notes
<p>Have the learner keep a record of accomplishments and successes. Help the learner plan to review it when feeling uncertain.</p>	
<p>Provide ways to feel successful, for example, tasks the learner can succeed at.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Discuss how feeling pessimistic is natural but public display of pessimism needs to be limited for the morale of all, as we all support one another.</p>	
<p>Avoid inadvertently rewarding the self-critical or pessimistic behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Encourage the learner to recognize that everyone has strengths and weaknesses. Model this attitude in your own self-reflection or self-evaluation.</p>	

For self-criticism or pessimism	Notes
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	

For self-criticism or pessimism	Notes
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Seat the learner away from others who share or feed into the pessimistic mood.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	

For social withdrawal or aversion to social situations	Notes
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Provide the learner with a quiet space to work if possible, while helping them recognize that some interaction will be required.</p>	
<p>Do not force the learner to work with others with whom they may feel uncomfortable.</p>	
<p>Seat the learner near others who will help to maintain a positive tone.</p>	
<p>Provide the learner with choices for learning activities and tasks.</p>	
<p>Reduce opportunities for competition or comparison of learner work.</p>	

For social withdrawal or aversion to social situations	Notes
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Consider offering information to all learners about developing and growing social skills. (Handout # 15)</p>	
<p>As a group, agree on a quick social protocol for minor irritations. For example, agree on the term “excuse me” for any unintentional interruptions.</p>	
<p>Encourage supportive behaviours between learners by publicly recognizing effort and perseverance together.</p>	
<p>Praise helpful and supportive behaviours.</p>	
<p>Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.</p>	

For social withdrawal or aversion to social situations	Notes
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
Check in frequently to monitor progress and give encouragement.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Gain the learner's attention before giving verbal instructions. Speak slowly.	

For social withdrawal or aversion to social situations	Notes
Give the learner time to respond to verbal communication.	
For difficulty expressing knowledge verbally, have the learner express information using a chart, spreadsheet, or map.	

For talking during quiet times or creating distractions for others	Notes
Speak with the learner about what is not working and why: "It's a social asset to like to talk, but most learners need quiet times to get certain kinds of work done."	
Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.	
Establish social rules such as quiet vs talking periods and seating arrangements for each period.	
Model respecting quiet work periods. Avoid talking and use this time for reading or marking learner work. If working one on one with learners during quiet periods, use low voices or move away from others.	

For talking during quiet times or creating distractions for others	Notes
<p>Do not accept ADHD as an excuse for poor social behaviour. While being mindful that the learner is working to manage their impulses, explain that the class is a place to practice and learn to follow social expectations and you expect their best efforts.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus on their work.</p>	
<p>Provide the learner with sensory tools for helping with focus, such as a stress ball to squeeze.</p>	
<p>Have the learner ask a question “in their head,” or jot down what they want to say, before asking for help.</p>	
<p>Make noise-cancelling headphones or ear plugs available.</p>	
<p>Try various instructional methods: individual work, partner with another learner, group work, online activity.</p>	

For talking during quiet times or creating distractions for others	Notes
Reduce the need to ask questions by providing clear, concise instructions in both verbal and written form.	
Check in frequently to monitor progress and give encouragement.	
Provide the learner with information on strategies for concentration. (Handout # 5)	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Include some highly talkative activities in the class program if feasible.	
Ensure the learner has gathered all materials needed before beginning a task.	

For talking during quiet times or creating distractions for others	Notes
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.	
Recognize and praise efforts to be patient: "Thank you for your patience."	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Give the learner opportunities to help other learners.	

For talking during quiet times or creating distractions for others	Notes
Reduce opportunities for competition or comparison of learner work.	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	

For sensitivity to environmental factors	Notes
Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.	
Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.	
Use background music if it helps with focus.	
Place desks/seats far enough apart to allow for interpersonal space.	

For sensitivity to environmental factors	Notes
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	

For sensitivity to environmental factors	Notes
Maintain natural interactions that show your interest in the learner is genuine.	
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

For side effects of medication	Notes
Speak to the learner and find out what is going on: "Are you feeling OK?"	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ensure the learner has water available to drink.	

For side effects of medication	Notes
Ensure the learner has unlimited access to the washroom.	
Provide the learner with sensory tools for relieving restlessness, such as a stress ball to squeeze.	
<p>In case of blurred vision:</p> <ul style="list-style-type: none"> • use big print • use coloured paper (yellow recommended) • provide magnifying glass or suggest discount reading glasses • provide the learner with audio materials that replace or correspond to written materials 	
In the case of drowsiness, employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.	
Give opportunity to self-initiate a short break when needed.	
Help the learner develop self check-in strategies such as: “Am I on task? What should I be doing right now?”	

For side effects of medication	Notes
Check in frequently to monitor progress and give encouragement.	
Allow the learner to occasionally take assignments home when side effects become too distracting.	
Reduce homework or extend deadlines as needed.	
Consider a shortened day or modified class schedule as necessary.	

Chapter 14 References

General Information:

American Psychiatric Association

Highlights of Changes from DSM-IV-TR to DSM-5 (2013)

<http://www.dsm5.org/documents/changes%20from%20dsm-iv-tr%20to%20dsm-5.pdf>

Canadian Mental Health Association British Columbia Division

Personality disorders (2004)

<https://www.cmha.bc.ca/documents/personality-disorders-2/>

Centre for Addiction and Mental Health CAMH

Borderline Personality Disorder (2012).

https://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/borderline_personality_disorder_an_information_guide_for_families/Pages/Borderline-Personality-Disorder.aspx

Mood Disorders Association of Ontario

Fact sheets about mood disorders (2016)

<http://www.mooddorders.ca/fact-sheets>

Mood Disorders Society of Canada

Quick facts: Mental illness and addiction in Canada (2009)

<https://mdsc.ca/documents/Media%20Room/Quick%20Facts%203rd%20Edition%20Referenced%20Plain%20Text.pdf>

Psych Central

Personality Disorders by John M. Grohol, Psy.D. (1995 - 2016)

<http://psychcentral.com/personality/>

Dissociative Personality Disorder by Steve Bressert, Ph.D. (1995 - 2016)

<http://psychcentral.com/disorders/dissociative-identity-disorder-symptoms/>

Psychology Today

The ten personality disorders by Neel Burton M.D. (1991 - 2016)

<https://www.psychologytoday.com/blog/hide-and-seek/201205/the-10-personality-disorders>

The benefits of personality disorders by Neel Burton, M.D. (1991 - 2016)

<https://www.psychologytoday.com/blog/hide-and-seek/201508/the-benefits-personality-disorder>

Quotations and information cited in-text:

Canadian Mental Health Association British Columbia Division

Personality disorders (2004).

<https://www.cmha.bc.ca/documents/personality-disorders-2/>

Canadian Mental Health Association British Columbia Division

Personality disorders (2004)

<https://www.cmha.bc.ca/documents/personality-disorders-2/>

American Psychiatric Association

Highlights of Changes from DSM-IV-TR to DSM-5 (2013)

<http://www.dsm5.org/documents/changes%20from%20dsm-iv-tr%20to%20dsm-5.pdf>

Psych Central

Personality Disorders by John M. Grohol, Psy.D. (2016)

<http://psychcentral.com/personality/>

Canadian Mental Health Association British Columbia Division

Personality disorders (2004)

<https://www.cmha.bc.ca/documents/personality-disorders-2/>

Centre for Addiction and Mental Health

Borderline Personality Disorder (2012)

[https://www.camh.ca/en/hospital/health information/a z mental health and addiction information/borderline personality disorder an information guide for families/Pages/Borderline-Personality-Disorder.aspx](https://www.camh.ca/en/hospital/health%20information/a%20z%20mental%20health%20and%20addiction%20information/borderline%20personality%20disorder%20an%20information%20guide%20for%20families/Pages/Borderline-Personality-Disorder.aspx)

Learning Strategies adapted from the following sources:

Fairchild, Ellen E. (2003). Multiple Roles of Adult Learners. *New Directions for student services*, Wiley Periodicals, Inc. (no. 102).

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)

<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014).

Pre-referral intervention manual: The most common learning and behaviour problems encountered in the educational environment, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Students First Project

Autism Spectrum Disorder (2016)

<http://studentsfirstproject.org/disorders-strategies/asperger-syndrome/>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)

<http://www.studygs.net/adhd/index.htm>

Chapter 15: Physical illnesses and brain injury

Some illnesses, as well as injuries to the brain, can create symptoms similar to a mental health issue, or can lead to a mental health issue.

Illnesses and brain injury can:

- affect the workings or chemistry of the brain
- disrupt thoughts, emotions, and behaviours, as mental illnesses do
- affect concentration, memory, and learning
- cause anxiety, depression, or other mental health issues
- require medications that can cause side-effects that affect concentration and learning

When an illness leads to changes in thoughts, feelings, or behaviour, it can be very disorienting and stressful for the individual and those around them.

Also, symptoms may come and go, which can lead to confusion over what is happening.

Physical illnesses can also contribute to or cause the onset of mental health conditions. Pain, disability, and worry for health and for the future can lead to anxiety or depression.

Medications used to treat illnesses can also cause symptoms of anxiety, depression, or psychosis. Combinations of medications can have adverse effects, creating severe symptoms including drug-induced delirium.

More than 100 medical disorders can masquerade as psychological conditions or contribute to them, complicating treatment decisions.

Melinda Beck, The Wall Street Journal (2011)

Brain injuries can be terrifying and confusing, as those experiencing them may behave differently, even seeming to show different personality traits, temporarily or permanently. Brain injuries can lead to instability, disability, or intellectual disability, as the brain controls thoughts, emotions, behaviours, and all physical and neurological functioning.

Brain Injury Canada (2016) states that 160,000 Canadians sustain brain injuries each year, and over a million Canadians live with the effects of an acquired brain injury. Approximately 50% of those injuries are the result of falls and motor vehicle accidents.

Types of illnesses

Illnesses that can mimic mental health conditions or disorders are too numerous to list, but can include:

- epilepsy or seizure disorder
- Parkinson's disease
- Multiple Sclerosis
- Diabetes
- dementia
- delirium
- thyroid disease
- brain tumour or cancer
- adverse reactions or allergies to medications

Causes of brain injuries

The causes of brain injuries are also numerous, but can include:

- accidents or trauma to the head, falls, concussion
- birth injury or trauma
- heredity or congenital defect
- oxygen deprivation due to asphyxiation, heart attack
- stroke
- seizures
- drug overdose
- tumours
- degenerative diseases
- infectious diseases
- exposure to toxins

Some illnesses or injuries that may be mistaken for mental health issues can result in sudden death.

Diagnosis of illnesses or brain injury

The high number of physical illnesses which can mimic mental health issues, and the fact that some of these illnesses can be life-threatening, underscores the importance of seeking prompt medical help when symptoms of mental health issues arise. A first step is always a family doctor or other health practitioner who can conduct a thorough examination, taking into account all health issues and current medications.

An accurate diagnosis can depend on the person's ability to remember and disclose all events and all medications or substances taken previous to the onset of symptoms.

Being prepared with details of the symptoms, their severity, and when they were first noticed, can also improve the speed of diagnosis and treatment.

Those who believe they may be experiencing a mental health crisis (such as overwhelming anger, anxiety, or depression, delusions or hallucinations, suicidal thoughts or imminent suicide plans) can call 911 or go to the emergency room and state that they are experiencing a mental health emergency.

The extra effort needed to perform each task and the emotional stress which accompanies these difficulties cause fatigue. Fatigue contributes to attention problems. The result is further failure, and the cycle of frustration, low-self-esteem, and learning deficits continues. Often, students are better able to learn early in the day or ... when they are well rested.

Howard Davidson, Just Ask! (1993)

Anyone who experiences a motor-vehicle accident, serious fall, or head trauma, must seek immediate medical attention, regardless of symptoms, as symptoms can sometimes be delayed, and untreated brain injury can result in sudden coma or death.

Treatments for illnesses and brain injury

Of course, treatments for illnesses depend on the specific illness. If a mental health issue is also present, both illnesses may be treated simultaneously.

The treatments for brain injury include psychotherapy, biofeedback, and special education programs or assistive technologies to re-train certain abilities. Brain tissue can heal, but sometimes brain injuries are permanent. Therapies can help with regaining of function.

Anti-convulsant medications are sometimes used to treat tremors and problems with motor control created by brain injuries.

Medications do not have the ability to cure a brain injury. Medications are prescribed to alleviate symptoms so the person can gain stability in their life.

The side-effects of anti-convulsant medications can include:

- dizziness
- sleepiness
- blurred vision
- problems with balance
- headache
- stomach upset
- lowered thinking skills, concentration, and memory

Keeping track of side-effects can help the health care professional to alter the medication as necessary in order to find an effective type or dose.

Starting a new and powerful medication can be stressful, and if it does not seem to work, or produces worrying side effects, a person may feel they should stop taking it. But medications have effects on the body and most times need to be discontinued gradually to be safe. Anyone starting, taking, or discontinuing medications for any mental health symptoms needs careful and regular monitoring by a health care professional.

Concurrent disorders, co-occurring disorders, and other risks

Substances

Use of substances such as nicotine, alcohol, or drugs during certain physical illnesses, or in combination with medications used to treat certain illnesses, can create symptoms of mental health issues such as delusions, hallucinations, or psychotic episodes.

Those living with chronic illness, or chronic pain due to illness, are at increased risk for developing substance-related disorders, as substances may be used to alleviate symptoms or pain.

Mood and anxiety conditions or disorders

Physical illness and brain injury can lead to increased vulnerability to mood and anxiety conditions or disorders. Those who are already at risk for these disorders are particularly vulnerable.

Mental and physical illnesses are often intertwined. Individuals with physical health problems often experience anxiety or depression, which affects their response to the physical illness.

Government of Canada (2006)

Suicide

Those living with chronic physical illness or with brain injury have a higher risk of death by suicide. All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Anyone can experience illnesses, but those with increased risk of developing mental health issues may also be at increased risk of experiencing mental health disorders or symptoms as a result of a physical illness.

Risk factors can include life circumstances or genetic predisposition.

Those with a genetic predisposition, or the elderly, are at increased risk of degenerative diseases or dementia.

Homelessness, long periods of institutional living or hospitalization, or treatment including medications with strong effects such as opioids, can also bring increased risk of experiencing symptoms of mental health issues such as delusions, hallucinations, or delirium.

Brain injuries can occur as a result of any accident or head trauma, and the symptoms may not be immediately evident, which can lead people to delay seeking treatment and cause the condition to worsen.

Brain injury can also be the result of degenerative diseases, which may in some cases be hereditary, or obstructions in the brain such as a tumour or cancer.

What you might notice

Symptoms of mental health issues can be an indicator of many conditions, but sudden unexplained symptoms may indicate a serious illness or brain injury. Any remarkable changes in behaviour or personality require immediate medical attention, as these can be the result of life-threatening illnesses. These would include:

- erratic or irrational behaviour
- sudden uncharacteristic outbursts of anger or other emotion
- sudden loss of memory, or strange gaps in memory, such as forgetting common words or familiar names
- uncharacteristic behaviours towards others, such as overly familiar behaviour to a stranger
- reversals in usual beliefs, opinions, thought patterns
- “going blank” or having periods of stupor, staring into space

- severe sleepiness, lethargy, fatigue
- slurred speech
- drooping or immobile facial features
- inability to move or use any part of the body
- severe pains, in the head or elsewhere
- extreme unexplained sensory experiences such as numbness, burning, pins and needles, smells, visual disturbances such as flashes of light or dark spots
- delusions, hallucinations, or psychotic episodes

However, often symptoms caused by illness or brain injury are milder and harder to detect, which is one aspect of how they may be mistaken for other mental health issues.

If a learner reports unusual symptoms, it is always best to encourage them to see a doctor, go to the emergency room, or call 911, depending on the severity of the symptoms.

Supporting learners living with physical illnesses or brain injury

Learners living with illnesses that create symptoms of mental health illnesses, or those living with brain injuries, need similar supports to learners experiencing mental health disorders.

These learners have had their lives disrupted by their condition. They may experience daily uncertainty about their changing condition, or about their abilities.

Those having experienced a brain injury often live with deep frustration at the changes in their skills, deep sadness over the abilities they have lost, and confusion over what seems the patchwork of strengths and challenges the injury has created. They may be plagued by struggles to maintain employment or by anxiety for the future.

Strengths

People living with these conditions are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a learner who has had to navigate the medical system might have developed strong problem-solving and self-advocacy skills. They may be able to help others learn more about developing these skills.

All learners in the class can learn and grow understanding by working with others who experience life challenges. You might consider having this learner lead a group discussion, if appropriate.

Your strength in supporting learners living with mental health symptoms will come in part from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Challenges

The challenges learners living with physical illnesses and brain injuries may face will vary depending on individual circumstances and therefore are too numerous to list.

However, brain injuries are known to create the following challenges

- trouble with attention or concentration
- trouble with memory
- irritability, frustration, or anger
- lack of energy or chronic fatigue
- self-criticism or pessimism

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:
 - ✓ listen with empathy and without judgement
 - ✓ don't argue or give advice
 - ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:

- ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
- ✓ offer information about mental health services available
- ✓ don't diagnose
- ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with brain injury

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work

together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks. **Although it may prove challenging at first, learners living with illnesses affecting mental health who can develop ways to achieve in class often find that attending school helps with recovery. For those living with brain injury, the satisfaction of completing steps towards a goal can increase self-esteem and, when the learner is ready, help to spark a more positive outlook for the future.**

As an adult education facilitator you are never expected to diagnose. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. No matter the cause, if a learner exhibits learning challenges, the related strategies may help.

For trouble with attention or concentration	Notes
Validate the learner’s experience: “I know this is difficult for you right now.”	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)	

For trouble with attention or concentration	Notes
Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.	
Seat the learner in a brightly lit area close to the center of instruction.	
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	
Allow the use of background music if it helps improve the ability to focus.	
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	

For trouble with attention or concentration	Notes
Keep tasks short and structured.	
Make a class contract regarding cell phone use. Have the learner put the cell phone away to reduce distraction.	
Make noise-cancelling headphones or ear plugs available.	
Create a class schedule for work time and break time.	
Provide a study carrel or screen for reducing distractions during individual work time.	
Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Encourage the learner to self-monitor their routine.	

For trouble with attention or concentration	Notes
<p>With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>During instruction, present main points first.</p>	
<p>Give one direction at a time.</p>	
<p>Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.</p>	

For trouble with attention or concentration	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Have the learner use the computer for tasks where applicable and appropriate.	
Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	

For trouble with attention or concentration	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Seat the learner away from visual distractions such as a window.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Give opportunity to self-initiate a short break when needed.	
Place desks/seats further apart to allow for interpersonal space.	

For trouble with attention or concentration	Notes
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	

For trouble with attention or concentration	Notes
Ask the learner to repeat instructions back to you.	
Develop a discreet way for the learner to find out missed instructions, such as a self-serve handout bank.	
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Try over-learning: continue to review information or instructions regularly.	

For trouble with attention or concentration	Notes
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	
Provide immediate positive feedback on comprehension-related activities.	
Introduce a timer for the learner to set a specific length of time to focus on work, with a planned break following.	
Using a timer, help the learner estimate time needed for a task, record actual time needed, and check against estimate. Help the learner adjust time-management plans as needed.	
Encourage quality of work over quantity.	

For trouble with attention or concentration	Notes
<p>Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.</p>	
<p>Make use of an online time-tracking system to help with managing tasks.</p>	
<p>Teach the learner key words and features to recognize in tasks and assessments.</p>	
<p>Allow the learner to use study notes or fact sheets to check during tasks, assignments, or assessments.</p>	
<p>Have the learner highlight or underline important titles, instructions, or information in written materials.</p>	
<p>Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.</p>	

For trouble with attention or concentration	Notes
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	

For trouble with attention or concentration	Notes
Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.	
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Reduce opportunities for competition or comparison of learner work.	
Encourage the learner to discover and draw on their own gifts and talents.	
Encourage the learner to maintain a short daily study routine on weekends or holiday breaks. Provide worksheets or textbooks for home as needed.	
Allow extra time for assignment completion and test taking.	

For trouble with attention or concentration	Notes
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.</p>	
<p>Employ frequent breaks. Suggest a physical activity such as a walk around the block or an errand in the building.</p>	
<p>Consider a shortened day or modified class schedule as necessary.</p>	
<p>Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	

For trouble with attention or concentration	Notes
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	

For trouble with memory	Notes
<p>Validate the learner’s experience: “I know this is difficult for you right now.”</p>	
<p>Ask the learner what strategies they already know work best for them to remember information.</p>	
<p>Break work into definable, manageable chunks to avoid overload and confusion.</p>	
<p>Provide short, structured tasks.</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For trouble with memory	Notes
During instruction present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Informally assess auditory vs visual learning and memory skills. Use the results to plan lessons and assessment.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For trouble with memory	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to memorize.	
Try both massed and distributed practice for memory retention. Massed: have the learner work to memorize a piece of information until they know it. Distributed: work to memorize information in 15 minute bursts repeated throughout the day.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Try over-learning: continue to review the information regularly after it has been memorized.	

For trouble with memory	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	
<p>Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	

For trouble with memory	Notes
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	

For trouble with memory	Notes
<p>Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.</p>	
<p>Have the learner self-evaluate which memorization strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.</p>	

For irritability, frustration, or anger	Notes
<p>Validate the learner's experience: "I know this is difficult for you right now."</p>	
<p>Talk through the issues together. Consider what might be causing an issue – can it be fixed?</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others and zero tolerance for obscene language or discrimination. Post the expectations in more than one spot in the room.</p>	

For irritability, frustration, or anger	Notes
Teach the learner appropriate ways to verbalize needing a break due to frustration: "Please leave me alone for a few moments. I need a break."	
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For irritability, frustration, or anger	Notes
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Seat the learner near others who will help to maintain a positive tone.	
Reduce opportunities for competition or comparison of learner work.	
Ensure that learner tasks are neither too easy nor too hard.	
Stay calm and speak in a calm tone.	
Model ways to deal with frustration: count to 10, deep breaths, short break.	

For irritability, frustration, or anger	Notes
Suggest alternative ways to deal with the pressures and challenges of school assignments, such as exercise.	
Give the learner opportunities to help other learners.	
Explain the reasoning behind course content or task requirements.	
Avoid content which may remind the learner of negative life experiences such as death, unemployment, alcoholism etc.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day. Suggest switching tasks if necessary to stem frustration.	
Identify one facilitator as this learner's go-to person for check-ins, instructions, and help.	

For irritability, frustration, or anger	Notes
Stay calm and speak in a calm tone.	
Give instructions and directives in a supportive and respectful manner.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Develop agreed-upon protocols for difficult days or for behaviour that falls outside class expectations. For example, agree together that if they find themselves swearing even in a whisper, the learner must be responsible for apologizing briefly and excusing themselves from class.	
Find ways to model using problem-solving strategies, perhaps as a group: "What can we do to make sure everyone has time on the computer?"	

For irritability, frustration, or anger	Notes
Give opportunity to self-initiate a short break when needed.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Avoid inadvertently rewarding the behaviour (by overly attending to it or by only interacting with the learner at that time).	
Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.	
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	

For irritability, frustration, or anger	Notes
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Encourage the learner to develop a mantra to repeat before engaging in a task, such as: “breathe and focus, breathe and focus.” (Handout # 9)</p>	
<p>Offer all learners information about relaxation techniques. Make a plan with the learner to self-initiate the techniques when feeling stressed. (Handout # 8)</p>	
<p>Avoid taking the learner’s words or behaviour personally.</p>	
<p>Help the learner understand that it is OK to leave unfinished work for next time.</p>	

For irritability, frustration, or anger	Notes
Encourage the learner to work on identifying mood patterns and learn appropriate ways to deal with anger, frustration, and other emotions.	
Discuss how frustration is natural but public display of frustration needs to be limited to appropriate responses and an appropriate length of time.	

For lack of energy or chronic fatigue	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Begin the day with short tasks in which the learner can feel success.	
Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.	

For lack of energy or chronic fatigue	Notes
Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.	
Seat the learner in a brightly lit area close to the center of instruction.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	
Seat the learner near others who share similar interests or with whom they have a positive relationship.	
Work with the learner one on one.	

For lack of energy or chronic fatigue	Notes
Help the learner set short-term, achievable goals.	
Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.	
Allow grazing on healthy snacks throughout the day where possible.	
Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Give opportunity to self-initiate short rest times when needed.	

For lack of energy or chronic fatigue	Notes
Help the learner organize their work using binder dividers or notebooks for each subject or project.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	
Provide opportunities to use computer or other technology tools as part of instruction.	
Reduce homework or extend deadlines as needed.	
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For lack of energy or chronic fatigue	Notes
Provide opportunities for the learner to demonstrate learning through alternative methods: letters, story-telling, posters, collages, reports, brochures, displays.	
Have the learner record instructions (using an audio player) so they can listen again as needed.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Assess the learner on their effort rather than their grade, where appropriate.	
Deliver directions in a clear, concise, and supportive way.	
Encourage the learner to discover and draw on their own gifts and talents.	

For lack of energy or chronic fatigue	Notes
If possible, alter the learner's schedule to start school later in the day.	

For self-criticism or pessimism	Notes
Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."	
Discuss appropriate outlets for feelings, such as writing in a journal.	
Provide evidence of ability: past successes or physical reminders of completed tasks.	
Have the learner keep a record of accomplishments and successes. Help the learner plan to review it when feeling uncertain.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	

For self-criticism or pessimism	Notes
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Discuss how feeling pessimistic is natural but public display of pessimism needs to be limited for the morale of all, as we all support one another.</p>	
<p>Avoid inadvertently rewarding the self-critical or pessimistic behaviour (by overly attending to it or by only interacting with the learner at that time).</p>	
<p>Encourage the learner to recognize that everyone has strengths and weaknesses. Model this attitude in your own self-reflection or self-evaluation.</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	

For self-criticism or pessimism	Notes
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	
<p>Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)</p>	
<p>When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.</p>	
<p>Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”</p>	

For self-criticism or pessimism	Notes
<p>When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”</p>	
<p>Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)</p>	
<p>Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”</p>	
<p>Seat the learner away from others who share or feed into the pessimistic mood.</p>	
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators: https://www.studentlingo.com/workshop/reducetestanxiety/</p>	

Chapter 15 References

General Information:

Brain Injury Canada

About acquired brain injury (ABI) (2016)

<http://braininjurycanada.ca/acquired-brain-injury/>

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

Epilepsy Foundation

What are some common side effects from seizure medicines? (2013)

By Steven C. Schachter, MD | Patricia O. Shafer, RN, MN | Joseph I. Sirven, MD

<http://www.epilepsy.com/learn/treating-seizures-and-epilepsy/seizure-and-epilepsy-medicines/side-effects>

Mental Health Foundation, UK

Dementia (2016)

<https://www.mentalhealth.org.uk/a-to-z/d/dementia>

The Wall Street Journal

Confusing medical ailments with mental illness (2011)

By Melinda Beck

<http://www.wsj.com/articles/SB10001424053111904480904576496271983911668>

Quotations and information cited in-text:

The Wall Street Journal

Confusing medical ailments with mental illness (2011)

By Melinda Beck

<http://www.wsj.com/articles/SB10001424053111904480904576496271983911668>

Brain Injury Canada (2016)

<http://braininjurycanada.ca/>

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd. Page 22.

Government of Canada

The Human Face of Mental Health and Mental Illness in Canada (2006)

<http://www.phac-aspc.gc.ca/publicat/human-humain06/5-eng.php>

Learning Strategies adapted from the following sources:

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being*

treated for mental disorders. Calgary, AB: Detselig Enterprises Ltd.
Fairchild, Ellen E. (2003). Multiple Roles of Adult Learners. *New Directions for student services*, Wiley Periodicals, Inc. (no. 102).
<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)
<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

International Bipolar Foundation

Accommodations for students with bipolar disorder and related disabilities
<http://ibpf.org/article/accommodations-students-bipolar-disorder-and-related-disabilities>

LiveBinders by Mindprint Learning

Instructional strategies to support attention
<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, M.Ed. (2014).
Pre-referral intervention manual: The most common learning and behaviour problems encountered in the educational environment, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Students First Project

School and Classroom Strategies: Bipolar Disorder (2016)
<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-Bipolar-Strategies-2.24.14.pdf>

School and Classroom Strategies: Depression (2016)
<http://studentsfirstproject.org/wp-content/uploads/School-and-Classroom-Depression-Strategies-2.24.14.pdf>

School and Classroom Strategies: Anxiety (2016)
<http://studentsfirstproject.org/wp-content/uploads/Anxiety-Quick-Fact-Sheet-Strategies-2.24.14.pdf>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)
<http://www.studygs.net/adhd/index.htm>

Chapter 16: Learning Disabilities

Learning disabilities are not mental health disorders, but they can affect many aspects of life, including learning, social interactions, and employment skills.

“Learning disabilities” is a term that represents a wide range of difficulties with processing information, that is, with intake, usage, and output of information. These challenges are distinct from the symptoms of mental health conditions and disorders, which affect thoughts, feelings, and behaviours.

However, learning disabilities can co-occur with a mental health condition or disorder, or can lead to mental health issues.

“Learning Disabilities” refers to a variety of disorders that affect the acquisition, retention, understanding, organisation or use of verbal and/or non-verbal information.

Learning Disabilities Association of Ontario (2015)

Also, those living with learning disabilities face similar general challenges in the classroom to those living with mental health issues, such as challenges with attention, communication, and organization.

Learning disabilities usually appear as a deficit in ability in a certain specific area. For example, a person might have good decoding and spelling skills but still struggle with reading comprehension.

As with mental health issues, we all have some experiences that are similar to learning disabilities. We are all good at some things but not others; for example, we might be good at remembering faces but not names, or good at writing but not long division. We all may have learning styles that work best for us: visual, auditory, or kinesthetic. Learning disabilities are different from the common experience of having certain skills we are better at, or certain preferred learning styles, in that they significantly impair everyday functioning. Learning disabilities get in the way of completing necessary tasks to an extent that limits opportunities.

However, learning disabilities affect specific, not universal, skills. People who live with learning disabilities often exhibit unexpected weaknesses in ability in some areas that do not seem to match with their strengths in other areas.

Unfortunately, many times strengths are overlooked when a

Learning disabilities are commonly considered a school-based issue; but struggling in school means struggling in life.

Barbara Arrowsmith-Young, The Huffington Post (2013)

specific academic skill proves very challenging. An adult learner with a learning disability can often recount a history of trouble in school and frustration from trying hard and “getting nowhere.” They may have been told they were too stupid or slow to reach their goals, which can obviously lead to low self-esteem or giving up. Their disability may have been mistaken for defiance or lack of motivation, at the same time as they may have felt helpless to perform certain tasks, which can lead to anxiety. Without strategies to compensate, a person usually cannot learn to work around a disability; they may come to believe the situation is hopeless, which may lead to depression.

Focusing on strengths is important not just to avoid frustration and depression. A person living with an learning disability can often use skills in their areas of strength to develop methods to compensate for skills that are weaker. For example, a learner living with disruptions in visual processing could use audio recordings to listen to instructions. Often if visual processing is weak, auditory processing is very strong, or the opposite, so these two skill areas may compensate for one another.

Learning disabilities are not the same as an intellectual disorder. Those living with learning disabilities may take longer to understand concepts but do not lack the ability to do so. Many living with learning disabilities show high levels of innovation and creativity. The creative and flexible ways of thinking people living with learning disabilities often exhibit can help them develop alternative ways of performing tasks.

Increasing awareness of learning disabilities and how they work has led to reformed attitudes in education, and interventions are being developed and used to help those living with learning disabilities succeed in school.

According to the Learning Disabilities Association of Ontario (2015), between 5% and 10% of individuals will be affected by a learning disability, 35% of students living with learning disabilities will drop out of school, and 62% of those living with learning disabilities will be unemployed a year after graduation.

There is a high likelihood that some adult learners will be living with learning disabilities.

Types of learning disabilities

There are many types of learning disabilities, and their effects can range from mild to severe. Learning disabilities are categorized in differing ways depending on how they affect functioning.

Learning disabilities can be categorized by the processing pathway that is disrupted: visual, auditory, or organizational processing of information.

Or, they can be categorized by the processing action that is disrupted, whether

it is the intake, understanding, storing, retrieving, or recounting of information that is affected.

Another categorization method stresses which area of functioning is affected; communication, learning, social interactions, or physical coordination can all be affected.

Still another categorization is by the subject or specific academic skill they affect, which include reading, writing, math, or motor skills.

According to the Learning Disabilities Association of PEI (2016), the most common learning disabilities include:

Dyslexia: interferes with the ability to process text

Dysgraphia: interferes with handwriting ability

Dyscalculia: interferes with the ability to understand and perform mathematical calculations

Dyspraxia: interferes with motor coordination

Attention Deficit Hyperactivity Disorder (ADHD): interferes with the ability to pay attention (note that ADHD falls under more than one classification. For more information please refer to Chapter 10).

Auditory Processing Disorders: interferes with the ability to process auditory input

Visual Processing Disorders: interferes with the ability to process visual input

Non-verbal Processing Disorders: interferes with the ability to process non-verbal cues such as facial expressions and body language (but accompanied by high skills in other social and communication areas, such as high verbal expression and memory skills)

Causes of learning disabilities

Learning disabilities are neurological disorders that are present from birth and are life-long. They are caused by

Learning disabilities are due to genetic, other congenital and/or acquired neuro-biological factors. They are not caused by factors such as cultural or language differences, inadequate or inappropriate instruction, socio-economic status or lack of motivation, although any one of these and other factors may compound the impact of learning disabilities. Frequently learning disabilities co-exist with other conditions, including attentional, behavioural and emotional disorders, sensory impairments or other medical conditions.

Learning Disabilities Association of Ontario (2015)

genetic, congenital, or neuro-biological factors, not environmental factors or experiences. Learning disabilities often run in families. Studies of the brain as yet cannot detect a difference in the brain's makeup that might point to an learning disabilities.

Diagnosis of learning disabilities

Learning disabilities can be difficult to diagnose accurately because they are invisible and because they can occur in combinations that are unique to the person, or because they can co-occur with Autism or other disorders.

Learning disabilities are usually assessed over time and by more than one source. Evidence of a learning disability might come from the person themselves, from parents, or from teachers who have observed markers of an learning disabilities.

However, assessments are available to detect learning disabilities. Children can be referred for assessment through the school system. Adults can access assessment, but the cost can be prohibitive.

Assessment can be conducted by an adult education facilitator using assessment tools, but training is recommended before using the tools.

Treatments for learning disabilities

Learning disabilities are not treated in the same way that mental illnesses can be treated. Individuals do not recover from learning disabilities; rather, they learn strategies and use tools to accomplish tasks in alternative ways.

Medications are not used for learning disabilities, with the exception of ADHD. For more information, please see the chapter on ADHD in this guidebook.

Training programs can help a person find ways to work within their challenges, but services may be fewer outside the school system.

However, learning and classroom strategies and assistive technologies can be of great benefit to those living with these conditions. Some quite simple strategies can be very effective.

Learners experience more success using strategies when they have the opportunity to learn more about their learning disabilities and can learn to self-advocate for the accommodations they need to succeed at school or in the workplace.

The Adult Basic Education Association of Hamilton has created resources for facilitators working with learners living with learning disabilities.

These resources include assessment tools, strategies for various processing challenges, as well as step by step instructions for overtly teaching learners to use strategies. (Sara Gill, Executive Director, ABEA of Hamilton, 2016 Webinar).

You can access these resources here:

<http://e-channel.ca/practitioner/resources/online-community-practise-resources>

For more information, please visit:

<http://www.abea.on.ca/>

For information on assistive technologies, please visit the **Learning Disability Association of Ontario:**

<http://www.ldao.ca/introduction-to-ldsadhd/what-helps/assistive-technology/>

Concurrent disorders, co-occurring disorders, and other risks

Co-occurring disorders

The Learning Disabilities Association of America (2016) states that approximately 50 % of those living with learning disabilities will also be living with another related disorder. These co-occurring disorders include mood disorders (depression, bipolar), anxiety disorders, Autism Spectrum Disorder, and ADHD.

Substance-related disorders

Adults living with learning disabilities are at increased risk for developing substance-related disorders. Substances may be used to alleviate the stress or frustration of not being able to do things that everyone seems to expect as “normal” skills.

Suicide

Those living with learning disabilities have a higher risk of death by suicide. All reports of thoughts or plans of suicide must be taken seriously. If suicide appears imminent, call 911.

Who can be affected

Anyone can experience learning disabilities, but they are known to run in families. Sometimes adults are only diagnosed when they seek help for their child.

What you might notice

Signs that an adult might be living with a learning disability can include:

- noticeable “gaps” in skill areas: high skill levels in one area that do not seem to “match” weaknesses in other areas
- slower working speed
- trouble with spelling, even when repeating the same word

- avoidance of certain academic tasks such as reading and writing
- misreading of information, or misunderstanding verbal instructions
- problems with attention
- trouble with memory, summarizing
- trouble with open-ended questions
- weak writing output, or difficulty putting thoughts on paper
- difficulty with organization, schedules, being on time
- difficulty interpreting social cues
- low self-esteem around academics

Supporting learners living with learning disabilities

Some learners will report a learning disability; others may report symptoms, or say they “know something is wrong.” They may tell you up front that they feel they are “stupid” or that they “can’t learn.”

Learners living with learning disabilities have often experienced repeated frustrations and setbacks on their education path. They can benefit enormously from the efforts you would make with any learner: getting to know them, developing a rapport, accepting their challenges, and working together to find ways to overcome challenges.

As a facilitator you cannot diagnose a learning disability. You do not need a formal diagnosis to help a learner living with learning disabilities. You can focus on learning challenges and how to help the learner work within those challenges. You can use what the learner reports, and what you observe, to choose learning strategies, and you can engage the learner in trying and evaluating strategies to determine what might work for them.

Strengths

People living with learning disabilities are people first. They will arrive in your class with their own unique strengths. As a facilitator, you can use these strengths as you plan and guide their learning path. For example, a learner who thinks creatively might do well with tasks that call for a creative response, such as collages, or video journals.

All learners in the class can learn and grow understanding by working with others who experience life challenges. You might consider having this learner lead a group discussion, if appropriate.

Your strength in supporting learners living with learning disabilities and mental health symptoms that may accompany learning disabilities will come in part

from your practiced ability to empathize with the challenges others face. In the midst of accommodating the variety of learning needs in your class, your efforts will be guided by your capacity to treat others as you would wish to be treated.

Challenges

The challenges learners living with learning disabilities face will vary depending on individual circumstances and therefore are too numerous to list in detail; however, learning disabilities are known to create the following challenges in general:

- lowered concentration, attention span, or ability to make decisions
- slower processing speed for information intake and output
- trouble processing verbal instructions
- trouble with memory
- difficulty with reading comprehension
- difficulty with organization
- impulsivity
- lack of understanding of basic concepts or “unwritten rules”
- lateness or unexplained absences
- reduced ability in abstract thought processes
- weak writing output
- self-criticism or pessimism
- sensitivity to environmental factors

What you can do

These suggestions appear in expanded form in the section **General Suggestions for supporting learners experiencing mental health conditions and disorders:**

- Get to know the learner and be open to conversations on mental health:
 - ✓ at intake
 - ✓ during regular attendance
 - ✓ when transitioning to further education or employment
- Listen:

- ✓ listen with empathy and without judgement
- ✓ don't argue or give advice
- ✓ validate what the learner is going through
- Encourage the learner to get information, and give any information you can:
 - ✓ gently encourage seeking information/help, or encourage them to see their health care provider for help with existing medications if needed
 - ✓ offer information about mental health services available
 - ✓ don't diagnose
 - ✓ avoid promises about the effectiveness of treatment
- Support the learner in the classroom:
 - ✓ recognize learner strengths and potential, and accept their challenges
 - ✓ help the learner assess their ability to be in class
 - ✓ help learners use strategies to maximize what they can achieve
 - ✓ tailor learning activities to the individual learner
 - ✓ raise awareness of mental health in the classroom

What you cannot do:

- You cannot solve another person's problems
- You cannot make a person seek help or follow a treatment plan

What you must do:

- Seek help for critical issues or crises
- Practice self-care
 - ✓ take action to maintain mental wellness, and model these actions for your learners
 - ✓ recognize that supporting others comes with challenges
 - ✓ seek the support you need

Learning strategies for learners living with learning disabilities

When considering and using these strategies, you will recognize that not every strategy works for every individual or every situation. More than one strategy is listed for each situation so you can try one, see if it works, and then try another if needed. You will also, in all probability, try several strategies concurrently.

Wherever possible, include the learner in choosing and managing the strategies that work best for them.

Your goal, and the learner's goal, will be not to eliminate symptoms but to work together within what is happening to build strategies, stamina, and resilience needed to attend class and complete required tasks.

The Adult Basic Education Association of Hamilton has created resources for facilitators working with learners living with learning disabilities.

These resources include strategies for various processing challenges, as well as step by step instructions for overtly teaching learners to use strategies.

You can access these resources here:

<http://e-channel.ca/practitioner/resources/online-community-practise-resources>

For more information, please visit:

<http://www.abea.on.ca/>

As an adult education facilitator you are never expected to diagnose an learning disabilities. However, you can use symptoms the learner reports, and what you observe, to decide which learning strategies might help. No matter the cause, if a learner exhibits learning challenges, the related strategies may help.

For lowered concentration, attention span, or ability to make decisions	Notes
Validate the learner’s experience: “I know this is difficult for you right now.”	
Talk through the issues together. Consider what might be causing an issue – can it be fixed?	
Ask the learner what strategies they already know work best for them to get started and to stay on task.	
Discuss learning styles, and have the learner self-identify or self-assess how learning style information may help them approach tasks. (Handout # 1)	
Seat the learner in a brightly lit area close to the center of instruction.	
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	

For lowered concentration, attention span, or ability to make decisions	Notes
Encourage focusing exercises before beginning work, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Keep tasks short and structured. Include a variety of question types within a task.	
Make noise-cancelling headphones or ear plugs available.	
Create a class schedule for work time and break time.	
With the learner, create an individual schedule for tasks. Plan to vary the tasks throughout the day.	

For lowered concentration, attention span, or ability to make decisions	Notes
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
Break work into definable, manageable chunks to avoid overload and confusion.	
During instruction, present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	

For lowered concentration, attention span, or ability to make decisions	Notes
Informally assess the learner’s strengths in learning styles: auditory, visual, kinesthetic. Use the results to plan lessons and assessment.	
Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Use verbal rather than written assessment where possible, if appropriate.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Discuss healthy practices that might combat fatigue: adequate sleep, nutrition, exercise, and relaxation time.</p>	
<p>Share information on the effects of blue light from screens and how it can interrupt the sleep cycle. Encourage good sleep habits.</p>	
<p>Have the learner self-assess their most and least alert and productive times of day. Use this information as you work together to create their daily schedule.</p>	
<p>Schedule assessments and more challenging assignments for the learner's most alert time of day.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Help the learner develop self check-in strategies such as: "Am I on task? What should I be doing right now?"</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	
Provide written instructions that match verbal instructions.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	

For lowered concentration, attention span, or ability to make decisions	Notes
Begin reading comprehension questions with true/false answers and work up to answers requiring abstract thinking.	
Provide immediate positive feedback on comprehension-related activities.	
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Ask the learner about their interests or have the learner fill out an interest survey. Assign tasks related to interests.	

For lowered concentration, attention span, or ability to make decisions	Notes
<p>Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	

For lowered concentration, attention span, or ability to make decisions	Notes
Use verbal questions about content to re-focus the learner on their task: "Remind me of the conflict in that story?"	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Provide the learner with test-taking strategies to help with multiple choice assessments. (Handout # 7)	
Reduce opportunities for competition or comparison of learner work.	
Encourage the learner to discover and draw on their own gifts and talents.	
Have the learner self-evaluate which learning strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For lowered concentration, attention span, or ability to make decisions	Notes
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Provide a study carrel or screen for reducing distractions during individual work time.	

For slower processing speed for information intake and output	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Seat the learner in a brightly lit area close to the center of instruction.	
Seat the learner away from visual distractions such as a window.	

For slower processing speed for information intake and output	Notes
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Try various instructional methods: individual work, partner with another learner, group work, online activity.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.	

For slower processing speed for information intake and output	Notes
Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.	
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to value their best effort and perseverance, not simply their grade.	
Check in frequently to monitor progress and give encouragement.	
Schedule assessments and more challenging assignments for the learner's most alert time of day.	
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	

For slower processing speed for information intake and output	Notes
Pre-teach relevant vocabulary and content, and provide the learner with pre-view materials to review, before a lesson.	
Have the learner take jot notes as they listen or read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips: http://www.livebinders.com/play/play?id=1982354#anchor	
Gain the learner's attention before giving verbal instructions. Speak slowly.	
Provide written instructions that match verbal instructions.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Provide immediate positive feedback on comprehension-related activities.	

For slower processing speed for information intake and output	Notes
Work with the learner one on one.	
Teach the learner key words and features to recognize in tasks and assessments.	
Use verbal questions about content to re-focus the learner on their task: "Remind me of the conflict in that story?"	
Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.	
Give the learner time to respond to verbal communication.	
Allow more time for the learner to complete assignments and assessments.	

For slower processing speed for information intake and output	Notes
Reduce homework or extend deadlines as needed.	
Make use of assistive technologies such as voice recognition or talking word processor, organization programs, reading or writing software.	

For trouble processing verbal instruction	Notes
Validate the learner's experience: "I know this is not one of your easier methods for learning."	
Seat the learner in a brightly lit area close to the center of instruction.	
Ask the learner what strategies they already know work best for them to listen and process.	
Use a combination of learning styles – auditory, visual, kinesthetic – when delivering direct instruction.	

For trouble processing verbal instruction	Notes
Teach the learner about how body positioning can affect concentration. Provide the learner with suggestions for body positioning: shoulders loose, hands at rest, feet flat on floor.	
Encourage focusing exercises before listening, such as mindfulness or meditation practices.	
Discuss with the learner what they find distracting and brainstorm ideas for how to reduce distractions.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	
Break work into definable, manageable chunks to avoid overload and confusion.	
During instruction, present main points first.	

For trouble processing verbal instruction	Notes
Give one direction at a time.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
<p>Have the learner take jot notes as they listen. Overtly teach methods for taking jot notes.</p> <p>Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	
Use concrete examples, or examples meaningful to the learner.	
Seat the learner away from visual distractions such as a window.	
Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.	

For trouble processing verbal instruction	Notes
Seat the learner near others who are likely to stay on task and are unlikely to provide distraction.	
Employ frequent breaks. Schedule breaks during direct instruction, and remind the learners of the upcoming break. Ask learners to try to wait until the break for any needs that require them to leave their seat.	
Place desks/seats further apart to allow for interpersonal space.	
Put tennis balls on chair feet to reduce noise distractions.	
Use auditory signals to gain group attention or indicate transition times such as wind chimes or rain stick.	
Use alternative methods for delivering instructions: PowerPoint presentations, cue cards.	

For trouble processing verbal instruction	Notes
Provide the learner with sensory tools for remaining alert, such as a stress ball to squeeze or other tactile aid – soothing stone, kinetic sand.	
Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.	
Ask the learner to repeat instructions back to you.	
Develop a discreet way for the learner to signal that they need you to repeat an instruction during group lessons.	
Allow the learner to record verbal instructions so they can listen to them repeatedly if necessary.	
Have the learner make jot notes of instructions including 1)what, 2)how, 3)materials needed.	

For trouble processing verbal instruction	Notes
Provide written instructions that match verbal instructions.	
Try over-learning: continue to review information or instructions even after learners seem to understand.	
Structure lessons to include short bursts of listening interspersed with answering written questions, group discussion, or small group activities.	
Call on the learner for yes/no or true/false questions you think they will be prepared to answer.	
Provide immediate positive feedback on answers to verbal questions.	
Introduce a timer for the learner to see how much listening time remains, with a planned break following.	

For trouble processing verbal instruction	Notes
Teach the learner key words to recognize in lectures or group lessons.	
Allow the learner to preview and use lecture notes or fact sheets while listening to group instruction.	
Provide handouts that match lesson content.	
Have the learner highlight or underline important titles, instructions, or information in handout materials as they listen.	
Ask the learner about their interests or have the learner fill out an interest survey. Use information about learner interests when preparing lectures.	
Check in frequently to ensure that all learners are following and understanding direct instruction content.	

For trouble processing verbal instruction	Notes
<p>Incorporate multiple senses in instruction: photos or maps, dry erase boards, audio, or videos.</p>	
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Give the learner time to respond to verbal communication.</p>	
<p>Provide frequent, genuine praise for efforts to develop and use strategies to manage attention and concentration.</p>	
<p>Point out that by learning to use strategies to accommodate their learning needs, they are building flexibility, resilience, and problem-solving skills, valuable for other aspects of life such as the workplace.</p>	
<p>Reduce opportunities for competition or comparison of learner abilities.</p>	

For trouble processing verbal instruction	Notes
Allow extra time for responding to questions verbally.	

For trouble with memory	Notes
Validate the learner's experience: "I know this is difficult for you right now."	
Ask the learner what strategies they already know work best for them to remember information.	
Break work into definable, manageable chunks to avoid overload and confusion.	
Provide short, structured tasks.	
Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4 , or: http://www.livebinders.com/play/play?id=1982354#anchor	

For trouble with memory	Notes
During instruction present main points first.	
Design tasks so the learner must actively respond, for example, write on the board.	
Informally assess auditory vs visual learning and memory skills. Use the results to plan lessons and assessment.	
Provide a variety of ways to process, build understanding, and retain information: verbally report, draw or map, and write about the information.	
Ask the learner to repeat instructions back to you.	
Provide written instructions that match verbal instructions.	
Incorporate multiple senses in learning tasks and instruction: photos or maps, dry erase boards, audio, or videos.	

For trouble with memory	Notes
Use concrete examples, or examples meaningful to the learner, for instruction or assessment.	
Informally assess the amount of information the learner can retain at one time. Plan lessons and assessments within the manageable range.	
Work with the learner to find a method of organizing information that makes sense to them before they attempt to memorize.	
Try both massed and distributed practice for memory retention. Massed: have the learner work to memorize a piece of information until they know it. Distributed: work to memorize information in 15 minute bursts repeated throughout the day.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Try over-learning: continue to review the information regularly after it has been memorized.	

For trouble with memory	Notes
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Repeat direct instructions slowly and clearly. Make eye contact if this helps with focus.</p>	
<p>Structure reading activities to include short bursts of reading interspersed with answering questions.</p>	
<p>Teach the learner phrases or mnemonics to help with remembering key concepts. (Handout # 13)</p>	
<p>Provide the learner with information about how memory works. Help them develop their own “filing cabinet” structure. (Handout # 12)</p>	
<p>Make available memory practice games and exercises; encourage gradually increasing lengths of time spent practicing. (Handout # 12)</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	

For trouble with memory	Notes
Check in frequently to monitor progress and give encouragement.	
Ensure that learner tasks are neither too easy nor too hard.	
Have the learner make and report a general overview of material before reading.	
Teach the learner key words and features to recognize in tasks and assessments.	
Have the learner highlight or underline important titles, instructions, or information in written materials.	
Use multiple choice rather than close, short answer, or essay format for assessment where possible.	
Gradually increase the expected length of concentration time or the number of instructions to remember. Praise the learner for their progress.	

For trouble with memory	Notes
<p>Help the learner build a physical system for recording information so as not to rely solely on memory, such as a pocket notebook, point form study notes, sticky notes, or digital file.</p>	
<p>Have the learner self-evaluate which memorization strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.</p>	

For difficulty with reading comprehension	Notes
<p>Give pre-information before reading, such as summary or predictions.</p>	
<p>Use visuals to accompany reading selections if available.</p>	
<p>Tie reading selections to the learner's interests or to real-world issues.</p>	
<p>Have the learner take jot notes as they read. Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips:</p> <p>http://www.livebinders.com/play/play?id=1982354#anchor</p>	

For difficulty with reading comprehension	Notes
Pair the learner with a partner or have them work in a small group to discuss the reading at intervals.	
Use alternative methods for delivering instructions or content: PowerPoint presentations, cue cards.	
Where possible, make use of online readings including graphics, videos, or other visual cues.	
Have the learner highlight or underline important details as they read.	
Make use of audio books by having the learner read and listen at the same time.	
Make use of assistive technologies that will read text on a screen aloud to the learner.	

For difficulty with reading comprehension	Notes
Make use of assistive technologies that can scan a document and reproduce it on a screen.	
Structure reading activities to include short bursts of reading interspersed with answering questions.	
Provide immediate positive feedback on comprehension-related activities.	

For difficulty with organization	Notes
Provide a class calendar or schedule handout to remind learners of class times.	
Make use of phone calls or messaging to remind learners of class times.	
Consider teaching all learners to use a day planner to keep track of commitments and appointments.	

For difficulty with organization	Notes
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Help the learner organize their work using binder dividers or notebooks for each subject or project.</p>	
<p>Help the learner develop a system for notes storage, using colour-coding of dividers, binders, or bins. Encourage the learner to store notes the same way each time so they can be easily found.</p>	

For difficulty with organization	Notes
Provide all learners with information on time management skills. (Handout # 11)	
Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Remind the learner to repeat their routine and slowly encourage the learner to self-monitor their routine.	
Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)	
Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Have the learner estimate the length of time needed for each part of a task, then record the time spent on each part. Help them use their findings to estimate and plan for the next task.	
Encourage the learner to take into account all aspects of a task when planning, including draft and review steps.	

For difficulty with organization	Notes
<p>Help the learner set priorities on how to use class time and learn to recognize which tasks must take priority.</p>	
<p>Suggest apps or online tracking devices such as MyHomework, Class Timetable, or AudioNote to help the learner keep track of assignments.</p>	
<p>Encourage the learner to schedule time for completing unfinished work.</p>	
<p>Set aside a short time each day for organizing tasks. Encourage all learners to use this time to organize their work.</p>	
<p>Set aside a short time at the end of each day to review homework. Ask if the learner still needs any instructions or items to complete homework.</p>	
<p>Post group assignments and homework on the board and give enough time for learners to copy details.</p>	
<p>Provide positive feedback on all efforts and successes in organization.</p>	

For difficulty with organization	Notes
Provide the learner with an extra set of books or copies of work to take home.	
Encourage the learner to deal with review or corrections immediately rather than putting aside for later, if feasible. Share the mnemonic acronym <i>OHIO</i> : only handle it once.	
Have the learner self-evaluate which organizational strategies they try, which work for them, which do not, and why. Help them use this information to plan strategies to approach new tasks.	

For impulsivity	Notes
Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.	
Discuss as a group social responsibility: and what this means in the classroom: "We are all responsible to support each other's efforts and to respect what others need to do their best."	
Establish social rules such as quiet vs talking periods and seating arrangements for each period.	

For impulsivity	Notes
<p>Develop a classroom routine that everyone can understand and follow.</p>	
<p>Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	
<p>Begin each day with a review of the day's schedule.</p>	
<p>Help the learner devise and use reward systems meaningful to them for completing certain sections of their work or tasks in their routine, for example, a 10-minute memory game on the computer after 30 minutes of reading comprehension work.</p>	
<p>Seat the learner where they can see you, and develop together a non-verbal check-in you can use as a reminder to re-focus.</p>	
<p>Help the learner with one or two first steps in a task, then explain how to continue on their own.</p>	

For impulsivity	Notes
<p>Have the learner answer a question “in their head,” or jot down what they want to say, before responding.</p>	
<p>Establish steps for effective listening: stop working, remove hands from materials, look at the source of instructions, wait until all the instructions are done before asking questions or beginning work.</p>	
<p>Establish steps for asking questions: listen to instructions first, repeat instructions to yourself, develop questions, write down questions, ask questions, record needed reminders, begin task.</p>	
<p>Help the learner develop self check-in strategies such as: “Am I on task? What should I be doing right now?”</p>	
<p>Check in frequently to monitor progress and give encouragement.</p>	
<p>Ask the learner to repeat instructions back to you.</p>	
<p>Use verbal questions about content to re-focus the learner on their task: “Remind me of the conflict in that story?”</p>	

For impulsivity	Notes
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Have the learner choose a responsibility at transition times, for example, helping to put away supplies at the end of a work period.	
Help the learner develop work to turn to when waiting for one on one help, for example, a duotang with extra review work or adult colouring pages.	
Recognize and praise efforts to be patient: "Thank you for your patience."	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Provide the learner with sensory tools for helping with focus, such as a stress ball to squeeze.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	

For impulsivity	Notes
Have the learner work with a partner who is likely to model staying on task.	
Praise efforts to stay on task and to use strategies to manage impulsive behaviours.	

For lack of understanding of basic concepts or “unwritten rules”	Notes
Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.	
Develop a classroom routine that everyone can understand and follow.	
With the learner, create visual cues to help them stay on task or prepare for the next task, for example, a visual schedule. (Handout # 2)	
Begin each day with a review of the day’s schedule.	

For lack of understanding of basic concepts or “unwritten rules”	Notes
<p>Create a set of class expectations including minimizing distractions, use of cell phones, supporting others. Post the expectations in more than one spot in the room.</p>	
<p>Where necessary, explain reasoning behind class expectations that may seem obvious: “Quiet is expected when the instructor talks so everyone can hear what they need to know.”</p>	
<p>Where possible, use graphics to display class expectations; for example, post a picture above each area to depict what activity takes place there.</p>	
<p>Establish social rules such as quiet vs talking periods and seating arrangements for each period.</p>	
<p>Overtly teach methods for approaching tasks; for example, teach how to write a paragraph step by step, including steps that seem “obvious.”</p>	
<p>Avoid unstructured time. Help the learner create a routine for each aspect of the day – preparing to work, working, break time. Gradually encourage the learner to self-monitor their routine using checklists. (Handout # 4)</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
<p>Consider teaching all learners to use to-do lists or checklists to plan and track class activities. (Handout # 3 or Handout # 4)</p>	
<p>Develop and use checklists for the learner to self-monitor task completion, such as those suggested here: Handout # 4, or: http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Overtly teach methods for taking jot notes. Provide strategies for taking notes such these tips. http://www.livebinders.com/play/play?id=1982354#anchor</p>	
<p>Pre-teach key concepts or vocabulary needed for lesson comprehension.</p>	
<p>Give pre-information before reading, such as summary or predictions.</p>	
<p>Give the learner opportunity to demonstrate or teach something in their area of expertise to another learner or a small group.</p>	

For lack of understanding of basic concepts or “unwritten rules”	Notes
Make use of video lessons to teach basic concepts.	
Do not assume knowledge of abstract concepts such as cultural beliefs. Provide information to support concepts the learner needs to understand to complete a task.	
Pre-teach key concepts or vocabulary needed for lesson comprehension.	
Give pre-information before reading, such as summary or predictions.	
Make use of video lessons to teach basic concepts.	

For lateness or unexplained absences	Notes
Speak to the learner and find out what is going on: “I’ve noticed you’ve been late/absent lately. Is there something keeping you from attending class?”	

For lateness or unexplained absences	Notes
<p>Discuss the importance of being on time and being reliable, for school and in the workplace – do not assume the learner inherently understands these middle-class expectations.</p>	
<p>Work with the learner to find ways to solve a problem that may be limiting attendance.</p>	
<p>Make use of phone calls or messaging to remind learners of class times.</p>	
<p>Consider teaching all learners to use a day planner to keep track of commitments and appointments.</p>	
<p>Greet the learner individually and initiate conversation at arrival, break, and exit times. Maintain natural interactions that show your interest is genuine.</p>	
<p>Take time to get to know the learner to develop rapport and build trust.</p>	

For lateness or unexplained absences	Notes
<p>Discuss how they can prepare for leaving home in the morning and help decide on a leaving time that will allow them to arrive on time.</p>	
<p>Create clear expectations for class participation. Have the learner track and document their own attendance, and set goals.</p>	
<p>Develop and agree together on a contract for attendance expectations.</p>	
<p>Have the learner choose a responsibility to help in the classroom, for example, turning on the computers.</p>	
<p>Ensure that learner tasks are neither too easy nor too hard.</p>	
<p>Begin the day with short tasks in which the learner can feel success.</p>	

For lateness or unexplained absences	Notes
Reduce opportunities for competition or comparison of learner work.	
Reinforce attendance by accepting the learner back and helping them get started again after periods of absence.	
If the learner speaks openly about medication, discuss how the medication affects attendance and if it might be possible to time taking the medication to promote attendance (for example at night instead of in the morning).	
Do not force the learner to work with others with whom they may feel uncomfortable.	
Give the learner adequate time to complete tasks.	
Help the learner understand that it is OK to leave unfinished work for next time.	

For lateness or unexplained absences	Notes
If the learner must take a break to manage mental health, make it clear you will be ready to work with them when they are ready, and encourage them to come back.	

For reduced ability in abstract thought processes	Notes
Use concrete examples in course material and assessments.	
Reduce the need to compare and contrast two examples or texts.	
Present one concept at a time. Check for understanding before presenting the next concept.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	

For weak writing output	Notes
Provide sentence starters, writing prompts, or visual writing prompts.	
Help the learner develop a bank of descriptive and useful words for various types of writing tasks.	
Use visual tools to plan written assignments, for example, graphic organizers, outlines, or story webs. Teach the learner how to use these tools.	
Overtly teach the concept of brainstorming and practice brainstorming activities using the same type of graphic organizer each time, for example, a story web. Start expectation with 2 ideas and increase as the skill is practiced.	
Create a step by step plan for all tasks: step 1, step 2, etc. Have the learner focus on one task, or one step, at a time.	
Provide short, structured tasks.	
Have the learner use the computer for tasks where applicable and appropriate.	

For weak writing output	Notes
<p>Make use of assistive technologies such as talking word processor or other writing software.</p>	
<p>Encourage quality of work over quantity by reducing the amount of work assigned while requiring high quality content, for example, one well-written paragraph instead of three.</p>	
<p>Help the learner understand that slower working speed can be a positive. Work created at a slower pace often shows greater attention to detail.</p>	
<p>Provide immediate positive feedback on written work.</p>	

For self-criticism or pessimism	Notes
<p>Validate the learner's feelings: "It's OK to feel that way." "That's a lot to deal with."</p>	
<p>Discuss appropriate outlets for feelings, such as writing in a journal.</p>	

For self-criticism or pessimism	Notes
Provide evidence of ability: past successes or physical reminders of completed tasks.	
Have the learner keep a record of accomplishments and successes. Help the learner plan to review it when feeling uncertain.	
Provide ways to feel successful, for example, tasks the learner can succeed at.	
Help the learner with one or two first steps in a task, then explain how to continue on their own.	
Check in frequently to monitor progress and give encouragement.	
Discuss how feeling pessimistic is natural but public display of pessimism needs to be limited for the morale of all, as we all support one another.	
Avoid inadvertently rewarding the self-critical or pessimistic behaviour (by overly attending to it or by only interacting with the learner at that time).	

For self-criticism or pessimism	Notes
<p>Encourage the learner to recognize that everyone has strengths and weaknesses. Model this attitude in your own self-reflection or self-evaluation.</p>	
<p>Explain that mistakes are OK and how to use them as learning opportunities.</p>	
<p>Model accepting your own mistakes and using them as learning opportunities.</p>	
<p>Encourage the learner to value their best effort and perseverance, not simply their grade.</p>	
<p>Provide information for all learners on positive self-talk: what it is and how it works. (Handout # 10)</p>	
<p>Work with the learner to develop positive self-talk to use when feeling uncertain. (Handout # 10)</p>	
<p>Provide positive and constructive feedback to all learners evenly. Be open and direct about what methods you will use for providing feedback.</p>	

For self-criticism or pessimism	Notes
Provide information for all learners on how constructive feedback works and how to use it to improve their work. (Handout # 14)	
When giving constructive feedback, provide at least three positive comments first, then one suggestion for improvement.	
Keep constructive feedback brief and specific. Avoid over-generalizing or using “always” and “never.”	
When giving constructive feedback, avoid using “you.” Comment on the work and what steps can improve it: “This part could be improved by ...”	
Provide all learners with information about how to develop and use problem-solving strategies. (Handout # 16)	
Find ways to model using problem-solving strategies, perhaps as a group: “What can we do to make sure everyone has time on the computer?”	
Seat the learner away from others who share or feed into the pessimistic mood.	

For self-criticism or pessimism	Notes
<p>Make use of videos and handouts that offer tips to deal with test anxiety. (Handout # 7) Another resource to try from Innovative Educators:</p> <p>https://www.studentlingo.com/workshop/reducetestanxiety/</p>	

For sensitivity to environmental factors	Notes
<p>Develop a comfortable classroom: quiet, uncluttered, clean, well lit, fresh smelling and at a comfortable temperature.</p>	
<p>Create an inviting classroom. Display motivational posters or quotes. Where possible, include natural elements such as plants, rocks, or shells.</p>	
<p>Use background music if it helps with focus.</p>	
<p>Place desks/seats far enough apart to allow for interpersonal space.</p>	
<p>Put tennis balls on chair feet to reduce noise distractions.</p>	

For sensitivity to environmental factors	Notes
Use auditory signals (wind chime, rain stick) or visual signals (lights on and off) to gain group attention or indicate transition times.	
Make noise-cancelling headphones or ear plugs available.	
Create a quiet space within the class for all learners to use when they need a self-initiated time out. Make rules for and monitor the use of the space; for example, suggest a 15-minute time limit.	
Develop a caring, supportive attitude in the classroom.	
Greet learners individually and initiate conversation at arrival, break, and exit times.	
Maintain natural interactions that show your interest in the learner is genuine.	

For sensitivity to environmental factors	Notes
Model supportive behaviours: respectful interactions and communications, praise or supportive encouragement when deserved.	
Praise learners for supporting one another.	

Chapter 16 References

General Information:

Adult Basic Education Association of Hamilton (2016)

<http://www.abea.on.ca/>

Canadian Education Association

Information package: Fact sheets from the Learning Disabilities Association of Canada (2004)

http://ldapei.ca/uploads/3/4/2/5/34258565/updated_info_booklet.pdf

Johnston, Janet. M.Ed. (1998). *I always hated school: Making sense of the frustration*. St Catherines, ON: Sureen Publishing & Productions/Learning Potentials.

Learning Disabilities Association of America

Related disorders of a learning disability: What you should know by Larry Silver, M.D. (2016)

<https://ldaamerica.org/what-you-should-know-about-related-disorders-of-learning-disability/>

Learning Disabilities Association of Ontario (2015)

<http://www.ldao.ca/>

Learning Disabilities Association of PEI (2016)

<http://ldapei.ca/index.html>

Types of Learning Disabilities

<http://ldapei.ca/types-of-learning-disabilities.html>

PBS Newshour

Five misconceptions about learning disabilities by Jason Kane (March 16, 2012)

<http://www.pbs.org/newshour/rundown/five-misconceptions-about-learning-disabilities/>

Wilson, Alexander M., Armstrong, Catherine Deri, Furrie, Adele, and Walcot, Elizabeth T. (2009). The mental health of Canadians with self-reported learning disabilities. *Journal of Learning Disabilities*, 42 (24), 1-18.

<http://ldx.sagepub.com/>

Quotations and information cited in-text:

Learning Disabilities Association of Ontario

What are learning disabilities? (2015)

<http://www.ldao.ca/introduction-to-ldsadhd/what-are-lds/official-definition-of-lds/>

Smith-Young, Barbara. (May 7, 2013). How my learning disability affected my mental health. The Huffington Post. http://www.huffingtonpost.ca/barbara-arrowsmithyoung/canadian-mental-health-week_b_3224386.html

Learning Disabilities Association of Ontario

<http://www.ldao.ca/>

Learning Disabilities Association of PEI (2016)

Types of Learning Disabilities

<http://ldapei.ca/types-of-learning-disabilities.html>

Learning Disabilities Association of Ontario

<http://www.ldao.ca/>

Adult Basic Education Association of Hamilton (2016)

<http://www.abea.on.ca/>

Online Community Practice Resources (2016)

<http://e-channel.ca/practitioner/resources/online-community-practise-resources>

Learning Disabilities Association of Ontario

Assistive Technologies (2016)

<http://www.ldao.ca/introduction-to-ldsadhd/what-helps/assistive-technology/>

Learning Disabilities Association of America

Related disorders of a learning disability: What you should know by Larry Silver, M.D. (2016)

<https://ldaamerica.org/what-you-should-know-about-related-disorders-of-learning-disability/>

Learning Strategies adapted from the following sources:

Adult Basic Education Association of Hamilton (2016)

<http://www.abea.on.ca/>

Autism Speaks

Autism Speaks Family Services school community toolkit (2012)

http://studentsfirstproject.org/wp-content/uploads/school_community_tool_kit.pdf

Davidson, Howard. (1993). *Just Ask! A handbook for instructors of students being treated for mental disorders*. Calgary, AB: Detselig Enterprises Ltd.

Fairchild, Ellen E. (2003). *Multiple Roles of Adult Learners. New Directions for student services, Wiley Periodicals, Inc. (no. 102).*

<http://robert-vroman.com/resources/Multiple%20Roles%20of%20Adult%20Learners.pdf>

Government of Ontario

Supporting Minds: An educator's guide to promoting students' mental health and well-being (2013)

<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>

International Bipolar Foundation

Accommodations for students with bipolar disorder and related disabilities
<http://ibpf.org/article/accommodations-students-bipolar-disorder-and-related-disabilities>

LiveBinders by Mindprint Learning

Instructional strategies to support attention

<http://www.livebinders.com/play/play?id=1982354#anchor>

McCarney, Stephen B., Ed.D. and Cummins Wunderlich, Kathy, [M.Ed.](#) (2014). *Pre-referral intervention manual: The most common learning and behaviour problems encountered in the educational environment*, 4th ed. Columbia, MO: Hawthorne Educational Services Inc.

Payne, Ruby K., DeVol, Philip E., and Smith, Terie Dreussi. (2001). *Bridges Out of Poverty: Strategies for Professionals and Communities*. Highlands, TX: aha Process Inc.

Students First Project

School and Classroom Strategies: Bipolar Disorder (2016)

<http://studentsfirstproject.org/wp-content/uploads/Quick-Fact-Sheet-Bipolar-Strategies-2.24.14.pdf>

School and Classroom Strategies: Depression (2016)

<http://studentsfirstproject.org/wp-content/uploads/School-and-Classroom-Depression-Strategies-2.24.14.pdf>

School and Classroom Strategies: Anxiety (2016)

<http://studentsfirstproject.org/wp-content/uploads/Anxiety-Quick-Fact-Sheet-Strategies-2.24.14.pdf>

Study Guides and Strategies: an educational public service

Studying with ADHD (2016)

<http://www.studygs.net/adhd/index.htm>

Chapter 17: Learner resources

Information on mental health for learners, or for your use in the classroom:

Mindsight

- Excellent information about mental health, including units with videos and quizzes, are available at Mindsight. You will need to create an account.
<http://mymindsight.uoit.ca/>
- Information for learners on mental health is also available from:

Canadian Mental Health Association

<http://www.cmha.ca/>

Mental Health Commission of Canada

<http://www.mentalhealthcommission.ca/English/>

Centre for Addiction and Mental Health (CAMH)

- The Centre for Addiction and Mental Health has developed a program on mental health for secondary school students which could be used for adult learners. The teacher's guide to implementing the program is available here:
https://www.camh.ca/en/education/Documents/www.camh.net/education/Resources_teachers_schools/TAMI/tami_teachersall.pdf

Information on learning strategies for learners' use:

- For learner resources on improving attention and concentration, organizing tasks, studying, and other topics:

LiveBinders by Mindprint Learning

Instructional strategies to support attention (2016)

<http://www.livebinders.com/play/play?id=1982354#anchor>

- For learner resources on reducing test-taking anxiety:

Innovative Educators: Student Lingo

Reduce Test Anxiety (2010, 2014)

<https://www.studentlingo.com/workshop/reducetestanxiety/>

- For more tips on being aware of body language in work situations, try this video. Note: this video corresponds with the learner handout on social skills. You will find other videos with employment-related work tips in this series.
http://www.huffingtonpost.ca/2016/11/28/body-language-workplace_n_13183564.html

Mental Health Services and Resources in Ontario

You can direct learners to mental health services for information, and for help with locating and accessing services.

Hotlines

211 Ontario

To find health services in Ontario, dial **211** (24/7), or visit:

<http://www.211ontario.ca>

Government of Ontario Drug and Alcohol helpline

Dial **1-800-565-8603** (24/7) or visit:

<http://www.drugandalcoholhelpline.ca>

Government of Ontario Mental Health helpline

Dial **1-866-531-2600** (24/7) or visit:

<http://www.mentalhealthhelpline.ca>

Government of Ontario Problem Gambling helpline

Dial **1-888-230-3505** (24/7) or visit:

<http://www.problemgamblinghelpline.ca>

Good2Talk

For mental health support for post-secondary students in Ontario, dial **1-866-925-5454**, or visit:

<http://www.good2talk.ca>

HERE24/7

For after-hours mental health support for the Waterloo-Wellington-Dufferin Region, dial **1-844-437-3247**

<http://here247.ca>

Canadian Mental Health Association Branches in Ontario

Please see the list below or visit:

<http://www.cmha.ca/get-involved/find-your-cmha/>

Brant County Branch

203-44 King Street Brantford, ON N3T 3C7
E mail@cmhabrant.on.ca
P (519) 752-2998
F (519) 752-2717

Champlain East Branch

329 Pitt Street Cornwall, ON K6J 3R1
E office@cmha-east.on.ca
P (613) 933-5845
F (613) 936-2323

Cochrane Timiskaming Branch

Timmins Office 330 Second Avenue, Suite 201 Timmins, ON P4N 8A4
E cmhaadm@cmhact.ca
P (705) 267-8100
F (705) 268-8742

Durham

60 Bond St W, Oshawa, ON L1G, Canada
E cmha@cmhadurham.org
P (905) 436-8760
F (905) 436-1569

Elgin Branch

110 Centre Street N5R 2Z9 St.Thomas, ON Canada
P (519) 633-1781
F (519) 631-1781

Fort Frances Branch

Box 446 - 612 Portage Avenue Fort Frances, Ontario P9A 3M8
P (807) 274-2347
F (807) 274-2473

Grey-Bruce Branch

1024 2nd Avenue East Owen Sound ON N4K 2H7
E admin@cmhagb.org
P (519) 371-3642
F (519) 371-6485

Haldimand and Norfolk Branch

395 Queensway West Simcoe, ON N3Y 2N4
E info@cmha-hn.ca
P (519) 428-2380 Toll-free: 1-888-750-7778
F (519) 428-3424

Haliburton, Kawartha, Pine Ridge Branch

415 Water Street Peterborough, ON K9H 3L9
E info@peterborough.cmha.on.ca
P (705) 748-6687
F (705) 748-4078

Halton Region Branch

1540 Cornwall Road, Suite 102 Oakville, ON L6J 7W5
E info@cmhahrb.ca
P (905) 693-4270 or Toll-free: 1-877-693-4270
F (905) 693-9183

Hamilton Branch

131 John Street South Hamilton, Ontario L8N 2C3
E info@cmhahamilton.ca
F (905) 521-0211
P (905) 521-0090

Hastings and Prince Edward Counties Branch

41 Octavia Street Belleville ON K7K 5T9
P (613) 969-8874

Huron Perth Branch

540 Huron St. Stratford, ON N5A 5T9
E geninfo@cmha-hp.on.ca
P 1-888-875 2944 or (519) 273-1391
F (519) 273-0505

Kenora Branch

227 Second Street South, 2nd Floor Kenora, ON P9N 1G1
E office@cmhak.on.ca
P (807) 468-1838
F (807) 468-6396

Kingston Branch

400 Elliott Avenue, Kingston, Ontario, K7K 6M9
E cmhstaff@kingston.net
P (613) 549-7027
F (613) 549-7098

Lambton Kent Branch

Head Office 240 Grand Ave. West, Suite 100 Chatham, ON, N7L 1C1
P (519) 436-6100

Middlesex Branch

534 Queens Avenue London, ON N6B 1Y6
E info@cmhamiddlesex.ca
P (519) 668-0624 Toll Free: 1-855-668-0624
F (519) 668-3641

Muskoka-Parry Sound Branch

173 Manitoba St., Suite 202 Bracebridge, ON P1L 1S3
P (705) 645-2262 x 288

Niagara Branch

15 Wellington Street St. Catharines, ON L2R 5P7
E info@cmhaniagara.ca
P (905) 641-5222

Nipissing Regional Branch

156 McIntyre Street West North Bay, ON P1B 2Y6
E info@cmhanipissing.on.ca
P (705) 474-1299 or Toll Free: 1-888-474-1299
F (705) 474-5325

Ontario Division

2301-180 Dundas Street West Toronto, ON M5G 1Z8
E info@ontario.cmha.ca
P (416) 977-5580
F (416) 977-2813

Ottawa Branch

1355 Bank Street, Suite 301 Ottawa, Ontario K1H 8K7
E cmhaoc@magma.ca
P (613) 737-7791
F (613) 737-7644

Oxford County Branch

522 Peel Street Woodstock, ON N4S 1K3
P (519) 539-8055 or Toll Free: 1-800-859-7248
F (519) 539-8317

Peel Branch

601-7700 Hurontario Street, Brampton, ON L6Y 4M3
E info@cmhapeel.ca
P (905) 451-2123
F (905) 456-7492

Sault Ste. Marie Branch

386 Queen St. E. Sault Ste. Marie, ON P6A 1Z1
E annette@cmhassm.com
P (705) 759-0458
F (705) 945-0261

Simcoe County Branch

15 Bradford Street Barrie ON L4N 1W2
E info@cmhastarttalking.ca
P (705) 726-5033 or Toll Free: 1-800-461-4319
F (705) 726-8629

Sudbury-Manitoulin Branch

111 Elm Street, Suite 100 Sudbury, ON P3C 1T3
E info@cmha-sm.on.ca
P (705) 675-7252 or Toll-Free: 1-866-285-2642
F (705) 675-7247

Thunder Bay Branch

200 Van Norman St. Thunder Bay, ON P7A 4B8
E cmhatb@cmha-tb.on.ca
P (807) 345-5564
F (807) 345-4458

Toronto Branch

480 - 700 Lawrence Ave. W. Toronto, ON M6A 3B4
E cmha.toronto@sympatico.ca
P (416) 789-7957
F (416) 789-9079

Waterloo Wellington Dufferin Branch

Head Office 80 Waterloo Avenue Guelph, ON N1H 0A1
Here 24/7 at 1-844-437-3247, TTY: 1-877-688-5501

Windsor-Essex County Branch

1400 Windsor Ave. Windsor, ON N8X 3L9
E info-referral@cmha-wecb.on.ca
P (519) 255-7440
F (519) 255-7817

York Region Branch

York Region Branch Main office 15150 Yonge Street, Suite 201 Aurora, ON, L4G 1M2
E yorkregion@cmha-yr.on.ca
P (905) 841-3977 Toll Free: 1-866-345-0183
F (905) 841-3007

Centre for Addiction and Mental Health (CAMH)

CAMH Main switchboard **(416) 535-8501** or **1(800) 463-2338** is toll free, staffed 24/7.

ACCESS CAMH **(416) 535-8501**, press 2 for information about accessing CAMH services. Mon-Fri: 8:30 a.m. - 5 p.m.

CAMH Information Officer **1 (800) 463-6273** toll-free or **(416) 535-8501, press 1** for general information. Mon-Fri: 8:30 a.m.-5:00 p.m.

Or visit:

info@camh.ca

CAMH branches in Ontario

CAMH operates central clinical and research facilities in Toronto:

Queen Street site (Queen and Ossington)

1001 Queen Street West
30, 40, 50 and 60 White Squirrel Way
100 and 101 Stokes Street
80 Workman Way
Toronto, Ontario
M6J 1H4

24/7 Psychiatric [Emergency Department](#) is located at

College Street site (including CAMH's Emergency Department)

250 College Street (College and Spadina)
Toronto, Ontario
M5T 1R8

Russell Street site (Russell and Spadina)

33 Russell Street
Toronto, Ontario
M5S 2S1

CAMH also operates from 8 regional locations throughout the province that provide communities with education and support for program development, health promotion and prevention.

Please note that clinical services are not available from CAMH Regional Offices:

GTA Region:

Toronto Community Office (416) 535-8501 Ext. 30335

East Region:

Kingston Toll-free (888) 287-4439 or (613) 546-4266

Ottawa Toll-free (888) 441-2892 or (613) 569-6024

West Region:

London Toll-free (888) 495-2261 or (519) 858-5110

Hamilton Toll-free (888) 857-2876 or (905) 525-1250

North Region:

Sudbury Toll-free (888) 880-7063 or (705) 675-1195

Thunder Bay (807) 626-9145

Penetanguishene (705) 549-9921

Chapter 18: Learner handouts

The following optional learner handouts are for you to use to support all learners in the classroom. These handouts may be particularly beneficial for learners living with mental health issues.

Feel free to alter the handouts to suit your classroom and learner needs.

These handouts support the learning strategies listed in the chapters, and are linked to the strategies for ease of use; however, you can choose to use the handouts in any way you wish, or to use your own materials.

My learning agreement

An agreement can help you stay committed to your education path, and can help you decide when it is necessary to be absent from class.

I agree to:

- ✓ attend classes

Class days:

Class times:

I will do my best to:

- ✓ be on time
- ✓ concentrate in class
- ✓ support others

Occasionally, I might have to be absent.

I might have to be absent if:

I am sick

If I have to be absent, I will let the instructor know.

In spite of my best efforts, there may be a time when I'm having trouble learning, or feel frustrated:

I might have trouble learning when:

If I have trouble learning or get frustrated, these things might help me:

Things that might help if I am having trouble:

take a break

switch to a different task

However, some days I might have to try again tomorrow:

I'll know it's time to try again tomorrow when I:

My instructor can ask me if I need to take a break OR if I need to try again tomorrow. We'll talk it over and decide together.

Signed _____

Date _____

List of available Learning Tips handouts

- 1/** Tips for using learning styles
- 2/** Tips for using a visual schedule
- 3/** Tips for using to-do lists
- 4/** Tips for using checklists
- 5/** Tips for improving concentration
- 6/** Tips for handling stress in class
- 7/** Tips for test-taking anxiety
- 8/** Tips for relaxation
- 9/** Tips for using a mantra
- 10/** Tips for using positive self-talk
- 11/** Tips for time management
- 12/** Tips for improving memory
- 13/** Tips for using mnemonics
- 14/** Tips for using constructive feedback
- 15/** Tips for social skills practice
- 16/** Tips to solve a problem




Tracking form for learning strategies

Strategy tried	Date	Did it work? yes/no	Results

1/ Tips for using learning styles

Learning styles are ways we learn.

Some ways we learn include:

Visual – with our eyes		you like to see instructions in writing you like to look at maps or pictures you learn by watching
Auditory – with our ears		you like to listen to instructions you like listening to books or the radio you learn by listening
Kinesthetic – with our hands or bodies		you like instructions that get you moving you like to use your hands you learn by trying it yourself

We can all learn in these ways. But there might be a best way for you.

My best learning style:	I know it because:
-------------------------	--------------------

You can use your best learning style to help you learn and remember.

If your best learning style is **visual**, you can try these methods:

- watch a teaching video
- look at photos or maps
- use a calendar or a day planner
- make charts, cartoons, sticky notes

If your best learning style is **auditory**, you can try these ways to learn:

- listen to audio books
- record and listen to lessons or lectures

- repeat steps or information aloud

If your best learning style is **kinesthetic**, you can try these ways to learn:

- use hands-on activities (puzzles, games, base-10 blocks)
- use your body to remember (for example, list on fingers)
- use word processing, websites, computer games, apps

You can also use learning styles to:

Learning Style	Study for a test	Relax	Complete tasks
Visual	<ul style="list-style-type: none"> • make flash cards 	<ul style="list-style-type: none"> • look at a magazine 	<ul style="list-style-type: none"> • watch a video-recipe while you cook
Auditory	<ul style="list-style-type: none"> • use a familiar tune to memorize 	<ul style="list-style-type: none"> • listen to music 	<ul style="list-style-type: none"> • use voice-mail to make a to-do list
Kinesthetic	<ul style="list-style-type: none"> • move as you study 	<ul style="list-style-type: none"> • go for a walk 	<ul style="list-style-type: none"> • dance while you sweep the floor and do chores

How could you use your best learning style to help you?

I would use: (check one)	To help me: (check one)
<input type="checkbox"/> Visual	<input type="checkbox"/> study for a test
<input type="checkbox"/> Auditory	<input type="checkbox"/> relax
<input type="checkbox"/> Kinesthetic	<input type="checkbox"/> complete tasks
	<input type="checkbox"/> other:

2/ Tips for using a visual schedule

A visual schedule lists activities you will do, with the times you will do those activities, or the order of your activities.

Visual schedules help you remember what you need to do, right now, and help to remind you of what is coming next.

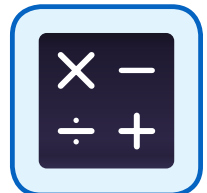
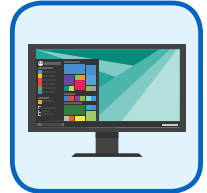
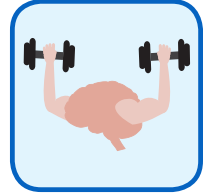
Your visual schedule could be a list, a chart, or a series of cue cards.

You could also use **pictures** instead of words to show your activities, or colour coding to help you remember your subjects.

Place your visual schedule where you can see it all day.

Here is an **example** of a visual schedule:

9:00 am	arrive at school gather supplies
9:15 am	Brain warm-ups
9:30 am	English
10:15 am	Break
10:30 am	Computer
11:00 am	English
12:00 pm	Lunch
1:00 pm	Brain warm-ups
1:15 pm	Math
2:00 pm	Break
2:15 pm	Review
3:00 pm	Pack up + home



3/ Tips for using to-do lists

To-do lists are lists you make of items or jobs you need to remember.

To-do lists can help you plan a task, step by step.

For example, I want to paint my kitchen chair. I will make a to-do list for all the things I need to do to get ready to paint the chair.

To-do:

- go to the hardware store to buy:
 - sandpaper
 - paint
 - paint brush
- find old rags
- find newspaper for the floor
- sand the chair with sandpaper
- wipe off with rags



To do lists can help you remember things you need to do.

Try it:

My to do list for _____

-
-
-
-
-
-
-
-
-
-

4/ Tips for using checklists

Checklists are like to-do lists. You can use them to check that everything you need to do is complete.

Checklists use boxes for checkmarks to check off when one part of a task is complete.

For example, I can list the things my paper will need before I hand it in.

Example checklist for my paper:

- thesis statement
- 3 examples:
 - 1 example + explanation
 - 1 example + explanation
 - 1 example + explanation
- concluding sentence
- my name and date
- cover page



Checklists can help you remember everything you need.

Try it:

My checklist for _____

-
-
-
-
-
-
-
-
-
-

5/ Tips for improving concentration

Concentrating on a task can be a challenge.

Here are some tips to try for increasing your concentration.

Before starting a task

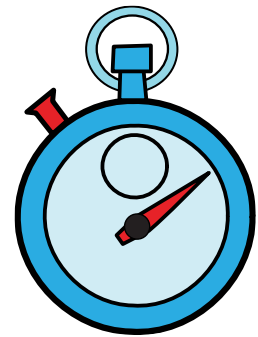
Prepare the work space:

- clear away other work
- gather everything you need: pen, notes, book, water, etc
- review what you need to do
- divide the task into small chunks
- make a checklist of the steps you will take to complete the first chunk
- set a timer or decide how long you will work and when you will take a break



Prepare yourself:

- put away distractions
- sit quietly for a few moments
- take 5 slow deep breaths, in through the nose and out the mouth
- tell yourself you can do it
- pick one short task to begin



For distractions in the class

- take 5 slow deep breaths, in through the nose and out the mouth
- count silently to 10
- re-focus on your work
- pick one short task to accomplish
- do one short thing to get started on that task, such as writing the date on your page

For distractions from life situations outside the class

- remove distractions such as a cell phone
- sit quietly for a few moments

- imagine the situation you are thinking about can be put inside a large bag
- if there are several situations, you can use several bags
- these items can be safely left in the bags for later
- in your imagination, tie the bags and put the bags aside
- later when you are finished what you are doing, you can untie the bags and think about these items again

When you still have trouble concentrating

write down what is happening:

I can't concentrate because ...

- fix any problems that can be fixed
- review your checklist and break the items into smaller chunks
- take a short, physical break – stand up, take a walk
- OR
- switch activities and return to this one later

6/ Tips for handling stress in class

Stress is a natural part of learning.

Stress can come from:

- trying new things
- not knowing what will happen next
- having your work marked and receiving feedback
- due dates
- writing tests



The stress of having to complete a task by a certain day can be good because it reminds you to work on the task.

But too much stress can make you too anxious to complete the work you need to do.

Here are some tips for handling stress in class.

Before starting a task:

- sit quietly for a few moments
- take 5 slow deep breaths, in through the nose and out the mouth
- tell yourself you can do it
- imagine yourself working on the task with success
- pick one short task to begin
- write down what you will do first (or, make a checklist)

First I will ...

When you feel “stuck:”

- count slowly and silently to 10

- take 5 slow deep breaths, in through the nose and out the mouth
- look at your work and find the place where you got stuck
- read the question or problem again – it might seem clearer
- ask for help if you need it

When you hand in an assignment:

- hand in a first draft – this step can help you find out if you are on the right track
- ask the instructor when your work will be marked
- have another task ready to do while you wait for your work to be marked
- remind yourself that you worked hard
- imagine getting positive feedback on your work
- use the instructor’s feedback to improve the assignment

When you have many tasks to do:

- make a list of the tasks
- figure out when each task has to be completed (what is the deadline?)
- using a calendar, mark the times the tasks need to be complete
- starting today, write in times when you will work on each task
- ask for help or more time if you need it

When stress from life situations outside the class make it hard to work:

ask yourself what you are anxious or worried about

I am worried about ... _____ _____ _____

- try to write in one sentence

For example, you might write: “I am worried about my daughter because she went to school not feeling well.”

- think about whether you can do anything to feel better

For example, could you call the school to check on your daughter?

- if there is something you can do, decide when you will do it (for example, on your next break)
- if there is nothing you can do right now, make a plan for what you will do later (for example, after class)
- use strategies to concentrate like breathing slowly in and out or counting to 10
- pick one short task to work on – sometimes getting started on one task can help you stop thinking about worries

When you feel nervous about taking a test:

- think about breathing in and out calmly
- remember that you will probably know more about some questions than others – it’s normal to remember some things more clearly
- look through the test, and answer the questions you feel most sure about
- now look at the questions you are less sure about
- if you feel “stuck,” count slowly to 10 and think about breathing in and out calmly

try jotting down whatever you can remember from studying

What I can remember is: <hr/> <hr/> <hr/> <hr/>
--

- look at the questions again and see if you can answer anything from the notes you jotted down
- always read back through what you’ve written – you might correct errors or think of more to add

7/ Tips for test-taking anxiety

Taking a test can be stressful for anyone. But some people feel very anxious when they take a test.

If you are one of those people, you might feel very afraid before a test.

- you might feel sweaty, shaky, or sick
- your heart might race
- your mind might go blank

These reactions are helpful when there is real danger we need to run away from.

But we can get these reactions even when there is no real danger.

If you feel very anxious before taking a test, you will need to learn to calm yourself.

The good news is that learning to calm yourself is something you can do. It will take practice.

Here are some ideas for learning to calm the reactions caused by test-taking anxiety.

Practice what you will need to do on the test:

Create study strategies that help you study what you need.

Often people study by reading their notes or their textbook.

But on your test, you will not simply be reading.

It can help to practice the exact tasks you will have to do on the test, for example, answering questions by writing out the answers.

Study strategies:

For tests where you will pick an answer such as true or false, or multiple choice:

- find the main topics you need to know
- cover your book and describe the main topics aloud
- if there is a list of points to know, repeat the list to learn it
- try numbering the main points to remember them: 1, 2, 3
- memorize key words that help you remember main points



- make up questions and answer them
- have someone else ask you questions from your notes

For tests where you will write your answers in sentences:

- find the main topics you need to know
- cover your work and describe the main topics aloud
- practice jotting down what you know in point form
- practice looking at what you jotted and writing it out in sentences
- make up questions and answer them in writing

You could also ask your instructor for practice questions to try.

Before the test:

Take good care of yourself:

- try to get to sleep on time the night before
- eat a healthy breakfast
- avoid too much sugar or caffeine (tea, coffee) because they can make you more anxious
- get some exercise (such as a walk) an hour before the test
- take 5 slow deep breaths, in through the nose and out the mouth

Listen to your thoughts and use positive self-talk:

- notice negative words you might be saying to yourself, such as “I’m going to fail”
- say to yourself
 - No, those aren’t the words I want. I’m going to replace those words.
- think of positive words you can say, such as
 - I can do this
 - I am ready for this test.
- repeat the new words to yourself
- avoid thinking you will either “ace” or “bomb” the test – instead tell yourself you will do what you can

During the test:

Remind yourself that there is no actual danger:

- notice what is really happening:
 - you are sitting in a chair
 - the test is a piece of paper
 - you are safe
- say to yourself:
 - I am safe.
- think about a place that relaxes you (such as the beach)
- this is your happy place

go there in your imagination



My happy place is

- take 5 slow deep breaths, in through the nose and out the mouth
- think about what you will do after the test is over

Concentrate on what you can do, not what you can't do:

- remind yourself that things rarely go perfectly
- remember that you will probably know more about some questions than others
- it's normal to remember some things more clearly

Read the questions:

- look through the test
- start with a question you feel sure you can answer
- answer a question, then read the question again
- does your answer make sense?

- check and count: if the question asked for two items, did you answer with two items?
- repeat the above steps and answer all of the questions you feel most sure you can answer
- now look at questions you're unsure about, pick one, and read the question carefully
- ask yourself, what is the question asking?
- if you're still not sure, answer the question by writing down any information you know about that topic

If it is a true or false, or multiple choice test:

- cover up the answers and read the question
- think of your answer first
- look at the answers
- there may be 2 answers that are almost the same – that's OK
- pick the **best** one
- if you don't know, make a guess
- always answer the question because you might be right!

If it is a test where you will write your answers in sentences:

- read the question
- think of what you know about the question
- jot down what you know in point form
- write your answer using what you jotted down
- if you can't answer the question exactly, write everything you know about that topic

If you feel “stuck:”

- stop
- take 5 slow deep breaths, in through the nose and out the mouth
- jot down whatever you can remember from studying
- look at your answers again and see if you can add anything

When you think you might be done:

- go back and answer questions you were not sure about
- always answer every question, even if you are not sure, because you might be right!
- always read back through what you've written – you might correct errors or think of more to add

After the test:

- congratulate yourself:
 - Wow, it was stressful but I did it.
- tell yourself it will be better next time:
 - With practice, taking tests is getting easier.
 - Next time will be easier.
- notice negative self-talk such as “I failed” and replace it
- say to yourself:
 - I did my best.
 - I did a great job.
 - I'm proud of myself.
- notice you are safe
- imagine getting a good grade

Get some exercise (such as a walk) to release stress.

8/ Tips for relaxation

Life can be stressful!

- we as people have a lot to deal with every day
- stress can make everything more difficult to do

Why do I need to know about relaxation?

- learning tips for relaxation can help you in school, work, and life
- relaxation can help us get more work done, and do a better job

Here are some tips to try to find ways to relax quickly and get focused for a task.

Put away distractions:

- messages can be stressful
- put away your cell phone or move away from the computer

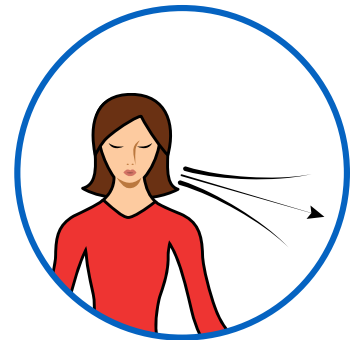


Breathe:

- take 5 slow deep breaths, in through the nose and out the mouth

Sit quietly and notice what is happening with your body:

- think about each part of your body – are you tense?
- take time to relax your muscles, one part of your body at a time
- if your muscles don't relax right away, try tightening and loosening them



- ✓ forehead
- ✓ jaw
- ✓ shoulders
- ✓ back
- ✓ arms
- ✓ hands
- ✓ chest
- ✓ stomach

✓ legs

✓ feet

Think about a place that relaxes you (such as the beach):

- this is your happy place
- go there in your imagination

My happy place is

Try meditation:

- meditation means relaxing your mind and thoughts
- it doesn't mean you will stop thinking

Try these steps to meditate:

- ✓ sit quietly
- ✓ pay attention to your breathing
- ✓ if you find your mind wandering, bring your attention back to your breathing
- ✓ take slow deep breaths, in through the nose and out the mouth

OR

choose a word to focus on, such as "sun" or "moon"

My word is:

- ✓ repeat the word in your mind each time you breathe out
- ✓ take slow deep breaths, in through the nose and out the mouth

Imagine putting your worries away:

- imagine your worries can be put inside a large plastic bag
- if there are several worries, you can use several plastic bags
- you can safely leave these items in the bags for later
- in your imagination, tie the bags and put the bags aside
- later when you are finished what you are doing, you can untie the bags and think about these items again

If you still feel anxious:

- take a short, physical break: stand up, take a walk
- OR
- start a task and try relaxation again later

9/ Tips for using a mantra

What is a mantra?

- a mantra can be a message to yourself
- a mantra can be words you choose to repeat to relax or to focus

Why do I need a mantra?

A mantra can help you:

- get started
- feel confident
- stop negative thoughts

How to make a mantra:

- choose a situation that you find challenging, such as writing a paragraph, taking a test, or having a job interview
- think of yourself as your own cheerleader
- what words would your cheerleader say?



Try these mantras:

- I can do this.
- I know how to do this.
- This is a piece of cake.

Make your own mantra:

My mantra is:

Try repeating your mantra over and over:

- repeating gives you something to focus on
- repeating makes your mantra seem true

- repeating blocks out negative thoughts

Use your mantra for relaxation or meditation:

- meditation means relaxing your mind and thoughts
- it doesn't mean you will stop thinking

Try these steps to meditate:

- ✓ sit quietly
- ✓ take slow deep breaths, in through the nose and out the mouth
- ✓ pay attention to your breathing
- ✓ if you find your mind wandering, bring your attention back to your breathing

OR

choose a word to focus on, such as “sun” or “moon”

My word is: _____

- ✓ repeat the word in your mind each time you breathe out
- ✓ take slow deep breaths, in through the nose and out the mouth

10/ Tips for using positive self-talk

What is self-talk?

- self-talk is the words you say to yourself inside your mind
- everyone has words they say to themselves

Why do I need to know about self-talk?

- you can use positive self-talk to help you in school, work, and life



Here are some tips to try to create positive self-talk:

1. Listen for your self-talk voice:

- this voice might sound like someone else's voice, which is normal because we are used to hearing others' voices
- words you hear in your mind are actually you talking to yourself
- ask yourself: does your self-talk voice say positive things?

2. Choose some positive words for your self-talk voice to say.

- everyone has words they say to themselves – that's normal
- you might notice your self-talk words are negative or positive
- you can choose positive words for your self-talk voice to say

For example, here are some positive words to try when working on a task:

- I can do this.
- I am learning to be good at this.
- I have everything I need to finish this task.
- I learn from my mistakes and get better as I go.

You can choose your own positive words, too.

Write your positive self-talk here:

Repeat your positive self-talk in your mind.

3. Replace negative self-talk with positive self-talk:

- try to notice when your self-talk voice says something negative
- when you hear negative words, replace them with positive words

You can even say to yourself:

- No, those aren't the words I want.
- I'm going to replace those words.

Then repeat the positive words you have chosen. Try it:

Replace these words:	With positive words (you can write your ideas here):
<input type="checkbox"/> I can't do it.	
<input type="checkbox"/> I'm going to fail.	
<input type="checkbox"/> I'll never finish this task.	
<input type="checkbox"/> I'm always making mistakes.	

If you need help, ask your instructor.

4. Repeat the steps until the positive words become a habit.

Sometimes positive self-talk feels uncomfortable because you aren't used to it:

- using certain words can become a habit
- at first it might be hard to train your mind to say positive words
- with practice, you will begin a habit of positive self-talk

5. Enjoy the benefits of positive self-talk.

With practice, positive self-talk can help you:

- positive self-talk helps us feel confident
- positive self-talk helps us succeed at completing tasks

11/ Tips for time management

Time! We all need more time. One way to have “more time” is to make good use of the time you have. Time management means planning ways to use your time best.

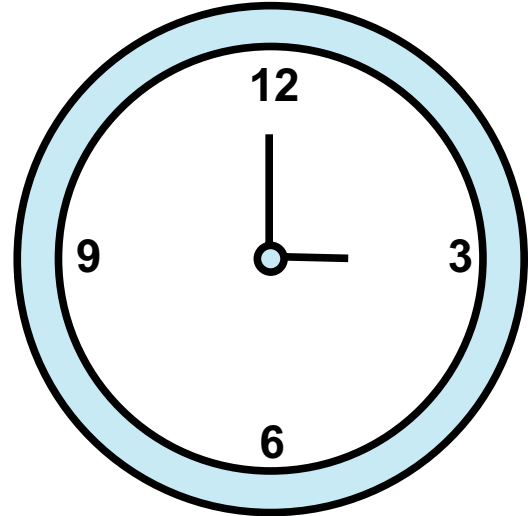
Some tips for time management:

- **Make a to-do list:**

Making a list helps you realize all the things you want to get done.

Here is an example:

- go to the hardware store
- pick up milk
- help Joseph with homework
- clean the kitchen



- **Decide how much time each item on the list will take:**

Knowing how much time a task will take is a skill we learn.

The first time you complete a task, you can't know in advance how much time it will take, but you can guess.

Keep track of the time it really takes to complete the task. Now you know for next time.

Here is an example:

- go to the hardware store (1 hour)
- pick up milk (15 minutes)
- help Joseph with homework (1 hour)
- clean the kitchen (30 minutes)

Don't forget to include the time it takes to travel from one place to another.

- **Look at the clock and plan your day out, step by step:**

You can use your to-do list to plan what time you will do each thing.

Here is an example:

- 1:00 pm Go to the hardware store (1 hour)
- 2:00 pm Pick up milk (15 minutes)
- 2:15 pm Go back home (15 minutes)
- 2:30 pm Clean the kitchen (30 minutes)
- 3:00 pm Help Joseph with homework (1 hour)

Do you see what changed?

The person who made the list changed two things. What were they?

The two things they changed were:

1.

2.

Answers on the next page.

Answer key:

The two things the person changed on their to-do list were:

1. The person made sure there was time on the list to go home after shopping.
2. Since Joseph does not get home from school until 3:00 pm, they decided to clean the kitchen while waiting.

Making a plan for time management can help you have more time to do things later.

- **Plan your time to avoid procrastination:**

Do you know what the word **procrastination** means?

Procrastination means to put things off for later that it might be better to do now.

For example, the person who made the list might say:

- I could clean the kitchen right now. Instead I'll just sit here and wait for Joseph to get home.

Time management can help with procrastination.

When you plan your day, you can get more done, and get things done on time.

You might find you have more “free time.”

- I have time between shopping and when Joseph comes home. I could clean the kitchen then and have free time later.

You can also use time management to:

- plan your week or month
- plan your school day
- plan when you will work on a school assignment

Here is an example:

Monday	<ul style="list-style-type: none">• read the article for the assignment
Tuesday	<ul style="list-style-type: none">• make jot notes
Wednesday	<ul style="list-style-type: none">• write a first draft
Thursday	<ul style="list-style-type: none">• hand it in and get feedback
Friday	<ul style="list-style-type: none">• make changes and finish

How can you use time management?

You can use this chart to plan your day or week:

Day/Time:	Activity:

12/ Tips for improving memory

Memory is like a muscle. It needs to be exercised.

Memory games can help you learn ways to use your memory.

Try it:

- put 5 to 10 small items on a plate and try to memorize what is there
- cover the plate with a towel and try to remember what is there
- look to see if you were right
- now try a method for memorizing – in your mind, group the items by:
 - ✓ colour
 - ✓ size
 - ✓ what they are used for



Which method of remembering works best for you?

You can also try this game with letters, numbers, or playing cards.

And, you can try memory games online.

Playing memory games can exercise your memory muscle and increase your memory skills.

Memory is like a filing cabinet. Your mind stores memories using a system similar to drawers and folders.

Drawers in your filing cabinet might be years or decades. Folders might be experiences in your life.

Try it:

- think back to a certain time in your life
- imagine a room you spent time in and imagine yourself there
- look around – what do you see?
- think of one thing in that room: a piece of furniture or an ornament
- can you think of other things that were nearby?

Sometimes one memory seems to lead to another. That's because those memories are in the same folder.

When we open a folder, we might see everything inside, not just one thing.

You can create memory folders:

You can attach one memory to another so they are both easier to recall.

Try it:

- ✓ you want to remember that the next Olympics is in Tokyo
- ✓ you want to remember that Tokyo is in Japan
- ✓ you want to remember that Japan's flag is white with a red dot

Take a few moments to think of these three things together: Tokyo, Japan, white with a red dot.

You can also write them together, or draw the flag and write the words in it.

The three things are now connected together in a memory folder.

Another day, try to remember where the next Olympics will be (Tokyo). You may find you can also easily remember Japan, and the colours of the Japanese flag.

Memory can be used in the same way we use sticky notes.

We use a sticky note in a certain place to remind us to do something.

For example, we might put a sticky note on an assignment to remember something to add later.

We can make “mental sticky notes” too:

Try it:

- next time you are going out, tell yourself that when you reach for the door handle, you will remember your umbrella
- picture yourself reaching for the door handle and stopping
- you know you must remember something
- it is your umbrella
- think through this action a few times: door handle, umbrella

See if your mental sticky note works.

You can also use an object placed somewhere unusual:

- let's say you are already in bed and you remember that you need to take your umbrella in the morning
- take an object nearby and place it on the floor: a pillow, a tissue

- say to yourself, this object will remind me to get my umbrella when I wake up
- repeat the idea a few times

See if your mental sticky note works.

You can use mental sticky notes to help you remember appointments or information for school:

Try it:

Think of something you want to remember. It could be an appointment,

I want to remember:

something you need at the store, or a fact for a test.

Now choose a place or an object to be your mental sticky note. It could be the

My mental sticky note will be:

door, your purse or book bag, or your shoes.

Now put the two things together:

When I see:

I will think of:

See if your mental sticky note works.

13/ Tips for using mnemonics

Mnemonics (New-mon-icks) are devices to help with memory.

For example, the mnemonic **BRAT** helps you remember foods to eat when you have an upset stomach:

B – bread

R – rice

A – applesauce

T – toast

There are several types of mnemonics you can use to help remember.

Chunking

- break information into groups of 3 or 4

For example, you can remember Canada’s provinces more easily if they are chunked into groups of three:

Newfoundland	PEI	Manitoba
New Brunswick	Quebec	Saskatchewan
Nova Scotia	Ontario	Alberta

And one more, British Columbia.

Association

- associate the thing you want to remember with other things you know

For example, when spelling our provinces, New Brunswick has the word “wick” like a candle wick. Saskatchewan has the word “chew” in it.

Stories

- make a story or poem to remember information

For example, if I went on a trip across Canada, I might:

Go for a **run** in New **Brun**swick,

Find **new** land in **New**foundland,

But no **Scots** in Nova **Scot**ia.

Peek into **PEI**,

Ask **questions** in **Que**bec,

Tarry in Ontario.

Talk to a **man** in **Manitoba**,

My **sassy** sister in **Saskatchewan**, and

My friend **Al** in **Alberta**.

By the time I get to **BC**, I'd **be ... collapsing!**

Acronyms

- use the first letters of words to remember a group of facts

For example, the acronym **SAM** can help you remember the prairie provinces:

S – Saskatchewan

A – Alberta

M – Manitoba

Try it:

What is an acronym for the capital cities of Canada, the US, and Britain?

Your answer here:

Answer key: OWL: Ottawa, Washington, London

14/ Tips for using constructive feedback

We don't start out doing things perfectly. We get better with practice.

When you're in school, your instructor will give you ideas for what you can do to improve your work.

These ideas are called **constructive feedback**.

Here are some tips to try for receiving and using constructive feedback:

Make a first draft.

A first draft is your first try at an assignment.

Your first draft is not your final try.

Ask your instructor for constructive feedback.

Your instructor will look at your first draft and tell you what things look good, and what things could be improved.

These suggestions are called **constructive feedback**.

These suggestions don't mean you did a bad job.

Asking for **constructive feedback** helps you to learn to make your work even better.

Listen to the constructive feedback and make notes.

It can be hard to hear that your work needs to be improved.

Sometimes these suggestions can make people feel anxious and they forget what was said.

When you receive constructive feedback, make notes about what to do.

If you need help with making notes, ask your instructor.

If you don't understand the suggestions, ask the instructor to explain them again.

Use the constructive feedback to make changes to your first draft.

Take the suggestions from your instructor and make changes to your work.

For example, if your instructor said your paragraph needs more points, you can add sentences with more information and examples.

You will probably have to re-write your first draft. This is normal.

Re-writing your first draft helps you learn to take what you've done and improve on it.



Hand in your work again and ask your instructor for more feedback.

You might have to repeat this step more than once. This is normal.

Getting more suggestions helps you learn what could improve your work for next time.

Learn to give constructive feedback yourself

Now that you know how constructive feedback works, you could learn to give constructive feedback, to:

- yourself
- someone else

****Always ask if it's OK before giving someone constructive feedback.**

Here are some ideas for how to give constructive feedback.

First, find what was well done. Pick out **3 things** you thought were well done.

3 things that were well done: _____ 1. _____ 2. _____ 3. _____
--

Think of one thing that could make the work even better.

For example, for a paragraph, could it be better if there was:

- ✓ more information?
- ✓ examples?
- ✓ shorter or clearer sentences?

When you give feedback, say 3 things that were well done for every 1 thing that could be even better.

1 thing that could be even better: _____ _____ _____

For example:

- I really liked the interesting words in this paragraph.
- I liked how the words painted a picture for me.
- I got interested in the topic because I could picture it in my mind.
- There was one sentence I didn't quite understand which could be even better if it was clearer.

Talk about the work, not the person. Avoid using “you.”

For example:

Say:

- This paragraph could be even better with more information.

Don't say:

- You should put more information in your paragraph.

Learning to give constructive feedback makes it easier to receive constructive feedback.

15/ Tips for social skills practice

It might sound strange that we need to practice social skills. But these skills are learned, and like anything we learn, it helps to practice.

Social skills are important to life, school, and work. If you work with people, social skills can help you get, and keep, a job.

There are several ways you can practice social skills.

Listening

Listening requires concentration and skills. Sometimes we don't hear what the other person is really saying. Learning listening skills can help.

Good listening is a skill that we can all practice.

Tips for good listening:

- sit or stand in a position that shows you are ready to listen (arms at your sides not crossed, movements at a minimum)
- make eye contact for at least part of the time
- don't think about what you need to say – just listen
- you can nod or smile, but try not to interrupt
- repeat what the person said to be sure you got it right
 - What I heard you say is ...
- listen for what might be most important in what they are saying

Good listening shows you are interested, or that you care.

Body language

We communicate with our bodies and faces, not just our words.

It can be helpful to think about what your body language messages you are giving.

For example, you might be frowning and not realize it. Another person might take your frown to mean you disagree with what they are saying.

Tips for body language:

- keep an open body posture (arms at your sides, not crossed, relaxed, or you



can move your hands as you talk)

- when working with others, keep a half-smile or a neutral expression
- make eye contact for at least part of a conversation
- nod and smile if appropriate
- mirror how the other person is standing or sitting – it can help them feel you are making a connection (for example, sitting straight in the chair if they are)

Your body language can help show you are open and friendly when meeting or working with others.

Social cues

Social cues are things we say and do that tell others what we might be thinking, or what we want.

They can be words or body language messages.

For example, if you want to talk to someone standing across a crowded room, you might make eye contact and wave them over.

People use too many social cues to list them all, but here are a few that can help when working with others:

- pay attention to others' body language

Watch others' facial expressions and movements to find clues to what they want. For example, if someone wants to ask you a question at work, they walk toward you and smile or make eye contact. You can also ask if you are unsure:

I think you were trying to get my attention. How can I help?

- pay attention to how much you talk and how much you listen

People usually want a conversation to be balanced between two people. They might indicate with a non-verbal message when they want to say something.

When you want to say something while another person is talking, you can use non-verbal messages to let them know, such as nodding, raising a hand, or parting your lips as if ready to speak.

- pay attention to tone of voice

Think about your tone of voice when talking to others. Listen for others' tone of voice.

Tone of voice describes the way a person uses their voice to help them communicate words. They might make their voice high or low, soft or loud:

- a softer tone may be used to communicate privately
- a louder tone is usually used to get someone's attention
- a low tone might be used to give instructions or directions
- a higher tone at the end of a sentence is usually used to ask a question
- a high tone might be used to gain someone's attention, ask for help, ask a question, or tell someone they did a good job

Paying attention to social cues, and noticing our own social cues, takes practice. It can help to be aware of the social cues you are sending out to others, and those they are sending to you.

What is one social cue you have noticed recently?

One social cue I have noticed is:

16/ Tips to solve a problem

Everyone runs into problems sometimes when working on a task.

You can try these steps to help solve a problem.

- you can check the boxes when you have completed a step
- you can write your answers in the boxes provided

Step 1. What is the problem? (checkmark items as you go)

- take 5 slow deep breaths, in through the nose and out the mouth
- ask yourself: what is the problem?
- in your mind, put the problem in a sentence
- write your sentence in the box below



The problem is ...

Step 2. Why is the problem happening?

- in your mind, repeat the sentence you made in Step 1
- ask yourself: why is this problem happening?
- put the reasons why in a sentence – there might be more than one reason
- write your sentence in the box below
- number the reasons

The problem is happening because ...

1. _____

2. _____

3. _____

Step 3: What could fix the problem?

- in your mind, repeat the sentence you made in Step 2
- ask yourself: what could fix the problem?
**you can look at the reasons in Step 2 to help you
- think of ideas to fix the problem (any ideas are good ideas – you will have time to choose the best ones later)
- make a list of your ideas in the box below

What might fix the problem? List any ideas you have:

- 1.
- 2.
- 3.

Step 4: What can I do?

- in your mind, repeat your list from Step 3
- give yourself time to think through the ideas and how they will work
- ask yourself: which ideas might work best? Why?
- write your ideas in the box below

The best ways to fix the problem would be ...

1.
because ...
2.
because ...

Step 5: Make a plan.

- in your mind, repeat your best ideas from Step 4
- make a plan for **how** you will do those things, step by step
- make a plan for **when** you can do those things – use a calendar if you need it

- write your plan in the boxes below

To fix the problem, I will ...

step 1.

step 2.

step 3.

Today I will ...

Tomorrow I will ...

Step 6: Follow your plan.

- look at the steps you created in Step 5
- complete any steps you can do right now
- look at the steps every day and follow your plan
- check your steps off in the box below

step 1 complete

step 2 complete

step 3 complete

Step 7. Check that the problem is fixed.

Ask yourself: is the problem fixed? Choose one column below and fill in your answer.

<input type="checkbox"/> yes I know the problem is fixed because ...	<input type="checkbox"/> no I know the problem is not fixed because ...
---	--

Step 8. If the problem is not fixed, try these ideas.

Ask yourself: Did I follow my plan?

Choose a column below.

<input type="checkbox"/> Yes, but the plan did not work because:	<input type="checkbox"/> No, I could not follow the plan because ...
--	--

- Think about what could still fix the problem.

Choose one idea below:

- I still need to follow my plan.
 - OR
- I need to make changes to my plan.
 - OR
- I need to make a new plan.

To make changes to your plan, or to make a new plan, repeat the steps again, starting from Step 1.

Sometimes you have to try more than one way to solve a problem.

If the problem is not fixed, repeat the steps using new ideas.

Ask for help if you need it.