

## Section 1: INTRODUCTION

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**A majority of children and young people with hemiplegia attend mainstream schools, but their success depends to a large extent on how much understanding they meet there. And since understanding depends on information, we are attempting to arm you with the information you need, whether you teach PE, where the student's difficulties will be obvious, or, for instance, French, where they may not be.**

### **WHAT IS HEMIPLEGIA?**

Childhood hemiplegia is a condition affecting one side of the body (Greek 'hemi' = half). We talk about a right or left hemiplegia, depending on the side affected. It is caused by damage to some part of the brain, which may happen before or during birth, when it is known as **congenital hemiplegia**, or later, in which case it is called **acquired hemiplegia**.

### **What are the main effects?**

It is difficult to generalise: hemiplegia affects each person differently. The most obvious result is a varying degree of paralysis and lack of control in the affected side of the body.

The person may have little use of one hand, may limp or have poor balance. The physical weakness may be very obvious, or so slight that it only shows when attempting specific physical activities.

### **Additional difficulties**

Many children and young people with hemiplegia suffer from added, 'invisible' difficulties, such as visual defects, perceptual problems or specific learning difficulties, or emotional and behavioural problems, which can be more frustrating and disabling than their physical ones.

### **School life**

Many students will integrate very well at school, others may have various difficulties from time to time. Common sense and experience will see you through most of these, but we hope this leaflet will help address a few specific difficulties which may crop up.

School ethos and attitudes are also critically important. The student will find it much easier to cope with both physical and learning difficulties if he or she feels secure and integrated in school life.

On-going problems can also, of course, be talked through with the student and his or her parents; they have probably been coping with hemiplegia for many years, and may have developed strategies for dealing with most problems.

## **GETTING AROUND SCHOOL.**

Having hemiplegia means having limited use of one arm and hand and possibly poor balance and coordination. This can cause difficulties in various areas.

### **Problems:**

- Opening doors
- Climbing stairs
- Carrying a heavy schoolbag
- Carrying sports equipment
- Carrying a lunch tray

### **Suggestions:**

- Use of a locker
- Extra time to collect books between classes
- Help from other students

**In addition** some students have **visuo-spatial problems** and may have initial difficulties finding their way around the school.

**Clear signposting of rooms, laboratories etc. (with teachers' names) will help them.**

## **Section 2: MAIN CURRICULUM SUBJECTS**

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**This section is problems-based rather than subject –based, since in our experience students face the same problems right across the curriculum. Subject teachers should read both the ‘Practical Problems’ and ‘Learning Difficulties’ sections, and also the paragraph on examinations and testing on page 12.**

## **PRACTICAL PROBLEMS**

### **Seating :**

Students should

- Face the teacher
- Face the board or demonstration area
- Be away from the main aisle or door, to minimise distraction
- Have adequate space for affected arm
- Have unrestricted movement of dominant arm

### **Production of written material**

#### **Problems:**

- stabilising of paper
- drawing of graphs diagrams etc
- setting out of work
- poor coordination affecting
- handwriting

#### **Suggestions:**

- A4 is easier to manage than A5
- use of a keyboard can ease problems with
- handwriting and setting out of work
- blobs of “blu-tack” can help anchor paper
- loose leaf notebooks or sheets attached to clipboards
- may be easier to manage than exercise books
  
- A magnetic board, used with
- rulers and geometry instruments
- also backed with magnetic strips,
- can help with drawing graphs,
- diagrams etc.

*(pre-prepared diagrams and graphs may also be helpful)*

- Extra time may be needed to complete tasks
- Tasks may be broken down into more manageable units

## **Practical Work**

### **Problems**

- Model making
- Conducting Experiments
- Cookery
- Technology
- Safety Factors (affected limb may have reduced sensitivity)

### **Suggestions**

- Pairing with another student
- Modification of equipment
- Extra time to complete tasks

**The student may feel more self conscious or clumsy during practical work, and may need encouragement to participate fully.**

## **Learning Difficulties**

This section addresses problems often associated with hemiplegia. Some of these may be specific learning difficulties, others, associated problems which nevertheless have an impact on school work.

Because of their physical limitations, most students with hemiplegia experience some difficulty and frustration at school, and may need a little more time and attention to achieve their full potential.

However, some young people with hemiplegia have general or specific learning difficulties which may be slight or severe, and which can be more frustrating and disabling than their obvious physical ones.

We cannot provide solutions for these problems, but we can offer suggestions on alleviating some of them, and draw attention to others so that advice can be sought from specialists and educational advisors in the appropriate area.

## **Short concentration span**

### **Problems:**

- Difficulty settling down to tasks
- Frequent lapses of attention
- Tendency to be easily distracted

### **Suggestions**

- Reconsider seating and position in classroom
- Break down tasks into smaller units

- Focus on short sessions of concentrated effort.

### **Short term memory problems**

#### **Problems**

- Poor retention of information or instructions
- Difficulty in sequencing a series of instructions or objectives

#### **Suggestions**

- Give clear instructions, written if necessary
- Give clear, written goals for all tasks, to help students develop personal organisational skills.
- Encourage student to draw up a work plan for each task.

**Many of the learning problems outlined above can be alleviated by the use of a computer.**

#### **Using a keyboard may:**

- Help students with poor handwriting skills
- Help develop the ability to present work effectively
- Help develop personal organisational skills
- Help dyslexic students correct spelling

**If the student has a Statement of Special Educational Needs (SEN) it may be possible to obtain funding for a laptop or alternative writing aid from your LEA. Another possible source is CENMAC (see back page), who will assess any student, whether statemented or not.**

### **Visual Perception and Spatial Awareness**

#### **Problems**

- Orientation within the school
- Reproduction of maps and charts
- Copying texts and sequences of numbers
- Setting out of work on the page
- Production of 3 – dimensional models
- Working with computer programmes involving mazes or puzzles

#### **Suggestions**

- Seek professional advice from School Support Services or Educational Psychologists

### **Specific Learning Difficulties**

Some young people with hemiplegia are dyslexic, others have problems with maths

**Suggestion:**

- Seek specialist advice

**See also paragraph on computers (above).**

**Statementing**

The student may already have a Statement of Special Educational Needs. If not, it may be appropriate for him or her to be assessed at this stage.

**Examinations and testing**

Provision exists within regulations for GCSE and SATS testing for students with special needs to have extra time and/or other appropriate help, e.g. use of extra equipment or a keyboard, **provided the Examination Board or Authority is notified in advance.**

**Teachers should refer to:**

**GCSE Examinations: Special Arrangements and Special Consideration (Guidance for Centres) and other relevant publications**

(See page 19 for titles and publishers)

**Section 3: PHYSICAL EDUCATION AND SPORT.**

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**This is an area where student's physical disability cannot be hidden or shrugged off, an environment which is by definition competitive and where hemiplegia is an obvious disadvantage.**

**Many of the young people questioned for this leaflet stressed how demoralising it was always to finish last, always to be picked last. And yet physical fitness is, if anything, more important for people with disabilities than for their able bodied peers.**

**Problems:**

- Poor balance
- Weakened of affected limbs
- Visual impairment
- Fatigue
- Self-consciousness
- Poor hand eye coordination

**Suggestions:**

- Flexibility of approach, e.g. head starts, development of underarm serving techniques
- Development of skills in weak areas, e.g. hand-eye coordination, balance, weight-bearing
- Encouragement to try new sports e.g. sailing, fencing, contact sports
- Extra time for dressing/undressing

**Section 4: MUSIC**

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**Certain musical instruments are more suitable than others for students with hemiplegia**

- **Cornet**      **Trumpet**
- **Horn**        **French Horn**
- **Trombone**   **Euphonium**

If the weaker hand cannot support, slings and stands are available through Remap-BG (see page 19)

**Piano & Keyboard**

There is a good deal of music for one handed players. On a keyboard the “good” hand can play the melody and additional part can be programmed in.

**Violin Viola Guitar**

Stringed instruments can be re-strung for either left or right handers, the weaker hand being used for bowing or strumming.

**Percussion**

Many percussion instruments can be played with one hand or hands of differing strength

**Section 5: GROWING UP WITH HEMIPLEGIA**

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Adolescence is a difficult enough time for anyone: for someone with a disability it is even more difficult. As physical appearance (one’s own and other’s) becomes more important, looking different, wearing special shoes or a splint, or appearing clumsy, can all affect the students sense of wellbeing at school. He or she may face teasing or bullying, or may find it hard to make friends.

***Recent research has shown that children and young people with disabilities of neurological origin, including hemiplegia, are more than usually susceptible to behavioural and emotional problems.***

They often, for example, suffer from poor self image and lack of confidence. All this, coupled with the physical and learning difficulties outlined above, can make school a very stressful place for the student. This stress can show in different ways – one person may become withdrawn and anxious, another may try to survive in a hostile environment by adopting an aggressive or over-independent stance.

***Schools need to be aware of these factors in their response to a student with a disability such as hemiplegia. Whole school support from teachers and fellow students is vital if the student is to fulfil his or her potential***

It is important to strike a balance between under and over reacting, to create a safe environment where the student can ask for help without losing face, or, equally, be challenged to reach heights he or she may not have dreamed of. Success even in one area can be an enormous boost to confidence.

Many parents will only be too happy to discuss any difficulties their child might be experiencing. Similarly, some schools have found it helpful for a parent to come and talk to staff before their son or daughter comes to the school.

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**These guidelines are based on information supplied to Hemi-Help by young people with hemiplegia, their parents and teachers. We plan to produce a series of more detailed fact sheets on some of the areas covered in this leaflet.**

**In all our literature for teachers we are keen to reflect not only the latest research in hemiplegia, but also the experiences of teachers themselves, so if you have any comments or suggestions to make sure we shall be very pleased to see them.**

**HemiHelp was set up in 1990 by a group of parents of children with hemiplegia. It aims to provide information and support for families where there is a child with hemiplegia, and to increase general awareness of the condition. As well as producing leaflets for parents and teachers, HemiHelp publishes a regular newsletter and runs frequent workshops for members. In the future we also plan to run workshops for teachers**

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Although great care has been taken in the compilation and preparation of this leaflet to ensure accuracy, HemiHelp cannot accept responsibility for any errors or omissions.

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