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Selected Methods in the Process of Teaching a Chronically Ill Child at the Early School Stage

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Abstract

The article discusses the definitions and models of chronic disease, and lists examples of diseases that are considered chronic diseases and fit into the classification of students with special educational needs. The role of chronically ill student in early school education and the goals that a teacher should set when working with a child are explained. The article contains considerations on selected methods of therapy for a child with a chronic disease.

Keywords: therapy, work as a teacher, chronically ill child, special educational needs

Introduction

Among students with special educational needs, chronically ill children can be distinguished. The term “chronic disease” is not unambiguous, as many researchers and specialists categorize and define this term differently in the literature. According to Maciarz (2001), the key characteristics of a chronic disease are:

- long duration, lasting more than four weeks;
- milder symptom intensity compared to the acute phase of the disease;
- the possibility of permanent, irreversible changes in the patient's body;
- chronic diseases require long-term medical care and the use of therapeutic and rehabilitation support.

According to Pilecka (2002), a chronic disease should be seen as a potential factor that changes the individual's and their family's previous situation, requiring changes in attitudes and behaviors from both the patient and their family members, which allow them to cope with this new and difficult life situation. The variety of definitions and the inability to develop consistent guidelines arise

from the fact that chronic diseases and their defining characteristics are strongly dependent on the individual's condition, the specifics of the disease's occurrence, and its type. They may be characterized by sudden onset, a slow process of initiating changes in the body, significant or only slight deterioration in health, a long period without symptoms, or a sudden worsening requiring hospitalization. Examples of chronic diseases include:

- cancer;
- respiratory diseases;
- obesity;
- diabetes;
- osteoporosis;
- epilepsy;
- autoimmune diseases;
- diabetes.

Models of Chronic Disease

Models of chronic disease help to understand what it means to adapt to life with specific limitations resulting from the presence of particular diseases in an individual. Their development is based on assumptions that explain the origin of the disease, its consequences, as well as the role and position of the sick person in society.

1. **Biomedical Model** – Focuses on the origin, course of the disease, prevention, and treatment. This model primarily refers to biological factors that determine how the student functions.

2. **Bio-psycho-social Model** – Assumes a holistic approach to both the disease and the patient, significantly expanding the structure of adaptation. It not only includes the negative consequences of the disease but also emphasizes the positive psychosocial aspects of human functioning. The student, as part of society, is subject to its influences. The person is treated as a system that functions in accordance with the principles of self-regulation and regulation.

3. **Cognitive Models of Disease** – These models focus on an individual's beliefs about the disease, its causes, consequences, their situation as a patient, and their future. Adapting to life with a chronic disease is viewed here as a process aimed at maintaining a positive self-image and worldview in the face of health-related problems (Plichta *et al.*, 2018, p. 159).

The Chronically Ill Child as a Student in Grades 1–3

Starting education at the early school stage is undoubtedly a stressful and significant change in the life of every new student. Changing schools, facing different requirements, and often leaving behind the preschool group and peers presents a considerable challenge for seven-year-olds, especially considering

that each child undergoes the adaptation process in a new environment in their own way. Taking all these aspects into account and analyzing the situation of a chronically ill child, we can infer that this may be an even greater challenge for them, as the limitations caused by the illness and the potential for exclusion from the peer group contribute to additional stress, reluctance, and fear of starting education at the early school stage. Particularly since not all children attend integrated schools, as, according to educational law, chronically ill children have the option of attending mainstream schools. Antoszevska (2020, pp. 60–64), as a way of fulfilling the school obligation or the duty to learn for a chronically ill child, suggests an approach tailored to the student’s health condition and the stages of the disease:

- attending primary schools in healthcare institutions;
- individual teaching;
- home education;
- mainstream primary schools.

According to the Act of April 12, 2019, on healthcare for students, the care of a chronically ill or disabled student in school is provided by a community nurse or a school hygienist. This care must be based on cooperation with the parents, the primary healthcare physician, the school principal, and the school staff. This cooperation includes determining the way the student is cared for, administering medications with the written consent of the parents, and adapting the student’s stay at school to their abilities and limitations resulting from the illness.

In the case of teaching a student with a chronic illness, the teacher is required, in order to achieve the most effective results in working with the student, to cooperate with the child’s parents, ensure the child’s position in the class, maintain a positive attitude and relationships with peers, and also adhere to the principles of working with a chronically ill child. These principles include, among others (Plichta *et al.*, 2018, p. 170):

- plasticity and complexity of action;
- the principle of subjectivity and individualization;
- minimizing unnecessary effort;
- therapeutic activation;
- functional reintegration and social rehabilitation;
- valuing the family environment.

Goals Set During Work with a Chronically Ill Child

When working therapeutically with a chronically ill child, the teacher should primarily focus on the goals that need to be set in order for the rehabilitation process to be meaningful and bring positive outcomes. The goals that the teacher should follow during their work with a chronically ill child include (Plichta *et al.*, 2018, p. 170):

- “Getting to know the chronically ill child, making them aware of the nature of their illness and the need to accept it;
- Increasing the child’s self-confidence and sense of self-worth;
- Raising awareness in the ill child and their family about the necessity and methods of ongoing treatment;
- Educating the child on what they can do on their own to reduce the effects of the illness;
- Adapting the environment so that the child can move independently (if they have limited mobility);
- Presenting content in a way that makes it fully accessible to the student;
- Adjusting educational and therapeutic goals to meet the child’s individual needs;
- Using activating methods and forms of therapeutic work;
- More frequent use of information technology in education (if the child has limited mobility);
- Organizing the student’s work time both in school and at home (taking into account necessary breaks) and understanding how much time it takes the child to complete individual educational tasks;
- Recognizing symptoms of poorer well-being (the teacher should know how to help the child);
- Encouraging the child to engage in frequent social interactions and make friends;
- Providing assistance in catching up with schoolwork missed due to absences;
- Offering opportunities for the child to demonstrate independence;
- Taking a holistic and multi-faceted approach to the problems and needs of the chronically ill child;
- Utilizing the body’s ability to compensate;
- Developing preserved skills;
- Adapting the family, school, and physical environment to the needs of the ill child;
- Helping the child adapt to the situation created by their specific illness;
- Teaching proper emotional regulation and boosting self-esteem;
- Encouraging the child’s active participation in treatment and rehabilitation”.

Selected Therapy Methods

Working with a child with special educational needs involves more than just teaching and conveying content that the child must learn. The work requires not only knowledge of the specifics of the illness and the ability to set goals for working with the child, but also conducting therapy that, when woven into daily

teaching activities, will help achieve results both in terms of academic progress and improvements in the emotional, psychological, and social aspects of the child's life. Working with a student requires constant searching and adapting the type of therapy to their abilities and needs, particularly during the early school education stage. When selecting the type of activities, the teacher must keep in mind that children at this stage are still primarily in need of play, and, considering their life and health situation, they need relaxation and a suitable way to release frustrations that may often accompany them. Here are some examples of therapy methods (Żelazkowska, 2016, pp. 223–232):

1. **Play** – Encourages taking part in joint activities, is a form of providing pleasure to the child, and is their natural form of activity. It allows for the development of prosocial behaviors, teaches active listening, observing, expressing one's own feelings, boosts self-esteem, and teaches the principles of healthy competition. Cooperation during play and the possibility of setting rules and guidelines fosters integration, showing that teamwork can be fruitful, enjoyable, and open to new ideas and solutions. Choosing appropriate games and activities helps meet the chronically ill child's need for positive interactions with their environment, overcoming difficulties, concentrating, and seeking new solutions.

2. **Artistic expression** – Develops skills of creative imagination, visual sensitivity, and motivates the child to express their own feelings and relieve tension. Between the ages of 9 and 12, chronically ill children often experience significant social challenges. In such cases, creating puppets and acting out dramas or scenes can help address the issues the child is currently facing.

3. **Fairy tale therapy** – Fairy tales break down shyness, teach expressing and discussing feelings through situations that are present in the story. There are many therapeutic books on the market that address problems in various contexts. By identifying with literary characters, students learn valuable patterns of behavior, social conduct, problem-solving strategies, and a new perspective on their own situation.

4. **Music therapy** – This form of therapy is considered one of the oldest. It primarily serves therapeutic and educational goals, aims to improve the self-image, develop motivation in children, and enhance skills such as motor coordination, auditory skills, and communication abilities. Therapeutic activities using music are enjoyable and relaxing for students, offering a means of releasing unwanted emotions, expressing oneself, and sharing their problems and emotional state through music.

Conclusion

The occurrence of a chronic illness in an adult or daily life with the awareness of limitations caused by the disease's consequences is burdensome for everyday functioning, pursuing education, or personal development. If being chronically ill is challenging for adults, we can only imagine how it affects children

living among healthy peers or family members. For a child with such limitations, establishing relationships with peers and attending a general education school largely depends on the child's health condition and on building a strong sense of self and belief in their capabilities.

A teacher working with a chronically ill child at the early school stage must step out of their comfort zone, overcome their internal barriers, and make an effort to transcend these challenges. Therefore, it is justified to state that their work cannot focus solely on teaching but must primarily involve supporting the child, integrating them into their environment, and implementing therapeutic activities that positively influence the child's social, physical, psychological, and emotional functioning.

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