

Center for Family Development

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Suggestions for Teachers Bipolar Disorder

What to say (and what *not* to say) to students with bipolar disorder:

Instead of: "I know you're not trying hard enough."

Say: "It looks like this is getting frustrating for you. Would you like some help?"

-Or-

"I know this is really hard for you right now. You're doing a good job. Maybe you need a little break from this assignment. I bet when you come back to it after you've had a break it won't be so frustrating."

Instead of: "I know you're not trying (or being lazy, not caring, etc.) because I've seen you do better work than this!"

Say: "I can tell you're having a tough day. I can see how hard you're trying and that it's just not coming together for you the way it usually does. It's okay to have a bad day. Let's try (mention a high interest or creative activity that would stimulate the student)."

Instead of: "I know you did that on purpose. I saw you, and now I'm going to make sure that you receive a punishment."

Say: "I'm concerned with what I just saw because (why). This would be a good time to use your behavioral management plan."

Instead of: "Why are you behaving like that? You're acting like a loser."

Say: "Hey, it looks like you need to calm down. Would you like to go to your "safe place"? Or would you like to draw or read (a favorite book) here in the classroom?"

Instead of: "Why did you just do that? You know better than that!"

Say: "Shoes are not for throwing," or "scissors are not for cutting the pages in your book."

Symptom: The student is experiencing increased thirst, frequent urination, drowsiness, sluggishness, and other side effects of medication.

Suggested accommodations:

- Permit the student to have unlimited access to water, juice, and other fluids.
- Permit the student to have unlimited access to a restroom.

- If the student needs to take medication at school, make sure it can be done privately, not in front of other students and staff.
- Inform all teachers and other school staff members who work with the student about how stomach pain, vomiting, and dehydration can be serious side effects for a student taking lithium, valproate medications, and some of the other medications used in the treatment of bipolar disorder.
- Provide teachers and staff members with the name of an emergency contact person in addition to the parent to call if the student is vomiting, complains of severe abdominal pain, or appears to be dehydrated. This person should be familiar with bipolar disorder and able to pick the student up from school if the parents are unable to.

Symptom: The student is experiencing an inability to awaken and attend school in the morning. This problem may be due to the side effects of medications the student is taking for bipolar disorder because the student is experiencing an episode of depression, or simply has a phase-delayed diurnal cycle that is common in bipolar illness.

Suggested accommodations:

- Arrange for a delayed starting time (and shortened school day) for the student-perhaps an hour or two after regular classes have begun. Schedule essential academics later in the day.

Symptom: The student experiences fluctuations in energy and motivation. These fluctuations may occur hourly, daily, in specific cycles, or seasonally.

Suggested accommodation:

- Devise a flexible curriculum that accommodates these sometimes rapid changes in the student's ability to perform consistently in school. When energy is low, reduce academic demands; when energy is high, increase opportunities for achievement.

Symptom: The student has difficulty concentrating and remembering assignments.

Suggested accommodations:

- Record the student's assignments daily in a notebook. Have both teacher and parents sign the notebook daily so that the student's progress-or lack of it-can be carefully followed.
- Set up a system for reminding the student at the end of the school day which materials he or she needs to take home for out-of-classroom assignments.
- Provide a second set of books for the student to use at home.
- Place an aide in the classroom to help direct the student and keep the student on task. It's important that the aide's role in the classroom be inconspicuous so as not to draw unwanted negative attention from the student's classmates.
- Modify classroom and homework assignments according to the student's fluctuations in energy and concentration. Lessen the workload when the student's energy and concentration are low; add challenging, stimulating material to the workload when the student is feeling better and appears able to handle such assignments.

Symptom: The student has difficulty reading and comprehending long, written passages of text.

Suggested accommodations:

- Provide the student with recorded books as an alternative to self-reading when the student's concentration is low.
- Have a student support teacher or aide break assigned reading into manageable segments and monitor the student's progress, checking comprehension periodically.

Symptom: The student has difficulty understanding an assignment with complex, multi-step directions.

Suggested accommodation:

- Break assignments into manageable steps. Have the student tackle these steps one at a time.

Symptom: As the result of a visual processing disability the student has difficulty answering written questions within a designated time frame, even when he or she knows the material.

Suggested accommodation:

- Permit the student to have extended time on tests.

Symptom: As the result of a visual processing disability, the student has difficulty understanding complex or multi-part questions on a written test.

Suggested accommodation:

- Have tests administered by a trained aide who can help clarify questions for the student.

Symptom: The student has difficulty writing. Poor fine motor skills affect handwriting and make it difficult to write in cursive or keep columns of figures in straight lines.

Suggested accommodation:

- Provide a calculator for math and a word processing device with a keyboard or dictation software for written assignments. Graph paper can help keep columns straight.

Symptom: The student experiences episodes of overwhelming emotion such as sadness, embarrassment, or rage.

Suggested accommodation:

- Provide an aide trained to work with children with bipolar disorder.
- Identify a place where the student can go for privacy until he or she regains self-control.
- Set behavioral goals each week with the student, and reward the student for meeting those goals.
- Develop methods (such as writing in the student's assignment notebook) for parents and teachers to communicate daily with each other about any behaviors or other incidents that are interfering with the student's ability to function in school. Positive behaviors and actions should also be noted.
- Have a Functional Behavior Assessment (FBA) administered to the student by a school psychologist or other expert trained to make such an assessment. An FBA can help identify the triggers that precede the student's loss of control.

Symptom: The student demonstrates poor social skills or relationships with peers, such as being too bossy, misinterpreting joking as attacking and becoming emotionally or physically defensive or aggressive, or being shy and withdrawn.

Suggested accommodations:

- Have the student and the school social worker or school psychologist meet weekly to work on learning social skills.
- Have the student work with other students in a group or class that specifically addresses the development of social skills.

Symptom: The student is experiencing social difficulties with a particular student or group of students.

Suggested accommodations:

- Place an aide in the classroom to watch for social conflict and to help the student avert problems before they occur.
- Have the school keep the student's parents apprised of any situations in which their child has been picked on or bullied. The school should have "zero tolerance" for such behavior. The student's parents also need to know the details—who, what, when, where, why, and how—of each incident in case the bullying persists outside of school.

Symptom: The student gets overheated and dehydrated from physical exertion on hot days.

Suggested accommodations:

- Allow student to excuse himself or herself from gym class on hot days.
- When heat is ongoing, replace gym class with individual private workouts, another healthful activity, or study hall.

Symptom: The student suffers acute embarrassment when participating in team sports. This may be due to lack of practice in sports skills and knowledge of the rules from periods of illness, or to a treatable anxiety disorder that often co-occurs with bipolar disorder.

Suggested accommodations:

- Excuse the student from participating in team sports until the anxiety is treated.
- Provide the student with one-on-one coaching in sports rules and techniques.
- Permit the student to substitute individual physical activities, such as aerobic workouts or swimming laps that do not involve competing in groups.
- Offer the student counseling at school to address his or her concerns about team sports.

Symptom: The student suffers acute embarrassment when speaking in front of others. This may be due to a treatable anxiety disorder that often co-occurs with bipolar disorder.

Suggested accommodations:

- Excuse the student from speaking in front of the class until the anxiety is treated.
- Provide the student with one-on-one coaching to reduce performance anxiety.

Symptom: The student experiences episodes of tearfulness and crying at school.

Suggested accommodation:

- Give the student advance permission to leave the classroom and go to a designated recovery place or person when he or she feels "on the verge of tears." If the child has an aide, arrange a private signal when leaving the classroom becomes necessary. Taking such action will reduce anxiety, permits the student to maintain self-control and avoids public humiliation and further distress.

Symptom: The student experiences episodes of frustration and/or rages at school.

Suggested accommodations:

- Have a Functional Behavior Assessment (FBA) administered to the student by a school psychologist or other expert trained to make such an assessment. An FBA can help identify the triggers that precede the student's loss of control. This information can then be used to develop a written Behavior Intervention Plan (BIP). The BIP provides a framework from which to teach the student new ways to prevent or cope with the stressors that provoke his or her loss of control.
- Some children who are extremely gifted or creative become stressed by boredom. To accommodate such a child, provide accelerated individual work in the areas in which he or she is gifted. Also, make sure the student's creativity is engaged in every class.
- A drop in blood sugar levels can trigger loss of control in some children. To accommodate such a child, ensure that he or she eats a high-protein breakfast. Also, give the student access to protein snacks at regular intervals.
- Students with learning disabilities and a mood disorder can experience stress if pushed too hard in an area of difficulty. To accommodate such a child, reduce academic demands on the student to a manageable level.

Symptom: The student is too overwhelmed by anxiety or emotional states to attend school.

Suggested accommodation:

- Place the student on temporary "homebound status." When a student is on homebound status, the school district must provide a tutor to oversee the student's educational objectives until he or she is ready to return to school. Should the student need to be hospitalized, the district must continue to make a tutor available—just as it must do for children with cancer, seizure disorders, or other illnesses that may prevent attendance at school.

Symptom: The student becomes rapidly destabilized and experiences loss of control that endangers self or others.

Suggested accommodation:

- Have a Functional Behavior Assessment (FBA) administered to the student by a school psychologist or other expert trained to make such an assessment. An FBA can help identify the triggers that precede the student's loss of control. This information can then be used to develop a written Behavior Intervention Plan (BIP). The BIP provides a framework from which to teach the student new ways to avoid or cope with the stressors that provoke his or her loss of control.
- Physical restraint and seclusion should be used only as a last resort, and only after procedures described in the student's BIP have been implemented. In addition, restraint and seclusion should be used only after parents have signed release forms, and should be administered only by trained staff.
- Place the student on "homebound status" while the IEP team is reconvened, and more restrictive placement options are investigated. When a student is on homebound status, the school district must provide a tutor to oversee the student's educational objectives until he or she is ready to return to school. Should the student need to be hospitalized, the district must continue to make a tutor available.