

The Importance of Movement for Individuals with CHARGE Syndrome

Second in a series

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Appropriate Physical Education Service in Schools: Laws and Knowledge

The Individualized Education Program (IEP) should address the impact of the dual sensory loss on motor development and provide interventions to improve overall motor function for individuals with CHARGE syndrome. One area related to motor development within the education system is general physical education and adapted physical education. Educational techniques and interventions within special education are specifically designed to meet the unique needs of the students, which may include adaptations when appropriate in the content, methodology, or delivery of instruction [Individuals with Disabilities Education Improvement Act (IDEA), 2004]. Special education instruction, includes physical education under IDEA, 2004, Public Law 108-466 regulations:

- (1) Special education means specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability, including--
 - (i) Instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and
 - (ii) **Instruction in physical education.** (Part B, Section 300 / A / 300.39 / a / 1)

Therefore, physical education should be specially designed to meet the unique needs of individuals with CHARGE syndrome.

Within the physical education class, students should learn about the following as defined by IDEA, 2004:

- (2) **Physical education** means--
 - (i) The development of—
 - (A) Physical and motor fitness;
 - (B) Fundamental motor skills and patterns; and
 - (C) Skills in aquatics, dance, and individual and group games and sports (including intramural and lifetime sports); and
 - (ii) Includes special physical education, adapted physical education, movement education, and motor development. (Part B, Section 300 / A / 300.39 / b / 2)
- (3) **Specially-designed instruction** means adapting, as appropriate to the needs of an eligible child under this part, the content, methodology, or delivery of instruction--
 - (i) To address the unique needs of the child that result from the child's disability; and

- (ii) To ensure access of the child to the general curriculum, so that he or she can meet the educational standards within the jurisdiction of the public agency that apply to all children.
(Part B, Section 300 / A / 300.39 / b / 3)

Early interventions and appropriate instructional strategies are critical components in the success and participation of a student who is deafblind (Hartshorne et al., 2011). Highly qualified adapted physical educators are professionals from standard-based physical education teacher education programs who can design, implement, and evaluate motor skills, levels of fitness, and athletic skills of students with disabilities (American Association for Physical Activity and Recreation & National Consortium for Physical Education for Individuals with Disabilities, 2007); especially from low incidence populations (Anderson & Smith, 2013; Regan & McElwee, 2013).

Qualified teachers “... provide equitable access and opportunities that build upon and extend what learners already know in facilitating the ability to acquire, construct, and create new knowledge” (Hollins, 2011, p. 395). Furthermore, qualified teachers demonstrate effective teaching strategies, specifically to adapted physical education (Lytle, Lavay, & Rizzo, 2010). Therefore, quality teaching must also include the knowledge of learners, which comprises of individual characteristics, background experiences, and prior knowledge (Hollins, 2011). Moreover, highly qualified adapted physical education teachers must possess a comprehensive content knowledge in disability studies, assessment methods, special education law, development of IEPs, adaptations and modification for physical education, behavior management, individual teaching and learning styles, inclusive practices, instructional design and planning, professional leadership, and assistive technology for physical education (Kelly, 2006). The service and placement of general physical education or adapted physical education should be in the student’s least restrictive environment, which allows the student to be safe at all times and be able to achieve successful movement experiences.

IDEA 2004, states that the State must ensure that public agencies in the State comply with the following:

- (a) General. Physical education services, specially designed if necessary, must be made available to every child with a disability receiving (Free Appropriate Public Education) FAPE, unless the public agency enrolls children without disabilities and does not provide physical education to children without disabilities in the same grades.
- (b) Regular physical education. Each child with a disability must be afforded the opportunity to participate in the regular physical education program available to nondisabled children unless--
 - (1) The child is enrolled full time in a separate facility; or
 - (2) The child needs specially designed physical education, as prescribed in the child's IEP.

(c) Special physical education. If specially designed physical education is prescribed in a child's IEP, the public agency responsible for the education of that child must provide the services directly or make arrangements for those services to be provided through other public or private programs.

(d) Education in separate facilities. The public agency responsible for the education of a child with a disability who is enrolled in a separate facility must ensure that the child receives appropriate physical education services in compliance with this section. (Part B, Sec. 300.108 Physical education)

To ensure a safe and successful physical education experience, research your state regulations related to physical education and adapted physical education. Then ask about a motor skills assessment for adapted physical education at your next IEP meeting.

Reference List

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