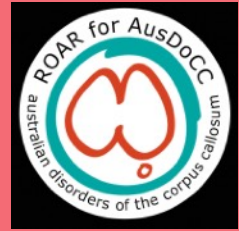


For Teachers

Australian Disorders of the Corpus Callosum: www.ausdocc.org.au



About Disorders of the Corpus Callosum (DCC)

The corpus callosum is the major nerve structure connecting and allowing communication between the 2 hemispheres of the brain. A disorder of the corpus callosum (DCC) occurs when the corpus callosum does not form properly or is completely absent.

Individuals with a DCC can have lifelong cognitive, behavioural and physical problems ranging from mild to severe. Difficulties may include developmental delays, seizures, social and behavioural disorders, learning disabilities, executive function deficits and difficulties with higher order reasoning, language and speech. There may also be other associated neurological, genetic or medical conditions such as autism, epilepsy and cerebral palsy. DCC presents as a hidden disability which can limit vital access to understanding, support and assistance. Early intervention is important and individuals can benefit from a range of therapies. These pages may help teachers who have a child, with a DCC, in the classroom.

THINGS TAKE LONGER

Give **plenty** of extra time to complete class tasks or assessments. Eliminate unnecessary tasks and select the most important exercises and tasks.

NOT LAZY OR STUBBORN

Avoid these labels. The kids with ACC are most likely working harder than most others, just trying to keep up. It may be an inflexible thinking capacity. Be kind, firm and patient

BE DISCREET

The child nodding and agreeing with you as you explain may just want you to leave him/her alone and stop singling them out in front of their peers.



Remember the 4Rs

Repetition
Reinforcement
Routine
Repetition



Key lesson points

Clearly identify the key points one point at a time. Ask the student to explain them to you.



Consolidate Basics

Master the basics: Boehm concepts, letter sounds & names, 100 most used words, times tables etc.

EACH CHILD IS DIFFERENT FROM OTHERS WITH A DCC Take time to identify a child's strengths and challenges. Be aware that these can change when least expected and their knowledge, learning capacity and skills can be very uneven. Re-evaluate approaches and achievements regularly and identify gaps.

Production Lag.

Production Lag is the perception of understanding more than is communicated back through written or oral language.

Production lag is common with kids with a DCC. They often understand much more than they are able to communicate through oral or written language. Don't set the bar too low. Assume competence and nurture confidence. You may feel a child will never grasp a concept but after many repetitions it clicks. There is also an opposite to this situation, where a firmly consolidated skill may disappear overnight.

Did they understand what they just read or heard?

Comprehension of reading materials can be disproportionate to vocabulary recognition and reading. A child may be able to read all the words in a whole passage or book but not comprehend what they have read.

Sometimes the child is still processing the first or last thing they heard and the rest can be completely missed. Give him/her the time needed for processing. This may mean giving one instruction at a time and waiting after you say something for the child to process your words **plus** the time he/she needs to formulate a response. Always try to be aware of this.



Take advantage of a skill, hobby or obsession

Use talents, skills or even obsessions with certain topics or things to yours and the student's advantage. For example, if the child only talks of trucks, use that for stories, reading, artwork, maths – everything! You're half way there because the interest and motivation are already ripe.

Sequence is important for success. Build on every small success to create the next one. Sometimes kids with a DCC will achieve 'inchstones' rather than milestones. Establish good communication with families to discuss achievements and issues.



GROUP WORK CAN BE TRICKY

Group work can be difficult. This can be due to social anxiety, misreading social cues and difficulties keeping up. Try to encourage inclusive dynamics and watch for subtle signs that the child with DCC may be masking his/her difficulties.

Sensory processing issues may affect attention, learning and belonging. These may be visual, cognitive and sensory processing difficulties.

Watch for other group members being unintentionally exclusive or taking advantage of the child. Try to develop methods of inclusion that will develop strengths and confidence for all participants. Make sure the participation roles are clearly defined and understood.

