



Implementing Curriculum for Students with Other Health Impairments: A Study of a Thinking Curriculum

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ABSTRACT

The paper explores how thinking curriculum and pedagogy can be implemented for students with other health impairment (OHI). Specifically, it discusses the concept, characteristics and challenges of other health impairment it, it further dwelt on the implementation of the thinking curriculum which is 'learning to learn' pedagogy that requires students learning programs to be personalized, meaning that students learning is student driven. The paper concludes that, the teacher of students with other health impairments must be trained to develop individualized educational programs for the students with other health impairment (OHI) recommended among others that curriculum should be based on variety and should integrate both content and process.

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INTRODUCTION

This chapter explore how a thinking curriculum and pedagogy can be implemented for students with other health impairment (OHI), as Seed (2006) Rightly notes that teaching of students with individual differences requires that they are grouped homogeneously so that special curriculum and pedagogical approaches can be deployed by the teachers who have been trained to use them so that the system encourages participation for all learners.

There are many conditions and diseases that can significantly affect a student's health and ability to function successfully in school. Most health impairments are chronic conditions; that is, they are always present, or they recur. By contrast, and acute condition develops quickly with intense symptoms that last for a relatively short period of time. To be served under other health impairment (OHI) category, the student's health condition must limit strength, vitality, or alertness to such a degree that the student's educational progress is adversely affected. More than 200 specific health impairments exist, and most are rare. (Pierangelo & Giuliani (2008).

A student with Other Health Impairment (OHI) is one who has been determined to meet the

criteria for OHI due to chronic or acute health problems. OHI means having limited strength, vitality, or alertness that adversely affects a student's educational performance. The term "limited alertness" includes a heightened alertness to environmental stimuli that results in limited alertness with respect to the educational environment (NICHCY, 2009). "Other health impairment" is eligible for special services to help the child address his or her educational, developmental, and functional needs resulting from the disability. According to the U.S. Department of Education (2012) in Eligibility Guidelines (2021) other Health Impairments represent approximately 12.0 percent of all students having a classification in special education.

The Individual with disability education act (IDEA, 2017) define other health Impairment (OHI) as having limited strength, vitality, or alertness including a heightened alertness to environmental stimuli that result in limited alertness with respect to the educational environment that is due to chronic or acute health problems that adversely affects a child's educational performance. However, what is central to all the disabilities falling under "Other Health Impairment" is that the child must have;



limited strength, vitality, or alertness due to chronic health problems; and an educational performance that is negatively affected as a result. The following according to IDEA (2017) are the classification of other health impairment;

- i. Asthma,
- ii. Attention Deficit disorder or Attention Deficit Hyperactivity Disorder (ADHD)
- iii. Diabetes,
- iv. Epilepsy,
- v. A heart condition,
- vi. Hemophilia,
- vii. Lead poisoning,
- viii. Leukemia,
- ix. Nephritis,
- x. Rheumatic fever,
- xi. Sickle cell anemia,
- xii. Tourette syndrome and many more

Characteristics of Other Health Impairment (OHI)

The characteristics of students with other health impairment vary depending of the health impairment. Students may be weak, tired or in pain. They also tend to have more absence due to their illness, some general characteristics faced by individuals with other health impairments according to American Academy for Special Education Programmed AASEP (2022) may include but not limited to:

- i. Fatigue
- ii. Mobility issues
- iii. Issues involving attention
- iv. Coordination difficulties
- v. Muscle weakness
- vi. Frequent absences or lateness's to school
- vii. Stamina
- viii. Inability to concentrate for long periods of time

According to star bright foundation (2002) cited in Turnbull et al (2004), there are numerous complex challenges facing students with health impairments. Common issues are: "loss of sense of control, lack of understanding about the condition, fear, worry, anxiety, stress, anger, and guilt, changes in family dynamics,

isolation, medical noncompliance, boredom, depression, pain, decreased self-esteem, negative body image, and impact on identity and social interactions, including those at school".

THINKING CURRICULUM

According to Reay (2014), thinking curriculum is based on new ways of thinking about learning that treat both content and processes differently. Content includes concepts, principles, generalization, problems, facts, definitions while process includes learning strategies, skills, creative and critical thinking, thinking about thinking (metocognition) social skills etc

The thinking curriculum or 'learning to learn' pedagogy requires students learning programs to be personalized, meaning that students learning is student driven, learning to learn and understanding how one learns is a critical part of personalized learning pedagogy.

Characteristics of Thinking Curriculum

Thinking curriculum fulfill a dual agenda by integrating content and process. Students develop habits of mind with respect to learning that serve them well both in school and in real world. While traditional curricula tend to teach content and process separately, a thinking curricula Weds process and content, a union that typifies real world situation students are taught content through processes encountered in the real world. (Fennimore Tinzman, 1990)

Some thinking and learning processes apply across all content areas and all areas of life and thus are generic i.e. problem solving, decision making, comparing and evaluating. However, process may be realized differently in different content areas. The students acquire content as they plan, evaluate, solve problems, make decisions, construct or critique arguments, compose essay etc. Students acquire knowledge in carrying out tasks requiring higher - order thinking. This approach to curriculum stands in contrast to traditional curricular, while traditional curricular expect students to master knowledge in school, in the thinking curriculum the content students learn has the power to promote higher-level process. In a nutshell the essence of thinking curriculum is the dual agenda.



According to (Suzanne, 2009), a thinking curriculum has four major characteristics elaborated below:

1. **The scope of a thinking curriculum promotes in-depth learning**

Thinking curriculum promotes in depth learning, important concepts and strategies need to be identified, organized, prioritized and taught in depth. Students develop a deep understanding of essential concepts and processes for dealing with those concepts. Thus, the thinking curriculum gives students the tools, perspectives, methodologies and concepts they need to carry out authentic tasks.

2. **Content and process objectives are situated in real-world tasks:**

In a thinking curricular, students are engaged in complex and holistic thinking which reflects what individual performing task do. Therefore, in a thinking curriculum, thinking processes with attributes of real-world i.e. orientations to problem solving, critical and creative thinking, dispositions toward learning sense of efficacy, a desire to ponder and learn etc. are carried out in collaboration with students, teachers, parents, and community members using tools and resources to perform real-world tasks so content and process objectives can be achieved when learning, task this will stimulate complex thinking involving true collaboration among students.

3. **Tasks are sequenced to situate holistic performances in increasingly challenging environments.**

A Thinking curriculum always treats as indivisible wholes it is not chapped on into isolated skills and facts rather it involves the holistic performance of meaningful complex tasks in increasingly challenging environment. As such thinking curriculum promotes a sense efficacy and confidence in students.

4. **A thinking curriculum actively connects content and process to learner's backgrounds**

In creating a thinking curriculum consideration should be based on the experience and knowledge that students bring to school and then expanding upon and refining these experiences and knowledge by connecting them to new learning. The content and processes learned than build on student's family, community and cultural experience. When student can relate school learning to important real- life issue, they are more likely to seek and value the perspectives of others i.e peers, teachers, parents, community members and experts in so doing they develop in the personal competencies.

Implementing a Thinking Curriculum across Content Areas

Implementation of a thinking curriculum for students with Other Health Impairment (OHI) would help to develop students who are successful learners, knowledgeable, self-determined, strategic and empathetic. By uniting process and contents, students learn the strategies they need to acquire, produce, use and communicate knowledge (Evans & Lunt 2012). Learning is thinking. Thus, according to Adam, Rigoni & Tatnal (2005) all reform efforts advocated moving away from a basic skills curriculum toward curriculum based on a new notion of learning in which students engage in authentic, higher order learning task. As such,

- a. Curriculum should be based on variety of research
- b. Curriculum should integrate both content and process. Process should be treated holistically, skills should be conceived as part of holistic processes and should not be taught in isolation
- c. Thinking should be taught as part of core curriculum, not in isolation
- d. Content should be taught as a whole idea organized rather than as isolated bits of information
- e. Content should include a wide variety of literature from diverse sources



- f. Students should have the opportunity to explore ideas in depth

Dike & Eze (2000) indicate that in this time of constant changes, it is essential that children be taught thinking skills that will allow them to be adaptable and to learn throughout their lives. Therefore, in the thinking classroom the teachers are expected to:

- a. Create a climate where thinking is a values activity.
- b. Structure the learning environment so that students will work in range of cooperative situations.
- c. promote meta cognition (thinking about thinking) through modelling his/her own thinking process and help students to become aware of their own thinking
- d. teach explicit thinking skills at each year level according to school plan
- e. While the students are expected to:
- f. be empowered with the language, and strategies to engage in a wide variety of thinking tasks appropriate to their level of development
- g. learn to solve problems in different ways, views, situations from a range of perspective
- h. view a situation from a range of perspective
- i. use tools (graphic organizers) to organized their ideas and thinking
- j. learn to transfer their skills to everyday life
- k. learn thinking skills aspects for lifelong learning

CONCLUSION

A thinking curriculum builds multicultural understanding while encouraging the philosophical understanding of different kinds of knowledge, the teacher of students with other health impairments must be trained to develop individualized educational programs for the students, supervise and monitor the student's health condition, adopt the curriculum to meet the students' needs and modify the environment. In a nutshell, there should be dramatic shift from traditional curriculum to changes in instruction, learning activities as well as assessment.

RECOMMENDATIONS

1. The curriculum should be modified to accommodate students with (OHI)
2. Training and workshop should be held frequently for teachers teaching students with (OHI)
3. The environment should be modified to accommodate students with (OHI)

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