

# Exploring the School Re-entry Experiences, Social Integration, and Related Factors Among Children with Special Health Care Needs



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## 1. Background & Significance

- Children with special health care needs (CSHCN, 15-20% of all children in the USA) are those who have or are at an increased risk for a chronic health condition and require additional healthcare services compared to the general population.
- CSHCN often experience disruptions in education due to health reasons and face **significant challenges returning to school after health-related absences**, complicated by chronic illness and related disabilities.
- However, little is known about CSHCN's school reentry process and factors of school reintegration outcomes.

### OBJECTIVE

- To identify the school reentry experiences and factors associated with school participation and social reintegration among CSHCN.

## 2. Methods

### QUALITATIVE DESIGN

- We conducted 11 semi-structured focus groups with CSHCN, parents, and pediatric rehabilitation specialists.

### PARTICIPANTS (N = 52)

- CSHCN (n=25, 15-23 y/o)
  - Experienced an acute inpatient pediatric rehabilitation stay between 2009 and 2019.
  - Causes of stay included acquired brain injury, chronic pain, neurological conditions, orthopedic procedures, and congenital disorders.
- Parents of CSHCN (n=19)
- Rehabilitation specialists (n=8) who assisted families with their return to communities.

### ANALYSIS

- We conducted a thematic analysis over transcribed interviews, guided by the International Classification of Functioning, Disability and Health (ICF).

## 3. Results

### Theme 1. School Reentry Process

#### Inpatient Phase

- CSHCN received varying levels of **educational support** from the schools and hospital teachers. Some had little support due to reasons including a lack of school-hospital communication, district policy, or health factors.
- Social engagement** in hospital-based social activities and with friends can support CSHCN's well-being, adjustment to health challenges, and school reentry.

#### Transition Planning

- Establishing IEP/504 plans** was a lengthy and challenging process requiring great parental involvement and communication with the hospital and school.
- Rehabilitation services** to restore school and social functioning prepared CSHCN for school reentry.
- School visits and meetings** with both hospital and school personnel before return to school were beneficial.

#### Reentry Phase

- Adjustments in school reentry plans** were often required due to unexpected barriers or changes in the child's condition.
- Parental involvement** and communication with school personnel were often needed to ensure optimal educational support.
- Continued healthcare services** were helpful to ensure smooth school reentry and adequate educational support.

### Theme 2. School Reentry Outcomes



#### Academic Outcomes

- Although they tried to help, in both cases, the teachers were, like, we don't have the ability to tutor you on basically everything that you missed. You're gonna have to figure it out, hire yourself a tutor, or something to be able to get yourself up to speed for that month that she missed. -Parent(010)
- For the most part, just like a pass. But because of those free passes, I never really got to learn anything. In fifth grade, we were focused on fractions and decimals, and I never really learned that, and I still don't. -Child(019)



#### Social Participation

- It was difficult because other kids didn't really know what I went through. Some of my friends just didn't talk to me and didn't know what to say to me. -Child(040)
- To this day, there's still a rumor going around my school that I was in rehab for drug abuse. It's just some people will just never understand. -Child(048)
- I've had to get feeding tubes and use different mobility aids. And going back to school in high school, I received a lot of teasing and pointing...it was very difficult for me, primarily socially. -Child(024)



#### Mental Health & Well-being

- I would say the two scariest parts of going back to school was the physical part of walking around the school. I was still not good at walking at the time. Also my social anxiety was absolutely through the roof because I used assistive walking devices for about six months...It just gave me horrible social anxiety. -Child(027)
- I was anxious to go back just 'cause people know that you were out, they know that it was for some chronic illness or disease or something...they do look at you a little differently. -Child(028)

### Theme 3. Supports and Barriers

#### + Facilitators

- Key person or disability champion** at school to support communications between the patient/family and teachers and ensure IEP/504 implementation.
- Continued health services** to follow up and communicate about ideal accommodation.
- Parent and patient self-advocacy**, resilience, and adjustment to disability
- Community resources** for disabilities.

#### - Barriers

- Lack of communication and coordination** between healthcare and education services was commonly reported, resulting in barriers to establishing accommodation and support.
- Negative attitudes and lack of awareness** and knowledge of disability and health challenges.
- Lack of school resources** and personnel training to implement disability services.

## 4. Conclusions

- Participants experienced various challenges navigating the process and attaining services, such as difficulties in establishing and implementing educational accommodations and misunderstanding of medical conditions among school professionals.
- Children in schools with better disability awareness, specialized supportive programs, and disability champions experienced better school re-entry and social integration.

### Theme 4. Recommendations for Services and Families

#### Services

- Support families** to navigate the process of establishing and updating IEP/504 plans.
- Parent peer support group** to share information and experience of navigating educational services.
- Continued healthcare services** to support CSHCN with ongoing changes in functioning and school reentry.
- Improve communication** between school and healthcare services.

#### Families and CSHCN

- Ensure that all teachers and staff are familiar with the IEP/504 plans. When the plans were not followed, be ready to advocate for support.
- Talk to fellow parents or patients and explore resources from local communities for children with disabilities.

## Contact Information

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