



BEST PRACTICES POLICY FOR STUDENTS WITH DWARFISM IN ONTARIO SCHOOLS

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1 PURPOSE

- 1.1 Students presenting with dwarfism require a variety of unique accommodations that may not be previously known to the school and/or school board of attendance. As the condition only occurs in about 1 in every 10,000 births (Pauli & Legare, 1998), there are few resources discussing appropriate accommodation and integration of Little People (LPs) into Ontario's education systems.
- 1.2 This Best Practices Policy attempts to address the gap in information by amalgamating various sources of information, both formal and informal, into one coherent document. It is the result of an intensive research process, policy and legislation review, literature review, interviews with special needs staff, other school/board members, little people and their parents.

This document is intended to serve as a reference to better integrate and accommodate students identified as LPs in Ontario primary and secondary schools. It is important to note that this process will differ from case-to-case. This document aims to establish an effective framework for understanding the general needs of students with dwarfism, specifically in accordance with the *Education Act, RSO 1990, c E.2* and accompanying documents as laid out by the Ministry of Education.

- 1.3 The Little People of Ontario abide by the Social Model of Disability. We believe people with Dwarfism are not inherently “disabled”. It is society that creates, or fails to remove, barriers to full inclusion in society. This is not to ignore medical considerations that may need to be addressed on a case-by-case basis, but we believe that a focus on the student, their needs and their goals will provide a far better quality of school life. We believe, respectfully, that medical and genealogical considerations belong in the hands of those with training in those fields.

2 SCOPE

- 2.1 People with dwarfism are under the protection of the *Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c.11* (AODA) due to orthopaedic challenges and the AODA considers them as an “at-risk” population. This means that various laws and regulations, programs, and services are in place to protect their interests. This includes students with dwarfism in Ontario’s primary and secondary schools.

3 UNDERSTANDING NEEDS OF STUDENTS WITH DWARFISM

Medical Information

- 3.1 Dwarfism is a genetic condition that is generally defined by an adult height of 4 feet 10 inches (147 cm) or less, though the average is around 4 feet (122 cm). There are more than 300 different types of dwarfism (MedlinePlus, 2018), with the most common being conditions of abnormal bone growth, or skeletal dysplasias. These occur in about 3 in every 10,000 births (Stoll, Dott, Roth & Alembik, 1989). By far the most common skeletal dysplasia is achondroplasia, which occurs in about 1 in every 26-28,000 babies of all races and ethnicities (Pauli & Legare, 1998).

Most types of dwarfism are caused by a spontaneous genetic mutation in the egg or sperm cell prior to conception (National Institutes of Health, 2018). Two average-size parents can have a child with dwarfism either through a spontaneous mutation or recessive genes held by them both (National Human Genome Research Institute, 2016).

- 3.2 Symptoms vary from condition to condition, and with the severity of that condition in each individual. Most LPs enjoy normal intelligence, normal life spans, and reasonably good health. Some will require surgeries or other medical interventions to address complications and maximize mobility. We recommend monitoring and addressing potential psychological concerns about body image. Differences in stature do not start to become significant until children are between the ages of 7 – 9. Some of the common symptoms, or symptoms that may affect the student in the school setting include:
 - Short arms and legs
 - Short fingers and toes, which may affect dexterity

- Gross and fine motor development delays, which may still be present at school age
- A short neck or instability of the neck bones
- Progressive development of a swayed lower back or hunching of the upper spine
- Repeated ear infections which can cause hearing difficulties and, in turn, delay speech
- Irregular breathing at night (sleep apnoea), which can interrupt sleep and cause excessive sleepiness during the day

- 3.3 There is currently no “cure” for dwarfism, and most people who are of short stature go through life without having serious medical problems or aggressive surgical interventions.

Terminology and Referencing

- 3.4 While the correct terminology varies by country, Little People (LP) communities around the world agree that the word “midget” is highly offensive because of the word’s misuse and use as a pejorative. More information about this can be found on the LPO website. The word “dwarf” is best to be avoided, whose plural is “dwarfs” and not “dwarves” – the latter being fictional characters. Terms such as “little person” (LP), “person of short stature,” or “person with dwarfism” are all acceptable in North America. In some countries, “short-statured” and “person of restricted growth” are also used.
- 3.5 Person-first and person-specific language is preferable, focusing on the human as opposed to their condition and/ or appearance. Likewise referring to people without dwarfism as “normal” implies that a person with dwarfism is not, which can be exclusionary, isolating and hurtful. People without dwarfism should be referred to as “average-sized” rather than “normal-sized.” Therefore, it is preferable to refer to people without dwarfism as “average-sized” as opposed to “normal-sized”. It is always, of course, preferable to refer to someone by their name, or to describe them using distinguishing features, such as eye or hair colour, that have not traditionally been used to ostracize or demean people from the community.
- 3.6 Members of the LP community do not necessarily view their condition as a disability despite it being legally defined as such in Ontario under AODA. The complications that arise as a result of the medical condition(s) associated with a particular form of dwarfism, in addition to physical, societal and systemic barriers are what require special consideration.

Roles and Responsibilities

- 3.7 The process of integration and accommodation of an LP student involves numerous people. This includes the parents or guardians, classroom and special education teacher(s) and principal. It may also include the student, additional special education staff, caseworker, occupational/physical therapist, and the school board. A detailed description of roles and responsibilities is outlined on page A10-13 of the *Special Education in Ontario Policy and Resource Guide* (2017).
- 3.8 The Ministry of Education enacts the Education Act, which ensures the appropriate programs and services are provided for exceptional students without payment from parents or guardians. School boards must follow the regulations outlined in the act and accompanying documents. The board must implement procedures for early and ongoing identification of student needs and must provide or purchase special education services and equipment for exceptional students. Every school board has a Special Equipment

Amount (SEA) that goes towards equipment for students with special needs. The board must cover a certain amount, and the Ministry of Education must cover anything above that amount. In order to get your request for special equipment funding approved, you will need an Individualized Education Plan for the student, a cost estimate, and a recommendation for specific equipment from a recognized practitioner (e.g. an occupational therapist). Accessing these free services can be slow due to wait lists, and some parents/ guardians may choose to pay for the services through independent organizations.

- 3.9 Students with dwarfism may have an occupational therapist, a physical therapist, a caseworker, and/ or an educational assistant. Occupational therapists (OT) work with the student to help them navigate physical barriers in society to meet their needs through finding adaptations suitable for daily living, suggesting accommodations specific to their physicality and health status, etc. A physical therapist (PT) focuses on prevention and treatment of injuries caused by the condition. Caseworkers give assistance and counselling to at-risk populations, which can include short-statured people in Ontario. Educational assistants (EA) are hired by school boards to provide additional support to students in the classroom or school. These professionals may enter a student's life at any time during their time at school and will help facilitate their school integration process. It is advised that they are included in decision-making for the child.
- 3.10 There are differing recommendations for the support of LP children. A personal, in-school PT, OT or EA may help them move around and complete daily activities. However, for some students, this may alienate them and draw unwanted attention from others. The school should discuss this with parents to find out what their and their child's preferences are. It may be helpful to suggest a buddy system if this has not already been brought up by parents.

Individualized Education Plan

- 3.11 The Individualized Education Plan, commonly known as the IEP, is the school's written plan of action for a special education student. IEPs are created for students when the school board's Identification, Placement, and Review Committee (IPRC) has met and recognized that the student has differing needs to ensure academic, and sometimes social, success at school. Each school board and school have a different way of dealing with special education, including the IEP and funding process. The Ministry of Education uses "impact on daily living" as one way to define disability. However, by this definition, the student, parents and/ or teachers may not consider the LP student as having special needs. Regardless, the child is still eligible to receive support and/ or accommodations.

Following the initial meeting, the IPRC will hold a review meeting on an annual basis. During these meetings the child's progress is reviewed, and the education plan may be revised. Parents are encouraged to attend these meetings even if they feel no revisions should be made. They are an important step in ensuring the student's needs are met scholastically and socially, and that the student's own goals and desires are considered. Attending these meetings allows students (when appropriate) and parents to keep abreast of developments and advocate for her/ himself/ their child.

- 3.12 The Ontario Ministry of Education requires that school team members continuously monitor all expectations described in an IEP. The expectations must be reviewed and updated as necessary, and at least once in every reporting period.

- 3.13 A meeting can also be set up each year (or as necessary) between the parents and teachers, to clear up any questions and encourage open communication. For elementary school children, homeroom Teachers will usually play the lead role in assessing the LP student's progress, however other adults working with the student (Educational Assistants, Methods and Resources Teachers (MART), etc) will also have input. For high school students, depending on the size and needs of the school, a variety of teachers usually have input for the IEP. When resources allow, this is over-seen by the Head of the Special Education Department. We recommend checking with your school to find out their strategies for developing IEPs.
- 3.14 When possible and appropriate, students should be included in their own IPRC and IEP meetings. Involvement can take the form of written information provided to the IPRC or attending various school meetings. If the student has not been formally identified by the IPRC as exceptional, the student does not want an IEP, and their academic success does not require one, take this into consideration.
- 3.15 Whether or not the school and parents choose to set up a meeting of this type, it is still recommended that an information sheet be provided to teachers. We recommend listing accommodations, preferences, any health concerns (including flexibility, mobility, etc.), and anything else the family wishes the teachers to know.

Communication with Parents

- 3.16 Open and honest communication between the parents or guardians of an LP student and the educators, coordinators and professionals is crucial to the transition and integration process. Parents know their child and his/her needs best, so using a "how can we work together" approach will lead to success for the LP student's school life. The Little People of Ontario believe your collective goal should be to increase the LP student's autonomy, encourage social interaction with peers, develop physical fitness, and preserve/ cultivate their self-esteem. Supporting success in these areas will lead to greater success in academics and future success.

This approach can be broken down into two key components: (1) availability of information, and (2) continued parental involvement. Ensure information, such as your school and school board's special needs policies, is readily available. Consider pointing school staff to LPO's *Parent's Guide for Students with Dwarfism* and LPO's *Parent and Teacher Corner*, both resources that help navigate the school system more effectively. Schools should also encourage the parents' continued involvement in the transition and integration process. This can include matters such as IEP meetings, facilitating school tours, and writing informative letters to an LP's future teachers.

If communication and assessment are occurring on a regular basis, both parties tend to be satisfied. However, in the case that an issue cannot be resolved between the IPRC and parents, or the school and parents, the parents have the right to schedule a second meeting or appeal. Educators are highly trained, however even exemplary teachers with a background in Special Education will not know the very specific needs of your child. It is best, therefore, to be proactive rather than reactive in terms of discussing and facilitating parental requests.

4 SCHOOL ENVIRONMENT RECOMMENDATIONS

General Accommodations

- 4.1 Having measures in place to ensure an LP student's mobility and safety outside of the classroom is equally as important as doing so within the classroom. This includes how the student gets to and from the school grounds, as well as their movements and actions in between classrooms and across school grounds including playgrounds, swimming pools, cafeterias, etc. After-school events affiliated with the school, such as tutoring programs, sporting and music events, and field trips must also be considered.
- 4.2 In terms of getting to school, door-to-door busing is usually an option if the home is not within walking distance of the school. For safety reasons, it is recommended that all walkways be paved and clear of snow and ice for the student's arrival and departure. It is preferable that LP students getting on a bus have a boarding device (e.g., ramp) or a step-stool. An aide or teacher can also assist the child with getting onto the bus, especially for those with more mobility issues. A portable seatbelt can be used on the school bus, which goes around the child and the entire seat. It should be kept on the bus specifically for that child's use, and a portable seatbelt can be kept in the child's backpack to avoid problems on field trips or if the regular bus breaks down. A friend can still sit with the LP student while a seatbelt is in use.
- 4.3 The movements LP students make across the school/campus, as well as the actions they perform in between classes, also require planning and consideration. Classes themselves should be hand scheduled when appropriate to avoid any unnecessary criss-crossing of the school grounds. Additionally, classrooms closer to accessible washrooms, and/ or on the first floor, are preferable as stairs can be a challenge for some, especially younger, smaller LP students. The school may also consider offering the student the option to leave class 5 minutes early to avoid the rush in the hallways and/ or having an aide to accompany them between classes to open heavy doors if the school is not equipped with automatic door openers. If the school is multi-level and the LP student must take a class on another floor, a lift for the stairs or an elevator may be required. If an elevator is used, consider an extension level and a reacher to use on the inside buttons (a pencil may suffice). If the student uses the stairs, the school may want to add an additional, lower handrail. Some LP students may wish to have a peer accompany them while going down the stairs during busy times, such as recess. The peer may help alleviate some anxiety.
- 4.4 Carrying books in between classes, and from school to home, can be difficult. It is recommended to have one set of books at home and one at school to keep in the student's locker or cubby. The cubby, hook or locker should be lowered to the appropriate height; if it is a full-length locker, the lock can be disengaged with a hasp added lower down. Once this is done, the LP student may use that locker for the entire time they are at that school. However, if class locations switch around a lot on a per-semester or yearly basis, it may need to be done to multiple lockers over time to minimize travel. Alternatively, a school may want to consider two lockers if classes are far apart so pertinent books and supplies can be kept nearer to each classroom.
- 4.5 LP students may have issues reaching water fountains or door handles. If they are unable to perform these actions, a stepping stool, doorknob extenders, reaching sticks and

automated doors will prove useful. If parents send their child to school with a water bottle, consider where and how the LP student will refill it. They may need the assistance of a person or step-stool.

- 4.6 Participating in school-affiliated activities is an integral part of an LP student's academic experience. The general recommendations above can be applied to these activities, such as auditorium/sporting events, after school programs, and field trips. For those LP students who can't climb steps, auditorium and outdoor sporting events may require special consideration. Setting up chairs for the LP and their friends or having them access raised seating through a separate entrance are two strategies to deal with raked seating. Wherever possible however, we recommend that the LP student have the opportunity to use the same seating and entrances as the rest of the student body. Ensuring that they can participate in these events alongside their friends helps foster an inclusive school environment. Another consideration is photoshoot day; appropriate adjustments for an LP child's size should be made. This includes having a gown tailored to fit for graduation photos.
- 4.7 As previously touched upon, implementing a buddy system may work for some students in some situations. These may include carrying a tray or reaching condiments in a lunch room, pushing elevator buttons, holding doors, etc. If the student has just arrived at the school, it is recommended to have a teacher or aide helping the LP child first, and then a helper or trusted friend may be assigned once they have adjusted. For younger grades, an assigned helper may be preferable. As the LP student grows older, they will likely make friends who can help them with what they need without a formal arrangement. With a healthy social life, this will likely happen naturally. However, as with anyone with a perceived "difference", peers can sometimes shy away from interacting with the LP student, creating fewer opportunities for integration and social growth. If this occurs, schools might consider including social skills training into the class curriculum, offering social skills groups as extracurricular activities and/ or including Social Skills as part of the student's Individualized Education Plan (see section 3.12). If this is not possible, parents may wish to seek social skills groups outside of the school.

In-Class Accommodations

- 4.8 With some modifications, schools can create a safe and inclusive environment in the classroom that helps the LP student perform to their maximum capacity. While classrooms may be all-purpose in younger grades, the needs associated with specialty classes such as art class, science labs, and music class must also be considered. For physical education recommendations, please see section 4, subsections 4.14 – 4.16.

Deciding what accommodations to make is the result of ongoing discussions between specialists, educators, parents, and the student. Many parents prefer options that blend in and minimize drawing attention from other students. With this in mind, we have created *Adaptive Equipment Guide* that lists recommended items designed for LPs, accessible on the LPO website.

- 4.9 Students spend the bulk of their time at school in the classroom, which can include sitting at a desk, shared table, carpet, lab workstation, on a stage, shop or dance studio. Short-statured students normally require desk and chair modifications for health and comfort reasons. These can include a smaller sized desk and chair that are not connected, a pillow to place behind the back so the knees can be bent, and stool to rest the feet on (legs can

fall asleep if dangling). One option is to purchase a desk and chair that have adjustable heights; this is especially true of shared activity tables, which allows them to sit at a table with other students. LP students with particular conditions (e.g. kyphosis) may require a booster seat as a floor chair, rather than sitting cross-legged. In middle and high schools, the desk and chairs are often bigger and LP students may be more self-conscious about fitting in. In this case, the simple addition of a step stool to stop feet from dangling while sitting could suffice.

Again, ensure spaces, furniture, storage and school supplies are at appropriate heights and come in a variety of sizes. Also consider an LP students' small hand size and some manual dexterity challenges. Consider hooks and cubbies, scissors, and mounted pencil sharpeners. Special crayons and scissors or pencil grips may be required. Additionally, some students may have difficulty taking notes. Accommodations may include but are not limited to audio recorders, a volunteer peer note-taker or adult scribe, dictation software, laptop/computer use, and/or extra time on tests and assignments. Some LP students may not want any/ all of these accommodations. It is important to note that, if a student does not want the accommodation, they should not be forced to use it. Let them know it will continue to be available (if possible) if they change their mind or would like to try it out. One thing to consider is that hand-writing can encourage the development of manual dexterity (Hill & Khanem, 2009). For features of the classroom that cannot be readily altered, consider having a step stool available for use. In middle and high schools, frequent switching of classrooms may mean having one in each.

- 4.10 Art class accommodations for younger students are similar to those already outlined in 4.6. However, as the LP student matures, they may prefer to use a high stool with a small step stool to blend in with classmates. The student should participate in clean-up, provided the tasks do not cause physical strain. Participation in these activities is important. Not only do they provide practice with life skills, but not including students may single out the LP student and cause resentment with others.
- 4.11 Science class and/or lab courses usually require a taller, perhaps multi-step stool for the LP student to reach the lab tables. Because students usually work in partners for lab activities, challenges with manual dexterity should not be an issue, though students may appreciate initial guidance in how to fairly divvy work. If the LP student is working independently, lab tests may require an adult's assistance.
- 4.12 When woodshop and/ or home economics classes are offered at your school, consider taking additional time to mitigate the specific safety concerns of working in these environments such as heat and power tools. In home economics, it may be challenging for the student to use the stovetop and access ingredients in cupboards. A step stool can help, as can placing ingredients and utensils within reach. Additionally, there are numerous low-tech assistive devices available on the market that may be helpful including bowl holders and rocking knives. Consider what you already have - a pizza cutter, for example, can be used for lighter cutting duties. In Woodshop, saws and power tools will be at face height for many LP students. It may be difficult, but not impossible, for an LP student to be included in these classes safely. If your school has an Occupational Therapist, they may be able to recommend assistive technology appropriate for your set up which could include handle extenders or extended uses for clamps. Consider the physical parameters of the workshop and LP students on a case-to-case basis.

4.13 There are cases where the LP student physically cannot play certain instruments; alternatives should be considered. The recorder, for example, is a widely used instrument that some LP students may find difficult to use due to for the spacing of the holes. Consider the following for music class:

- **A flute** – it has keys, so the student doesn't need to have an average person's reach to cover the holes
- **Ukelele, mini guitar, or mini violin** – these string instruments are an ideal size, though the mini violin may require some extra foam padding

Adapted Physical Education

4.14 Students with dwarfism can typically follow much of the physical education guidelines for students without physical disabilities. It is very important that students with dwarfism participate as much as possible, both for their physical and mental health. However, some activity and equipment modification will likely be necessary to ensure safety and comfort.

4.15 While people with dwarfism have an average level of intelligence and lifespan, they face physical difficulties as a result of their condition. Little people are at an increased risk for becoming overweight or obese, and characteristically have low muscle tone, inflexible joints, and difficulty with manual dexterity (Pauli & Legare, 1998). This can be addressed by placing emphasis on developing foundational motor skills and movements, and focusing on activities that build muscle, flexibility, and cardiovascular endurance.

Although adaptations and modifications are required, having dwarfism does not mean that a child cannot be athletic, active, or play with other children. Although their physicality differs from the average student, students of shorter stature want to play with their peers and be included. In line with Ontario policy on accessible education, accommodations must be made to maximize the full inclusion of the student (Ontario Human Rights Commission, 2018). (*Policy: Accessible education for students with disabilities*, 8.1.3) Participation in physical activities can boost an LP student's self-image, confidence, and sense of autonomy, and have physical benefits which can help to alleviate some of their medical complications (Hastie & Martin, 2006).

Adaptations and inclusion of LP children in physical education classes doesn't just benefit the LP child, but all students; some benefits include greater overall acceptance of individual differences and disabilities, learning leadership skills, and improved self-esteem (Hastie & Martin, 2006). It is therefore in the interest of the school and/or school board to ensure the appropriate accommodations are made for maximum participation in physical education classes. The school should work with the physical education teacher to lay out a clear plan for adapted physical education and consider adding details to the student's IEP. Resources such as LPO's *Adapted Physical Education Guidelines* can provide further details.

4.16 Phys Ed instructors may be interested to know that the opportunity for LPs to participate in sports and other athletic events eye-to-eye with other LPs is increasing. Watching these events offers young people the opportunity to see diverse, strong bodies at work, which helps challenge biases and provide role models. LPO hosts sports events every year as does the Little People of America (LPA) in association with the Dwarf Athletic Association of America (DAAA). The Canadian counterpart, the Dwarf Athletic Association of Canada (DAAC) is also working to provide more regular training and events in preparation for the

World Dwarf Games (WDG) hosted in a different country every 4 years as administered by the International Dwarf Sports Federation (IDSF). For more information contact DAAC at: www.dwarfathletics.ca.

Bathroom Accommodations

- 4.17 Being short-statured can create unique challenges for toileting. It is recommended to use the health room, a staff washroom if it is a single-stall washroom, or accessible bathroom for self-toileting. If this is not possible, the school must make adaptations to a central bathroom, outlined below.
- 4.18 Some students with dwarfism may need to sit on the floor in order to take their pants down. The floor in central bathrooms is often wet and dirty, and students can be seen underneath the stall door. Having a yoga mat to use for the floor and lowering the door to close the gap can help solve these issues. Ensure the stall door latch is reachable. There are several approaches that can be taken regarding the toilet itself. Typical wheelchair accessible or traditional accessible toilets are not appropriate; an average -sized toilet can be used with an accompanying step stool, arm rails, and seat extender. Platform step stools often work well because students can leave their clothes on them. For younger students, provide one similar to the one they have practiced with at home. Arm rails should be affixed to the toilet, rather than the wall.
- 4.19 For post-toileting sanitation, the height and type of other washroom features must be considered. Recommended adaptations include a lowered paper towel dispenser or stack of paper towels beside the sink, a stepping stool or wooden steps to access sink, and a sensor faucet. Parents may wish to send their child to school with hand sanitizer to skip the hand-cleaning process altogether.

Lunchroom/Cafeteria Accommodations

- 4.20 For lunchtime, the goal is to create an environment where the LP student can easily get and eat their food while interacting with peers. Often the biggest challenges at lunch are carrying trays, reaching condiments and cutlery, and being able to see what food is on offer. Considerations should be made with respect to the specific physical layout of the lunch room at your school. Accommodations may include but are not limited to step stools, and/ or at least one cutlery/ condiment station at a lower height or pre-packaged condiments. An appropriate chair can be moved to and from the end of the lunch table by staff to allow support and inclusion with peers – do not use a separate table.

Recess Accommodations

- 4.21 Recess is a time for all students to play with peers and engage in physical activity. Some LP students may be less steady and be prone to slips and falls, putting them at greater risk for cranial and spinal cord injuries (Mayeux, 1993). Each child will have different needs when accessing the varying equipment specific to your school yard. While we encourage autonomy, some students may require additional supervision and/ or physical assistance to participate fully. Of course, this is especially important for equipment when there is a possibility to fall from a height (e.g. monkey bars, jungle gyms), particularly for younger children who may not yet know the equipment or their limits. If there is equipment the LP student has trouble using, replace it with an alternative, such as adaptive tricycles for kindergarten. If snowsuits and other heavy-duty winter gear need to be worn, the LP

student may struggle more than her/ his peers so a staff member should be available to help the LP as needed. In some cases, the school may need to provide 1:1 adult supervision.

5 HEALTH AND SAFETY RECOMMENDATIONS

Emergency Protocol

- 5.1 During school-wide safety drills (fire, tornado, lockdown, etc.), consider developing additional strategies or protocols for the LP student. Common concerns include the child being knocked over or pushed down stairs, or otherwise not being able to exit the building or enter a classroom quickly enough. More mobile students may not need help getting to safety in an emergency, but students with mobility challenges may require specific assistance, especially in a multi-level school. Police and firefighters are often involved in drills, and your local paramedic service providers may be useful resources when considering safety protocols specific to the layout of your school. Consider consulting with them and devising a specific safety plan with consideration of physical layout of your building(s) and campus as well as and the physical necessities for your LP student.

In-School Medical Care

- 5.2 If there is a nurse or health care provider at your school, they should be informed about any specific health or physical conditions of the student. We recommend that prescription drugs, pain relievers and heating/ice packs are stored in either the teacher's desk (potentially in a locked box), principal's office or nurse's office. We recommend that older students be taught responsible drug management.

Bullying Prevention

- 5.3 Students of short stature can be targeted by other students based on their physicality. Safe Schools legislation mandates that every school in Ontario to have anti-bullying programs, policies, and procedures in place. Even so, social and emotional challenges reported in a clinical setting have included anxiety, introversion, stigmatization, and juvenilization (Hwang & Seo, 2018). However, there are measures that can be taken to reduce the incidence of bullying and promote LP self-confidence, which mainly consist of educating other students and their parents, allowing them to ask questions, and normalizing the condition.
- 5.4 Advocacy for an LP student within a given school is best done through collaboration between the student, parents, and school staff. The school staff may be tempted to delve into the LP child's specific condition, and dwarfism more broadly, however we recommend focusing on the individual student, and the adaptations and accommodations they require for a happy, safe and successful school career. Teachers play a vital role in educating their students and reducing the incidents of bullying. Promoting inclusion and organically incorporating materials on a regular basis in which little people are portrayed is an excellent start. Consider purchasing books and watching videos that feature people of short stature. If the parents want to send an informative letter or email to other students' parents, help them facilitate this. Each set of parents and their child will have a different perspective on the advocacy process. Please refer to the LPO website for tools and templates, including our *Bullying Awareness Presentations*.

- 5.5 Despite the best efforts of educators, parents, and the LP student, bullying may still occur. Prevention is the main goal, but it is also important to have measures in place to minimize the damage if it does occur. The parents may have their own resources available for dealing with this, but it is important to ensure that a school counsellor or trusted teacher is available for the student to confide in if required.

6 DEFINITIONS

Terms and definitions

Adapted Physical Education: A physical education instructional program for a learner with a disability, based on a comprehensive assessment, to enhance physical fitness and wellness.

Adaptive Equipment: Devices that are used to assist a person in completing activities of daily living, particularly those with disabilities.

Bullying: Unwanted, aggressive behaviour among school-aged children that involves real or perceived power imbalance and is typically repetitive in nature. This can include verbal, physical, and social bullying.

Dwarfism/Student with Dwarfism: A student who has been diagnosed with dwarfism, a genetic or medical condition that results in short stature.

Exceptional Student: A student with behavioural, communicational, intellectual, physical or multiple exceptionalities that require special education.

Individualized Education Plan: A document that identifies a student's specific learning expectations and outlines how the school will address these expectations through appropriate accommodations, program modifications and/or alternative programs as well as specific instructional and assessment strategies.

Physical Disability: A condition of such severe physical limitation or deficiency as to require special assistance in learning situations to provide the opportunity for educational achievement equivalent to that of students without exceptionalities who are of the same age or development level.

7 RELATED LEGISLATION AND DOCUMENTS

Ministry of Education

Bullying Prevention and Intervention, 2012, no. 144

Collaborative Professionalism, 2016, no. 159

Daily Physical Activity in Elementary Schools, Grades 1-8, 2017, no. 138

Developing and Implementing Equity and Inclusive Education Policies in Ontario Schools, 2013, no. 119

Diagnostic Assessment in Support of Student Learning, 2013, no. 155

Early Identification of Children's Learning Needs. 1982, no. 11

Education Act, R.S.O. 1990, c. E.2

- O Reg 181/98: Identification and Placement of Exceptional Pupils
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8 FEEDBACK

- 8.1 School and board staff, LP students and their parents or guardians, and professionals may provide feedback about this document by emailing info@lpo.on.ca.

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