OTHER CONTRIBUTIONS

Exploring E-learning Provision for Children with ME in Scotland
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The rapid development of technology over the last two decades has led to a range of innovative e-learning solutions for education such as the island in Teen Second Life, “Schome Park” (Twining & Footring, 2010) for teenagers. Many such innovations are targeted at young people who would benefit from alternative educational provision, for instance Notschool, and mobile learning (e.g. Lockyer, Johnson, & Dyer, 2010) both aimed at young people who have become disengaged from mainstream education.

However, educational provision for children with the chronic illness ME is rarely discussed, despite research showing that it is the most common cause of long-term school absence due to illness (Dowsett & Colby, 1997). Here we propose that e-learning solutions have the potential to substantially benefit children with ME, enabling them not only to remain engaged with the education system, but to fulfill their educational potential.

Myalgic Encephalomyelitis (ME), sometimes called Chronic Fatigue Syndrome (CFS), is a debilitating multi-system illness resulting in a range of symptoms including profound physical and cognitive exhaustion after minimal effort, significant pain, difficulties with memory and concentration and sensitivity to noise, light and temperature.

It is estimated to affect 25,000 children across the UK, with the most common age of onset being 13 (Dowsett & Colby, 1997). Due to the severity of the symptoms, all but the most mildly affected will experience periods of months and in many cases years, when they are unable to attend main-stream education. An educational strategy which addresses the needs of these students, while supporting their recovery is therefore crucial.

In the UK, local authorities are responsible for implementing legislation such as the Additional Support for Learning legislation and the Equality Act 2010 with respect to all children who have different educational needs. In Scotland this commitment to supporting all children is enhanced through the Scottish Government's “Getting it right for every child policy” which aims to “help children

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and young people achieve their full potential” (GIRFEC, 2008). However research by the Scottish Cross Party Group carried out under the Freedom of Information Act, found that in Scotland, the educational provision offered by local authorities to children with ME was variable, and that there was a very poor understanding of the educational needs of children with ME. The UK charity the TYMES Trust (Young ME Sufferers Trust) report that the majority of calls to their advice line concern unsuitable pressure to attend school. For this reason the education of children with ME often suffers, or in some cases, ceases completely.

The Scottish Cross Party Group looking at the educational needs of children with ME believes that e-learning offers a number of affordances that could be of particular benefit to children with ME, enabling them to reach their full educational potential. Firstly it enables students to pace their activity throughout the day, for instance by taking regular breaks, and for activity to be tailored to the energy level of the individual student. As ME often affects students’ concentration and memory, the ability to replay recorded lessons is particularly useful. E-learning enables students to study from home, so limited energy resources can be conserved for learning, social interactions, as well as tasks associated with daily living. It also offers a flexibility, enabling students to study at the time of day when they feel most well. Indeed E-learning itself is no longer viewed as second best by many practitioners and researchers; see for example the manifesto for teaching online (Ross et al, 2011), particularly the first statement “Distance is a positive principle, not a deficit. Online can be the privileged mode.” Recent technological developments also make e-learning both a realistic and a cost effective solution. This is particularly so in Scotland, some of which is sparsely populated, making accessing alternative face to face education both logistically difficult and expensive.

Two solutions in particular could be of benefit to children with ME. The first makes use of the expertise of the Nisai Virtual Academy (NVA), who have substantial experience of the problems faced by students with ME (Small & Colby, 2010). The NVA, currently available to some students in England, provides E-learning tuition for 350 students (of whom approximately 30% have ME), using a combination of synchronous and asynchronous teaching. NVA currently only offer English qualifications (e.g. GCSEs), but it has the potential to expand to offer the Scottish curriculum. NVA provide a timetable tailored to each student’s individual needs, comprising of lessons of between 30 and 60 minutes, in addition to social networking opportunities, enabling the students to interact with others in similar situations.

The second option is to extend the use of the national (Scottish) schools’ intranet, GLOW, which is being under used across the country. This could be incorporated into a virtual learning environment (as demonstrated by Perth and Kinross Education Authority) which would allow students to use GLOW from home, enabling them to take part in their regular school lessons and to record and replay the lesson in their own time. Effective use of GLOW could benefit young people across
all local authorities by providing effective, interactive online education. Each of these systems has advantages and disadvantages. However, we believe that a flexible E-learning system which allows students to study from home while they are too ill to attend school, could be highly beneficial to students with ME, as well as those with other long term health conditions.

References


