



Crohn's and
Colitis Canada
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A TEACHER'S GUIDE

UNDERSTANDING YOUR
STUDENT'S JOURNEY WITH
CROHN'S OR COLITIS



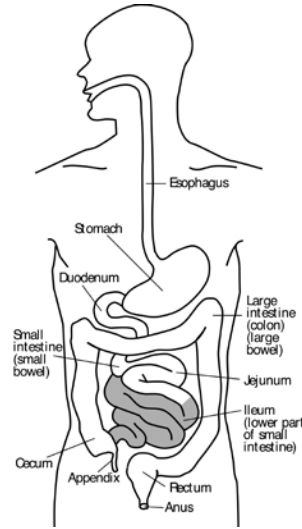
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INTRODUCTION

Students living with Crohn's disease or ulcerative colitis may find themselves needing extra support and accommodations in school in order to be successful in their academics AND to ensure that their health is maintained.



WHAT ARE CROHN'S DISEASE AND ULCERATIVE COLITIS?



Crohn's disease and ulcerative colitis are the two main forms of inflammatory bowel disease (IBD). These diseases are not contagious, however their symptoms can be very debilitating and can affect an individual's quality of life. They are life-long conditions that affect the digestive tract or gastrointestinal (GI) tract causing ulceration and resulting in severe pain,

urgent bathroom visits and often requiring medication or surgery to treat. Since Crohn's and colitis inflame the lining of the GI tract, digesting food, absorbing nutrients and eliminating waste can be challenging. In Canada, there are nearly 250,000 people with Crohn's or colitis, or one in every 150 Canadians. People with Crohn's or colitis tend to be diagnosed in their late teens or early 20s; however, the number of children living with IBD in Canada has almost doubled since 1995. An estimated 6,000 Canadian children have Crohn's or colitis.

Crohn's disease is a condition in which the walls of the GI tract are inflamed, irritated and/or swollen. This inflammation can occur anywhere in the GI tract from the mouth to the anus.

Ulcerative colitis causes inflammation of the GI tract in the large intestine or colon only.

Students with Crohn's or colitis go through times when their disease is active and causing symptoms (also known as a 'flare-up') and times when it is not active and few or no symptoms are present (also called 'remission'). Many medications are aimed at bringing periods of flare-ups into a state of remission and keeping it that way for as long as possible.

COMMON CROHN'S AND COLITIS SYMPTOMS

- Abdominal pain, sometimes severe
- Cramping
- Gas and bloating
- Fatigue
- Diarrhea (possibly bloody), often frequent and urgent
- Loss of appetite
- Weight loss
- Nausea or vomiting
- Joint pain

HELPING STUDENTS WITH CROHN'S OR COLITIS

Crohn's disease and ulcerative colitis are unique to each individual and coping methods can range from person-to-person. Both diseases are unpredictable and symptoms can vary.

STUDENTS WITH CROHN'S OR COLITIS MAY FEEL;

- Embarrassed
- Different from their peers



- Reduced self-esteem
- Fatigued
- Heightened levels of stress and/or anxiety
- Anxious and/or depressed

These issues may lead a student to withdraw from group or social activities, act out in anger, and/or neglect their diet and medications.

The best way for teachers to respond to the needs of their students with Crohn's or colitis is to treat them as individuals, helping them identify their needs while in school, and supporting access to the accommodations they may require. The student, his/her family, teachers and school administrators share a common goal of wanting the student to be successful in their academic careers. Crohn's and Colitis Canada provides the following tips and advice to help with this shared goal.

MEDICATIONS: BE PREPARED AND COMMUNICATE



It is important that the parents of a student with Crohn's or colitis regularly connect and update their child's teacher. Open communication helps ensure the student's symptoms, prognosis and medical treatments are being discussed and managed. Parents appreciate when teachers ask questions to support the student's learning experience and provide support to keep their studies moving forward.

No two Crohn's or colitis cases are the same and treatments can vary, both from one individual to another, and over time for a single individual. Children may differ from teens, who may differ again from adults. In general, medications fall into one of two categories

- A. Medications that are used to reduce inflammation (and may therefore reduce Crohn's or colitis symptoms), and;
- B. Medications aimed only at symptom-management and do not affect the inflammation in the GI tract.

Parents must bring all medications to the attention of the school. The principle/vice-principal must be aware of the medication(s) and all pertaining details (dosage, side effects, etc.). By being aware of the medications and their side effects, the teachers and administrators can monitor the student and notify the parents if there are any symptom changes throughout the day.

Canadian schools do not allow teachers to administer medications to their student(s). Medication is dispensed from the office unless, in the case of emergency, such as the need for an Epi-pen, when the child cannot self-administer. Each school board has medical administration forms, which are given to parents to inform the school of their child's medical needs. Parents should ask teachers about these forms, and teachers can explain the school's policies. Some parents may share medication details and possible side-effects with the teacher in addition to the forms – if so, please do so prior to each school year with new teachers. It is a good idea for teachers to have this information in case of an emergency.

For students who are self-administering medications, having teachers and parents stay connected and discuss accommodations can be an important part of the student's success in caring for their health.

MEAL TIME AT SCHOOL

Food choices can be a tricky thing for parents and teachers when a student has Crohn's or colitis. Again, because the diseases are so individual, many students generally follow a custom meal plan of what works for them. This meal plan has been developed over time, often using a trial and error process and students are generally very familiar with what works for them. Discuss with the student and his/her parents what foods should be avoided (also known as 'personal trigger foods'). These foods vary and may change if the student is on certain medications. Ask the parents to let the school and teacher know of any changes in medication or diet as early as possible.

It is common for schools to host pizza lunches, birthday and holiday celebrations. With some advance warning, it is possible for the parents and teachers to make accommodations at school events that will have food present. Here are some tips:

- Try to provide the parent with one week notice about an event;
- Encourage parents to recommend where to purchase, for example, dairy-free pizza if the student is restricted from dairy;
- If the student has a number of dietary restrictions, reassure the parents and the student that they won't be excluded from the event, and welcome a 'safer' pizza alternative from home; and,
- Help the student feel accepted and included by avoiding too much focus on the food – instead, keep the celebrations front and centre.

It is rare that students with Crohn's or colitis need to be reminded of the foods they should not be eating – if you want to do so, try to have a private chat with the student and/or their parents.

As mentioned, sometimes the amount of nutrients absorbed by an ulcerated GI tract may be limited due to Crohn's or colitis. This can take place even when the diseases are in remission. To counter this loss of nutrients, some students may have a percutaneous endoscopic gastrostomy (PEG) tube inserted in their abdomen. This is a feeding tube that provides liquid nutrients directly into the stomach. Some students who have the PEG tube may experience feelings of anxiety or embarrassment. Try to avoid focusing on it, but if attention is needed, be as matter-of-fact as possible.

WASHROOM BREAKS

Diarrhea and frequent/urgent washroom visits are a common element of living with Crohn's and colitis. Some people may experience 20 or more trips to the washroom during the course of a day when experiencing a flare-up. Students will experience a high degree of anxiety and fear when this occurs but you can help your student(s) feel at ease in moments of pain



and discomfort. Support your student(s) by allowing him or her to use the washroom as needed, even providing a personalized 'open hall pass' where such are required. Consider arranging to have the student sit near the door of the classroom so that they can slip out discreetly rather than disrupting the class.

Simple washroom accommodations, like the hall pass, help the student feel more comfortable and less anxious about having an accident – it can help keep his or her focus on your lesson plan. It may also be helpful to arrange, where possible, for the student to have use of a bathroom other than the student washrooms. Having frequent diarrhea in a public area with lots of other children around can be excruciatingly embarrassing.

CHANGE OF CLOTHES

Due to the urgent nature of washroom visits for a student with Crohn's or colitis, sometimes accidents happen. Teachers and parents are encouraged to have a change of clothes left at the school. Emergency contact numbers should also be accessible for teachers to use to contact family in case of an accident or emergency.

ABSENCES FROM SCHOOL

Crohn's and colitis are unpredictable, and students may miss classes for a short or extended period of

time depending on the severity of their symptoms. Absences from class may be due to routine doctor's appointments or to periods of hospitalization. Please be supportive and flexible with assignment deadlines. Try to communicate regularly with the student's family to arrange homework drop-offs/pick-ups (this is, if there is a possibility that the student can study at home). Having a teacher stay in touch while the student is out of school can be an important way to limit isolation and encourage the student to stay engaged.

EXAMS AND TEST

Exams and tests are stressful for most students. Although stress is not a cause of Crohn's or colitis, it may aggravate or increase symptoms. During testing, teachers should allow the student washroom breaks as needed, as they did in the classroom, and provide extra time to make up for time away from the test. Again, as with the classroom seating plan, allowing the student to sit near the exit will limit disruption to others and minimize embarrassment. Specialist doctor's visits, such as to a pediatric gastroenterologist or to a physician in another city or town, may be very difficult to re-schedule. If an appointment falls on a test date, work with the student and parents to find a way to accommodate the appointment. If hospitalization occurs over a test or exam period, make arrangements with the parents to connect and discuss re-scheduling once the student has recovered.

EXTRA-CURRICULAR ACTIVITIES/PHYSICAL ACTIVITIES

Students with Crohn's or colitis should be encouraged to participate in extra-curricular activities as other students do. Students should be able to monitor their energy levels and determine their choice of activities in most instances. Teachers in charge of these activities may find it helpful to communicate with the parents, and to be notified of any changes of import. As ever, support and motivate the student to do the best they can and they will respond well, but don't force them to over exert themselves.



BULLYING AND SHARING INFORMATION

Certain symptoms of Crohn's and colitis may inspire bullying behavior for students who do not understand the diseases. Teachers are usually very good at sensing when bullying is happening in their classrooms and know to address it immediately. Avoid bringing attention to the student's condition and focus on team building. Discuss the negative effects that bullying can have on people in an age appropriate and inclusive manner. Singling out the student with Crohn's and colitis, however, can make the student very uncomfortable and vulnerable.

Students with Crohn's or colitis will decide when they want to tell their peers about their health – and teachers should respect their choice. However, together, you and the student could make the introduction of the topic easier when the student decides it is time. Consider assigning a science activity that explains Crohn's or colitis and how the GI tract is affected. Discuss the timing with the parents and the student ahead of time, to decide if and how to inform classmates. By engaging the class to have a better understanding of what Crohn's and colitis are, and how they affect the body, the student may feel more confident in sharing their own feelings about living with IBD.



POST-SECONDARY EDUCATION

Post-secondary education can be a difficult transition time for many people, but especially students living with the unpredictability of Crohn's or colitis. This is also a time when students are transitioning from pediatric care to adult care, changing physicians and specialists, and assuming responsibility for their own healthcare in full. A recent survey conducted by Crohn's and Colitis Canada found that 69% of people who had Crohn's or colitis when they were young were delayed in completing their post-secondary education due to their disease. Other students were first diagnosed once they started university or college.

Virtually all universities and colleges in Canada have an office for students with disabilities that can help provide support to students and work with your teachers and professors to create reasonable accommodations. It is strongly suggested that the student meet with a representative by phone or in person from this office when they are accepted to the university or college of their choice (or when diagnosed).

Even if the student is in remission, it is best to be informed and to know what accommodations can be made – this will help reduce the stress experienced. Some accommodations may include (but are not limited to):

- Changing required number of hours per semester;
- Providing a specific residence room (with private washroom, if the facility permits);
- Adjusting assignment due dates or exam dates (due to flare-ups or hospitalization); and
- Providing class notes when absent.

CROHN'S AND COLITIS CANADA

Crohn's and Colitis Canada offers a variety of patient programs, particularly those for youths. Consider joining education events that cover a wide range of topics, including that of transitioning to adult care, or applying for the following programs:

ABBVIE IBD SCHOLARSHIP

The AbbVie IBD Scholarship Program, in partnership with Crohn's and Colitis Canada, helps students with IBD pursue their dreams. These one-time scholarships of up to \$5,000 (CAD) are awarded to students who are living well with Crohn's or colitis, who are striving to sustain an optimal level of wellness, all while excelling and inspiring others to do the same. The scholarships are available to students of any age, diagnosed with Crohn's or colitis, who are entering into or currently attending a Canadian post-secondary educational institution. Visit ibdscholarship.ca.

CAMP GOT2GO

Camp Got2Go is a one-week, overnight summer camp experience for youths 9-17 living with Crohn's disease and ulcerative colitis. Campers get the chance to have an amazing transformational experience, doing ordinary camp activities with other kids living with IBD. Visit campgot2go.ca.



ADDITIONAL RESOURCES

Additional information can be found on the Crohn's and Colitis Canada website including educational brochures about specific topics and a video that explains IBD with illustrations (great for the classroom). Also, parents can go online and download a template letter that can be customized, which helps to explain to teachers any accommodations that may be required. The Canadian Digestive Health Foundation (CDHF) has also developed a "Blackboards and Bathrooms" resource for teachers and can be found on their website.



ABOUT CROHN'S AND COLITIS CANADA

Crohn's and Colitis Canada is the only national, volunteer-based charity focused on finding the cures for Crohn's disease and ulcerative colitis and improving the lives of children and adults affected by these diseases. We are one of the top two health charity funders of Crohn's and colitis research in the world and the largest non-governmental funder in Canada. We are transforming the lives of people affected by Crohn's and colitis (the two main forms of inflammatory bowel disease) through research, patient programs, advocacy, and awareness. Our **Crohn's & Colitis – Make it stop. For life.** Campaign will raise \$100 million by 2020 to advance our mission.

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For more information on Crohn's disease or ulcerative colitis visit our website **crohnsandcolitis.ca** or call 1-800-387-1479

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