Childhood Epilepsy and School:
A Study into the Factors Affecting Inclusion

Rachel Standen

1 in 240 school-aged children have a diagnosis of epilepsy in the UK.

Approximately 50% of children with epilepsy experience difficulties in school ranging from slight underachievement to severe problems.

Current guidelines from the Department of Education refer primarily to medical management of seizures.

Research Questions
1. What factors are associated with a high level of school inclusion for children with Epilepsy in the United Kingdom (UK)?

Factors
- Age of Pupil
- Age of Seizure Onset
- Seizure Frequency
- Seizure Type
- Prescription of emergency medication
- Teachers’ understanding of epilepsy
- Type of provision (e.g. mainstream or specialist)
- Overall Score on the SDQ
- Scores within individual subtests on the SDQ

2. To what extent does the ABLE correlates with the SDQ when measuring the psychological adjustment of children with epilepsy?

Measures
The inclusion measure was adapted from Survey of Teacher Attitudes and Opinions about Students with Special Needs and the Types of Support for Integration/Inclusion and follows the Farrell (2004) conceptualisation of school inclusion.

Presence the extent that a child is in the classroom,

Acceptance how included and welcomed the young person is by peers and staff within the school.

Participation the extent to which pupils contribute actively in all school' activities

Achievement the extent to which pupils learn and develop positive perceptions of themselves.

Further information on the psychological adjustment of the children with epilepsy was collected using the Parent and Teacher Versions of the Strengths and Difficulties Questionnaire (SDQ) and the Parent and Teacher versions of the Assessment of Behaviour and Learning (ABLE).

Method
34 parents and 34 teachers completed online questionnaires which were quantitatively analysed to identify the strength of the relationship between the factors of interest and overall inclusion score.

Findings
Six factors were found to be significantly correlated with parent and teacher ratings of inclusion;

- Age of seizure onset,
- Seizure frequency,
- Type of provision,
- Teacher understanding of epilepsy,
- Presence of peer difficulties
- Total ABLE score.

Two more had moderate effect size

- Age of the Child
- Prescription of Emergency Medication

There was also a strong positive correlation between risk indicators on the SDQ and the ABLE suggesting the ABLE is an appropriate measure of neurobehavioural presentation for children with epilepsy.

References