What is Expected of an Open Airways for Schools Facilitator?

You may be getting nervous about getting up in front of a group of children for the first time and talking about a subject you may not feel you know very well. That is normal, especially if you do not have a teaching background. The Open Airways for Schools (OAS) curriculum is very thorough and easy to follow. It includes detailed instructions, handouts, posters, and directions. If a question arises that is not covered in the curriculum, it is appropriate to say, “I don’t know, but I can find out for you.” A call to the American Lung Association office should provide the needed support.

Your role as a facilitator is to allow your students to share their experiences and build upon them to gain new skills in asthma management. The curriculum is designed so that any adult who likes children and can read can teach the material. Managing a classroom of young students may seem daunting, but this can be an extremely rewarding experience for both you and the children.

The OAS facilitator not only teaches the curriculum to students, but also creates a supportive peer group for these children. It is the instructor who sets the tone for the class. Focus on helping the children feel safe talking about their experiences and their feelings about having asthma. For some, this will be the very first time they are able to communicate such things. Having a safe space in which to do so sends a powerful message of acceptance and reassurance to these children. It is important not to contradict this by using sarcasm, put-downs, or negative comments. Feedback should always be positive.

How Do I Get the Children to Discuss and Solve Problems?

The key to getting children involved in sharing their experiences and developing solutions to asthma problems is to ask open-ended questions of the whole group. An example is “How do you feel when you start to have asthma symptoms?” When one child answers, repeat the answer using the child’s name and then ask if anyone else feels that way. “Enrique says he feels angry. Who else feels that way?” The other children’s responses will help the class learn that in most cases their feelings are shared.
The next step is to explore further by asking: “Are there any other feelings you have when you get asthma symptoms?” Asking questions of the group encourages participation by all children and allows shy children to say they agree or just to nod. It is best not to call on children by name, particularly shy children, because this restricts discussions and puts shy children on the spot.

**What If I’m Nervous?**

It is natural to feel nervous. The key is to prepare well for each lesson. Read over the lesson until you understand the information. Read it aloud and time yourself (the student’s responses will increase your time by one-third). Practice the lesson in front of a friend or family member. Always make sure you have all the materials with you and enough time to set up the classroom. When students arrive for the first lesson, greet them, have them put on nametags, and ask them to find seats. Smile and look into their eyes. During the session, do not feel self-conscious about holding the curriculum book or even reading from it. Just make sure you look up to talk to the children, especially when you ask them questions.

As you move through the lesson, you will start focusing more on the children, helping them to understand the material, and worrying less about yourself. Your nervousness will decrease.

**How Do I Handle the Homework Assignments?**

The take-home assignments are the key component of the curriculum. Some facilitators put the letters in an envelope addressed to “the parents of...” Through the information sent home, parents learn how to help their children better manage asthma and improve the quality of life for the entire family. Encourage the children to “teach” the program concepts to their family. Students who enjoy the class are more likely to share what they have learned at home. Praise children who complete the assignments, but do not scold those whose assignments were not done.

**How Do I Talk to Children?**

Stick to the curriculum. If you deviate from the content, you will be rushing to complete the class material. The curriculum suggests ways to ask questions, give encouragement, and praise children for their answers and involvement. Open-ended questions allow children to make decisions and use problem-solving skills. Stress the positive attributes and ideas of each child by using phrases such as “Good answer.”
Then say the child’s name and restate what they said. In this way, you convey that you understood and value the child’s input.

If a child answers a question incorrectly, thank them for the response but follow up with the correct answer. You might say, “Doctors tell us that ...” or “Experts say...” Never scold a child for a wrong answer. Instead, redirect the class by asking the following questions, “What can happen if you do that?” “What can you do instead?” If a child asks a question and you do not know the answer, say so. Tell them you will try and find the answer and get back to them at the next lesson. Contact the American Lung Association for asthma information.

**What Can I Expect from the Children?**

Like adults, children differ in personality and experiences. Some of these children may have dealt with severe or poorly managed asthma for a long time. Most of them have had asthma episodes they remember. A few children may have been first diagnosed with asthma when they were five. These kids may not have had symptoms for a long time. Given that the children’s familiarity with asthma may vary it is best to stick closely to the curriculum.

Refer to the introductory pages of the curriculum guide to learn how to manage overexcited, distracted, shy and misbehaved children.

**Can Facilitators Hug Their Students?**

While the American Lung Association advises that there be no physical contact between facilitators and their students, this class environment can be a bonding experience for the children. They often want to be affectionate with their instructors, hugging or touching them.

Every volunteer who works with children should be fingerprinted and screened with a justice agency to make sure that OAS does not become a vehicle for inappropriate persons to interact with children. There are also guidelines to ensure that accusations of misconduct can’t be made against the OAS volunteers. Please follow these guidelines for your protection and the protection of the students.

- Never be alone in a closed room with a single child. Keep the door to the classroom open or stand in the hallways until at least two students are present.
- Never pick up or physically restrain a child in any way, unless in defense of another person.
- Never let a child sit on your lap and never put your arm around a child unless responding to a hug the child initiated.
- Never accept phone numbers or email addresses from the children or share yours with them.

**What Should I Do If I Think a Child is Abused?**

Because the OAS class experience encourages children to talk about their feelings in a safe environment, an abused child may disclose details about their circumstances. It is possible you may see indications of possible abuse. These situations are rare, but it is important to know what to do if they arise. As a result of The Child Abuse Prevention and Treatment Act (as amended 42 U.S.C. 5106a) all 50 states, the District of Columbia, and US Territories have statutes specifying procedures for handling reports of suspected child abuse or neglect. Your school or American Lung Association staff contact can provide you with information on the policies for your state and school. You should make a report immediately if you have reasonable cause to suspect a child has been subjected to abuse or neglect and notify your school principal, school nurse, and American Lung Association as well.

To learn more about the role of the OAS facilitator, refer to the curriculum guide or contact the American Lung Association.