

Thank you for the opportunity to speak with you today.

I am here today to address the issue of opioid addiction and its affects on Vermont's school children. While I commend the state on it's efforts to address opioid addiction in adults, the state of Vermont must not overlook the needs of the children affected by these addictions. While the state has increased its efforts to confront the problem of opioid addiction in adults, there are children of these addicted adults that are also affected by that addiction and their needs must not be overlooked.

I am proud to say that I have worked as a special educator for almost 40 years. While the district I am currently in has seen a decrease in the general student population, the number of students with special needs has increased significantly. Luckily, these children are often identified at a very young age, but their needs have become more critical.

Many of these children are drug addicted at birth, or have been exposed to drugs or the effects of drugs in one way or another. If their parents were addicts, the children may have been exposed to violent or neglectful behavior as well. The impact on their education is substantial, often affecting their ability to learn to read, attend, speak, listen, socialize, or grow. These children may have cognitive, communication or sensory deficits. Typical classroom noises may cause them to react in unusual or violent ways. If asked to participate in a general classroom activity, these children may not have the cognitive or social skills necessary. As special educators we have always used alternative methods to teach our students, but these children have more issues, and less control, tolerance, or capacity to function in a general education setting.

As special educators our job is so much more than teaching reading or math skills, we document behavioral incidents, develop behavior plans,, correspond with behavior consultants, DCF workers, mental health professionals, and look for ways to teach, using alternative approaches in alternative settings. Often we are dealing with children who lash out, run away, hit, scream, bite, spit, destroy materials and property, and put themselves and others at risk.. The most significant change is in the increasing need to intervene in physically aggressive behavior, including blocking blows, punches, and other violent acts.

Over the years that I have been in this profession, I have taught many children with various needs. I have seen a marked increase in the number of children affected by their parents' opioid addiction and the severity of the affects of that addiction.

As children initially enter school, some transitions can be particularly challenging. In a recent case in my school, two kindergarten students were experiencing challenges with the transition to school. Often they ran from teachers, swore at staff, kicked, punched, threw materials and made for a very unsafe environment for themselves and others. Because of this situation with these children, we went through the special education evaluation process, and developed plans to support each child's needs. Because of their aggressive behaviors, they needed an alternative classroom setting, one that would support their learning while keeping them safe when they could not maintain appropriate behavior in their general education setting. My room became that alternative classroom. This meant that when I was teaching one or more children with severe learning issues to read, I often had one or more students in another part of my room, screaming, throwing

objects, fighting with educational assistants, or me. This scenario continues to play out, and we continue providing alternative settings for students unable to stay in a general education classroom.

The special needs population is growing, yet our budget isn't. Schools need more resources to deal with this growing population. Currently funds are taken from other resources, stretching the budget even tighter. While on one hand the governor discussed supporting the efforts to fight opioid addiction, but then proposed that school budgets be level funded. These addictions don't just impact the addict, they affect their children as well. We, as educators of these children, see the results of this, and while addiction is growing, so too is the long-term affect of addiction on children in the public school setting. Instead of taking away funds from public schools, resources need to be increased to meet the needs of our ever changing population.

Thank you for your time and consideration.