

# WEBINAR

## *05-03-2026*

*La connessione tra studenti in Istruzione Domiciliare (ID) e la propria classe di appartenenza*

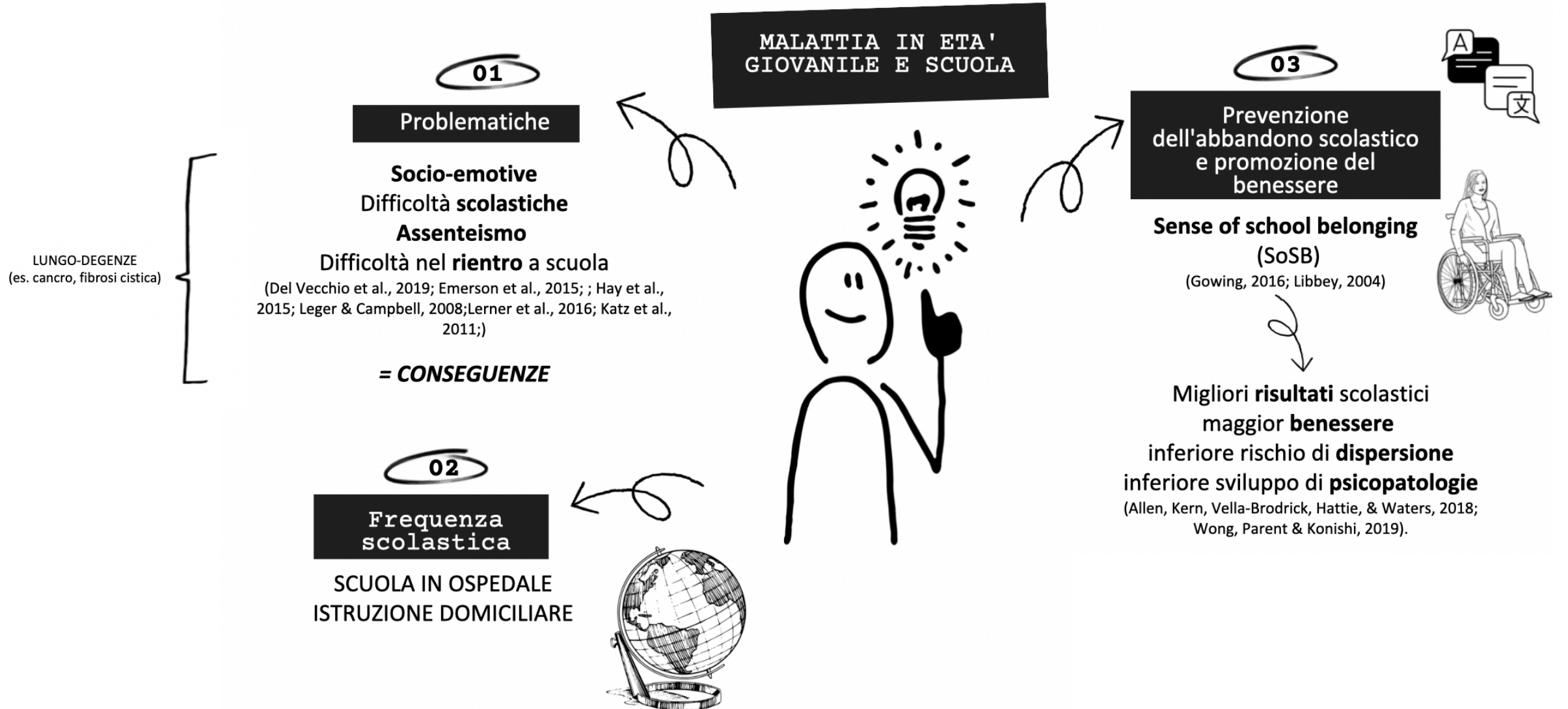
# «La connessione tra studenti in Istruzione Domiciliare (ID) e la propria classe di appartenenza»

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FORLILPSI, Università di Firenze



# Alcune premesse per allineare il pensiero...



- Sensazione di smarrimento, ansia, preoccupazioni rispetto alla salute e gestione della classe (Mukherjee, et al., 2000);
- Senso di impotenza ed inefficacia, nei confronti dei bambini/ragazzi, genitori (Alisic, 2012);
- Che fare se rientra a scuola?(Shiu, 2004);
- Difficoltà nel contattare la SIO e collaborare (Jackson, 2013);
- Lacuna nella formazione dei docenti (Clay et al., 2004);

**Docenti di appartenenza**

- Necessità di comprendere la patologia (Shiu, 2001);
- Difficoltà dalla diagnosi del compagno fino al rientro;

**Compagni di classe**

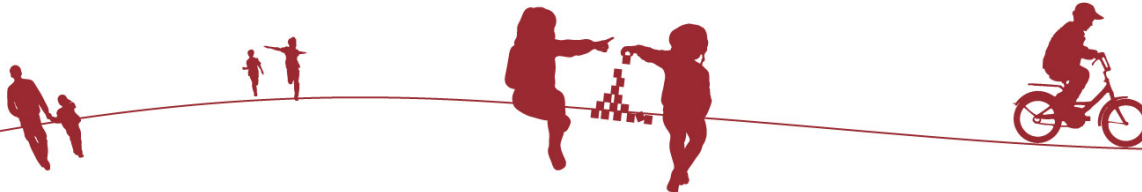
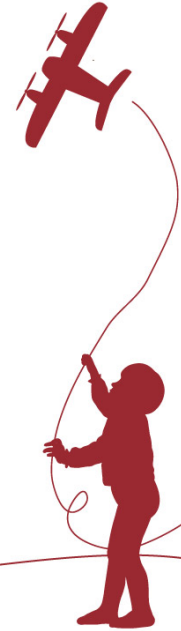
- Difficoltà a livello scolastico (Capurso, 2006);
- Difficoltà cognitive (Jacola et al., 2016);
- Difficoltà emotive (Suris, Pacera & Puig, 1996);
- Lum e colleghi (2017) sottolineano importanza di sostenere lo studente scolasticamente per favorire maggior benessere;
- Rischio bullismo (rassegna di Pinquart, 2017);

**Studenti**

*Cosa ci dice la letteratura sul tema dei vissuti emotivi dei docenti ospedalieri e dei docenti di ID?*

## *La scuola come «ponte» e come aggancio alla «parte sana»*

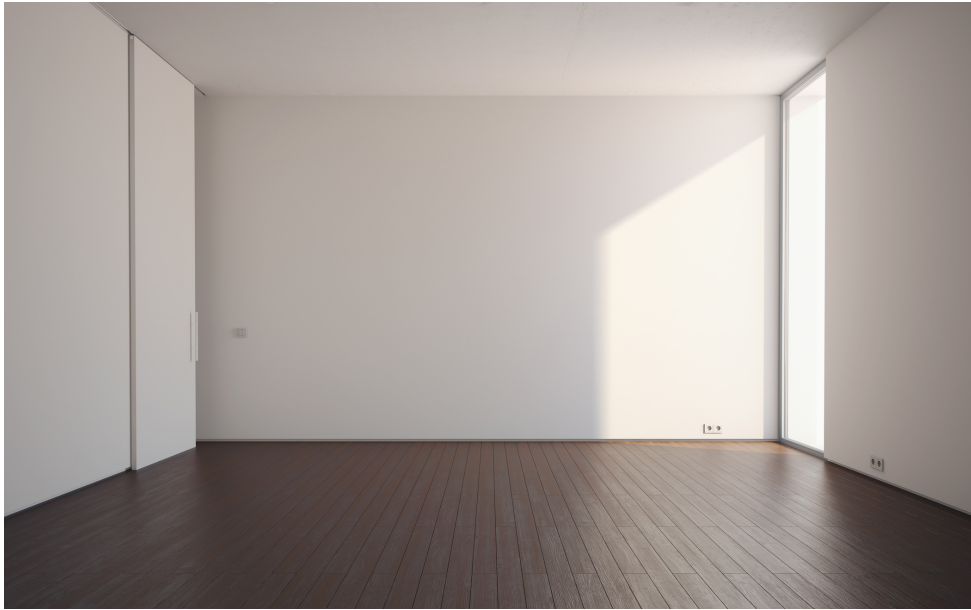
*“Il bambino [...] scopre, attraverso la proposta di uno speciale progetto didattico a lui rivolto, che non tutto si è rotto. Solo una parte di sé è malata, l'altra, quella sana, può continuare come prima. Vede che, benchè in un ambiente diverso e mentre la sua vita subisce cambiamenti enormi, la scuola continua, secondo i principi di prima (nessuno “sconto” per il fatto di essere in ospedale!), pur tenendo conto delle difficoltà e dei disturbi” (Axia, 2004, p. 224 – 225).*



Spogliamoci dalla  
dimensione “didattica”



Indossiamo l'abito della  
dimensione relazionale



# *Mettiamoci nei panni di uno studente frequentante l'istruzione domiciliare e di un docente di ID...*

*La presenza dei genitori*



*L'ingombro della malattia*



*Spazi della casa, intimità, quotidianità*

## La relazione tra insegnanti e famiglie durante gli interventi di istruzione domiciliare

Francesca Linda Zaninelli<sup>1</sup>, Germana Mosconi<sup>2,3</sup>

### Abstract

Il presente contributo tratta il tema dell'istruzione domiciliare e in particolare la relazione tra insegnanti e familiari dei bambini malati, che non possono frequentare la scuola di appartenenza. Le prime riflessioni sui dati raccolti durante l'anno scolastico 2020-2021 mostrano come la relazione con i familiari risulta condizionata da alcuni fattori, quali il tipo di malattia (oncologica o neuropsichiatrica), il grado di scuola frequentato e l'età degli allievi. È altresì evidente come in numerosi casi essa non costituisce per i docenti un tema centrale nella loro professione. Questi primi risultati confermano l'importanza di riportare al centro dell'attenzione il tema trattato, in particolar modo nei contesti scolastici non tradizionali.

**Parole chiave:** istruzione domiciliare, contesti scolastici non tradizionali, relazione insegnanti/famiglie, scuola primaria, scuola secondaria di primo e secondo grado.

### Abstract

This paper deals with the topic of home education, focusing on the relationship between teachers and family members of sick children unable to attend school. Starting from the teachers' words, collected during the school year 2020-2021, we assume that their relationship with family members is conditioned by some factors, such as the type of disease (oncology or psychiatry), the school grade attended, and the age of the pupils. It is also evident that in many cases it is not a central issue for teachers in their profession. These results confirm the need for more reflection about this topic by teachers working in non-traditional school settings.

**Keywords:** homebound schooling, nontraditional school settings, teacher/family relationship, primary school, secondary and high school.

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<sup>3</sup>L'articolo è frutto del lavoro congiunto delle due autrici. Nello specifico, sono da attribuirsi a Francesca Linda Zaninelli i paragrafi 1 e 2 e a Germana Mosconi i paragrafi 3, 4 e 5. Le *Conclusioni* sono a cura di entrambe.

# Scuola – famiglia e cronicità

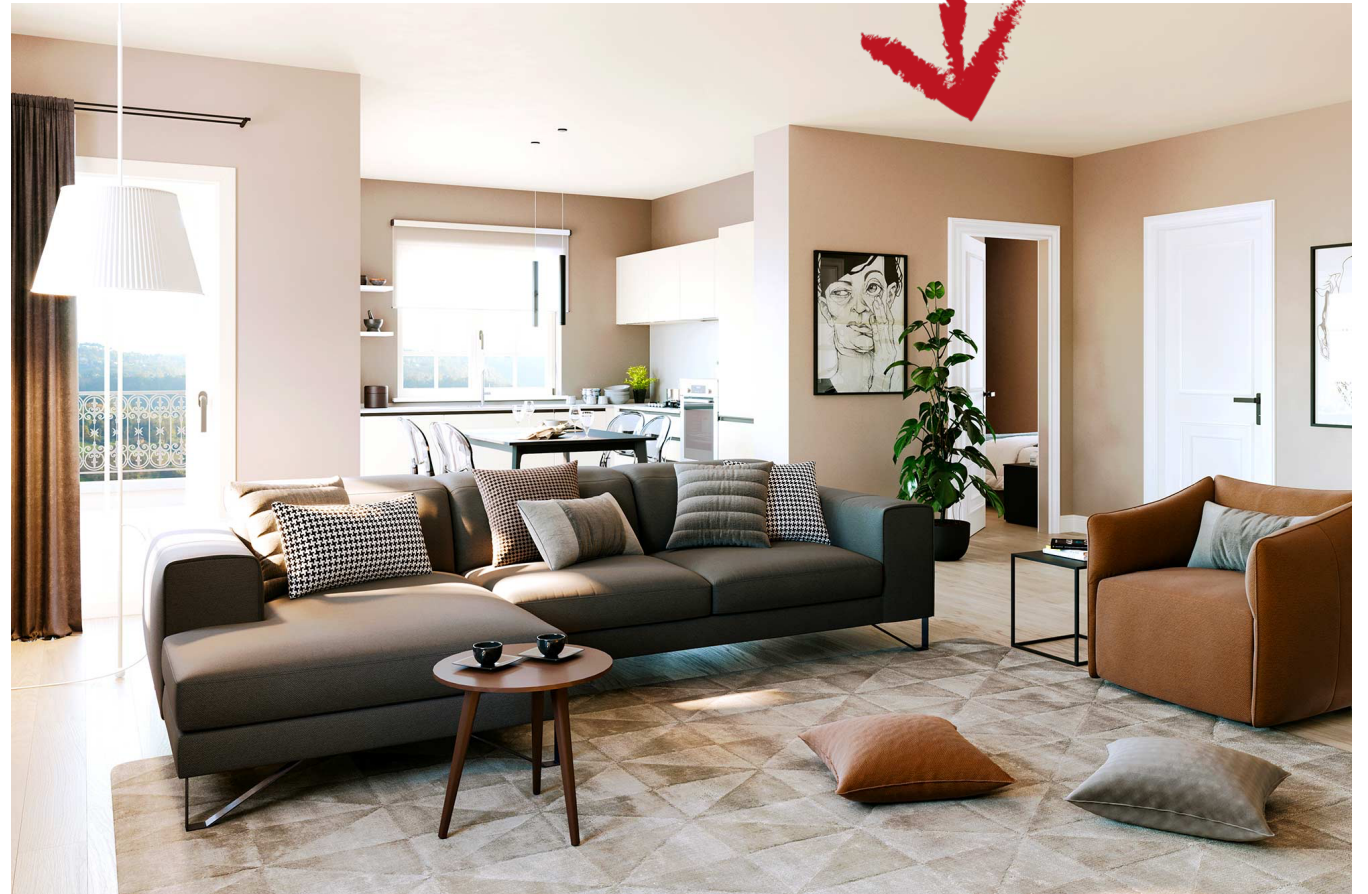
- **Presenza della famiglia nel Sistema educativo**
  - ostacolo o risorsa?
  - non riguarda il lavoro dell'insegnante?
  - dipende dalla buona volontà/caratteristiche personali dell'insegnante?
- **Presenza dell'insegnante nel Sistema familiare:** aspetti di pianificazione e organizzazione, aspettative, difficoltà relazionali
- Il ruolo dell'età, della patologia dello studente, dell'attaccamento

# *Mettiamoci nei panni di uno studente frequentante l'istruzione domiciliare e di un docente di ID...*

*La presenza dei genitori*



*L'ingombro della malattia*



*Spazi della casa, intimità, quotidianità*

# *...E nei panni di un docente di scuola di appartenenza*

*L'esempio della sedia vuota*



*Sentirsi «impreparati»  
sull'argomento e bisogno di  
formazione sul tema*



# Ripensiamo al titolo del nostro intervento

«La connessione tra studenti in Istruzione Domiciliare (ID) e la propria classe di appartenenza»



Di che «connessione» stiamo parlando?



Il ruolo dei devices



Quali costi?



L'elemento relazionale:  
Sentirsi pensati,  
Sentirsi presenti





# Sense of School Belonging and Paediatric Illness: A Scoping Review

LUCREZIA TOMBERLI

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LITERATURE REVIEW

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HEAL

HELP

HOPE

REDLACEH

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KEYWORDS:

hospital-based school; child with special needs; sense of school belonging; hospital teachers; school attendance

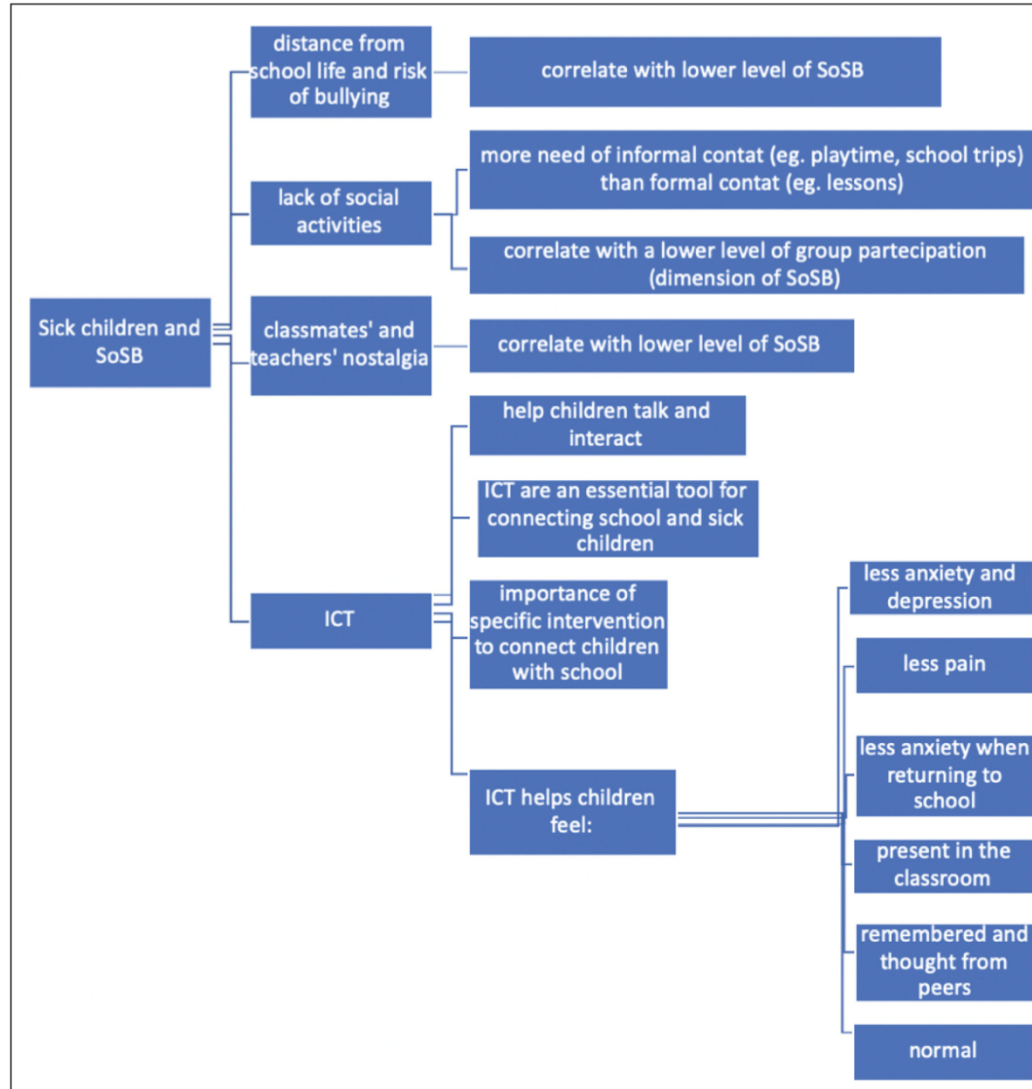
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## ABSTRACT

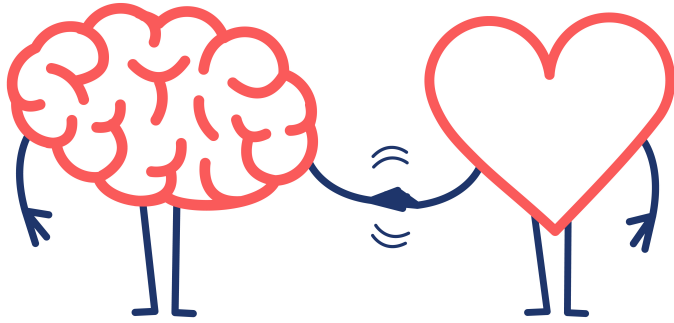
The experience of hospitalization leads children to move away from their everyday life, such as school attendance. Participating in school activities and relating with classmates are important experiences in children's development and promote a general sense of school belonging.

A scoping review was conducted on the sense of school belonging (SoSB) of school-age children with medical conditions. The review concerned four specific research questions: (a) How is SoSB studied and indexed? (b) Has research on this topic changed over time? (c) What methods and techniques are used to study this topic? and (d) What role does SoSB play in the life of pupils with medical conditions? Four databases were searched: PubMed, Scopus, PsycInfo, and Education Source. The abstract and full-paper screening process identified 10 articles. A qualitative line of argument metanalysis highlighted numerous interesting aspects: SoSB is a psychological need for pupils with a medical condition and information and communication technologies (ICT) offer an opportunity to promote SoSB and make pupils feel greater levels of well-being, less pain, and fewer negative emotions. Promoting SoSB is important for fostering a better quality of life for children with illness, helping them feel more normal and part of the class, despite not being present; hospital and regular schools should engage in creating connection opportunities for pupils with medical condition and their classes.



**Figure 2** Children With a Medical Condition and SoSB: Correlated Dimensions, Emotions, and Cognitions.

# The INSCHOOL project: Young people with long-term physical health conditions: An in-depth qualitative study of their needs at school



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#### Funding information

National Institute for Health and Care Research

#### Abstract

**Introduction:** The INSCHOOL project aimed to understand the school experiences and unmet needs of young people across a diversity of long-term physical health conditions.

**Methods:** Young people aged 11–18 years, in mainstream secondary school in the United Kingdom, with one of 11 physical health conditions were invited to unique participant-driven interviews, focus groups, or written activities. Creative preparation activities were provided to give participants increased control over the data collection and prioritize their voices. A needs analysis, in combination with participatory analysis sessions with young people, identified the common needs of participants in relation to their school lives.

**Results:** Eighty-nine young people participated from April 2022 to 2023. Analysis of their transcripts defined six common needs across all the health conditions: Need to safely manage my health at school; need for a flexible education pathway; need to be acknowledged and listened to in the right way; need to be included in and supported by the school community; need to build toward my future; need to develop attitudes and approaches to help me cope in school.

**Conclusions:** This study has generated new, actionable knowledge by identifying six major needs that young people have in relation to the intersection of their health condition and their school life. This paper shows that a commonalities approach to research and policy development is warranted given the similarities in experiences and needs. The common needs identified in the INSCHOOL project highlight six areas where future interventions could be targeted to begin making meaningful changes for all young people with long-term health conditions.

#### KEYWORDS

chronic conditions, needs, participatory research, qualitative research, schools





# Keeping Students with Long-term Conditions Connected with Schools: Facilitators for Sustainable Virtual Connections

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RESEARCH

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**KEYWORDS:**  
long-term conditions;  
students; social connection;  
school belonging; inclusion;  
virtual connection

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<https://doi.org/10.5334/cie.133>

FACILITATORS	DESCRIPTION
Individual student needs	<ul style="list-style-type: none"> <li>flexibility to include virtual connections in learning environments based on students' needs</li> <li>empowering students in the decision making</li> </ul>
Culturally responsive support	<ul style="list-style-type: none"> <li>understanding students' and their families' values and beliefs</li> <li>culturally competent practices for virtual connections</li> </ul>
Purposeful virtual connections with schools	<ul style="list-style-type: none"> <li>making virtual students feel present and included</li> <li>mitigating exclusion through purposeful connections</li> </ul>
Technology for virtual school connections	<ul style="list-style-type: none"> <li>positive inclusive experience for students that supports their social connectedness</li> <li>managing expectations and addressing concerns</li> </ul>
Safe online environments	<ul style="list-style-type: none"> <li>privacy in online environments</li> <li>students feel safe in the virtual connection</li> </ul>
Stakeholder training and support	<ul style="list-style-type: none"> <li>health literacy for support providers</li> <li>accessing and receiving support</li> <li>developing teacher preparedness</li> </ul>

**Table 2** Facilitators for Sustainable Virtual Connections Identified from the Interview Data.

## ABSTRACT

Students with Long-Term Conditions (LTCs) experience prolonged absences that can impact their school connectedness and belonging. Inclusive education policies in New Zealand advocate for equitable learning opportunities for students with disabilities. Students with LTCs are included under this purview, but responses to their unique learning and connectedness needs are not well articulated. Literature suggests the potential of technology to enable virtual connections to keep these students' continued presence and engagement in class (i.e., sustainable connections). Studies internationally and in New Zealand, argue that virtual connections with schools can enhance educational opportunities and a sense of belonging for students with LTCs. However, limited research is available on developing and nurturing such ongoing connections with schools. This article reports on a qualitative study investigating New Zealand stakeholder perspectives on the facilitators of virtual connection with schools for students with LTCs. Findings from a thematic analysis of 18 individual interviews with stakeholders highlighted six facilitators for virtually connecting these students with schools, indicating the need for a flexible approach tailored to students' needs, strong support systems and purposeful, safe and inclusive connection opportunities. The stakeholders indicated these facilitators as essential for the virtual school connections to be sustainable and enhance students with LTCs' presence, belonging and social connection in schools.



# Psychological and Pedagogical Support for Parents of Children with Special Educational Needs

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GALIYA SHUBAYEVA   
KUANYSH SHALABAYEVA   
GULNUR ISMAGAMBETOVA

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## ABSTRACT

This study primarily aimed to develop a program that aids parents of children with Special Educational Needs (SEN), placing emphasis on the challenges encountered in communication and understanding. The Eidemiller and Justizkis's (2008) Family Relationship Analysis (FRA) served as the core method of the research. As inclusive education progresses, new challenges incessantly emerge necessitating immediate effective solutions. This research spotlights the triad of teachers, psychologists, and parents. A cornerstone of this research is the emphasis on nurturing a unique bond between school psychologists or teachers and parents. This bond should be anchored in mutual trust, motivation, and a conducive psychological environment. The overarching goal is to boost parental motivation, alleviate concerns linked to the child's condition, reinforce family relationships, and cultivate a positive enabling environment for the child. The study culminated in the rollout of a tailored program connecting parents with educational professionals. This program encompassed lectures and exercises delving into understanding challenges, coupled with innovative methods like fairy tale activities and initiatives to foster tolerance. Feedback indicated a notable positive impact on parents. The research underscores the necessity of fostering parental confidence and assuaging fears regarding their child's condition. In this context, the influence of peers and friends on the development of inclusive education should be considered in future studies.

## RESEARCH

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**KEYWORDS:**  
fairy tale activity; learning models; personal competencies; family relationships; hyper protection

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RESULTS	PERCENTAGE	DESCRIPTION
Instability of Parenting Style	15%	Constant changes in the style of education, lack of gradation in education.
Hyper protection	13%	Parents pay too much attention to the upbringing of their child.
Indulgence	13%	Over-indulging a child in various things at his will.
Excessive requirements	12%	High demands on the child in the field of development, education, talent and sociology.
Ignoring	9%	Parents lack the strength and desire to meet the needs of the child.
Excessive demands-prohibitions	8%	Many prohibitions on various activities, communication, thoughts on the part of parents.
Insufficiency of requirements-prohibitions	8%	The absence of any prohibitions for the child, that is, all permissibility.
Minimality of sanctions	7%	Lack of sanctions and punishments for non-performance of work.
Lack of child responsibilities	6%	Parents give a small number of responsibilities to children in the home.
Hypo protection	5%	Parents do not have time for the development and upbringing of their child, respectively, do not deal with the child at all.
Excessive sanctions	4%	Severe penalties for non-compliance with assigned tasks.



**Table 3** Results of the survey “Analysis of family relationships”.



*Come rendere l'ambiente scuola e  
classe inclusivo  
per lo studente con patologia?*

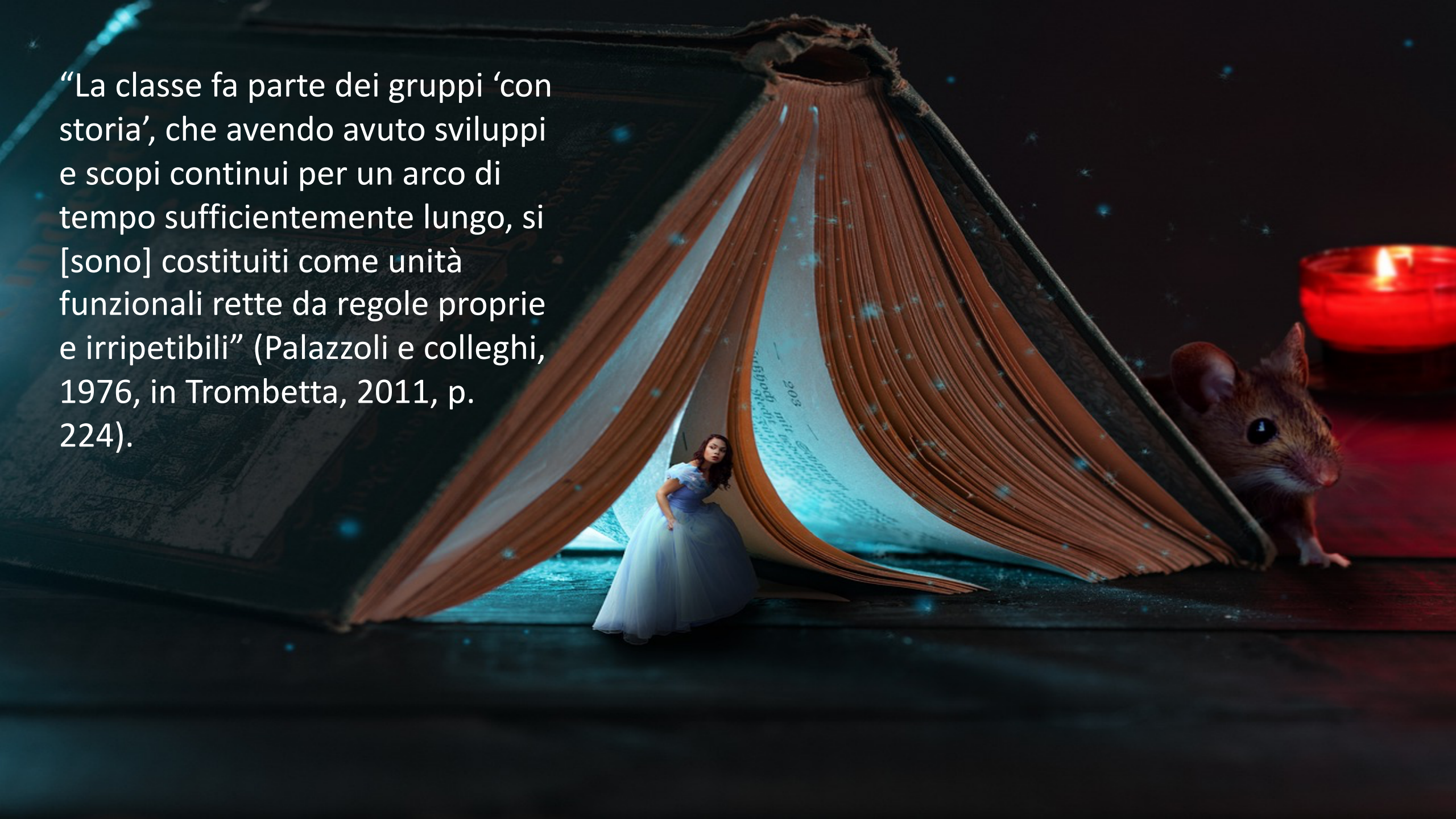


*Come rendere l'ambiente scuola e  
classe inclusivo  
per lo studente con patologia  
senza che altri studenti  
restino esclusi?*

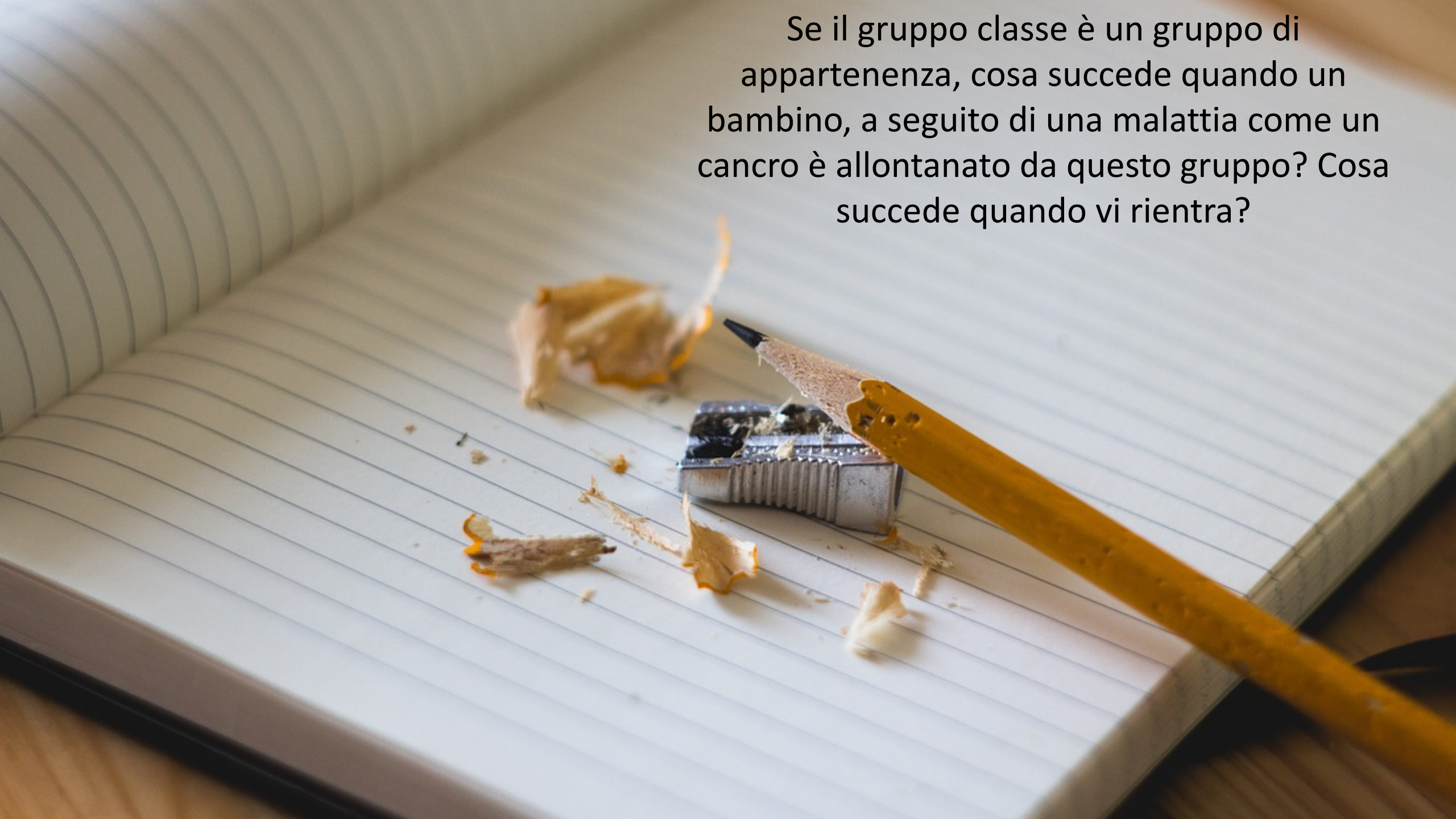


*Ambienti inclusivi o  
insegnanti inclusivi?*

“La classe fa parte dei gruppi ‘con storia’, che avendo avuto sviluppi e scopi continui per un arco di tempo sufficientemente lungo, si [sono] costituiti come unità funzionali rette da regole proprie e irripetibili” (Palazzoli e colleghi, 1976, in Trombetta, 2011, p. 224).



Se il gruppo classe è un gruppo di appartenenza, cosa succede quando un bambino, a seguito di una malattia come un cancro è allontanato da questo gruppo? Cosa succede quando vi rientra?



# Spunti pratici di connessione

*A livello didattico*



*Bacheca*

*Registro elettronico*

*Condivisione di momenti didattici*

*Compiti in condivisione*

*Connessioni relazionali*  
**INFORMALI**



*Quali costi?*

*Connessioni relazionali*  
**FORMALI**



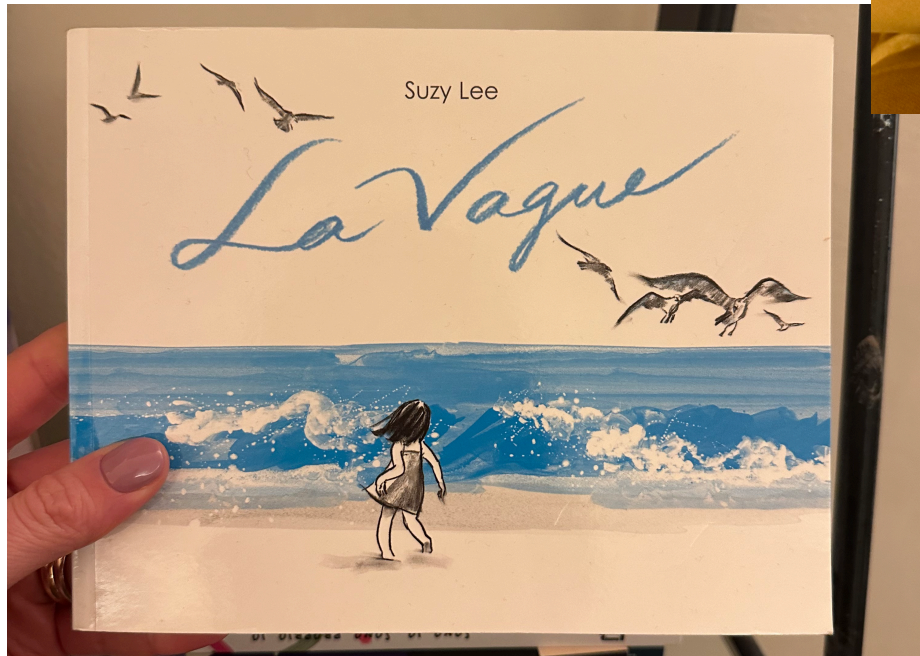
*«Appello»*

*Inserimento in attività non didattiche (es.  
PON/PEZ/PNRR)*

*Inclusione in attività di gruppo a distanza*

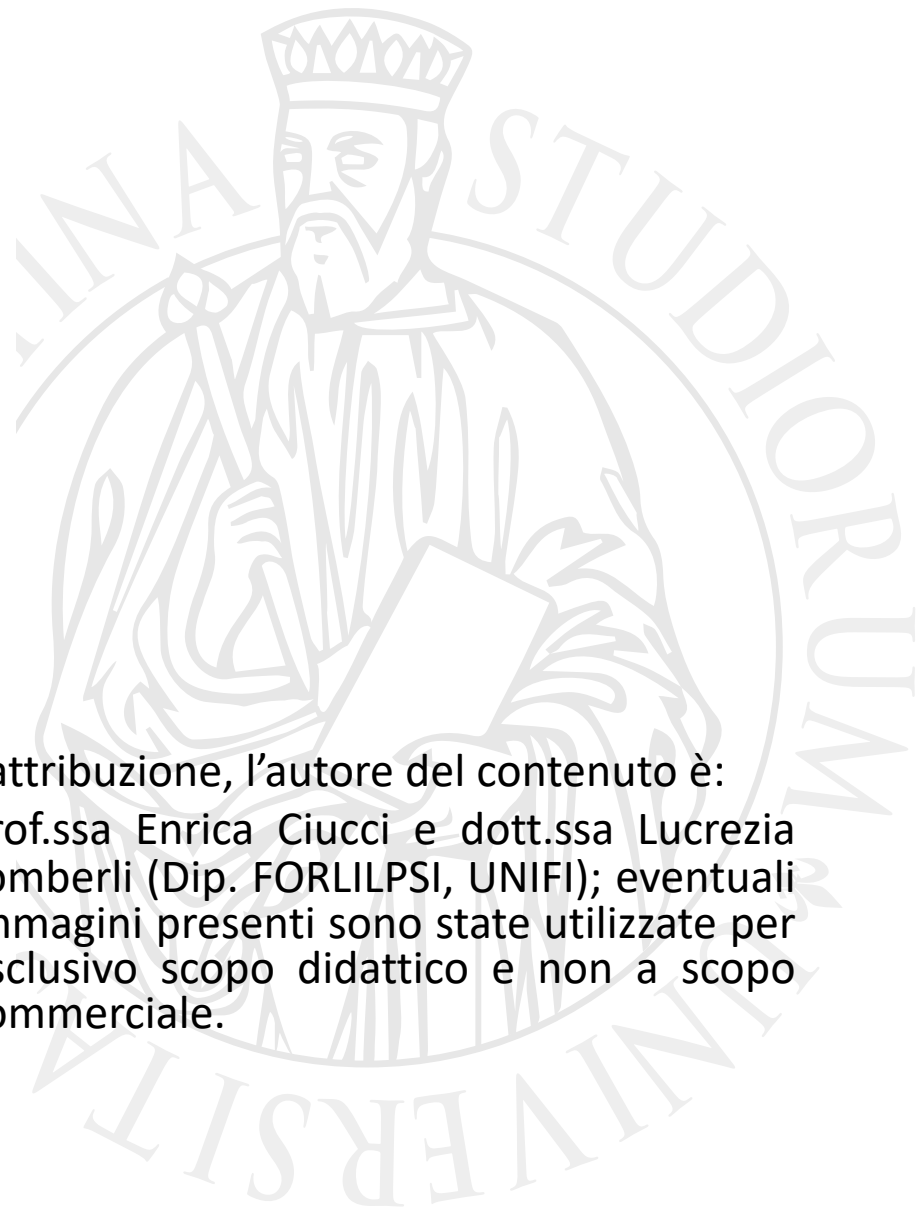
*Sedia*

# L'onda come metafora dell'esperienza



Condivisioni?  
Riflessioni?





Per l'attribuzione, l'autore del contenuto è:

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