



# UNIT-2

## Common Types of SEN

### Learning Outcomes

By the end of this unit the learner will be able to:

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## Unit 2

### Common Types of SEN

#### Introduction

Working as a teacher or teaching assistant, you will encounter various different types of special educational needs (SEN) while working in an academic environment. Though every SEN pupil's case will be 100% unique, there are nonetheless several different types of special educational needs you are more likely to encounter than others.

By familiarising yourself with the basics of these common SEN types, you will be in a better decision to provide helpful and appropriate support for the pupils you work with. In this unit, we will be taking a brief look at several common types of disabilities and disorders, which in all instances can have a major impact on a child's education.

Some of which we will be revisiting in subsequent units for a more in-depth investigation.

#### ADHD

Attention Deficit Hyperactivity Disorder (ADHD) is a condition that primarily manifests as impulsiveness, overactive behaviour and difficulties paying attention in those affected. A surprisingly common disorder, estimates suggest that up to 1% of all children in the United Kingdom have ADHD. It's not yet clear what causes ADHD or what the key risk factors for the condition may be, although it is known that boys are approximately five times more likely to be diagnosed with ADHD than girls.

The term 'ADHD' is often inappropriately used in reference to *all* children who display signs of impulsiveness or attentiveness, before a formal assessment has taken place. There is also controversy regarding the extent to which ADHD can and should be treated with prescription medication like methylphenidate (Ritalin).

#### Key Characteristics of ADHD

Signs and symptoms of ADHD vary from one individual to the next, but some of the main characteristics on the condition are as follows:

- Difficulties completing tasks and following instructions
- Problems focusing intently on one activity
- Forgetfulness and being easily distracted
- Frequent mistakes due to an inability to focus on the detail
- Clumsiness or apparent issues with motor coordination
- Reluctance to perform tasks that demand and sustained focus
- Poor listening skills and issues with concentration
- Restlessness and an inability to sit still
- Any apparent signs of impulsiveness (at school or elsewhere)
- A tendency to run in inappropriate situations
- Frequent outbursts or interruptions to other conversations
- A tendency to interfere with the other children's work



- Twitching, rocking and other unusual movements
- Shouting answers to questions without being asked
- Lashing out verbally or physically with no regard for the consequences
- Perceptual-motor problems and issues with handwriting
- Frustration or anger due to the inability to communicate clearly

It's important to remember that under no circumstances should the presence of one or more of the above be considered sufficient evidence for a formal diagnosis. Specialist support should be sought at the earliest possible stage, in the event that an educator or parent suspects a case of ADHD in a child.

### **How Teachers and Teaching Assistants Can Help**

What constitutes the right level and type of support will be determined by the child's unique case and requirement, though the following can prove helpful when working with pupils with ADHD:

- Remove distractions from the classroom environment
- Provide clear, simple and concise instructions
- Stick with a schedule and avoid surprise tasks or activities
- Keep goals and targets small, measurable and reachable
- Learn how to spot the signs of an impending tantrum or disruption
- Always stay calm when dealing with a distressed pupil
- Provide one on one support with everyday tasks
- Praise small achievements and always reward good behaviour
- Use checklists to help them with tasks and homework
- Teach social skills and assist their interactions with others
- Never embarrass or make an example of them
- Allow extra time for tasks and provide additional resources
- Liaise with parents on a regular basis

## **Autism Spectrum Disorder**

Autism Spectrum Disorder – also referred to as Autism Spectrum Condition – refers to a wide spectrum of disorders that can impact a child's education. Autism in general is a complex subject about which the scientific community knows comparatively little. Causes and risk factors for autism remain unknown, just as there is still no 100% effective way of formally diagnosing or denying a case of autism.

In addition, the fact that every case of autism manifests in a completely different way can make it a difficult disorder to understand. It's currently estimated that around six in every 1,000 children are affected by an ASD – boys being around four-times more likely to be affected than girls.

### **Key Characteristics of Autism Spectrum Disorder**

Diagnosing a suspected case of autism can be extremely complex, though is a process usually based around the following characteristics and behaviours:

- Issues with social interaction
  - The inability to understand the thoughts and feelings of others
  - A tendency to be 'aloof' and avoid social situations entirely
  - Little to no intention to make or maintain friendships
  - Aggressive or inappropriate behaviour during interactions



- The desire to spend as much time as possible alone
- Indications of stress, anxiety or fear in social situations
  
- Issues with thought and imagination
  - Obsessive compulsive fixations with specific toys or activities
  - A lack of imagination and creativity when playing or performing tasks
  - Taking more of an interest in inanimate objects than people
  - Displays of repetitive behaviour, such as turning lights on and off
  - Negative reactions to changes in routine or surroundings
  
- Issues with communication
  - Difficulties both using and making sense of verbal communication
  - The inability to use or interpret expressions, gestures and body language
  - Speaking in a monotone or repeating phrases over and over
  - Difficulties understanding figures of speech, jokes, sarcasm etc.
  - Use of language primarily copied from TV, video games, books etc.
  - Frustrations when attempting to communicate with others
  
- Additional signs and symptoms
  - General evidence of aggressive behaviour
  - Unusual or inconsistent eating habits
  - Sensitivity to sensory stimuli
  - Self-injury or dangerous behaviour
  - Hand flapping, rocking or spinning
  - Poor or inconsistent sleep patterns
  - Delays in developing speech skills
  - A short temper and angry outbursts
  - Hyperactivity and concentration issues
  - Phobias or irrational fears

### **How Teachers and Teaching Assistants Can Help**

Approaches to education and general developmental support must be tailored individually for all cases of autism. Some of the more general tactics and strategies that can prove helpful include the following:

- Keeps things structured and avoid distractions
- Provide the child with an individual workspace
- Clarify and simplify all instructions and communications
- Never interpret lack of eye contact as lack of interest
- Make use of computers and other electronic devices
- Introduce a visual timetable and work checklist
- Create a comfortable and welcoming classroom environment
- Teach the child about body language, gestures and so on
- Keep things continuous and avoid changes where possible



- Where change is inevitable, provide plenty of advance notice
- Introduce a buddy system to encourage social interaction
- Remind the pupil of the rules of the classroom regularly
- Bring more games and practical activities into the classroom
- Explain jokes and idioms in a way the child can grasp
- Consult with parents on a regular basis

## Dyscalculia

Dyscalculia is a recognised learning disability that specifically affects the pupil's capacity to develop mathematical skills. In many instances, the pupil will excel in various other aspects of their education, though will remain unable to grasp the basics of counting, calculating and understanding numbers and symbols.

There are still no known issues or risk factors that affect an individual's likelihood of being affected by dyscalculia. Research suggests that an abnormality in brain development at the foetal stage may play a role, though there is no formal evidence to confirm or refute this.

### Key Characteristics of Dyscalculia

One of the biggest issues with dyscalculia is the way in which many cases are simply written off as the pupil in question having underdeveloped mathematical skills. Though the characteristic signs of dyscalculia go beyond everyday issues with mathematical calculations alone, incorporating the following issues among others:

- The inability to perform mental arithmetic
- Poor maths skills despite above average skills elsewhere
- Difficulties grasping the meaning of sequences, rules and concepts
- Reluctance or the inability to read or write numbers
- Difficulties with money (counting change, paying the right amount etc.)
- A poor sense of direction and a tendency to get lost
- Obvious issues with coordination in activities that involve a change of direction
- Memory problems when presented with mathematical tasks
- The inability to keep score when taking part in games
- Issues with time keeping, punctuality and time management
- Problems remembering people's names
- Upset and distress when performing numerical tasks

### How Teachers and Teaching Assistants Can Help

The success rate for treatment of cases of dyscalculia is comparatively high, though appropriate support must be provided at the earliest possible stage to ensure a positive outcome. Teachers and teaching assistants can help pupils with dyscalculia in the following ways:

- Always ask the child how they came to any given answer
- Explain concepts in clear and concise terms
- Ask the child to repeat what you have said to make sure they understand
- Bring pictures, visual aids and apparatus into lesson plans
- Use interesting stories and songs to teach numbers



- Encourage the use of computers and electronic devices where appropriate
- Focus as much on the language of maths as the technicalities
- Teach them how to properly use a calculator
- Understand, acknowledge and appreciate their difficulties
- Never make the pupil feel bad about a wrong answer or failed task
- Use wall displays to remind pupils of key formulas and concepts
- Use a buddy system to pair struggling pupils with appropriate classmates
- Always allow additional time for the completion of tasks
- Consult with parents on a regular basis

## Dysgraphia

Dysgraphia is a neurological condition that manifests as difficulties in using the correct sequence of muscle movements to write. Though it can present as a learning difficulty on its own, it is more common for dysgraphia to accompany other learning difficulties.

Children who suffer from dysgraphia may endure immense frustration and upset in the classroom, due to the inability to communicate in the written form – despite having well-developed or even advanced oral language skills. Dysgraphia means those affected know what they want to say and how to say it, but cannot communicate this information in writing.

### Key Characteristics of Dysgraphia

In contrast to some of the conditions outlined above, diagnosing a case of dysgraphia is relatively straightforward. The following behaviours and difficulties all being key characteristics of the condition:

- Slow and laborious writing with poor presentation
- Good oral language skills but highly underdeveloped writing skills
- Difficulties grasping a pen or pencil appropriately
- A tendency to mix up lower-case and upper-case letters
- Excessive use of rubbers and whiteout products
- The ability to type coherently while being unable to write
- Anger, upset and frustration when presented with writing tasks

### How Teachers and Teaching Assistants Can Help

What's interesting about dysgraphia is the way in which those affected can often type coherently and confidently, providing them with a much more accessible means of written communication. Support strategies of importance when working with pupils with dysgraphia include the following:

- Ensuring they are taught keyboard and word processing skills
- Providing adequate additional time for the completion of written tasks
- Bringing more oral or activity-based tasks into the classroom
- Encouraging the use of different types of stationary to find something they like
- Ensuring homework assignments are within the pupil's capabilities



## Dyslexia

Another condition which is far more likely to affect boys than girls, dyslexia is a complex neurological disorder that's also surprisingly commonplace. It is currently estimated that around 10% of the population is dyslexic to a degree, though what's often overlooked is the way in which dyslexia is in no way related to general intellectual ability.

Dyslexia affects the ability of those affected to spell and read, often making it difficult to read quickly or coherently and resulting in the use of poor or nonsensical spellings. Dyslexic individuals may also struggle with information processing and can sometimes have an underdeveloped short-term memory.

Though again, it is the norm for pupils with dyslexia to excel in other aspects of their education. It is believed that dyslexia has a genetic cause and runs in families, but remains a condition of much debate and discussion for the scientific community.

### Key Characteristics of Dyslexia

Many children struggle to get to grips with reading, writing and spelling – often progressing at a slower speed than their counterparts. But this alone does not indicate a possible case of dyslexia. The primary signs of dyslexia in school-age children are as follows:

- Issues with reading
  - Children who see distorted or blurred word shapes on the page
  - Issues with phonological processing that lead to blending and segmenting issues
  - The inability to keep their place when reading
  - Use of nonsensical words or phrases when reading out loud
  - Frustration and anger when presented with reading or writing tasks
  - Issues with high frequency words while coping well with more complex words
  
- Issues with writing
  - Use of bizarre spellings
  - Written work of a generally poor standard
  - Multiple attempts to correct simple single words
  - Confusion between letters with similar shapes
  - The inability to copy written text from books or boards
  - Use of reverse numbers and letters beyond an early age
  
- Additional signs and symptoms
  - Issues with short term memory and information processing
  - Tiredness and apathy when presented with tasks
  - Uneven and inconsistent performance in the classroom
  - Difficulties organising themselves and their belongings
  - Problems remembering days of the week and other sequences
  - Possible coordination issues
  - Low self-esteem and a lack of confidence
  - Frustration leading to anger and disruption



### **How Teachers and Teaching Assistants Can Help**

Helping pupils with dyslexia means first building a detailed picture of their strengths, weaknesses and capabilities in general. Though in most instances, the following may prove helpful in supporting their daily education and development:

- Designs tasks that focus on their strengths and capabilities
- Note for specific words and types of words they struggle with
- Provide word lists and displays of keywords as reminders
- Bring more activity-based learning into the classroom
- Use word and language games as an alternative to more formal tasks
- Allow sufficient additional time for the completion of assignments
- Teach them keyboard skills and how to use spellcheckers
- Avoid asking nervous or frustrated pupils to read aloud in class
- Use praise and encouragement regularly to help build their confidence
- Pair stronger learners with struggling peers (a buddy system)
- Consult with and involve parents in the process at all times

### **Dyspraxia (Developmental Coordination Disorder)**

A condition that is estimated to affect approximately one in every 20 children, dyspraxia affects the brain's ability to process information and transmit messages. Those affected by dyspraxia often experience difficulties controlling their movements, often appearing unusually clumsy or accident prone in the classroom.

Handwriting problems and other perceptual motor difficulties may be experienced, along with the inability to pronounce certain words due to issues controlling the movements of their tongue and mouth. This is another condition where boys are more likely to be affected than girls – some studies suggesting approximately four times more likely.

#### **Key Characteristics of Dyspraxia**

Dyspraxia is a condition that is often picked up on by parents at a comparatively early age, manifesting in the form of signs and symptoms such as:

- Difficulties picking up and holding small objects
- The inability to concentrate beyond a short period
- Reaching milestones such as crawling and walking later than normal
- Noticeable problems with language skills development
- Problems holding pencils, doing jigsaws and so on
- Limited or absent social skills
- Tiredness, lethargy and irritability
- Issues with posture and excessive clumsiness
- Immature use of pens, pencils and crayons
- Difficulties using a knife and fork
- The inability to follow sequential instructions
- Problems judging distances and object positions



- The inability to throw and catch during games
- A general lack of coordination and/or balance

### **How Teachers and Teaching Assistants Can Help**

Educators may play a role in identifying cases of dyspraxia, though most cases are picked up on my parents – educators being subsequently informed of the child’s issues and requirements. Potential support strategies that can be helpful when working with children with dyspraxia include:

- Limiting handwriting activities where possible
- Offering pens, pencils and stationery that are comfortable to hold
- Reduce distractions to create a quiet working environment
- Make sure the child is comfortable at their desk
- Limit tasks that involve copying from the board
- Be patient and provide instructions as clearly as possible
- Break down larger tasks into smaller sections
- Use and encourage the use of body language and gestures
- Back up written information with speech
- Provide plenty of reminders after giving instructions
- Allow ample extra time for tasks to be completed
- Include appropriate games in your classroom plan
- Encourage the use of computers and related technology
- Take notes and liaise with parents on a regular basis

### **Moderate Learning Difficulties (MLD)**

Also referred to as ‘global learning difficulties’, moderate learning difficulties is a broad term that indicates a general developmental delay in the individual in question. Such pupils would have previously been labelled as ‘slow learners’ and may simply have been allocated places in the bottom sets in all subjects.

Today, it’s recognised that moderate learning difficulties affect different pupils in different ways, therefore calling for different levels of support for each child affected. It’s also acknowledged that moderate learning difficulties can lead to extreme issues with confidence and self-esteem, making it difficult for those affected to take any pride or pleasure in their time spent at school.

#### **Key Characteristics of Moderate Learning Difficulties**

MLD is a category of learning difficulties that covers a wide variety of issues encountered by school-age children. However, some of the defining characteristics of moderate learning difficulties include the following:

- Underdeveloped or absent social skills
- Poor communication skills with teachers and peers
- Immature listening and general attention skills
- Difficulties focusing on a single task for long
- Issues with coordination and clumsiness
- Problems with both short and long-term memory capacity
- Difficulties acquiring basic numeracy and literacy skills



- Difficulties with general comprehension skills
- The inability to grasp rudimentary mathematical concepts
- A lack of logical reasoning and understanding
- Underdeveloped verbal and nonverbal communication skills
- Poor organization and time keeping skills

### **How Teachers and Teaching Assistants Can Help**

Children who are affected by MLD are often all too aware of their situation and the extent to which they are falling behind their fellow pupils. It is therefore imperative for educators to do everything they can to both support the pupil's education and boost their self-esteem. Strategies that have proved effective include the following:

- Getting to know the pupil and their struggles on a deeper level
- Using observations and intuition to modify teaching styles accordingly
- Focusing heavily on the pupil's strengths and capabilities
- Setting achievable goals and realistic learning objectives
- Avoiding tasks the pupil in question has no realistic way of completing
- Show the pupil what to do, rather than just telling them
- Monitor and track the child's progress, recognizing every achievement
- Keep tasks short, simple and enjoyable
- Ensure adequate additional time is provided to complete tasks
- Break down larger tasks into smaller steps for easier comprehension
- Establish a routine/timetable and stick to it where possible
- Bring multi-sensory tasks and activities into your lesson plans
- Consult and meet with parents on a regular basis
- Provide additional support with the help of teaching assistants
- Be patient, empathetic, supportive and creative

### **ODD (Oppositional Defiant Disorder)**

Oppositional defiant disorder (ODD) is a comparatively rare condition, which manifests in the form of defiant and aggressive behaviours that go beyond what would be expected from a child of such an age. ODD occurs more commonly in boys than girls, typically before the child in question reaches the age of 10.

ODD can be difficult to diagnose, as many children go through periods (sometimes prolonged) where they behave in an irrational, provocative and disobedient way. Though there is some evidence to suggest ODD runs in families, the exact cause of the condition remain unknown.

#### **Key Characteristics of Oppositional Defiant Disorder**

Most children display at least some of the signs and symptoms of ODD at some point, though on a strictly temporary basis. ODD may be diagnosed when any of the following behaviours become continuous and do not naturally diminish:

- Refusal to take responsibility for actions
- Deliberately being rude and provocative to others
- Purposefully going against rules and restrictions
- The use of hurtful, spiteful or inappropriate language



- A tendency to blame others, rather than taking responsibility
- Acts of physical and verbal aggression to others
- Outbursts of anger and extreme tantrums on a regular basis
- A general mood of anger and resentment
- Constant arguments with parents, teachers and peers

### **How Teachers and Teaching Assistants Can Help**

Working with pupils with oppositional defiant disorder can be particularly challenging, as volatile situations may become an everyday part of life in the classroom. Where a case of ODD is diagnosed, teachers and teaching assistants may help in the following ways:

- Meet and consult with parents as regularly as possible
- Ensure all teachers and support staff involved in the child's care and support follow the same consistent approach and are kept up to date with recent developments
- Establish clear, measurable, reachable and defined goals with appropriate rewards
- Encourage the use of ICT equipment to motivate and entertain
- Use role-playing activities to encourage pupils to express their feelings
- Learn to spot the signs and triggers of angry or aggressive outbursts
- Always remain calm when dealing with difficult situations
- Don't take it personally when the child's anger is directed at you!

## **Visual Impairment**

The term 'visual impairment' applies when a child or pupil is recognized as having severely compromised sight or no sight whatsoever. The terms 'partially sighted' and 'blind' are most commonly used by health and social services in the UK, though the education system more widely uses the terms 'visually impaired' and 'totally blind' in reference to the same issues.

In education, a pupil is considered to be visually impaired if it is not possible to correct their vision to an acceptable standard by any means. Any educational environment that accepts visually impaired pupils will need to be adapted in a variety of ways, both to ensure the quality of their education and to oversee their safety.

Visual impairment is rarely a condition teachers and teaching assistants will be required to identify and diagnose. However, any indications that a child who is believed to have good vision is struggling with any aspect of their sight (near vision or distance vision) should be brought to the attention of their parents immediately.

Children with visual impairments often need to be educated in an entirely different way to their peers, though must be provided with full access to the same curriculum. Where a child's visual impairment is particularly severe, they are more likely to be taught in a specialist educational environment than a mainstream school.



## Further Reading: