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Module 1, Special Educational Needs

Module 1: Overview

If you are considering working with children who have Special Educational Needs, it is important that you understand as much as possible about those needs so you can make a real difference in their lives while also having a rewarding career.

In this module, you will learn about what Special Educational Needs (SEN) are, some of the different forms of SEN, how SEN affects the way that children learn and grow, and some general support systems for children with SEN. By the end of this module you should have a greater understanding about what makes kids with SEN both different and special.

What you will learn in this module:

- 1.1. What are Special Educational Needs?
- 1.2. Different forms of Special Educational Needs
- 1.3. Effects of Special Educational Needs on Learners
- 1.4. General Support Systems for Special Educational Needs

1.1 What are Special Educational Needs?

The term “*Special Educational Needs*” applies to children who have disabilities or learning difficulties that make it much harder for them to learn than most other children in the same age group.

While many children will go through stages when they need some extra help for a period of time, those with SEN usually have one or more of the following:

- Learning difficulties, especially when it comes to gaining basic skills.



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- Social, mental, or emotional difficulties. This can include problems making friends and relating to adults or other kids their own age.
- Difficulty expressing themselves and understanding exactly what other people are saying.
- Specific difficulties when it comes to learning such as with writing, reading, understanding information or number work.
- Physical or sensory needs such as physical difficulties, visual impairment or hearing impairment.
- Health or medical conditions which can slow down their progress and affect their education.
- Difficulties such as Attention Deficit Hyperactivity Disorder (ADHD), and Dyslexia.
- Multi-sensory impairment.
- Autism spectrum conditions.

It is estimated that approximately 16% of young people, and children have SEN at some point during their education. Most of them will have all of their needs met with extra support from their schools (this is where you come in), while around 1.3% will have more significant needs, and will need further support by a specialist.

1.1.1 The Difference Between Special Educational Needs and a Disability

A child has SEN if they need extra support because it is harder for them to learn than most other children of the same age.

A child has a disability if they have a mental or physical impairment that has a long term or substantial effect on their ability to complete normal day to day activities. It is estimated that around 6-7% of children have a disability.

1.2 Different Forms of Special Educational Needs

There are many different forms of SEN. They can range from barely noticeable, to having a huge impact on a child's life, and the way he or she learns.



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1.2.1 Emotional, Behavioral, and Social Difficulties

They can range from slightly inappropriate behaviors to difficulties which are both persistent and significant.

a barrier to their social, cognitive, personal, and emotional development.

can be communicated through both externalizing and internalizing behaviors.

small number of children in this group would be clinically diagnosed with a mental illness or clinical disorder

ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

ADHD is the most commonly diagnosed mental health disorder of children, and can continue throughout the teenage years, and into adulthood. It is estimated that around 10% of school-aged children are affected by ADHD, and while no one knows why, boys are around three times more likely to be diagnosed with ADHD than girls.

Mostly Hyperactive-Impulsive

Most of the child's symptoms fall into the hyperactivity-impulsivity categories, and they usually have fewer than six symptoms of ADHD, although inattention can still be slightly present.

Children who have mostly Hyperactive-Impulsive ADHD may:

- Squirm and fidget in their seats.
- Constantly talk.
- Have trouble sitting still.
- Have difficulty with quiet activities and tasks.
- Be extremely impatient.
- Blurt out comments which are inappropriate or offensive.
- Have difficulty waiting for turns in a game or for things they want.
- Often interrupt other's activities or conversations.



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(2) Mostly Inattentive

ADHD, they will have six or more symptoms

These kids are less likely to act out or have problems getting along with their peers.

Children who have Mostly Inattentive ADHD may:

- *Miss details, be easily distracted, forget things, and switch frequently between activities.*
- *Have difficulty with focusing on one thing and tend to daydream.*
- *Become bored easily unless they are doing something they really enjoy.*
- *Have difficulty focusing their attention on completing tasks, organizing, or learning new things.*
- *Have trouble with homework assignments, and often lose things that are needed in order for them to complete the activities or tasks.*

(3) Both Inattentive and Hyperactive-Impulsive

*This is the **most common type of ADHD**. Most children will be both Inattentive and Hyperactive-Impulsive. This means that the child **has six or more symptoms** of Hyperactivity-Impulsive along with six or more symptoms of Inattentive.*

Current treatments are focusing on reducing ADHD symptoms, and include psychotherapy, medication, education and training, or a combination of these.

OPPOSITIONAL DEFIANT DISORDER (ODD)

It is estimated that between 2% and 16% of teens and children have ODD. Many children with ODD will also have other behavior problems, learning disabilities, and anxiety disorders.

Some of the most frequent symptoms of ODD include:

- *Throwing repeated temper tantrums.*
- *Excessive arguments with adults.*
- *Refusing to comply with rules and requests.*



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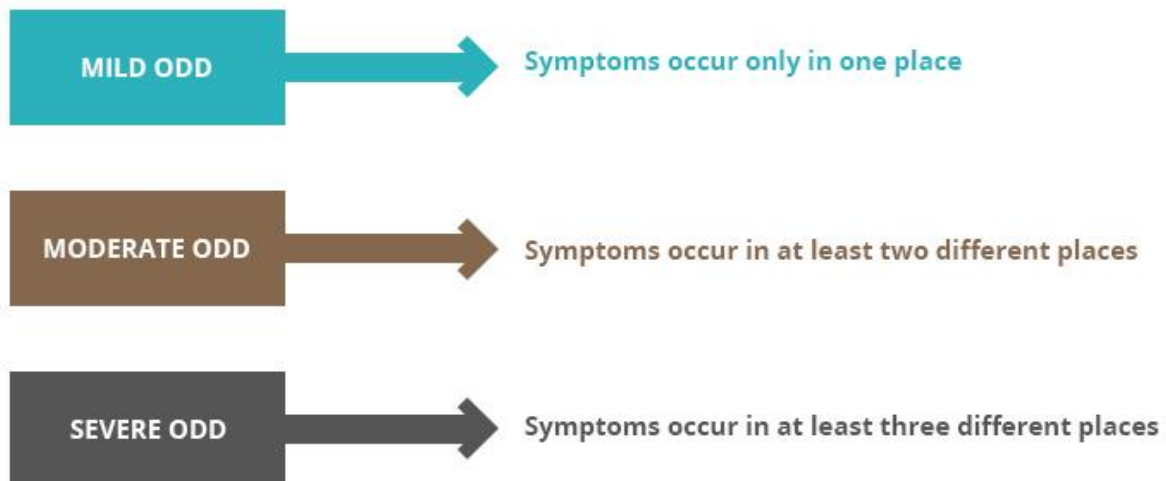
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- *Going out of their way to upset and annoy others, or being easily upset and annoyed by others.*
- *Blaming others for their mistakes.*
- *Displaying spiteful and revenge-seeking behavior.*
- *Swearing and using bad language.*
- *Saying hateful and mean things when upset.*
- *Becoming easily frustrated.*
- *Having low self-esteem.*

While the exact cause of this behavioral disorder is unknown, some studies suggest that injuries or defects in the brain can lead to serious problems with behavior in children.

There are also environmental factors that can contribute to ODD, including a dysfunctional family life, inconsistent discipline by those in authority, and a family history of substance abuse.

Signs of ODD will usually begin during preschool years, and this disorder can vary in severity:



Psychotherapy is a type of counseling and is used to treat children with ODD



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CONDUCT DISORDER (CD)

Conduct Disorder is another type of behavioral disorder that is more severe than ODD.

Symptoms of CD include:

Symptoms of CD include:

Aggressive Behavior	This is behavior that threatens or causes physical harm, and can include bullying.
Destructive Behavior	This involves intentionally destroying property, and in extreme cases can include to destroy other people's property.
Deceitful Behavior	This can include lying repeatedly, shoplifting, breaking into cars and homes, and
Breaking Rules	This often means the child will go against accepted rules of society, and engage school, running away, playing pranks, or being sexually active.

1.2.2 Pervasive Developmental Disorders (PDDs)

Pervasive Developmental Disorders cover five main disorders, including Autism/Autistic Spectrum Disorders (ASDs). ASDs are neurological disorders that are characterized by difficulties with social interaction, social imagination, flexible thinking, and social communication.

There is a large overlap between the different forms of autism. ASDs affect approximately one out of every 68 kids. This also occurs more often in boys than in girls, and seems to be on the rise, although no one can quite figure out why. Contrary to pseudo science floating around on blogs and Facebook; vaccinations do NOT cause Autism.

ASPERGER'S SYNDROME

Asperger's involves delays in the development of basic skills, including the ability to communicate, to use imagination, and to socialize with others. While Asperger's is similar to autism, kids with Asperger's will usually function better than those with autism. They generally have near-normal language development and intelligence, although they sometimes have problems communicating.



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Symptoms of Asperger's include:

- **Poor social skills:** Kids with Asperger's will usually have difficulty interacting and relating to others, and can be awkward and stilted in social situations. They are unlikely to make friends easily, and also have difficulty conversing.
- **Repetitive or Eccentric Behaviors:** One key way to notice if a child has Asperger's is to check for odd, repetitive movements. These can include finger twisting, hand wringing or "flapping".
- **Bizarre Rituals or Preoccupations:** Children with Asperger's sometimes develop certain rituals which they refuse to alter, and trying to change these can result in a huge tantrum. It could be that the child likes to get dressed in the same order each day, needs to eat the same food, or simply cannot deal with any change in routine.
- **Problems Communicating:** Kids with Asperger's will often fail to make eye contact when they are speaking with someone. They may find it hard to use their gestures and facial expressions. They will not be able to understand body language, tone, or facial expressions from others. They usually will not understand subtext, and will take language very literally.
- **Small Range of Interests:** People with Asperger's often have an obsessive and intense interest in just a few areas. Often they will excel in these areas, showing exceptional skill in an area like math or music.
- **Problems with Coordination:** The movements of children with Asperger's can seem awkward and clumsy.

AUTISM

Children with autism often have behavior challenges, and intellectual disabilities. However, they will often also be the sweetest kids you will ever meet. Symptoms typically appear before the age of three, and can vary from mild in severity to completely disabling.

General symptoms of autism include:

- *Difficulty communicating, understanding and using language.*
- *Inability to participate in conversations, even when they have the ability to speak.*
- *Problems with non-verbal communication like facial expressions, body language, and gestures.*
- *Poor social skills and difficulty relating to people.*
- *Problems making friends, and a preference for playing alone.*



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- *Odd ways of playing with toys, such as only playing with them in a certain way or lining them up.*
- *Problems with changes in routine or surroundings.*
- *Repetitive movements such as spinning, hand flapping or head banging.*
- *Preoccupation with different objects.*

There is also a form of autism called Autistic Savantism, and children will show incredible skills in some areas such as art, numbers, or music, without any practice or lessons.

While the cause of autism is unknown, both women who have children over the age of 40, and older fathers have higher rates of having a child with autism.

1.2.3 Learning Disorders

Learning disorders affect how kids understand, remember, and respond to new information.

Here are some of the most common learning disorders:

DYSLEXIA DYSCALCULIA LANGUAGE/ AUDITORY PROCESSING DISORDER

DYSLEXIA

Dyslexia affects children's reading fluency, reading comprehension, decoding, writing, spelling recall, and sometimes speech.

Some signs that a child has dyslexia are:

- Their reading is slow and painful.
- They experience errors when decoding, especially when it comes to the order of letters.
- They have a large disparity between their listening comprehension and reading comprehension.
- They have trouble spelling.
- They may have poor handwriting.
- They show difficulty remembering words they already know.
- They may have difficulty with math.



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DYSCALCULIA

Kids with dyscalculia often have a poor understanding of math symbols, can struggle with organizing and memorizing numbers, and have difficulty counting or telling time.

There has not been a lot of work on dyscalculia, which means there is no definitive list of symptoms. However, these are some symptoms which have been established through research:

- Delay in counting skills. Kids will show less understanding of the basic principles of counting.
- Difficulties memorizing facts about math and arithmetic.
- Fundamental difficulties understanding quantity, for example being unable to differentiate which is the larger of two numbers.
- Anxiety about math.
- Trouble learning reasoning methods.
- Difficulty learning place value.
- Problems sequencing events or information.
- Difficulty recognizing patterns with subtracting, dividing, multiplying, or adding.
- Problems with organizing problems on their page.

LANGUAGE / AUDITORY PROCESSING DISORDER

The term “*Processing Disorder*” is often used to describe many different communication disorders. Two of the most common processing disorders are Auditory Processing Disorder and Language Processing Disorder.

In order to help a child who has a **Language Processing Disorder**, teachers should help them learn visualization techniques that will help them with their listening, and comprehension. Writing the main concepts of a lesson on the board or allowing kids to record lessons is helpful. It is also important that teachers speak slowly and clearly.

An Auditory Processing Disorder occurs when sound travels through the air, is adversely effected, and sometimes interpreted incorrectly by the child’s brain. This means that kids will



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not be able to recognize differences in words. They may find it difficult to make sense of the order of some sounds, and to block out background noise.

Signs of an Auditory Processing Disorder are:

- **Difficulty remembering and processing** language-related facts and tasks, but no trouble with recalling or interpreting non-verbal sounds in the environment such as music.
- **Problems processing** thoughts and ideas, and explaining them.
- **Misspelling and mispronouncing** of similar-sounding words or confusing words that sound similar.
- **Confused by language** which is figurative, and will usually only interpret words literally.
- **Difficulty staying focused.**
- **Problems remembering** oral directions or following directions.
- **Can “ignore” people if concentrating.**
- **Will often say “what?”** even if they have heard most of what was said to them.

1.3 Effects of Special Educational Needs on Learners

Having a child with SEN can have a huge impact on both the child and their family. Parents face a unique combination of social, physical, financial and emotional pressures that impact their life

Children with SEN can sometimes feel like their life is out of their control, particularly if they have numerous appointments with therapists, doctors, and counselors.

1.4 General Support Systems for Special Educational Needs

General support systems can include:

- Extra after-school support and classes.
- One-on-one help with a tutor.
- Extra help from teachers.



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- Speech therapy.
- Special education classes within the public school system.
- Counseling.
- Physical and occupational therapies.
- Buddy programs partnering kids with SEN with non-special needs kids.
- Family therapy programs.

[Exam Link](#)