



## Understanding Special Needs

If you have a child who has been diagnosed with a specific learning difficulty, a developmental, behavioural or communication disorder or has specific physical needs you will no doubt already be doing your best to find out as much as possible about your child's needs and how to support him. Below is a summary of some common conditions and some website resources to find out more.

**Autism spectrum disorder (ASD)** is a condition that affects social interaction, communication, interests and behaviour.

ASD can cause a wide range of symptoms:

- Problems with social interaction and communication – including problems understanding and being aware of other people's emotions and feelings; it can also include delayed language development and an inability to start conversations or take part in them properly.
- Restricted and repetitive patterns of thought, interests and physical behaviours – including making repetitive physical movements, such as hand tapping or twisting, and becoming upset if these set routines are disrupted
- Children, young people and adults with ASD are often also affected by other mental health conditions such as attention deficit hyperactivity disorder (ADHD), anxiety or depression.
- About half of those with ASD also have varying levels of learning difficulties.

Source: [www.nhs.uk](http://www.nhs.uk)

Additional resources: <http://www.autism.org.uk> ; <http://www.learningdisabilities.org.uk/help-information/learning-disability-a-z/a/autistic-spectrum-disorder-asd/>

**Attention deficit hyperactivity disorder (ADHD)** is a group of behavioural symptoms that include inattentiveness, hyperactivity and impulsiveness. Much is still being learnt about this condition.

Common symptoms of ADHD include:

- a short attention span or being easily distracted, making careless mistakes – for example, in schoolwork - appearing forgetful or losing things, being unable to stick at tasks that are tedious or time-consuming, appearing to be unable to listen to or carry out instructions, constantly changing activity or task, having difficulty organising tasks
- restlessness, constant fidgeting or overactivity, excessive physical movement, excessive talking,
- being impulsive, little or no sense of danger, being unable to wait their turn, acting without thinking, interrupting conversations

ADHD can occur in people of any intellectual ability, although it often occurs in people with learning difficulties. People with ADHD may also have additional problems, such as sleep and anxiety disorders.

Symptoms of ADHD tend to be first noticed at an early age, and may become more noticeable when a child's circumstances change, such as when they start school. Most cases are diagnosed in children between the ages of 6 and 12.

Source: [www.nhs.uk](http://www.nhs.uk)

Additional resources: <http://www.nimh.nih.gov>

**Dyslexia** is a common learning difficulty that mainly affects the way people read and spell words. Dyslexia is a spectrum disorder, with symptoms ranging from mild to severe. People with dyslexia have particular difficulty with:

- phonological awareness - the ability to identify how words are made up of smaller units of sound, known as phonemes.
- verbal memory - the ability to remember a sequence of verbal information for a short period of time.
- rapid serial naming - the ability to name a series of colours, objects or numbers as fast as possible.
- verbal processing speed - is the time it takes to process and recognise familiar verbal information, such as letters and digits.

Primary school aged children with dyslexia may

- answer questions well orally, but having difficulty writing down the answer
- have difficulty carrying out a sequence of directions
- struggle to learn sequences, such as days of the week or the alphabet
- have slow writing speed or poor handwriting
- have problems copying written language, and taking longer than normal to complete written work

Source: [www.nhs.uk](http://www.nhs.uk)

Additional resources: <http://www.learningdisabilities.org.uk/help-information/learning-disability-a-z/d/dyslexia/>; <http://www.bdadyslexia.org.uk/>

**Developmental co-ordination disorder (DCD)**, also known as **dyspraxia**, is a condition affecting physical co-ordination that causes a child to perform less well than expected for his or her age in daily activities and appear to move clumsily.

Early developmental milestones of crawling, walking, self-feeding and dressing may be delayed in young children with DCD, and drawing, writing and performance in sports are usually behind what is expected for their age.

The problem is not due to general delays in development or a learning disability, and is not caused by cerebral palsy or another neurological disorder (conditions affecting the nervous system).

Although signs of the condition are present from an early age, children vary widely in their rate of development and DCD is not usually definitely diagnosed until a child with the condition is around five years old or more.

Primary school aged children may have difficulties:

- with playground activities such as hopping, jumping, running, and catching or kicking a ball – they often avoid joining in because of their lack of co-ordination and may find PE (physical education) difficult
- walking up and down stairs
- writing, drawing and using scissors – their handwriting and drawings may appear scribbled and more childish than other children their age
- getting dressed, doing up buttons and tying shoelaces
- keeping still – they may swing or move their arms and legs a lot and find it hard to sit still

Children with Dyspraxia may also have difficulty concentrating, difficulty following instructions and copying down information, be poor at organising themselves and getting things done.

Children with learning difficulties often feel very frustrated and inadequate which may show up as behavioural problems. In addition children who have difficulties with coordination and compromised ability to play games may have difficulties with friendships.

Source: [www.nhs.uk](http://www.nhs.uk)

Additional resources: <http://www.learningdisabilities.org.uk>

**Sensory processing disorder (SPD), or sensory integration dysfunction (SID)**, are names for a condition where a person's nervous system has difficulty in taking in, integrating and making use of sensory information.

In most people the senses - touch, hearing, vision, taste and smell as well as movement and body position - occur automatically, without having to think about them. The nervous system supplies information about these sensations to the brain, where the information is used to understand what is going on within the body and the world around us. These normally develop more fully during childhood. How the brain processes and uses this information is referred to as sensory integration. There are several stages in sensory processing:

- Registering
- Orientating
- Organising
- Interpreting
- Responding

The ability to process this information affects how we learn, do everyday activities and develop relationships with others.

If the brain has a problem in processing and using the sensory information provided, where it does not organise the sensory signals in a useful or accurate way, it can affect the ability to learn as well as the development of behaviour, social and motor skills.

It varies between individuals in both characteristics and intensity: children may be born hypersensitive (over-responsive to stimuli), or hyposensitive (under-responsive to stimuli) – which may result in avoidance of an activity.

Symptoms of SID include:

- **Tactile:** the sense of touch. Sensitive to clothing textures and clothes labels. Dislikes hair brushed or washed. Reacts badly to being touched unexpectedly. Unusually sensitive to being too hot or cold.
- **Visual:** the sense of sight. Overwhelmed in a visually 'busy' environment. Focuses on little details in a picture and misses the whole. Loses his/her place frequently when copying from the blackboard.
- **Auditory:** the listening sense. Low tolerance of noise generally, says that noise 'hurts ears' or gives him/her a headache. Or, seems not to register sound. Fails to respond to hearing name called.
- **Oral:** the sense of taste & texture. Fussy or picky eater with determined food preferences and limited range. May lick, taste or chew on inedible objects. Dislikes toothpaste and brushing teeth.
- **Olfactory:** the sense of smell. Disturbed by cooking, bathroom or perfume smells. Or, may not notice unpleasant, noxious odours or be able to distinguish smells/fragrance.
- **Vestibular:** the sense of movement. Avoids playground apparatus and equipment. Fearful of heights. Or, may crave movement experience, especially fast or spinning. Thrill seeker.
- **Proprioception:** the sense of body position. Difficulty understanding where their body is in relation to other objects and may appear clumsy and bump into things. Misjudges the weight of an object.

In addition, there are many general behaviours and traits that are associated with SID, eg. agitation, frustration, aggression, low self-esteem, difficulty unwinding or sleeping and appearing out-of-sync with self or others and the environment.

Source: <http://www.webmd.boots.com/children/guide/sensory-processing-disorder>

Additional resources: <http://www.spdfoundation.net>

## **Conduct disorder and Oppositional Defiant disorder**

- **oppositional defiant disorder (ODD)** – is defined by negative and disruptive behaviour, particularly towards authority figures, such as parents and teachers
- **conduct disorder** – this often involves a tendency towards highly antisocial behaviour, such as stealing, fighting, vandalism and harming people or animals

Source: [www.nhs.uk](http://www.nhs.uk)

Additional resources: [www.webmd.com/mental-health/oppositional-defiant-disorder](http://www.webmd.com/mental-health/oppositional-defiant-disorder)

[www.webmd.com/mental-health/conduct-disorder-directory](http://www.webmd.com/mental-health/conduct-disorder-directory)

## Anxiety disorder

Anxiety is a feeling of unease, a worry or fear. Children can be fearful of many things, some of them imaginary and many of them irrational. It can be hard for an adult to understand their fears. Many worries are a normal part of growing up. But sometimes anxieties are very big, very frequent and very consuming. Anxiety becomes a problem for children when it starts to get in the way of their day-to-day life. Anxiety may also cause physical symptoms, such as a rapid heartbeat, sweating and dizziness or stomach cramps or eczema.

Children suffering from anxiety may:

- lack the confidence to try new things or seem unable to face simple, everyday challenges and may avoid everyday activities, such as seeing friends, going out in public or attending school
- find it hard to concentrate
- have problems with sleeping or eating
- be prone to angry outbursts
- talk constantly about their negative thoughts or the bad things that are going to happen
- engage in comfort eating

Additional resources: <http://www.nhs.uk/conditions/anxiety-children/Pages/Introduction.aspx>

**Depression** - is more than simply feeling unhappy or fed up for a few days. Children suffering from depression are feeling persistently sad or hopeless, losing interest in the things they used to enjoy and feeling very tearful for weeks or months, rather than just a few days. These feelings are causing interference to their normal life. There can be physical symptoms too, such as feeling constantly tired, sleeping badly, having no appetite and complaining of various aches and pains. People who are depressed often feel anxious too.

Source: [www.nhs.uk](http://www.nhs.uk)

**Epilepsy** – a condition that affects the brain and causes repeated fits or seizures. The severity of seizures can differ from person to person. Some people simply experience an odd feeling with no loss of awareness, or may have a "trance-like" state for a few seconds or minutes, while others lose consciousness and have convulsions (uncontrollable shaking of the body).

Source: [www.nhs.uk](http://www.nhs.uk)

**Tourette's syndrome** – a condition of the nervous system, characterised by a combination of involuntary noises and movements called tics

Source: [www.nhs.uk](http://www.nhs.uk)