



Facing the challenge and shaping the future for primary and secondary aged students with Foetal Alcohol Spectrum Disorders (FAS-eD Project)

CASE STUDIES: TEACHING AND LEARNING STRATEGIES TO SUPPORT STUDENTS WITH FOETAL ALCOHOL SPECTRUM DISORDERS (FASD)

Carolyn Blackburn, Project Researcher, October 2010

E: Carolynb@hotmail.co.uk

Project Director: Professor Barry Carpenter, OBE

CONTENTS

Case Study	Page Number	
<p>Case Study 1: Mainstream Primary Setting (personalised learning)</p>	3	
<p>Case Study 2: Mainstream Secondary Setting (therapeutic approaches combined with a differentiated national curriculum)</p>	7	
<p>Case Study 3: Special School Setting (transition from primary to secondary education with complex health needs)</p>	12	

These case studies are designed for teacher training and development. They can be used by a range of professionals, but will be particularly useful for practising teachers and support staff or trainers of trainee teachers. They should be used alongside the Primary and Secondary Frameworks resulting from this project. The feedback sheets from teachers are examples of teachers' feedback on how effective strategies implemented from the Frameworks were for the student in question.

FOETAL ALCOHOL SPECTRUM DISORDERS (FASD)

Be Healthy – Stay Safe – Enjoy and Achieve – Make a Positive Contribution – Achieve Economic Well Being

Case Study 1 – Primary Education (Personalised learning)



Background

Child 1 attends a mainstream nursery and primary school where she is placed in a class of 30 children and accesses the National Curriculum. She is supported by an Inclusion Assistant for all activities, some of which take place in the classroom alongside her peers, whilst others are delivered on a 1:1 basis according to the subject and topic. All work for this student is personalised according to her needs, including the delivery of curriculum and recording of progress.

The Child as a Learner – Strengths and Challenges

Child 1 listens well in the classroom and enjoys school. She wants to do well and be included and is willing to learn.

Her enthusiasm is coupled with a visual impairment, small stature, immaturity and inattention as well as learning difficulties. This has implications for where she is able to sit in the classroom in order to see the teacher and whiteboard, how her peers treat her in equality terms, her ability to stay on task and retain information and the length of time she is able to focus for.

For example, there is a temptation for peers to 'baby' her as it is not always easy for her to follow the rules of playground games or play them on an equal basis. Her lack of focus and attention imply that tasks must necessarily be broken down into small steps and highly personalised to her individual needs in order to engage her in learning. Her visual impairment means that she must sit near the front of the classroom so that she is able to see the teacher and whiteboard and also has implications for the use of computers and visual equipment in ICT.

The Child as a Learner – Opportunities for Inclusion

Including this child in a mainstream secondary setting and providing access to the national curriculum have been possible through a combination of adult support and scaffolding, personalised teaching and learning and partnership with parents. For example:



- Abstract concepts such as money are taught using a range of concrete examples such as oversized laminated pictures of coins, plastic coins and games. The equipment is then sent home so that the student can practice with parents. This is then reinforced with a trip to the shop with peers to use real money and facilitate the transfer of knowledge from the classroom situation to a practical application and embed the practice of buying items in real life with peer and adult support.
- Life skills such as cooking, hygiene, peer relations, emotions, safety, life cycle issues are taught through attendance at a weekly life skills class with peers.
- Recording of achievement is appropriate to the situation and the child. For example, photographs of the child taken at various stages of the learning process demonstrate progress, without the need for her to undertake lengthy writing activities, which tire and frustrate her, leading to a sense of failure and low self esteem.
- Pictures and symbols are displayed below the whiteboard so the student and other children with additional needs have a visible timetable of the day/lesson. The teacher/inclusion support assistant will talk through the timetable so that the student knows what's happening now and next.
- A buddy system is provided at break and lunch times to ensure that the student has peer companionship and support throughout the day.
- A home-link diary is used to keep parents informed and parents are able to use this to ensure that school are aware of issues at home that may impact on learning or emotional well being throughout the school day.

These measures ensure that this child is able to access the national curriculum in a mainstream educational setting alongside her peers.

Effective Teaching and Learning Strategies for Case Study 1 (feedback from Class Teacher)

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
Social experiences e.g eating activities in life skills sessions.	Social eating with a small group of children Skills: sharing, manners, learning how to use a knife (buttering).	Very successful. The child will participate within the group. Fine motor skills improving, social eating v. enjoyable and allowed lots of opportunities for chatting and increasing social awareness.	The child can use these skills at home, parties, restaurant etc... Life skills
"self" through discussion (circle time activities).	Used daily within the class during discussions across the curriculum, Group read, reflection opportunities. Speaking and listening.	Very successful. The child knows when it is her time to talk and when it is her time to listen. The child will put her hand up independently and participate in lessons.	The child is happy and engaged in class. The child does not always need prompting within class discussion as she is independent in her responses. Excellent for independent learning and for assessment opportunities!
Majority of strategies on the being healthy section are naturally included within the school setting – i.e Healthy eating within Science, school assemblies etc.	Cooking within life skills. Discussion on healthy eating. Trying new foods (fruits) in life skills	The child really enjoys food and is therefore naturally interested and engaged in her learning and experience. The child enjoys cooking and this in turn gives ample speaking and listening/ communication skills to be put into practice.	Good understanding of healthy food.
Address stranger Danger and personal safety issues during circle time/drama.	Discussed during assembly time. HPSE and "people who help us" topic. (Lifeskills)	Successful Hopefully The child understands who is able to approach if she is lost – fireman, police- person. Visits to school from police/fire have reinforced this.	Help the child to understand her community and who to trust.
Small group work Discussed with student (work experience) group work on Bullying.	Anti bullying reminder. The child is capable of telling us if she is unhappy at lunchtime. Similarly – the child can recognize nice playing and can identify what she wants to do with her time – she is becoming more independent which is stopping people from treating her like a baby.	Very successful. The child is largely independent at Lunch times and playtimes. Adult is there if the child needs their help but they monitor her needs from a distance. This aids her independence too.	The child is speaking a lot more for herself and is becoming more aware of what is right and wrong in a certain amount of situations.

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
Provide 1:1 adult support giving independence when appropriate.	Most areas of the curriculum support is given when needed to keep on task, especially. The child had a variety of independent choices to choose from.	Successful – the child is confident and happy, she is a child who is thriving with support and is becoming more confident without support.	To identify when the child needs time out and space due to overload, being tired or emotional
Provide opportunities for group work.	Group reading, The child joins in with a weekly reading session with 5 other children. Books are suited to their needs and discussion follows after the session.	VERY successful, the child will take her turn and put her hand up to join in by answering questions and she is beginning to re-tell stories.	Inclusion. Good for the child but also good for others in the group for reinforcing ideas.
Make visual timetables'/using photographs.	The child has a visual timetable in the front of the class. Written responses to lessons are not always needed. We use photo evidence of practical work showing the child playing games etc.	Successful, we will look back through the book and discuss previous work. Topic books are also made for various subjects. We have worked with jumbled sentences – the child has used this to work on sentence structure.	The child is engaged in her learning. It is also an excellent way of sharing the child's work with others and for the child to show her parents what she has done at school
Mathematics Assesses the curriculum at the level and understanding.	Crickweb –Educational resource website with an early years section – used to encourage independence and mouse skills. Games and resources for the foundation stage. Fractions-cutting up fruit.	Successful: tactile, visual areas of learning.	Keeps the child engaged whilst learning.
Literacy	The Learning and Behaviour Support Service have provided a variety of resources, blends, phonics, reading books. Small group work to suit child's needs.	Successful: Reading improved, can retain some information from class discussion.	Lots for the child to be involved in and lots of praise for her when she achieves small targets.
History Geography	Topic books made with photos for school and home reading.	Very successful: Inclusive learning within the classroom and not outside. Also encourages independent reading and knowledge on the related subject.	Inclusion in the classroom, independence.

FOETAL ALCOHOL SPECTRUM DISORDERS (FASD)

Be Healthy – Stay Safe – Enjoy and Achieve – Make a Positive Contribution – Achieve Economic Well Being

Case Study 2 – Secondary Education

(Therapeutic approaches combined with a differentiated National Curriculum)



Background

Child 2 attends an Autistic Spectrum Condition Unit attached to a mainstream secondary school. Most lessons and learning take place supported in the mainstream, with individual programmes in the Unit where necessary. She also has access to music therapy and occupational therapy through her place in the unit.

Child 2 is supported in all lessons by at least one TA, although for some practical lessons, it is necessary to provide 2:1 adult support.

The Child as a Learner – Strengths and Challenges

Child 2 is a keen learner, when she is confident she will be able to complete tasks. She enjoys school, in particular she likes public speaking, drama, French, history, literacy, dance and gymnastics. She takes pride in her artistic talent and her ability to write stories. She is noted for her general knowledge and politeness.

This enthusiasm is coupled with extreme impulsivity, hyperactivity, and a propensity to become over stimulated by busy, noisy, tactile environments (due to a sensory processing disorder). This has particular implications for practical lessons such as science, food technology, and physical education, where close supervision is required to ensure her safety and the safety of other students and staff. For example, in Carolyn Blackburn

science lessons, she can easily become overwhelmed by equipment such as Bunsen burners, bright liquids and noisy experiments. When she is over stimulated, she may pick up or touch equipment (Bunsen burners, ovens, chemicals) and move around the room with them before a member of staff can react. When in noisy changing rooms, over stimulation can lead to her climbing on top of equipment such as lockers. This can be interpreted by uninformed staff as a behavioural issue and result in sanctions rather than understanding.

The Child as a Learner – Opportunities for Inclusion

Including this child in a mainstream secondary setting and providing access to the national curriculum have been possible through a combination of careful and thorough risk assessments, adult support and scaffolding, personalised teaching and learning and partnership with parents. For example:

- Before practical sessions such as food technology or science take place, the science teacher or ASC unit teacher (accompanied by a TA) will walk and talk the student through the equipment, providing her with clear demonstrations and explanations of the safe use of equipment. She is then in a position to attend a lesson alongside her peers armed with a basic understanding of the principles and expectations. This will always be supported by at least 1:1 and sometimes 2:1 adult supervision.
- The student has a visual timetable located in the ASC which she looks at each morning on arrival at the unit.
- A smaller version of the timetable is copied into her individual planner so that she can view it during lessons as necessary.
- TAs monitor her anxiety and arousal level throughout the day through discussions with her and liaise with her and each other, as well as the ASC unit teacher about those lessons where more support may be necessary. They can then discuss the nature of support necessary to ameliorate the effects of her Sensory Processing difficulties as far as possible.
- The ASC unit teacher (and school SENCo when appropriate) corresponds daily with parents by email regarding issues arising.

In addition the student is provided with access to occupational therapy and music therapy to address sensory processing and social and emotional difficulties, combining a therapeutic approach with a differentiated national curriculum.

These measures ensure that this student is able to access the national curriculum in a mainstream educational setting alongside her peers.

Effective Teaching and Learning Strategies for Case Study 2 (feedback from ASC Unit Teacher)

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
Provide tactile examples of what teaching-allowing to touch/see feel before lesson.	Communication skills: level of understanding.	This has been used particularly in science where there are many safety issues and temptations to touch. Head of Science has collaborated with support staff. The child has been taught in 1:1 sessions issues around safety such as what is OK to touch and when, and why something is not OK to touch, as well as danger signs to look out for. This has been successful in that it seems to satisfy the need to touch what is around in the lab. There is less impulsivity and the child is therefore safer in class.	The child has been more aware of safety issues within the lab and this has helped her have more access and inclusion into potentially dangerous practical sessions. To be able to touch in a controlled way satisfies the need to explore and has curbed impulsivity.
Consider other methods of recording progress such as mind maps diagrams, writing frames camera and video.	Communication skills: Literacy skills.	Mind maps used to help organise thoughts in English Writing frames used for written homework tasks with clear structure and concise organization of what and where to put on page. This can help keep the child on track and stay focused. Makes other subject tasks manageable.	The child is able to manage tasks more effectively and not get lost in flow of irrelevant thoughts. Helps with the organisation of thoughts and tasks, and helps to embed understanding of the task and the subject.
Provide adult explanations and discussions with the child about coming activities, reminding the child to regulate her pace.	Being healthy: inability to regulate own pace.	This strategy is used consistently through the day-support staff go through lesson immediately prior to start with reminders of expectation around pace. The child is told when her pace is becoming an issue-awareness raised so able to self regulate more.	The child is able to increase awareness of suitable and appropriate pace to be working at, and increase self awareness of how to self regulate.

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
Consider classroom and school environment in terms of noise, light, sound, access-safety in labs and workshops.	Sensory processing difficulties.	OT has helped with sensory assessments and delivered staff training around sensory issues and stimulation. Risk assessments in place around safety in labs and workshops. One to one sessions in labs and workshops help with safety awareness.	The child is involved in sensory audits, which leads to an increased awareness of dangers and safety issues. The child is more able to cope safely when in large mainstream group.
Provide concrete or visual examples to enhance understanding of abstract concepts.	Abstract Concepts: level of understanding.	Post it notes with hot spots written on them are used to label potential dangers in labs and technology rooms.	Helps the child to stop and think around potential danger zones before acting impulsively.
Use (percussion) instruments for student to create rhythms and to practice following instructions to play and copy patterns. Students will need to listen and sustain attention to listening.	Attention/Distractibility /Hyperactivity.	Weekly music therapy session very successful. Gives a safe space for child to explore expressive outlets, have freedom to express and communicate through music and develop listening and focus skills. One of the highlights of child's timetable.	The child is able to have allocated time where she can go at the pace she would like to, where the pressure is off in terms of academic learning and where listening and focus are developed through this medium. HIGHLY RECOMMENDED
Keep task short and achievable and break tasks up with physical activity to expend energy and refocus attention.	Attention/Hyperactivity/ Distractibility.	Relies on sensitivity of support staff-can work well. Tasks sheets with timings of each activity to tick off help focus. Going for a run around the field if hyper then back in to class can work but only in extreme cases. The difficulty can be then that the activity becomes preferable to the lesson and is used as avoidance strategy but with right approach can work well.	When the child is hyper and unfocused this can be a great strategy to help the child gain calmness and reduce tensions in the mainstream class-hyper states can be hard for teachers and peers to manage, and for child who is not aware of impact. A run or walk to help her calm down can be effective and allow calm access to remainder of lesson afterwards.

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
Discuss with child and record in file info around well being and emotional state. A scale of 1 – 10 is used in this scale to record the level of emotional well being on each occasion.	Relationship difficulties including lack of understanding of own needs and others.	Really helpful as support staff can see lesson by lesson which ones are going to be the challenges of the day as perceived by student and plans can be made to address high anxiety lessons- less time in room , scale back expectations and shift goal posts etc.	When the child is unable to communicate to support staff verbally around anxieties, folder gives instant view of situation and helps support staff understand student and better prepare for managing her within lesson.
Teach life skills specifically and frequently.	Lack of life skills, particularly around personal safety and forming appropriate relationships.	Hard to measure as not seen applying in out of school context. We can see progress during structured sessions within school time, and have clear set of shopping/road safety competencies to work through with guidance from Occupational Therapist.	The child has increased awareness of the skills needed for personal safety and responsibility. She is more aware of the skills needed for independence. Less risk to safety when out of school and in public. Can lead to false sense of security- 'I've done that now!'
Provide opportunities for the student to take on special roles within the school – 'Eco Rep' , office services 'Duty Student' for day.	Immaturity and lack of understanding about employment opportunities and job roles/	Very successful. Has shown the child's ability to rise to the occasion and take responsibility seriously. Staff are more aware of the fact she is capable in these areas.	This has been good for the child's independence skills and self esteem.
Provide specific teaching around independence and safety.	Impulsive behaviour/no sense of danger regarding self or others.	This needs to be ongoing over time around specific issues to be successful- using clear broken record technique- 'If you want to go by yourself, you need to do this and this to be successful. If you don't, then this will happen.'	The child is clear about boundaries and consequences. Issues talked through when calm so processing is better rather than in heat of the moment when communication skills fall away. Over time the message begins to sink in, and new responsibilities can be added in.

FOETAL ALCOHOL SPECTRUM DISORDERS (FASD)

Be Healthy – Stay Safe – Enjoy and Achieve – Make a Positive Contribution – Achieve Economic Well Being

Case Study 3 – Special Education

(Transition from primary to secondary education with complex health needs)



Background

Child 3 attends a Specialist Physical and Sensory Special School. The school caters for students aged from 4 – 16 with physical disabilities and complex medical needs and students aged 11 – 19 with Profound and Multiple Learning Difficulties (PMLD). Student 3 is placed in a class size of 10 children and he follows a modified National Curriculum. At the moment, he is placed with age appropriate peers, but when he makes the transition from primary to the secondary part of the school in September, he will be streamed according to ability (social and emotional as well as academic) so he will be with a mixed age group. His needs are mostly medical.

The Child as a Learner – Strengths and Challenges

Child 3 has strong literacy and speaking skills and enjoys drama. He has a positive and enthusiastic attitude to his learning.

His challenges include difficulty with abstract concepts, particularly money, and his ability to see himself as age appropriate. He demonstrates an eagerness to please which could cause irritation amongst older peers and he is working on his ability to manage conflict. This is an area of focus as he makes the transition to the secondary curriculum.

These challenges are combined with complex health needs, including visual and hearing impairments, heart problems (a leak on one of the valves), feeding problems, skeletal problem (his bones are not formed properly), mobility difficulties which impact his ability to walk distances and run and he is doubly incontinent. There are also difficulties around feeding, food choices, small stature and appropriate interactions with others, particularly unfamiliar adults.

The Child as a Learner – Opportunities for Inclusion

In order to address these challenges, Child 3 has access to a curriculum which incorporates life skills in key areas through discussion with the teacher and his peers in order to prepare him for transition to the secondary curriculum. In particular, his needs are addressed in the following areas alongside curriculum areas, in order to ensure that he is prepared for transition, whilst maintaining his independence in self care, health monitoring and relationships.

Health Issues

Health and dietary needs are met by a multi-disciplinary team who communicate effectively and regularly with parents, education staff and the student in order to ensure that any lesson time missed through visits to therapies and the medical room is caught up to avoid student anxiety. He is encouraged to assess independently when he needs to visit the medical room for personal care needs.

Child 3 is encouraged to try very small amounts of new foods. Limiting what is on his plate and giving very clear targets for the amount he should try to eat helps to add variety to his diet. However, this needs to be balanced with the provision of opportunities for independence, as although he can often eat more if he is fed by an adult, he is capable of feeding himself.

Transition and Age Appropriateness

Staff located within the Secondary Unit are regular visitors to the Primary Unit and are therefore familiar to students, who are able to develop an appropriate relationship with secondary staff before transition takes place. In addition this student is being encouraged to choose and read age appropriate literature through a small step approach of encouragement and praise to build his confidence. Work is also ongoing on improving his understanding of text, in particular popular media and the messages given out through advertising to progress his understanding of fantasy and reality.

Staying Safe

Discussions about over familiarity with strangers, personal boundaries and appropriate interactions with others are held both on a 1:1 basis with the child and in peer groups in order to help him make connections between areas of learning which other students make automatically.

Effective Teaching and Learning Strategies for Case Study 3 (feedback from Class Teacher)

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful – why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
<p>Enjoyment of books</p> <p>Explained to the child that I wanted him to read longer books.</p> <p>Asked him to choose from a range of chapter books - he chose 'The Witches' by Roald Dahl.</p> <p>Planned a regular reading session 2 times per week</p> <p>The child was to rehearse reading before reading a maximum of one page to an adult.</p> <p>He was given a target to read no more than 2 -3 pages before next reading to an adult. He was also given a reading journal to keep a record of his reading with three comprehension questions to answer about the text - simple retrieval questions at present.</p>	<p>Enjoy and Achieve</p> <p>Literacy Skills – increasing reading stamina</p> <p>Although the child has very age appropriate reading fluency he prefers to read very short simplistic texts.</p>	<p>Aims:</p> <p>To increase reading stamina and confidence when reading longer chapter books. To Increase application of comprehension skills.</p> <p>Although the child was initially excited about having a chapter book the reality of the task soon became daunting. He commented on the length of the book and that it was hard. Used opportunities when hearing him read to praise his reading fluency. Used reading rehearsal to reduce the stress of reading aloud 'cold' to an adult.</p> <p>Introduced reading journal and very small reading targets. Introduced comprehension questions to add purpose to this reading.</p> <p>The child is feeling more positive about continuing to read the book and has now read 27 pages.</p>	<p>The child is beginning to read more age and ability appropriate texts and feel that the task is achievable.</p> <p>The child is increasing his vocabulary and using more contextual cues to tackle unknown words.</p> <p>The child's reading is becoming more purposeful.</p>

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
<p>Understanding money</p> <p>Using real money to count and exchange to understand the value of individual coins. I introduced a lot of activities around looking at coins and identifying the number on each coin -which coin has the highest number, which is worth more.</p> <p>Used knowledge of number to exchange coins and match values e.g. 10 pennies = a 10p coin</p>	<p>Enjoy and Achieve</p> <p>The child found it difficult to grasp the value of coins and that it is the value of the coins not the number of coins that dictates the amount of money you have.</p>	<p>The child became more confident with money and had a greater understanding of the values of coins.</p> <p>He knows he has to add up the amount each coin is worth to know how much he has not the number of coins he has.</p> <p>He is able to exchange coins for pennies.</p>	<p>The child became more confident using money and took on the role of the shopkeeper during shopping role play.</p>
<p>Encouraging the child to try very small amounts of new foods. Limiting what is on his plate and giving very clear targets for the amount he should try to eat.</p> <p>Help with feeding – v. recent due to lethargy and recent health problems.</p>	<p>Being Healthy</p> <p>The child has a number of health issues and has an aversion to certain types and textures of food. He usually eats very small amounts but has an even poorer appetite at present due to additional health difficulties.</p>	<p>The child has been willing to try new foods in small amounts and this has increased his food choices including more vegetables. He has continued to eat v. small amounts and needs a lot of encouragement to eat his target amount of food. Due to increased lack of appetite I tried feeding him and the transformation was incredible. Happy to eat large spoonfuls and finished his target amounts in a few minutes unlike the usual playing with food with tiny bites – this is a dilemma.</p>	<p>Non-stressful encouragement to try new foods on his terms has made him more confident to try new foods and added more variety to his diet. Recent improvement in the amount he eats via being fed made him very happy and meant he met his target amount very quickly and successfully. Need to consider this against emotional negativity linked to non-age appropriate support – He is physically very able to feed himself!</p>

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
<p>Opportunities for small group work</p> <p>Using simple instructions with visual cues The class are investigating smoothies. In mixed ability groups they had to follow instructions for making smoothies and come up with a description of their smoothie.</p>	<p>Communication Skills:</p> <p>Being able to follow and explain instructions and extend own descriptive vocabulary.</p>	<p>Aims:</p> <p>To encourage the child to lead a group in a structured way and extend his vocabulary to support his descriptive language</p> <p>This proved very successful – the child had clear and simple instructions that he had to read to the group and use to identify the tasks they had to do. The child happily took the lead and supported his group in completing the task. This was partly because the task was multi sensory and had a clear purpose. Also the instructions were clear and organised into simple visual stages. The child extended his vocabulary by being given word choices and using his own senses to describe the fruit and the smoothies. He used pre identified descriptive words to choose three key words to describe his smoothie – fruity, tasty sweet.</p>	<p>The child was very proactive and positive about the task. He ceased saying that he was tired and wasn't hungry and got fully involved in what he was doing. In addition he enjoyed tasting the smoothies and tried all the other groups as part of a 'what makes a good smoothie' taste test? (this has helped to further improve his food choices) He happily went through the instructions with his group and reminded them of each stage of the activity. He also helped his group with their tasks and supported them to assess their work. He was very pleased and positive about what he had achieved.</p>

Strategy Tried (Description)	Objective/Target for Strategy (What barrier to learning is the strategy intended to overcome)	Outcome (Successful/unsuccessful - why?)	Observable benefit to child (For example more engaged in learning, happier in class, reduced disruptive or inattentive behaviour)
<p>Provide gentle guidance over appropriate behaviour</p> <p>The child was involved in rehearsals for a concert which involved a number of other schools and a member of staff witnessed the child being over familiar with a female member of staff from another school by leaning on her:</p> <p>Initially I told him to not to lean - the child found this difficult so removed him from the vicinity. I then spoke to him back at school about the incident. This was linked discussion to issues about personal boundaries and relationships, differences between friends, family and strangers. After discussion gave the child very clear instructions about how he should behave in future</p>	<p>Achieve Economic Well Being</p> <p>Lack of Life Skills, particularly around personal safety and forming appropriate relationships.</p> <p>The child is very small for his age; he can appear precocious and is used to being 'fussed' over. This can lead to him being very trusting and over familiar with strangers.</p>	<p>Difficult to judge success – will need to see how he behaves in a similar situation.</p> <p>The child found it very difficult to understand that this behaviour was not appropriate.</p> <p>The child could not distance himself from the woman and understand that she was a stranger.</p> <p>The child regarded her as a friend because she was nice and he had seen her a couple of times at rehearsals.</p> <p>The child appeared to come to some understanding about family and friends versus people we don't really know but not embedded in his understanding.</p>	<p>Discussion caused some stress – he was resistant to the idea of this woman as a stranger. He was more concerned about being in trouble. Once this was dealt with he was more relaxed about discussing appropriate behaviour and why.</p> <p>This needs further work.</p>

These Case Studies are free to download from www.nofas-uk.org

Carolyn Blackburn, October 2010

E: Carolynb@hotmail.co.uk

T: 07722 059625

Published by: National Organisation on Fetal Alcohol Syndrome-UK: London