

## **Religious Education SEND Adaptations**

Strategies for supporting pupils with Special Educational Needs and Disabilities in Religious Education Lessons.



"Treat others just as you want to be treated" Luke 6:31

	Here's how we will help.
Attention	Classroom environment/set up:
Deficit	• Ensure all adults in the lesson know the child well and can recognise when to enforce rules and when not to
Hyperactivity Disorder	• Ensure a non-confrontational approach will help the child to self- regulate and reduce any anxiety and arousal
	• Ensure any rules are consistently implemented and reinforced,
	• Consider seating arrangements to minimise distractions (eg at the end of a row, or the front of the classroom).
	• Paired working, or support from a positive role model may help the child to focus. They may also struggle to work in a group, so paired seating may be preferable.
	• Allow a calming-down period before the lesson starts, especially if it follows a breaktime/lunchtime, as transition points may be difficult for the child to manage.
	Resources and equipment you might consider before the lesson:
	• A timer will provide a focus for the child's attention, enabling them to
	complete a task.
	• Use of a word processor if their work is disorganised/illegible.
	• A 'stress ball', or other fiddle object (agreed by the SENCO) may help
	with concentration.
	Visual prompts to help self-regulate
	Teaching methods to consider:
	• Ensure instructions are delivered clearly, concisely and step by step, child to repeat them back, or have them written on a prompt sheet.
	Small steps – first /next card
	Explicitly teach, reinforce and model strategies
	Provide a mix of activities to suit a range of learning styles
	• Encourage the use of pictures, or diagrams to represent thoughts and ideas.
	• Use subtle, visual pre-agreed cues, to remind the children of tasks.

Classroom environment/set up
• There are many types of anxiety and these will often accompany many areas of SEND. Ensure that you are familiar with the cause of anxiety for the particular child and how this manifests, bearing in mind that sometimes there may be no outward signs at all. Knowing the child really well will help with this. This is especially important in a subject such as RE, which often involves discussing feelings, thoughts, memories, families and, sometimes, sensitive issues.
<ul> <li>Let the children know before the lesson if the usual seating plan is due to change during the activity. Carefully plan groupings / pairings and be aware of who the child feels most comfortable with sitting next to and having them support them with their work.</li> </ul>
<ul> <li>Ensure the child is prepared and knows what to expect prior to the lesson. This may include a list of vocabulary that will be covered, the activities involved etc.</li> </ul>
<ul> <li>If a supply teacher (or another member of staff) is covering a lesson, ensure that the child is made aware of this, so that it is not a surprise to them.</li> </ul>
Resources and equipment you might consider before the lesson:
<ul> <li>Consider the use of a 'help' card, which the child can use if they feel anxious/overwhelmed, so that they can go somewhere they feel safe to calm down e.g. classroom calm area or THRIVE room</li> </ul>
Teaching methods to consider:
<ul> <li>The child may find certain teachers difficult to cope with. This may be for a whole of reasons and they may not be able to verbalise these feelings. If you notice a child is anxious around you, please adapt your behaviour accordingly to make them feel more comfortable</li> </ul>

Autism	Classroom environment/set up:
Spectrum Disorder	A child with ASD may find RE a particular challenging curriculum area, however, using some of these strategies may help provide the environment for them to feel safe and secure in order to access the activities:
	• Take time to build a good, trusting relationship with the child. This will also help adults understand the most appropriate way to respond to any behaviour, at a given time;
	<ul> <li>Ask the child where they would prefer to sit in the classroom. Avoid changing this seating plan without plenty of warning, as this could cause anxiety. Think carefully about who is sat near to the child, as they may feel uncomfortable around certain children who may be a 'trigger' for them;</li> </ul>
	<ul> <li>When planning group work, ask the child who they would prefer to work with, or offer the chance to work by themselves (or with their TA). Ensure that groups/pairs are carefully planned to provide supportive/positive role models;</li> </ul>
	• Ensure that both the child and their TA are prepared for what is coming up next and what the lesson is about, so that they know the expectations. Ensure you pre-warn the child (and TA) of any changes, to avoid anxiety and allow them both time to prepare for the change;
	• Be mindful of sensory processing difficulties and ensure the learning environment is neither over, or under, stimulating for the child;
	• Provide a safe, familiar calm down space for the child, so that they can have sensory breaks when needed;
	<ul> <li>If the child's behaviour becomes challenging, it is important to remember that this is often communicating a need, or difficulty. Look beyond the behaviour and ask for support from the SENCO if necessary. Sometimes, the child may just need time out from the class in their calm down space and may then feel ready to return again to the class;</li> </ul>
	• Visual active timetable- Display in class what is coming up next and remove lessons / activities once they have been completed;
	<ul> <li>Model and encourage positive and supportive behaviour to the child's peers.</li> </ul>

Autism Spectrum	Resources and equipment you might consider before the lesson:
Disorder	• Provide vocabulary, structure, or starting ideas for the lesson.
	<ul> <li>Use visuals and structured tasks, incorporating the child's own interests wherever possible. Find out which ones work and use them all of the time, even if it doesn't seem that the child needs them;</li> </ul>
	<ul> <li>Allow the use of fiddle toys in class. The child may also prefer to sit on a wobble cushion/special seat to provide sensory feedback and help them self-regulate and focus;</li> </ul>
	Teaching methods to consider:
	Avoid open-ended questions;
	Provide time to process information;
	<ul> <li>Encourage the child to demonstrate/present their learning in alternative ways which suit them;</li> </ul>
	<ul> <li>Provide clear timelines for when things need to be achieved and make expectations really clear (i.e. how many sentences, how many pieces of work etc. to be completed in a time frame, or before a reward is achieved)</li> </ul>

Dyscalculia	<ul> <li>Tracking from the whiteboard to paper may be difficult. Share the lesson with the child, so they can follow it on a laptop (if used);</li> <li>Provide print outs of diagrams and visual support in lessons.</li> </ul>
	<ul> <li>Teaching methods to consider:</li> <li>The child may work slower than peers. Be sensitive to this and supportive of any additional time/repetition they may need;</li> <li>The child may become easily overwhelmed and anxious; they may shut down and employ avoidance strategies. You can interrupt this cycle by scaffolding the child's work and supporting them.</li> </ul>

	When preparing resources and equipment before the lesson, you might consider:
Dyslexia	<ul> <li>keeping sentences and written instructions short and simple to read</li> </ul>
	<ul> <li>checking reading ages and ensure any work is differentiated appropriately</li> </ul>
	<ul> <li>use pastel shades of paper (cream is a good alternative to white)</li> </ul>
	<ul> <li>avoid black text on a white background and light text on a dark background</li> </ul>
	<ul> <li>avoid underlining and italics</li> </ul>
	<ul> <li>use bold text for titles, sub-headings, or to draw attention to important information, or key vocabulary</li> </ul>
	use alternate colours for lines of text
	<ul> <li>on worksheets, leave plenty of space to write a response</li> </ul>
	<ul> <li>use of widget to reduce reading requirement</li> </ul>
	Familiarise yourself with any resources/equipment the child needs to support them and ensure that these are readily available during their lesson. For example:
	• It may help to use a ruler, or finger to track the words as they read
	• A personalised, coloured overlay, or ruler may help cut down on visual contrast and help 'stabilise' any written materials. It may be worth trying a variety of colours to work out the best to use;
	Teaching methods to consider:
	• Help the child to learn and understand any specific vocabulary. This may be done visually, practically and/or during a pre-teach session to build the child's confidence before the lesson;
	<ul> <li>The child may prefer it if an adult (or supportive peer) reads through questions with them;</li> </ul>
	• Be supportive of the child if they don't want to read aloud in front of the class (either offering to read it for them, asking a friend to read it, or checking with them beforehand if they would like it shared);
	• Explore alternative methods of written recording e.g. dictation into ipad, adult scribing, typing, Clicker, stem sentences, writing templates etc.

Dyspraxia	<ul> <li>Classroom environment/set up:</li> <li>Provide a large space for the child to work in. This will allow the child room to move and remain active when completing a task. They may also prefer to stand when handling any equipment/physical resources.</li> </ul>
	<ul> <li>Resources and equipment you might consider before the lesson:</li> <li>Provide part-prepared handouts to reduce unnecessary writing and lists of key concepts; or vocabulary</li> </ul>
	<ul> <li>Consider alternatives to writing- word processors, iPad, dictaphones, scribe etc.</li> </ul>
	<ul> <li>Provide templates with headings to help the child structure their work;</li> </ul>
	Teaching methods to consider:
	<ul> <li>Clarify rules and expectations, using unambiguous language;</li> </ul>
	<ul> <li>Allow extra time to complete work, with movement breaks when needed;</li> </ul>
	<ul> <li>Allow time to settle, especially if the lesson is after a breaktime/ lunchtime, as transitions are challenging;</li> </ul>
	<ul> <li>Give the child plenty of warning that the lesson is due to end and allow them additional time to pack up to leave (or get ready for the next lesson).</li> </ul>

Classroom environment/set up:

## Hearing Impairment

- Discreetly check that the child is wearing a hearing aid (if applicable) and frequently check-in with the child that they are hearing and understanding;
- Be aware of seating arrangements to suit the child's specific needs, for example if they are reliant on lip reading (i.e. seated towards the front of the classroom with an unobstructed view, or with their good ear facing outwards into the classroom);
- Ensure that any background noise is minimised and control class/group discussions, so that only one person is speaking at once
- Be aware of outside noise and how this may affect hearing noise e.g. rain on windows, tractor cutting grass
- Adult teaching to wear an assisted devices e.g. microphone and be aware of any noises this may create if teacher is wearing a necklace, ID lanyard etc.

Resources and equipment you might consider before the lesson:

- Ensure any videos/films used are captioned, or a suitable alternative way is provided
- Provide any important information/instructions about the lesson in writing, as well as verbally. In addition, provide (in a written format) any lists of subject-specific vocabulary and technical terms

Teaching methods to consider:

- Repeat clearly any questions asked by other students in class before giving a response;
- Assist with lip reading by doing the following: ensure your face is clearly visible at all times when speaking and sitting directly opposite the child whenever possible
- seating the child so that they can see others in the class (where possible)
- ensuring the lighting is adjusted so that it is not too dark
- providing written materials for all lessons, so that the child is not having to lip read and take notes from the whiteboard
- Be aware of the specific circumstances for the child and adapt accordingly. For example: if hearing loss acquired early in life, they may have associated literacy issues and need additional support with reading or interpreting information. If they have associated speech issues, they may need support with reading out their work, speaking clearly and may prefer an adult to read it for them.

	Classroom environment/set up:
Toileting Issues	<ul> <li>Let the child leave and return to the classroom discreetly and without having to get permission whenever they need the toilet (use a 'toilet pass' if appropriate)</li> </ul>
	• Sit the child close to the door so that they can leave the classroom, discreetly
	<ul> <li>Appreciate that they may arrive late for lessons because of an urgent need to use a toilet</li> </ul>
	<ul> <li>Be aware that the child may need to take medication during school hours and/or need extra meal breaks and provide a discreet / comfortable place for them to do this</li> </ul>
	Resources and equipment you might consider before the lesson:
	• If the child has a diagnosed medical condition, they will have an Individual Healthcare Plan. Please make sure that you are familiar with this document. The SENCO can give you access to this.
	• If the child has ongoing toileting issues, they will have an Intimate Care Plan. Please make sure that you are familiar with this document. The SENCO can give you access to this.
	Teaching methods to consider:
	• During more active sessions, try to be alert to the child's psychological needs and relationships with other children. Let them judge for themselves if they wish to join in on a day-to-day basis - don't stop them trying whatever they want to try. However, be aware that the child may also try to push themselves, so that they don't let others down. Be mindful of this and offer discreet support when/where needed;
	<ul> <li>Bending and stretching may bring on pain, or make pain worse. Teambuilding type activities/games can be particularly problematic;</li> </ul>
	<ul> <li>Be mindful of other students teasing the child about my lack of stamina, or their need for extra rests (for example during group activities/team building);</li> </ul>

## Cognition and Learning Challenges

Classroom environment/set up:

• Ensure all classroom adults give specific, targeted praise so the child knows exactly what they are doing well;

• The child will have a visual and auditory memory for information, processes and instructions. Ensure all classroom adults are aware of this and they regularly check the child's understanding of questions and tasks. This will support the child with staying on track;

• Carefully consider working pairings/small groups. Support the child with managing peer relationships effectively by providing a positive work 'buddy';

• The child may appear needy with an over-reliance on adult help and support. Encourage and support the child's independence and confidence by making the curriculum/tasks accessible to them.

Resources and equipment you might consider before the lesson:

• Support the child to overcome problems with understanding instructions and task requirements by using visual timetables and prompt cards with pictures as reminders of the steps needed to complete the task;

• Provide a word bank, with key vocabulary with pictures / symbols for the topic/area being studied;

- Pre-teach essential vocabulary
- Provide a writing frame to help structure work;
- Keep PowerPoint slides simple and uncluttered. Highlight key information.

Teaching methods to consider:

• Carefully plan and differentiate work, breaking it down into small manageable tasks;

• Provide time to consider questions, process and formulate an answer. Slow down and/or reduce the number of words that you use;

• Go over key vocabulary and ideas with to check understanding;

• Physically demonstrate tasks, rather than relying on verbal instructions;

• Repeat information in different ways, varying the vocabulary you use. Also, keep instructions simple;

• Use structured questioning to support and help the child to answer by scaffolding their response;

• Encourage the child to make a mind map, or other visual representation of what they already know and use that as a starting point to teach next steps.

	Classroom environment/set up:
Speech,	<ul> <li>Create a relaxed, safe, and friendly environment with lots of</li> </ul>
Language	opportunities to talk. Not too noisy;
& Communication	<ul> <li>Provide plenty of opportunities for the child to communicate in a small group (they will be less confident working in a big group and will be less involved);</li> </ul>
	• Widget – communicate in print
Needs	<ul> <li>Carefully consider any pairings or groupings and include good communication role models for the child to copy;</li> </ul>
	<ul> <li>Ensure all adults respond positively to any attempt the child makes at communication – not just speech. Role model this positive response for the child's peers to copy;</li> </ul>
	<ul> <li>Listen carefully to what the child says, so that they don't need to repeat themselves;</li> </ul>
	<ul> <li>Provide a low distraction/quiet area for the child's group/pair to work so they can focus on their communication;</li> </ul>
	<ul> <li>Regularly check understanding and encourage the child to identify what they can/cannot understand.</li> </ul>
	Resources and equipment you might consider before the lesson:
	<ul> <li>Use signs, symbols and visual timetables to support communication;</li> </ul>
	<ul> <li>Use visual displays (objects and pictures) that can be used to support understanding;</li> </ul>
	<ul> <li>Provide a visual guide to the lesson, eg a check list, or pictures to aid understanding.</li> </ul>
	Teaching methods to consider:
	<ul> <li>Be aware of the specific communication difficulties the child may have - it may be a processing disorder;</li> </ul>
	<ul> <li>Be aware of the level of language the child is using – use a similar level to ensure they understand;</li> </ul>
	<ul> <li>Do not rush, or interrupt the child as this means they have to begin processing all over again from the beginning, causing frustration!</li> </ul>
	<ul> <li>Slow down your rate of speech by using pausing and give the child lots of time to process and reply</li> </ul>
	• Allow time for the child to finish what they are saying, don't finish it
	for them;

<ul> <li>Keep language simple by breaking long sentences into short separate ideas;</li> </ul>
<ul> <li>Provide plenty of repetition (activities and vocabulary);</li> </ul>
<ul> <li>Use non- verbal clues to back up what you are saying eg: gesture;</li> </ul>
<ul> <li>Ensure adults are providing a clear language model and expand what the child says, by repeating their words back to them correctly, without pointing out their errors;</li> </ul>
<ul> <li>Reduce the number of questions you ask and make sure you give time to answer;</li> </ul>
<ul> <li>If you do need to ask questions in front of the class, try to use closed questions, as these require only a 'yes'/'no' answer, which will reduce anxiety.</li> </ul>

	Classroom environment/set up:
Tourette's Syndrome	<ul> <li>Be aware of (and familiar with) the various ways in which Tourette Syndrome can present. Common vocal tics are: coughing, grunting, sniffing, throat clearing, shrieking, whistling, spitting, animal sounds and echolalia (repeating others' words, or phrases). Common motor tics are: eye blinking (excessively, or in an unusual pattern), echopraxia (imitating others' actions), self-injurious behaviours involving touching, biting, hitting, pulling out eyelashes/hair, smelling/sniffing things. Being aware of the particular type of tic(s) presented by the child, will also help you to be aware of the impact on the child's learning and how they can access the learning in the classroom. For example:</li> </ul>
	<ul> <li>Motor tics of the eyes, head or neck may interfere with reading and affect handwriting, or the ability to write for prolonged periods of time;</li> </ul>
	<ul> <li>Motor and vocal tics may make the child reluctant to read aloud, ask/answer questions, or ask for help. Be understanding of this and support the child to feel involved and able to participate;</li> </ul>
	• Thought tics inhibit auditory processing. Be mindful and do not assume the child is intentionally not listening.

<ul> <li>Tics can be triggered, or increased by stress, excitement or relaxation (all of these emotional states may be experiences during PSHE type</li> </ul>
activities and lessons, especially as some of the subjects covered may be of a sensitive nature).
<ul> <li>Ensure that all adults in the room are mindful to filter out their emotional reaction and instead listen and respond with support and understanding. It is not helpful ask the child to stop their tics, as they are involuntary. Being asked to suppress them is stressful and will cause an increase in the tic.</li> </ul>
<ul> <li>Furthermore, it will mean the child is unable to engage with what is going on around them.</li> </ul>
<ul> <li>Similarly, try not to ask the child not to do something, as it will instantly turn into a compulsion. Because TS can be suggestible, if classmates discover 'the trigger', they may use this to make the child tic. Please try and prevent this happening;</li> </ul>
<ul> <li>Ignoring tics avoids drawing any unnecessary attention towards them;</li> </ul>
Teaching methods to consider:
<ul> <li>The child may have a poor attention span, fail to complete tasks, be easily distracted, unable to listen, fidgety and impulsive. To support them, provide a structure (schedule/tick list) to assist with planning, organisation, time management and initiation of tasks;</li> </ul>
<ul> <li>Be mindful when planning activities, that the child may experience sensory processing difficulties, where they may be either overresponsive, or under responsive to sensory stimuli, eg: noise, clothing, textures</li> </ul>

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	Classroom environment/set up:
ExperiencedTrauma	<ul> <li>Ensure you are very familiar with the child's past experiences and context, as this will help you understand their behaviour;</li> </ul>
	• Ensure all classroom adults take a non-confrontational approach. A discreet, understanding and reassuring approach from all classroom adults is vital;
	• Provide a safe, consistent and warm classroom environment.
	<ul> <li>Incorporate as many opportunities for humour and laughter in lessons as possible (as laughter reduces the traumatic response in the brain);</li> </ul>
	• Ensure the lesson has clear expectations for behaviour and structure, as this will help provide a predictable environment, necessary for the child to feel secure enough to participate and access the learning;
	<ul> <li>Classroom adults need to be emotionally available and able to support and coach the child in ways to calm themselves and manage emotions, as well as opportunities to practise de-escalating when they feel overwhelmed;</li> </ul>
	• Ensure adults are vigilant to and mindful of any trigger points for the child, as this will help de-escalate emotional situations;
	• Very carefully check through the lesson content prior to the session and look at it through the eyes of the child's context and background. There may be obvious trigger points that can be planned for and managed prior to the lesson, with some elements needing to be avoided. Equally, there may be trigger points in the lesson, which may not be so clear from the outside. Ensure that the classroom environment, available adults and overall support for the child is strongly in place should this arise.
	Resources and equipment you might consider before the lesson:
	• Provide a safe and familiar breakout space for the child to use during times when they feel overwhelmed or emotionally dysregulated. The child may also need access to a space to exercise, so that they can have regular learning/ sensory breaks;

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	<ul> <li>Consider the use of a 'help' card (or small item) for the child to use to signal that they are finding the situation tricky, without having to vocalise any details;</li> <li>Have consistent expectations and behaviour plans in place that are based on reward systems, not punishment.</li> </ul>
	Teaching methods to consider:
	<ul> <li>Be extremely mindful and vigilant throughout the lesson, as some of the content of RE lessons can be very personal, maybe covering memories, families, emotions etc, all of which are likely potential trigger points. Equally, something which doesn't seem connected on the surface, may be a trigger for the child in some way;</li> </ul>
	<ul> <li>Slow yourself down when talking, as this will appear non-threatening: talk slower, use a lower pitch for your voice, don't use complex sentences, minimise body movements;</li> </ul>
	<ul> <li>During activities, teach and model positive self-talk to encourage self belief.</li> </ul>
	<ul> <li>Help the child to see that making a mistake is considered a necessary part of learning and that minor mistakes will not incur adult anger, or punishment;</li> </ul>
	<ul> <li>Ensure you use plenty of positive reinforcements, rewards, role modelling with the child (while actively ignore any negative behaviour);</li> </ul>
	• Use collaborative problem-solving during activities, so that the child feels in control.

Visual Impairment	<ul> <li>Classroom environment/set up:</li> <li>Keep your classroom visually uncluttered and reduce the number of objects in the immediate working area;</li> </ul>
	<ul> <li>Be mindful of seating arrangements and discuss any preferences with the child. For example, they may prefer to work at close distances, (such as sitting closer to the board), or move the object closer to them, (such as people getting closer when talking);</li> </ul>
	<ul> <li>Be aware of the specific circumstances of the child, for example: - If they are sensitive to light and glare, control the light in the classroom using blinds, sit the child with their back to windows and reduce the glare on surfaces;</li> </ul>
	• The child may need to be seated near natural light, where possible;
	• The child may need to use a lamp, which should be places behind their shoulder on the opposite side to their writing hand and/or on the same side of their stronger eye;
	<ul> <li>They may need to wear a hat/visors, or sunglasses even when staying indoors. Be sensitive to this and mindful of other pupils comments/ reactions surrounding this;</li> </ul>
	High contrast objects/pictures may be beneficial.
	<ul> <li>As best practice on handouts/presentations, black &amp; white give the highest contrast. Do not use dark colours together (like blue and green). Avoid using white &amp; grey with other light colours. Avoid pastel colours next to each other. In addition, avoid the use of red or green pens on the whiteboard, as these can be difficult to see;</li> </ul>
	• Warn the child of changes in lighting, as this can cause extreme eye strain and headaches.

Resources and equipment you might consider before the lesson:

- Familiarise yourself with any specific resources the child needs to support them; for example:
- they may be better able to read their own writing if they use a thicker black pencil/pen/marker;
- they may need a typoscope when reading. This is a reading shield made of a black material with a rectangular cut out. It reduces extra light reflected from the surface of the paper and helps assist with staying on the correct line while reading;
- they may need an electronic magnifier
- ensure the child is wearing any prescribed glasses to reduce visual fatigue;
- Provide enlarged/magnified pictures, images, maps and print. The VI team will have assessed the child's vision and recommended a font size and typeface to use. The SENCO will advise on this. Be wary that simply enlarging worksheets on a photocopier makes the letters, or edges of diagrams lose their sharpness and reduces the contrast. Please ensure resources are produced in the correct font size and type-face for the child to access.

Teaching methods to consider:

- Allow the child to take a break from their work, as this enables them to be visually focused for shorter periods of time and prevents fatigue;
- Allow more time when visually exploring a material and when completing a visually challenging tasks;
- If the child has central visual field loss, they may experience incomplete images, or a central "blind spot" when looking. This may mean they appear not to maintain direct eye contact. Be sensitive to this and manage any comments/reactions from their peers