

2. How to support students with diverse needs

2.1. Methodology for identifying the diverse needs of the students

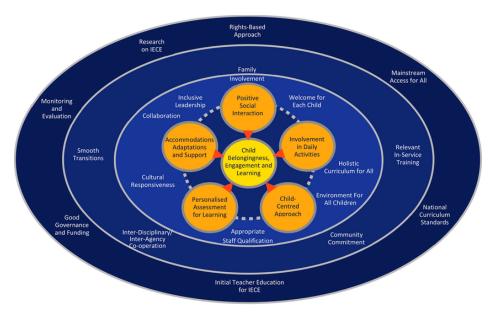
2.1.1. Blindness

1. Description

Blindness refers to a significant loss of vision that cannot be corrected with glasses, contact lenses, or surgery, impacting an individual's ability to interact with their surroundings. Short-sightedness (myopia) is a refractive error where distant objects appear blurred, while near vision remains clear. Myopia, the most common visual impairment in children, has been rising globally due to factors like increased screen time and reduced outdoor activities (WHO World Report on Vision, 2019).

Visual impairments, whether congenital or acquired, can hinder children's ability to access educational materials, engage socially, and participate in visually-driven activities. According to the World Health Organization (WHO), uncorrected refractive errors are a leading cause of vision impairment worldwide. In Europe, approximately 30 million people are visually impaired, including 2.55 million who are blind and 23.8 million with low vision.

Addressing these needs in primary education is vital to fostering equity and inclusion. Teachers play a key role in identifying and supporting children with visual impairments by creating learning environments that promote engagement and belonging. Inclusive Early Childhood Education (IECE) has been shown to improve lifelong learning outcomes and active citizenship by prioritising a holistic, child-cantered approach.



The Ecosystem Model of Inclusive Early Childhood Education. From New Insights and tools Contributions from a European Study (EASNIE 2017a, 37).

2. Context

Visual impairments in children may result from genetic conditions, environmental factors, or health issues such as uncorrected refractive errors, congenital cataracts, or retinopathy of prematurity. Some impairments are present at birth, while others develop due to progressive conditions, injuries, or diseases like diabetes.

In classrooms, visual impairments can create barriers to accessing written and visual information, participating in group activities, and navigating physical spaces. Children with blindness or low vision often rely on tactile or auditory resources, while those with myopia may struggle to see information displayed on boards or screens.

An inclusive educational environment—supported by trained educators who understand and accommodate diverse needs—can greatly enhance the learning and social experiences of visually impaired children. This fosters not only academic success but also a sense of belonging and participation.

2. Key characteristics

Traits:

- Difficulty in recognising objects, letters, or numbers at a distance (short-sightedness).
- Reliance on auditory or tactile information for learning (blindness).
- Delayed fine motor skills development due to limited visual exploration.
- Challenges in spatial awareness and orientation in the classroom.

Examples in school settings:

- A child with blindness might need braille textbooks or tactile aids to participate in lessons.
- A child with short-sightedness may consistently move closer to the board or squint while reading.
- Struggles with group activities requiring visual input, such as identifying colours or reading instructions from a shared screen.

3. Indicators and nuances in the Classroom

Myopia (Short-Sightedness)

Signs to observe:

- Frequent squinting, blinking, or rubbing of eyes.
- Holding books or devices very close to their face.
- Sitting closer to the board or screen than their peers.

Behavioural clues:

- Avoidance of tasks involving distant visual input (e.g., looking at presentations)
- Loss of focus or frustration (when unable to see clearly during lessons).
- Frequent requests to borrow peers' notes.

Teacher action:

- Notify parents to conduct visual screenings.
- Encourage open communication about visual difficulties.
- Seat students with suspected myopia closer to the board or screen and provide printed materials when needed.

Blindness and Severe Visual Impairments

Teachers must ensure the classroom is inclusive and responsive to the needs of pupils with severe visual impairments.

Self-Reflection for Inclusive Classrooms (Adapted from the Inclusive Early Childhood Education Environment Self-Reflection Tool):

- 1. **Physical Accessibility**: Are pathways, seating, and learning areas free from obstacles and designed for easy navigation?
- 2. **Tactile and Auditory Resources**: Are alternative formats (e.g., Braille, audio materials) readily available and integrated into lessons?
- 3. **Engagement Strategies**: Are sensory activities included to promote equal participation? For example, using textured objects, sound cues, or group discussions.
- 4. **Peer Inclusion**: Are peer activities structured to promote collaboration and reduce social isolation?
- 5. **Teacher Preparation**: Are teachers trained to use assistive technologies (e.g., screen readers, Braille machines) and adapt materials accordingly?

Teacher Action:

- Collaborate with specialists (e.g., vision support staff) to implement assistive strategies.
- Engage pupils in discussions to understand their preferences and challenges.

4. Further Reading

Reports and Guidelines:

- RNIB (Royal National Institute of Blind People): <u>Curriculum Framework for Children and Young People with Vision Impairment (CFVI)</u>
- Inclusive Early Childhood Education New Insights and Tools Contributions from a European Study

Best Practices and Databases:

European Agency for Special Needs and Inclusive Education: https://www.european-agency.org/resources

5. Bibliography and references

- World Health Organization (WHO). (2023). *Blindness and visual impairment*. Retrieved from https://www.who.int/news-room/fact-sheets/detail/blindness-and-visual-impairment
- European Blind Union (EBU). (n.d.). Facts and figures. Retrieved from

2.1.2. Deafness

1. Description

Deafness refers to a partial or complete inability to hear, ranging from mild hearing loss to profound deafness. While some people are born deaf (congenital deafness), others acquire it later due to illness, injury, or environmental factors. However, the term *deafness* encompasses more than a sensory condition—it also represents a rich cultural and linguistic identity. Many Deaf individuals identify as part of a linguistic and cultural minority, using national sign languages as their primary means of communication. In this context, the term "Deaf" (with a capital D) refers to people who are part of this community, whereas "deaf" may be used in a more medical sense to describe hearing levels.

Deafness in children can arise from various causes, including genetic conditions, prenatal infections, birth complications, or exposure to loud noise or ototoxic medication. Some children are born deaf, while others develop hearing loss in early childhood. The degree and timing of hearing loss, as well as the presence or absence of early support, significantly influence a child's language development and educational experience.

2. Context

For children in primary education, deafness can significantly impact access to language, communication, and learning if appropriate strategies are not in place. According to the World Health Organization (WHO), over 430 million people worldwide have disabling hearing loss, with a growing prevalence among children (WHO, 2021). The World Federation of the Deaf (WFD) and the European Union of the Deaf (EUD) emphasize that access to early language—spoken and/or signed—is crucial for cognitive development, academic success, and social inclusion.

Hearing loss can lead to delays in language acquisition, literacy, and social-emotional skills if not identified and supported early. In educational settings, children who are deaf or hard of hearing may face barriers to understanding spoken language, participating in group interactions, or following auditory instructions. These challenges are often compounded when schools lack inclusive teaching methods or accessible learning environments.

Language acquisition is a particularly critical issue. Without timely exposure to an accessible language—spoken or signed—children may experience delays in expressive and receptive communication skills. This can affect literacy, cognitive development, and social-emotional learning. According to the WFD and EUD, early access to sign language and visual communication is key to ensuring full development and lifelong learning.

However, deaf children are not all alike. Some may use sign language as their primary language, others may use spoken language with or without hearing technology (such as hearing aids or cochlear implants), and many may use a combination of both. Teachers must be aware of this diversity and avoid a one-size-fits-all approach.

Inclusive primary education plays a fundamental role in promoting equal opportunities. Teachers who recognize and address the needs of deaf learners—through visual, tactile, and multimodal strategies—can foster a classroom culture of participation and belonging. This includes acknowledging the importance of sign language access, alternative communication methods, and culturally responsive teaching. According to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, Article 24), States are obligated to ensure inclusive education systems that respect the linguistic identity of the Deaf community and support full participation in society.

3. Key characteristics

Traits: Children who are deaf or hard of hearing may exhibit a wide range of communication and learning preferences, depending on the degree of hearing loss, the age of onset, and the language environment they have been exposed to. These children may:

- Prefer visual communication (e.g., sign language, gestures, writing) over spoken language.
- Experience delays in spoken language or literacy if not given early language access.
- Use hearing technology (e.g., hearing aids, cochlear implants) with varying degrees of benefit.
- Rely more heavily on visual cues, facial expressions, and body language in learning and social interaction.
- Display strong visual-spatial skills and memory, often excelling in pattern recognition and visual tasks.
- Show signs of frustration or withdrawal in environments that lack visual accessibility or clear communication.

Importantly, deafness does not affect a child's intelligence or capacity to learn, but it does shape how they access and process information. Teachers must recognize that communication access is central to learning and social participation.

Examples in school settings:

- A child who uses sign language may need an interpreter or communication assistant to fully engage in class discussions.
- A child with hearing aids may still miss parts of spoken instructions, especially in noisy environments, and may benefit from captions or written summaries.
- A child might seem inattentive or distracted, not due to lack of interest, but because they are struggling to follow speech without visual support.

- During group activities, a deaf learner might prefer to work in pairs or small groups where communication is easier to manage visually.
- A pupil may develop strong written expression but struggle with reading comprehension due to limited access to spoken language in early years.

4. Indicators and nuances in the classroom

Signs to observe: Some children may enter school without a formal diagnosis of hearing loss. Teachers play a key role in noticing early signs that may indicate communication difficulties, such as:

- Frequently asking for repetition or appearing confused during oral instructions.
- Difficulty following verbal tasks, especially in group settings or noisy environments.
- Not responding when their name is called, particularly when not facing the speaker.
- Speaking with unclear articulation or a flat intonation.
- Relying heavily on visual cues, such as copying from peers rather than listening to instructions.

Behavioural clues: Unidentified or unsupported deafness may lead to behaviours that are misunderstood, like:

- Appearing inattentive, distracted, or unmotivated.
- Withdrawing from group activities or avoiding social interaction.
- Becoming easily frustrated or tired, especially after long periods of listening effort.
- Demonstrating behavioural outbursts linked to communication breakdowns.

These behaviours are not signs of disobedience or lack of ability but may reflect unmet access needs. Teachers should approach them with curiosity and sensitivity.

Teacher action: To create an inclusive classroom and support all learners, teachers can:

- Ensure that visual supports (images, text, demonstrations) accompany spoken instructions.
- Establish clear communication routines: face the class when speaking, avoid speaking while writing on the board, and use gestures when appropriate.
- Promote peer collaboration and awareness to reduce isolation and encourage inclusion.
- Use assistive tools such as captioned videos, written summaries, and visual timetables.
- Collaborate with specialists (e.g., communication support workers, audiologists) and maintain open dialogue with families.
- Foster a classroom culture where multiple communication styles are normalised and respected.

Inclusive classroom reflection (based on the IECE Model)

- **Visual Accessibility:** Are all students able to access information visually (e.g. key words written down, visual instructions)?
- **Communication Diversity:** Are different ways of expressing and receiving information welcomed in the classroom?

- **Peer Relationships:** Are group activities structured to promote full participation of all learners, including deaf pupils?
- **Teacher Awareness:** Are educators prepared to adjust their teaching strategies and collaborate with professionals to support deaf children?

5. Further reading & bibliography

- World Health Organization (WHO). (2021). World Report on Hearing. https://www.who.int/publications/i/item/world-report-on-hearing
- United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). Article 24:
 Education. https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html
- European Agency for Special Needs and Inclusive Education. (2017). *Inclusive Early Childhood Education: New Insights and Tools*. https://www.european-agency.org/resources
- World Federation of the Deaf (WFD). (n.d.). Position Paper on Inclusive Education. Retrieved from https://wfdeaf.org
- European Union of the Deaf (EUD). (2020). *Position Paper: Sign Language Legislation in the EU*. Retrieved from https://www.eud.eu
- United Nations. (2006). Convention on the Rights of Persons with Disabilities (CRPD), Article 24: Education. Retrieved from https://www.un.org/development/desa/disabilities

2.1.3. Mental-intellectual disability

1. Description

Definition: Mental-intellectual disabilities encompass a broad spectrum of conditions that affect cognitive functioning, emotional regulation, and social interactions. These include anxiety disorders, social anxiety, Down syndrome, mood disorders (e.g., depression, bipolar disorder), obsessive-compulsive disorders (OCD), gender dysphoria, and neurodevelopmental disorders (e.g. autism spectrum disorder, and specific learning disabilities). Recognizing and addressing these needs is critical for fostering inclusive learning environments and ensuring every pupil has the opportunity to succeed.

Context: Students with mental-intellectual disabilities face diverse challenges in educational settings. Anxiety disorders, for example, might lead to avoidance of certain subjects or tasks, while Down syndrome can affect speech, motor skills, and adaptive behaviours. Social anxiety and mood disorders may hinder a student's ability to participate in group activities, and neurodevelopmental disorders might result in difficulties with attention, organization, or sensory processing. These conditions can create barriers to academic progress and social integration, emphasizing the need for effective identification methodologies to provide tailored support.

2. Key characteristics

Traits:

- **Anxiety Disorders:** Persistent fear or worry about specific situations (e.g., exams, social interactions).
- **Social Anxiety:** Extreme discomfort in social settings, avoidance of participation, or fear of judgment.

- **Down Syndrome:** Intellectual disability, distinctive physical traits, speech delays, and health complications.
- **Mood Disorders:** Variations in mood that disrupt daily functioning, such as depressive episodes or manic behaviours.
- **Obsessive-Compulsive Disorders (OCD):** Repetitive thoughts and behaviours that interfere with learning.
- **Gender Dysphoria:** Discomfort with one's assigned gender, impacting self-esteem and social interactions.
- **Neurodevelopmental Disorders:** Difficulties in attention, social communication, motor skills, and sensory processing.

Examples in school settings:

- A student with OCD, repeatedly erasing and rewriting answers during tests.
- A child with Down syndrome, requiring more time and repetition to learn new concepts.
- A student with social anxiety, avoiding presentations or group discussions.

3. Indicators and classroom support strategies

Signs to observe:

- Avoidance behaviours, such as skipping classes or feigning illness, often linked to anxiety.
- Repeated frustration, crying, or withdrawing during group work, possibly indicating social anxiety or OCD.
- Delayed responses, difficulty understanding instructions, or a need for repeated explanations, common in Down syndrome.

Behavioural clues:

- A student who struggles to follow routines or appears hypersensitive to noises might be exhibiting signs of a neurodevelopmental disorder.
- Intense emotional reactions to minor changes in schedule or environment could indicate mood or anxiety disorders.
- Visible discomfort or reluctance to participate in activities tied to gender identity, signaling gender dysphoria.

Classroom strategies for teachers:

- **For Anxiety Disorders & Social Anxiety:** Provide structured routines, encourage participation in low-stress settings, and implement relaxation techniques.
- **For Down Syndrome:** Use visual supports, break tasks into smaller steps, and offer hands-on learning activities.
- **For Mood Disorders:** Create a safe space for students to express their emotions, implement mood check-ins, and establish a strong support network.
- **For OCD:** Set clear expectations, provide additional time for tasks, and encourage gradual exposure to anxiety-inducing activities.

- **For Gender Dysphoria:** Foster an inclusive environment, respect students' preferred pronouns, and educate peers on gender diversity.
- For Neurodevelopmental Disorders: Adapt teaching methods to support diverse learning styles, utilize sensory-friendly classrooms, and provide alternative assessment methods.

Concrete examples:

e.g. 1 - Science class: A 10-year-old student with Down syndrome may have difficulties with certain tasks like reading complex instructions, organizing materials, or expressing abstract ideas.

Inclusive Solution: The teacher can assign roles in group work based on each student's strengths. For the student with Down syndrome, the teacher might give them the "materials manager" role, where they are in charge of handing out materials for the experiment; pair them with a supportive buddy who naturally works well with them, provide visual instructions (like step-by-step images of the experiment) instead of a long written procedure, allow them to present their group's results with support, like reading from a script or using visual aids they helped create.

Outcome: The student is meaningfully involved, feels like a valued contributor to the team, and participates actively in learning—just in a way that fits their abilities and style.

e.g. 2 - Art class: A student with Down syndrome may have fine motor skill challenges or trouble with verbal expression when explaining their work.

Inclusive Solution: The teacher can prepare pre-cut materials (pictures, stickers, shapes) for all students, but especially for the student with Down syndrome, to reduce frustration with cutting and gluing; allow students to use photos from home (with family support) so the student with Down syndrome can share what's important to them without needing to explain everything in words. During sharing time, offer the option to point to pictures while the teacher or a peer helps describe them; seat the student next to a buddy who can model the task, and celebrate their collage as part of the class gallery.

Outcome: the student gets to showcase who they are, just like everyone else, using visuals and support that match their strengths. They feel seen, successful, and proud.

4. Additional resources for educators

Practical strategies:

- Refer to the "Inclusive Classroom Practices" section for strategies tailored to neurodivergent learners.
- Consult the "Socio-Emotional Support Framework" developed in collaboration with UKEN for insights into supporting mental health challenges.
- Explore the "Best Practices Database" for examples of peer-to-peer mentoring and teacher-led interventions specific to mental-intellectual disabilities.

Professional development and further reading

- Attend workshops on inclusive teaching methods and mental health awareness.
- Collaborate with special education professionals to develop individualized learning plans.
- Join online communities and forums focused on special education best practices.

5. Bibliography and references

- American Psychiatric Association. (2022). *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.).
- Centers for Disease Control and Prevention. (2023). *Developmental Disabilities*. Retrieved from https://www.cdc.gov
- UNESCO. (2021). *Inclusive Education: A Framework for Identifying Diverse Needs.* Retrieved from https://unesco.org
- National Association of Special Education Teachers. (2022). Effective Teaching Strategies for Special Needs Students.
- Child Mind Institute. (2023). Understanding Learning and Attention Disorders in the Classroom.

By understanding and implementing inclusive strategies, educators can create supportive and effective learning environments that cater to the diverse needs of students with mental-intellectual disabilities.

2.1.4. Neurodivergence

1. Description

Neurodivergence refers to a range of neurological conditions that affect the way individuals think, process information, behave, and interact with others. This includes but is not limited to Attention-Deficit/Hyperactivity Disorder (ADHD), Autism Spectrum Disorder (ASD), and Specific Learning Disorders (SLDs) such as dyslexia, dysgraphia, and dyscalculia. Neurodivergent individuals do not have a 'deficit' but rather a different way of experiencing and interacting with the world. Recognizing neurodivergence in the classroom is essential to create inclusive, supportive learning environments that accommodate cognitive and emotional diversity.

In the school context, neurodivergent students often face challenges in adapting to standardized teaching methods. For instance, students with ADHD may struggle to sustain attention or remain still, while students with autism might experience sensory overload or difficulties in social interactions. Those with SLDs may need specific adaptations to access reading, writing, or mathematical tasks. These challenges can lead to frustration, behavioural issues, or disengagement if not properly addressed. Teachers play a key role in early identification and intervention by adapting teaching strategies and collaborating with specialists.

2. Key characteristics

Traits:

- ADHD: Inattention, impulsivity, hyperactivity, frequent distraction, difficulty completing tasks or following detailed instructions.
- Autism Spectrum Disorder: Challenges in social communication, preference for routine, restricted or repetitive behaviours, sensory sensitivities.
- Specific Learning Disorders (Dyslexia, Dyscalculia, Dysgraphia): Difficulty in reading fluency and decoding (dyslexia), calculating or understanding numbers (dyscalculia), and handwriting or spelling (dysgraphia).

Examples in school settings:

- A student with ADHD may blurt out answers, leave their seat often, or lose materials needed for tasks.
- A child with autism might struggle with eye contact, find transitions overwhelming, or fixate on specific topics.
- A student with dyslexia may read slowly, skip lines, or reverse letters in writing, often avoiding reading aloud.
- A child with dysgraphia might have illegible handwriting and take much longer to write sentences or copy from the board.

3. Indicators and nuances in the classroom

Signs to observe:

- Difficulty maintaining focus during lessons; unfinished tasks or apparent forgetfulness (ADHD).
- Challenges with non-verbal communication (e.g., eye contact, facial expressions); preference for solitary play (Autism).
- Repeated struggles with spelling, slow reading speed, or confusing similar-looking letters (Dyslexia).
- Noticeable anxiety or resistance during writing or math tasks (Dysgraphia/Dyscalculia).
- Sensitivity to sound, light, or touch; strong reaction to routine changes (Autism).

Behavioural clues:

- Frequent fidgeting, calling out, or interrupting others (ADHD).
- Avoidance of social situations, misunderstanding jokes or figurative language (Autism).
- Low self-esteem or frustration when engaging in reading/writing/math tasks (SLDs).
- Sudden meltdowns or withdrawal in overstimulating environments (Autism, ADHD).

4. Further reading

Additional methods and best practices:

- Universal Design for Learning (UDL) to accommodate multiple learning styles.
- Use of visual schedules, task cards, or sensory tools to support predictability and regulation.
- Adjusted assessment formats (oral exams, dictation software, visual aids).
- Peer tutoring, small-group instruction, and cooperative learning strategies.
- Ongoing teacher training in inclusive pedagogies and collaboration with SEN experts.

Refer also to the 'Mental-Intellectual Disability' and 'Socio-emotional Support' resources in the project database for overlapping supports.

5. Bibliography and references

- American Psychiatric Association. (2022). Diagnostic and Statistical Manual of Mental Disorders (5th ed.).
- Centers for Disease Control and Prevention. (2023). ADHD and Other Developmental Disabilities. https://www.cdc.gov

- National Center for Learning Disabilities. (2021). The State of Learning Disabilities.
- UNESCO. (2021). Inclusive Education: A Framework for Identifying Diverse Needs. https://unesco.org
- British Dyslexia Association. (2022). Understanding Dyslexia. https://www.bdadyslexia.org.uk
- Autism Europe. (2020). Inclusive Education and Autism: A Guide for Teachers.

2.1.5. Physical disability

1. Description

Definition: Physical disability encompasses a range of conditions that impair an individual's ability to move or control their body movements. These conditions can be congenital or acquired and may affect mobility, coordination, and fine motor skills. Examples include cerebral palsy, muscular dystrophy, multiple sclerosis, spinal cord injuries, and amputations.

Context: In educational settings, students with physical disabilities often face challenges related to accessibility, participation in physical activities, and the need for specialized equipment or accommodations. Recognizing and addressing these needs is crucial to ensure equitable learning opportunities and foster an inclusive environment.

2. Key characteristics

Traits:

- Mobility Impairments: Difficulty in walking, climbing stairs, or moving between classrooms.
- **Fine Motor Challenges:** Struggles with tasks like writing, using a computer mouse, or handling small objects.
- Fatigue: Increased tiredness due to the physical effort required for daily activities.
- **Sensory Impairments:** Conditions such as cerebral palsy or multiple sclerosis may affect vision or hearing.

Examples:

- A student with cerebral palsy may use a wheelchair and require adaptive technology for communication.
- A student with muscular dystrophy might need extended time for tasks due to muscle weakness.

3. Indicators and nuances in the classroom

Signs to observe:

- **Physical Strain:** Visible effort in moving or maintaining posture.
- Use of Assistive Devices: Wheelchairs, crutches, or specialized seating arrangements.
- Delayed Responses: Longer time taken to complete tasks or respond to questions.

Behavioural clues:

- Avoidance of Certain Activities: Reluctance to participate in physical education or group activities
- Frustration or Withdrawal: Signs of stress when faced with inaccessible environments or tasks.
- **Dependence on Support:** Regular use of aides or assistance from peers or staff.

4. Further reading

- Internal/External Environment Friendly to PWD: This chapter provides guidance on creating accessible learning environments for students with physical disabilities.
- **Best Practices:** Implementing universal design principles and providing reasonable accommodations can enhance learning experiences for these students.

5. Bibliography and references

- New Brunswick Human Rights Commission. (2011). Physical Disabilities. Retrieved from https://alc.ext.unb.ca/modules/physicaldisabilities/definition.htmlalc.ext.unb.ca+1alc.ext.unb.ca+1
- ADCET. (n.d.). Disability Specific Adjustments: Physical Disability. Retrieved from https://www.adcet.edu.au/disability-practitioner/reasonable-adjustments/Disability-Specific-Adjustments/physical-disabilityADCET+1ADCET+1
- Trinity College Dublin. (n.d.). *Physical Disabilities*. Retrieved from https://www.tcd.ie/disability/information-for-teaching-and-professional-staff/disability-awareness-information/physical-disabilities/Trinity College Dublin

2.1.6. Socio-economical-cultural disadvantages

1. Description

Socio-Economic-Cultural (SEC) disadvantage refers to the challenges faced by students due to factors such as low family income, lack of educational resources, limited parental involvement, cultural or linguistic barriers, and unstable living conditions. These disadvantages can significantly impact a child's academic performance, social development, and emotional well-being.

Students from socio-economic-cultural disadvantaged backgrounds often experience significant challenges that impact their education and well-being. Limited access to essential resources such as books, internet, school supplies, nutritious food, and healthcare can hinder academic progress and personal development. Language barriers may further complicate communication and learning, making it difficult for students to engage fully in classroom activities. Additionally, unstable home environments, caused by financial insecurity, frequent relocations, or a lack of parental support, can create stress and inconsistency in a child's education. Social exclusion or difficulties integrating with peers due to cultural differences may lead to isolation and decreased confidence. Moreover, emotional stress resulting from economic hardships or discrimination can negatively affect students' mental health, further limiting their ability to succeed in school. Recognizing these factors is crucial for educators to provide appropriate support and create an inclusive learning environment.

2. Key characteristics

Traits: Students from socio-economic-cultural (SEC) disadvantaged backgrounds often exhibit common characteristics that signal their need for additional support. These traits may include persistent fatigue or lack of focus in class due to inadequate rest or nutrition, inconsistent attendance or frequent tardiness, and difficulty completing homework due to a lack of resources at home. They may also display social withdrawal, reluctance to participate in group activities, or difficulty integrating with peers due to cultural or linguistic differences. Additionally, signs such as inappropriate clothing for the season, poor hygiene, or visible stress related to home conditions may indicate economic hardship. Emotionally, these students may exhibit heightened anxiety, frustration, or difficulty regulating emotions, stemming from unstable home environments. Recognizing these traits allows educators to provide targeted interventions, fostering a more inclusive and supportive learning environment.

Examples: Clothing and Hygiene Issues Example.

Situation: Arek, an eight-year-old student, frequently comes to school in worn-out clothes and lacks access to hygiene products. His schoolmates avoid engaging with him due to his noticeable odour, and he often reacts with aggressive behaviour.

Findings: When his mother was called into school, she showed little understanding of the issue and demanded that the school "do something" because she was juggling three jobs to repay a loan. She also revealed that Arek's father had recently passed away due to rapidly developing cancer, adding to the family's distress.

Solution: The school pedagogue began working closely with Arek to help him manage his emotions and social interactions. Additionally, the school identified Marcel, a strong and compassionate classmate, who helped Arek reintegrate into peer activities. Finally, a local charity organization provided clothing and hygiene products to improve Arek's daily well-being. Over the course of six months, these combined efforts significantly improved Arek's situation, fostering his emotional stability and social inclusion.

3. Indicators and nuances in the classroom

Signs to observe: Students with socio-economic-cultural (SEC) disadvantages often exhibit noticeable signs in a school environment that can indicate their need for additional support. Academically, they may struggle with completing homework or participating in class due to a lack of resources at home, such as books, internet access, or parental guidance. They might display frequent absenteeism or tardiness, as well as difficulty concentrating or retaining information due to inadequate nutrition or sleep. Socially, these students may have trouble forming relationships with peers, often showing signs of isolation, reluctance to participate in group activities, or difficulty communicating due to language barriers. Behaviourally, they might exhibit withdrawal, excessive shyness, or aggression as a response to stress or emotional distress. Additionally, physical indicators such as poor hygiene, wearing inappropriate or worn-out clothing, or frequently appearing tired and unwell can signal underlying economic hardships.

Behavioural clues: Behavioural clues that may indicate a student is facing socio-economic-cultural (SEC) disadvantages often manifest in their interactions, emotions, and classroom engagement. These students may exhibit withdrawal, reluctance to participate in group activities, or avoidance of social interactions due to feelings of exclusion or embarrassment about their circumstances. Some may display heightened emotional sensitivity, frequent mood swings, or sudden outbursts of frustration or aggression as a response to stress or unmet needs. Others might show signs of anxiety, nervousness, or an excessive need for teacher attention, seeking comfort in structured environments where they feel supported.

Additionally, a lack of motivation, disengagement from learning, or difficulty following instructions could stem from external pressures such as family struggles or an unstable home environment. Some students may also develop coping mechanisms like excessive joking, defiant behaviour, or hyperactivity to mask their challenges.

4. Further reading

Additional methods: please refer to the corresponding detailed sections in this guide, for example for physical disability refer to the chapter of Internal/external environment friendly to PWD - Thales/DCVPR which provides further guidance on this topic or some best practices mentioned or the database (if applicable).

5. Bibliography and references

- Svoboda, Z., & Zilcher, L. (2019). Social disadvantage and the possibilities of overcoming it perceived by basic school pupils in the Czech and the Slovak Republic. *ICERI2019 Proceedings:* 12th Annual International Conference of Education, Research and Innovation, 6220–6225. Seville, Spain. https://doi.org/10.21125/iceri.2019.1499

2.2. Learning materials and identification strategies

Understanding the diverse needs of pupils begins with careful observation and reflection. Every child learns in a different way, shaped by personal, social, and cultural experiences. Teachers are often the first to notice when a pupil struggles, withdraws, or shows signs of emotional or learning difficulties. Yet identifying what lies beneath these signals requires sensitivity, structure, and practical tools.

This section introduces a set of materials designed to support teachers in diagnosing individual needs and responding to them effectively. The checklists and activity sheets that follow are not only instruments for classroom organization but also diagnostic aids, helping educators recognize early indicators of learning barriers, emotional stress, or social exclusion. Each checklist focuses on specific areas: classroom environment, teaching practices, and material adaptation. They are intended to guide teachers in observing patterns and adjusting their approach accordingly. The checklists are available in Appendix 1.

The activity sheets (available in Appendix 2) complement this process by suggesting short, ready-to-use interventions that can be applied immediately once a need is identified. Together, these resources offer a bridge between awareness and action: they empower teachers to interpret what they see in the classroom and to make informed, compassionate adjustments that foster inclusion and well-being.

Developed within the SIEMdig framework, these tools promote a reflective practice in which teachers become active observers and facilitators of every child's growth. By integrating these strategies into daily routines, schools can transform identification from a reactive process into a continuous, empathetic practice that ensures no learner is overlooked.

2.3. Creativity plans

Creativity opens pathways to inclusion. When pupils are encouraged to imagine, create, and express themselves, they begin to build confidence, empathy, and a stronger sense of belonging. Creative learning does not simply mean adding art or play to lessons; it means using imagination as a bridge between differences, allowing every child to participate according to their own strengths and comfort.

The creativity plans presented in Appendix 3 are **ready-to-use lesson frameworks** that combine emotional learning, cultural awareness, and inclusive teaching strategies. Each plan addresses a particular type of need such as anxiety, communication difficulties, or social disadvantage, and translates it into **positive**, **structured classroom activities**. These plans help teachers move beyond diagnosis to active support, using creativity as a means of engagement and healing.

Through storytelling, role play, art, music, or collaborative projects, pupils learn to explore emotions, appreciate diversity, and develop social and emotional skills in a safe and supportive environment. The flexibility of the plans allows teachers to adapt them to different age groups.