

It takes all kinds of minds

A guide to understanding learning difficulties



The Salvesen
Mindroom
Centre
no mind left behind

We are all unique in the way we function

In this guide you will find:

- information about learning difficulties
- facts about some of the more common conditions that are associated with learning difficulties
- examples of how we can each make simple changes to support people with learning difficulties to reach their potential
- further information about The Salvesen Mindroom Centre

About The Salvesen Mindroom Centre	pg 3
What are learning difficulties?	pg 4
Understanding ADHD	pg 7
Understanding Autism	pg 11
Understanding DCD	pg 15
Understanding Dyslexia	pg 19
Understanding Tourette syndrome	pg 23
More about what we do	pg 26

The Salvesen Mindroom Centre is committed to raising awareness of all kinds of learning difficulties

We are a small independent Scottish charity with a big vision - a world where 'no mind is left behind' and every person with a learning difficulty receives the recognition and the support they need to achieve their potential.

The Salvesen Mindroom Centre works to achieve this vision by:

- providing **direct help and support** for the families of children and young people with learning difficulties
- **collaborating** with organisations across the public, private and third sectors
- seeking to **influence** policy and practice at local and national level
- building **awareness** of learning difficulties
- offering **training** to families, to professionals across the health, education and third sectors and to private sector organisations
- **building a programme** of **research** with the University of Edinburgh and NHS Scotland to understand better and resolve learning difficulties, and influence best practice

What are learning difficulties?

If a person has a learning difficulty, here are just a few of the ways it may affect them:

- not being able to concentrate for long periods of time
- getting bored rather easily
- acting impulsively
- tripping over things
- difficulty making sense of what they read or write
- living in a world of their own
- losing track of time
- forgetting what they have just learnt
- being single minded or highly focused

Of course, the above could apply to most of us at some time in our lives. The difference for people with learning difficulties is that these behaviours persist to an extent that makes their daily life challenging.

Learning difficulty or learning disability?

The Salvesen Mindroom Centre uses the following definitions:

Learning difficulty

A problem of understanding or an emotional difficulty that affects a person's ability to learn, get along with others and follow convention.

Learning disability

A significant, lifelong, condition that starts before adulthood and affects development to the extent that the person requires support to understand information, learn skills and to cope independently.

There is no single interpretation or consensual definition of the terms 'learning difficulty' and 'learning disability'. Different organisations and local authorities have adopted their own definitions of the terms.

Listed below are some of the more common conditions associated with learning difficulties. Often an individual will be affected by more than one condition.

Attention Deficit Hyperactivity Disorder (ADHD) and

Attention Deficit Disorder (ADD)

People with ADHD are inattentive, easily distracted, impulsive and hyperactive. These characteristics are usually combined in varying degrees of severity. ADD has the same characteristics as ADHD except that individuals do not have hyperactive or impulsive symptoms.

Autism

Autism affects how individuals communicate, process information, and experience the world around them. People with autism will often have difficulties with social interaction, coping with change and sensory stimuli.

Developmental Coordination Disorder (DCD)

DCD is characterised by impairments in coordination, motor control and planning, affecting any or all movements. Associated difficulties with memory, perception and organisation can impact everyday life. DCD is still sometimes referred to as 'Dyspraxia'.

Dyslexia

Specific difficulties with reading, writing and spelling.

- Dyscalculia - difficulties with maths.
- Dysgraphia - difficulties with handwriting.

Tourette syndrome

Involuntary movements or sounds which may come and go and vary in severity. These actions are known as 'tics'.

Meet Estella

A close-up portrait of a young girl with dark hair and freckles, wearing a red floral shirt and a large blue tassel earring. She is looking slightly to the right with a gentle smile.

She is extremely creative

She is full of energy

She thinks outside the box

She has a great memory

But Estella can't always sit still and concentrate

Understanding ADHD

Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental condition - which means that it is part of the make-up of the brain. It is one of the most common of all learning difficulties and research indicates that around 5% of the population has ADHD. More males are currently diagnosed than females, though recognition of ADHD in girls at an earlier age is increasing.

A person with ADHD will almost certainly have difficulties with impulsiveness, inattention and hyperactivity. They may be unable to sit still, plan ahead or finish tasks. Due to their short attention span they may often be unaware of what is going on around them.

On a good day someone with ADHD may seem fine, leading others to think that the ADHD is something the individual can choose to switch on and off. This can lead to frustration and misunderstanding on both sides as it is not as simple as that. However, many people can learn to manage their own ADHD well, using a combination of approaches including educational support and behavioural strategies, and sometimes medication.

Attention Deficit Disorder (ADD) - it is now recognised that some people have attention disorder without hyperactive and impulsive symptoms. These individuals can appear lethargic, often struggling to pay attention, plan, organise and complete work tasks.

ADHD: strengths and challenges

Estella often needs help with structure. It can be useful to provide her with reminders and prompts.

Try to put Estella in a position that demands short-term bursts of concentration and give her good organisational support. A minimalistic environment would help to reduce her stress and hyperactivity.

Capitalise on her enthusiasm, her energy and her curiosity. Estella is best at projects and tasks that can be completed quite quickly. She is personable and good at looking after people. She thrives on new challenges with a short-term deadline.

Here are a few ways we can all support Estella:

General

- Talk with her about strategies that work best for her
- Let her have breaks in the day

At home

- Use a diary for notes and reminders
- Give access to a peaceful and quiet space
- Keep routines consistent but vary activities
- Be consistent and clear with rules and boundaries

At school

- Break large assignments into smaller blocks of work
- Check results regularly and give feedback
- Review study plans daily and help Estella to make schedules and lists
- Vary tasks and keep them fairly short

At work

- Structure the day clearly
- Discuss and agree priorities
- Set achievable deadlines for each piece of work
- Where possible, regularly assign fresh duties to help Estella stay on task

At the hospital

- Explain any medical procedures clearly
- Provide activities to occupy Estella
- Plan the best time of day for her appointment
- Ensure waiting times are as short as possible on arrival and that staff are aware of Estella's ADHD

Meet Amber



She is full of curiosity and energy
She can remember everything
She is passionate about her interests
She can light up a room with her smile

But Amber can't always understand
how to act in social situations

Understanding Autism

Autism is a neurodevelopmental condition - which means that it is part of the make-up of the brain. People refer to autism in different ways, and you might see it called Autism Spectrum Disorder or Condition (ASD or ASC). Asperger syndrome is a diagnosis that has been given in the past to autistic people who do not have a learning disability, though this term is no longer often used.

About 1 in 100 people are thought to be on the autistic spectrum. Autism is more commonly diagnosed in males, though it is increasingly recognised that there are more females on the autism spectrum than previously thought.

Autism is a spectrum condition, which means that the variation between individuals is huge, though there are key similarities. The core challenge for all is in making sense of the world. The main areas of difficulty are social interaction, communication, flexibility of thought and behaviour, and sensory processing. The degree to which these difficulties impact on day-to-day life can range enormously from person to person, in different settings and across the life span.

People on the autism spectrum often find changes difficult to manage and may become fixated on certain objects or actions. Some will use alternative communication systems, for example signs or pictures. Many autistic individuals are over or under sensitive to touch, taste, smell, sound, light, temperature or pain.

Autism: strengths and challenges

Amber benefits from a reliable daily routine. She is likely to be at her best in safe, familiar surroundings and to find sudden changes challenging.

Amber is best suited to tasks where her attention to detail is a real asset. She can work accurately and will deliver consistently good performance on tasks which match her skill level. For her, quality rather than quantity is the driving force during her day.

Quiet environments with few distractions are where Amber can maximise her strengths. She will almost certainly have difficulties with social interaction and she is unlikely to feel at her best in situations that rely heavily on social or communication skills.

Amber may struggle to explain when a problem arises, so it would be good to check in with her regularly to let her raise any issues.

Here are a few ways we can all support Amber:

General

- Communicate clearly and speak literally
- Keep routines consistent
- Give ample warning and explanation of changes

At home

- Use visual cues to help communication
- Tell her what she should do, not what she shouldn't do
- Help her to make charts and write lists
- Identify stress triggers and try to work around them

At school

- Provide a predictable environment
- Be clear about classroom rules
- To explain harder tasks, use lists, cards or pictures

At work

- A structured routine is likely to work best
- Assign work in small steps and help with prioritising tasks
- Use Amber's ability to focus intensely by involving her in projects where this skill is helpful

At the hospital

- Be aware that Amber may be over (hyper) or under (hypo) sensitive to touch, pain, smells and sounds
- Explain any medical procedures very clearly
- Try to ensure that Amber sees the same staff regularly
- Consider the best time of day for an appointment
- Make waiting times as short as possible

Meet Jennifer

She is determined and hardworking
She can think creatively
She works wonders on the computer
She loves to read

But Jennifer often avoids physical activity and
dislikes new or unpredictable situations

Understanding DCD

Developmental Coordination Disorder (DCD) is a neurodevelopmental condition - which means that it is part of the make-up of the brain. It is often used interchangeably with the term 'dyspraxia', though DCD is the diagnosis most likely to be given by health professionals. DCD is more commonly diagnosed in males and sometimes runs in families.

DCD is characterised by impairments in coordination, motor control and planning which can affect any or all movements. These difficulties interfere with daily living activities and academic achievement. The condition varies in severity and may also affect language, perception and thought.

Core problems involve difficulties in planning and carrying out complex, sequenced actions. As a result, those with DCD may be seen as clumsy and delayed in their actions.

Someone with DCD may struggle with everyday tasks such as: using pens or cutlery, getting dressed, walking up and down stairs, tying shoelaces and spatial awareness. They commonly have difficulties with organising their time and activities.

DCD often coexists with other neurodevelopmental conditions such as dyslexia and autism.

DCD: strengths and challenges

Jennifer usually needs help with structure and organisation. She will benefit from positive encouragement, as difficulties with everyday activities can become very frustrating.

Jennifer will be at her best when given time and reassurance to complete activities. Talk with her to find out what activities she struggles with most and work on coping strategies together. Structured environments will help her to develop motor skills and confidence.

Being positive and focusing on what Jennifer can do, not what she can't, will help her motivation and self-esteem.

Here are a few ways we can all support Jennifer:

General

- Be encouraging and supportive
- Give clear and specific instructions

At home

- Help her to use a diary for notes and reminders
- Plan each day with simple lists and schedules
- Encourage her to practise motor and coordination skills
- Give support with activities Jennifer finds challenging

At school

- Break large assignments down into smaller blocks
- Allow time for breaks
- Check results regularly and give feedback
- Offer a computer as an alternative to handwriting
- Give extra support in PE and practical subjects

At work

- Discuss and agree priorities
- Set achievable deadlines for each block of work
- Encourage Jennifer to use lists and schedules
- Build in regular short breaks throughout the day

At the hospital

- Explain any medical procedures clearly
- Be aware that she may be over (hyper) or under (hypo) sensitive to touch, pain, smells and sounds
- Consider the best time of day for an appointment
- Make waiting times as short as possible

Meet Daniel

He is a visual thinker

He is sociable and a good talker

He can be highly creative

He can achieve impressive results

But Daniel can't always make
sense of letters or words

Understanding Dyslexia

Dyslexia is a neurodevelopmental condition - which means that it is part of the make-up of the brain. It is the most common cause of reading, writing and spelling difficulties. As many as 1 in 10 people are thought to be dyslexic, and it can run in families.

Dyslexia is best described as a combination of abilities and difficulties that affect reading, writing and/or spelling. It is often a result of not being able to sort out the sounds that make up words. Some people with dyslexia have associated difficulties with processing information, short term memory and organisation.

Although dyslexia can cause significant problems, especially if not spotted early, it is no reflection of intelligence. People with dyslexia may have challenges with literacy, but can excel in other subject areas.

Dyslexia commonly co-exists with any of the other neurodevelopmental conditions.

Similar Conditions

Dyscalculia is a condition which causes specific difficulties in maths. Those affected have particular difficulties in learning 'basic' arithmetic facts, performing calculations and estimating amounts.

Dysgraphia is a condition which causes difficulty with handwriting, affecting the ability to write fluently. It is more than an untidiness in writing and can worsen when under time pressure.

Dyslexia: strengths and challenges

Daniel needs you to make the most of his social, visual and creative talents and to minimise his reliance on text and documents.

Daniel will achieve most in a position that maximises his creativity. He is likely to enjoy varied tasks and has a capacity for lateral thinking. Though he may find purely academic situations challenging, projects using computers suit him well and technology can help him to do his best work.

Take advantage of Daniel's creative ideas and don't hesitate to put him in charge of projects. He has the capacity to do this and just may need some support with his note taking.

Remember that although Daniel may have difficulty with simple writing challenges, he will have many compensatory strengths. These strengths are incredibly valuable if you work with Daniel to profit from them.

Here are a few ways we can all support Daniel:

General

- Use as much visual information as possible
- Make sure written information is easy to read with big clear fonts and printed on non-white paper
- Be direct and to the point - avoid long sentences

At home

- Provide reassurance and encouragement
- Plan for breaks when doing tasks involving reading or writing
- Encourage Daniel's creative and visual talents

At school

- Use verbal instruction rather than written
- Let Daniel use a computer for written pieces of work
- Ensure planned and appropriate adjustments are in place for exams
- Use Daniel's creative capacities

At work

- Take time to discuss the best ways of working
- Avoid 'paper work' as far as possible
- Go through new tasks and duties face to face
- Build in time for breaks throughout the day

At the hospital

- Talk to Daniel instead of giving written information
- Provide help with forms or paper work
- Explain any medical procedures clearly



Meet Owen

He is reliable and practical
He is intelligent
He can bring a smile to your face
He can take the initiative

But Owen can't always control
his own movements and sounds

Understanding Tourette syndrome

Tourette syndrome is a neurodevelopmental condition - which means that it is part of the make-up of the brain. It affects around 1 in 100 people, is more commonly diagnosed in males and may run in families.

People with Tourette syndrome sometimes lose control over the movements and sounds they make. Without warning, they may twitch, nod, jerk or make grunting, coughing or other noises. These actions are completely involuntary and are known as 'tics'.

Tics can come and go and vary in severity. They can be 'simple' such as a small movement or a single sound, or 'complex', such as speaking a phrase or making a series of movements. Most people will have a combination of physical and vocal compulsions, and may also experience difficulty in managing their emotions. A well-known feature of Tourette syndrome is an uncontrollable use of obscenities ('coprolalia'), but this is not very common.

More and more people are being diagnosed with Tourette syndrome as understanding about the condition improves. Symptoms tend to begin in childhood and are generally most prominent during the early teenage years.

Tourette syndrome is often associated with other conditions such as ADHD, obsessive compulsive disorder (OCD) and coordination difficulties.

Tourette syndrome: strengths and challenges

Owen works best with consistency in the surroundings and people he comes across, as sudden changes and new situations may be hard to handle.

While the tics are involuntary, certain strategies may help to reduce and manage them. It is important that in every environment, Owen has a space for peace and quiet.

Put him in a position that builds on his reliability and energy. Use his intelligence and constructive ideas, and give him an environment where he can be focused and stay readily on task.

By ignoring the tics and drawing on Owen's sense of responsibility and willingness to work hard, he can be given a chance to achieve his true potential.

Here are a few ways we can all support Owen:

General

- Avoid reacting to the tics
- Keep Owen busy and focused

At home

- Have reliable routines
- Provide structure to the day
- Help him to find a hobby to concentrate on

At school

- Break assignments into manageable sections
- Talk together to agree the best classroom strategies
- Make sure Owen can have regular breaks
- Give him plenty of time to complete tasks and allow extra time for tests

At work

- Try to arrange for Owen to work in a familiar place with the same people
- Build in opportunities for regular breaks
- Ensure his workload is manageable and clearly broken down into smaller sections
- Minimise disruption and available distractions

At the hospital

- Ensure Owen sees the same staff regularly
- Provide activities to occupy Owen
- Consider the best time of day for an appointment
- Make waiting times as short as possible

Direct Help and Support

Just knowing that there is someone who cares and understands can be the first step towards improving the lives of people with learning difficulties and their families.

Our dedicated and professional Direct Help and Support team provides:

- practical and emotional 1:1 tailored support to the families of children and young people up to the age of 25 years with learning difficulties
- essential information and advice regarding difficulties with learning, specific conditions, and related mental health and wellbeing issues
- guidance on rights and responsibilities ensuring access to education and appropriate supports
- expert knowledge about, and referral to, a range of supportive professionals working with children and young people with learning difficulties

We keep the child/young person at the centre of everything we do and we empower families by ensuring they have the knowledge, skills and importantly the confidence to address areas of concern. We strive to work closely with a range of professionals to build a network of support around the family.

For 1:1 support, contact us on directhelp@mindroom.org or 0131 370 6730

Other things we do:

Collaboration

The Salvesen Mindroom Centre has built positive working relationships with many organisations across the public, private and third sectors. If another service exists that can meet the needs of families better than we can, we signpost or refer families to those services.

Influencing

Part of our role is engaging with the public sector at national and local level to improve policies and promote good practice to ensure better outcomes for people with learning difficulties. The Salvesen Mindroom Centre is a member of several cross-party groups of the Scottish Parliament and we work as part of key Scottish Government groups on additional support needs. We respond to Scottish Government consultations on issues that affect the lives of people with learning difficulties. Additionally, we are members of the *for Scotland's Disabled Children* (fSDC) coalition.

Awareness

We are dedicated to building awareness of all kinds of learning difficulties, and of the contribution that people with differing needs can make to society.

Training

The Salvesen Mindroom Centre runs training events about learning difficulties for professionals, for families, or for organisations across the public, private and third sectors.

Research

Research to improve the lives of those living with learning difficulties is a key focus for The Salvesen Mindroom Centre. We work in collaboration with researchers and clinicians from the University of Edinburgh and NHS Scotland to improve diagnosis, assessment and treatment of all types of learning difficulties.

For more information about The Salvesen Mindroom Centre, visit our website:

www.mindroom.org



Visit us on Facebook
f nomindleftbehind

Follow us on Twitter
t @MindroomInform



The Salvesen Mindroom Centre

no mind left behind

t: 0131 370 6731 (general office)

e: admin@mindroom.org (general office)

t: 0131 370 6730 (helpline)

e: directhelp@mindroom.org (Direct Help & Support)

A registered Scottish charity SC030472

A company limited by guarantee and registered
in Scotland SC209656