
Supporting Learning and Well-Being of Young Children with Disabilities at Home



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Introduction

Context

The pre-primary education and support for early learning and care young children receive from parents/caregivers at home set the foundation for their learning. Receiving quality early childhood care and education impacts children's subsequent retention in school and learning outcomes. It is thus important for all early childhood educators and parents/caregivers to promote the well-being and learning of young children, including young children with disabilities.

The COVID-19 pandemic led to widespread school closures around the world, including in the South Asia region, affecting children at all levels of education. Among them, young children (aged 3 – 8 years) with or without disabilities had also been confined to their homes for long periods, with their routines and daily activities interrupted.

Many young children with disabilities were already out of school prior to the pandemic, deprived of opportunities to explore, discover and play with their peers, which are essential for their physical, social, emotional and cognitive development at this critical stage in life and in their educational journeys.

This period had also been challenging and stressful for families in coping with the pandemic and its socio-economic fallout, while also supporting their children's learning at home. For some children with disabilities, the school closures and lockdowns not only meant they were missing out on learning key concepts such as social-emotional skills, but also on therapeutic services such as occupational therapy/physiotherapy/speech therapy. The lack of routine and support may have also led to behavioural

issues among some children, such as children with autism, for whom routines need to be followed meticulously.

Young children's learning requires facilitation, as they are less able to learn on their own at this stage. Young children with disabilities in particular need specific and tailor-made one-to-one instruction and learn best through concrete materials and hands-on experiences. It is important that early childhood educators provide guidance to parents/caregivers and families of young children with disabilities on how they can more effectively support home-based learning and development of their children when preschools/schools are closed, as well as when they are open to reinforce what they learn at school.

Purpose of the guidance note

This guidance note is aimed at supporting the well-being and learning of young children with disabilities at home. While the impetus for the development of this guidance was the COVID-19 pandemic and related preschool closures, it can also be used beyond the context of school closures in supporting learning and development of young children with disabilities at home, reinforcing what is learned at school.

The guidance aims to promote continued learning and development of young children and to

address the detrimental effects of prolonged isolation and increased stress, anxiety and social isolation associated with the pandemic and of being out of school.

The guidance note elaborates on an approach early childhood educators¹ can use to collaborate with families to foster a conducive learning environment at home that is responsive to the unique needs of each child to build on her/his strengths to promote well-being.

It also outlines home-based activities that early childhood educators and professionals can support family members of children with disabilities² to undertake to promote their children's holistic development. This guidance note is based on the assumption that early childhood educators and professionals working with young children with disabilities have knowledge of developmental domains and early learning and development standards.

Target audience

The primary target audience for this guidance note is early childhood educators who are responsible for promoting the learning and well-being of young children. Other professionals, including special educators and early childhood intervention professionals and therapists, may also find the guidance useful while working with young children with disabilities.

Box 1. Understanding children with disabilities

THE CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES states that persons with disabilities are those having a long-term physical, mental, intellectual or sensory impairment that – in interaction with the environment – hinders their participation in society on an equal basis with others.

Children with disabilities are not a homogenous group. They may be born with or acquire impairments that, in relation to barriers they may face in their surroundings (for example, inaccessible environments and communication, stigma and discrimination) lead to disabilities, such as in relation to seeing, walking, communicating, self-care or making friends.

¹ The term 'early childhood educators' includes preschool teachers, Anganwadi workers, early childhood care and development workers and community workers, which are nomenclatures commonly used in the South Asia region.

² Since this guidance note refers only to young children aged 3 – 8 years, guidance in relation to specific learning disabilities is not included as these are identified at about age 8 and after.





2

Approach to promoting learning and well-being of children with disabilities at home

Guiding approach

This guidance note for promoting learning and well-being of young children with disabilities at home is informed by a family-centred approach with the home as the natural learning environment for young children as they spend most of their time there. Parents/caregivers along with the child and the early childhood educator, are recognized as the co-creators of learning opportunities that are situated in the child's daily life setting and respond to her/his unique interests, needs and assets. There are six key components to this approach, which are described in this section (see Figure 1).

(i) Promote responsive parenting/caregiving

Young children thrive when they are allowed opportunities to explore, play and develop in nurturing environments and when they interact with their parents/caregivers (WHO, UNICEF & World Bank Group, 2018). It is important that young children live in a warm and loving environment, where their feelings, needs and views are acknowledged and responded to. Furthermore, parents/caregivers should build on children's interests, ensuring they are appropriately challenged and supported as they learn new concepts and generalize skills they have learnt.

(ii) Facilitation by early childhood educators

Early childhood educators have an important role to play in empowering parents/caregivers and enhancing their competencies to support their children’s learning and identify their children’s interests, needs and assets. At the same time, it is important that early childhood educators acknowledge the expertise and knowledge of parents/caregivers as valid and valuable and build on their strengths, while being responsive to each family’s cultural, ethnic, racial, linguistic and socio-economic background.

Early childhood educators must aim to encourage parents/caregivers to carry out meaningful

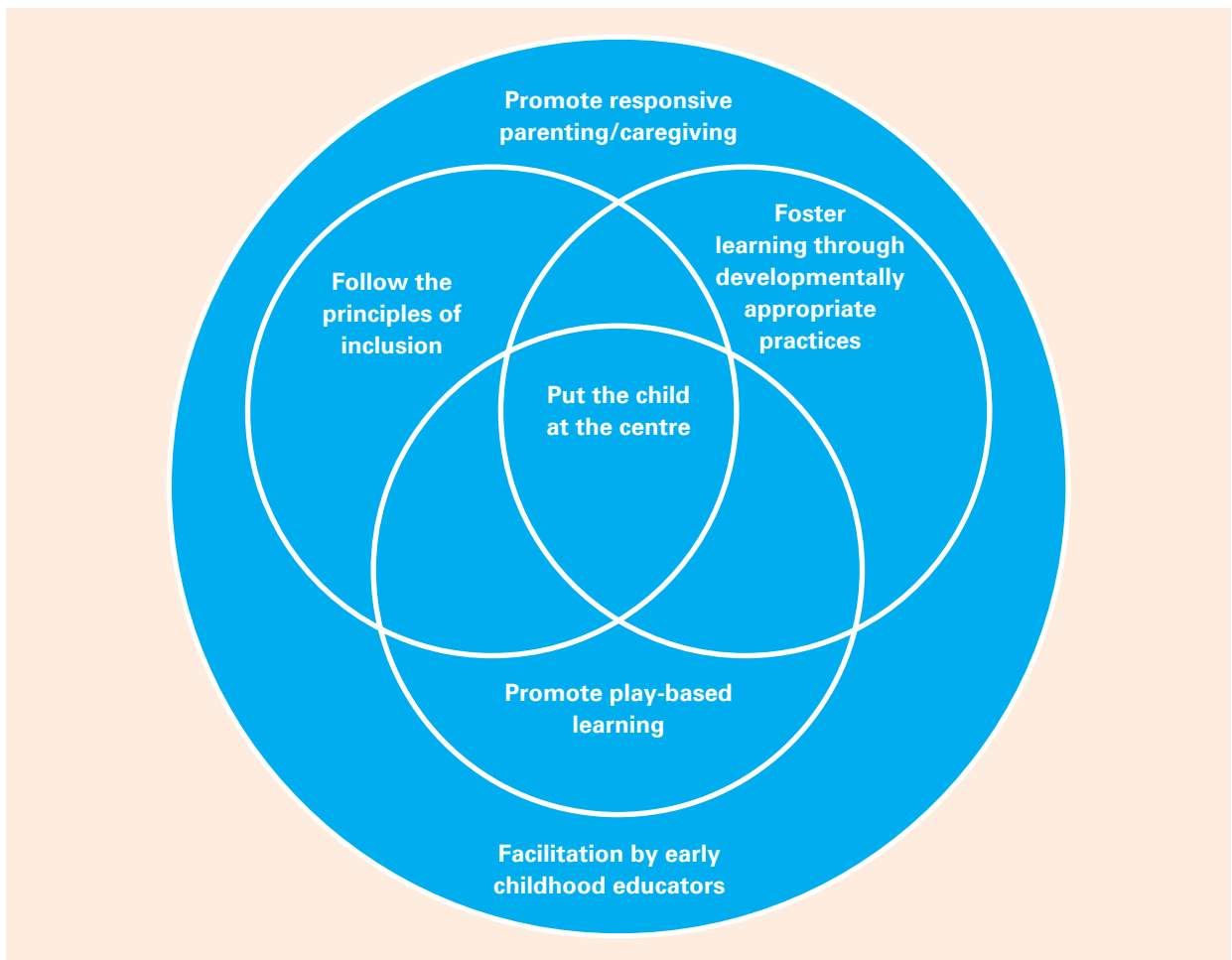
activities to foster learning among their young children with disabilities based on their sociocultural context and everyday routine.

In short, it is important for early childhood educators to focus on facilitative family–child interactions, rather than child-directed therapies, and respond sensitively and empathically in all interactions with families.

(iii) Follow the principles of inclusion

Children with disabilities have the right to education, play and recreation on par with their peers. Parents/ caregivers and early childhood educators must support children with disabilities in removing the barriers they face to their full inclusion in education and learning both at home and at school.

Figure 1. Approach to promoting learning and well-being of children with disabilities at home



(iv) Put the child at the centre

Research indicates that the activities most likely to promote learning among young children are those that are based on their interests, are engaging, provide opportunities for them to explore, demonstrate their abilities and understand how they can influence their environments (Jensen, et al., 2019).

This makes it vital for both the parents/caregivers and early childhood educator to recognize and identify (a) the child's interests, such as likes and preferences, that influence her/his engagement in everyday activities, and (b) barriers the child may face in engaging in different learning and developmental activities and identify strategies to address them.

(v) Foster learning through developmentally appropriate practices

Children, including children with disabilities, benefit from increased learning outcomes when parents/caregivers support their learning through developmentally appropriate practices (Bredekamp & Copple, eds., 1997), with support from early childhood educators.

There are three dimensions to the concept of developmental appropriateness: age, individual growth patterns and cultural factors. It is therefore important for early childhood educators to consider not only the cognitive, but also the physical, social and emotional development in preparing the learning environment and planning appropriate teaching strategies by addressing barriers to learning of the child and by taking into account each child's own growth patterns, personality, learning styles, family background and culture (NAEYC, n.d.).

This will not only increase the child's participation, but also encourage inclusion of the child with a disability within the home setting.

The goal is to ensure *breadth* (many different kinds of learning activities) and *depth* (many different learning opportunities in any one activity) in a child's interest-based learning. A child with a disability will therefore be given the dual benefit of both the parents/caregivers and the early childhood educator/practitioner working together in her/his best interest. Furthermore, an increased alignment between home and school expectations and practices will provide greater consistency with increased benefits for children with disabilities.

Box 2. Importance of early identification and early intervention

EARLY IDENTIFICATION of developmental delays and disabilities along with timely, high-quality early childhood intervention is critical to support a child's optimal development.

Early identification is the initial identification of possible developmental delays and disabilities, typically conducted before the age of 8 years.

Early intervention includes services and support for young children who are either at risk of developmental delay or identified with developmental delays or disabilities. The services for young children and their families can include preschool education, rehabilitation services, training and counselling of parents/caregivers, among others. Access to effective early intervention services is crucial to promoting inclusive education for children with disabilities.

(vi) Promote play-based learning

Play helps in the overall development of children as it gives them opportunities to learn and develop skills, such as problem solving, and offers a safe space for them to try new things and take risks. Play also provides an opportunity to feel a sense of agency, with children directing their own activities (Jensen, et al., 2019).

Given that children with disabilities also learn through play, adults have an important role in creating enriching and diverse learning

opportunities through play indoors and outdoors, as feasible, at home, in the community and in preschool settings.

Play activities should be thoughtfully designed, rather than believing that any free play that children engage in will automatically lead to their development, since research shows that guided play has the most significant effect on children's learning (Fisher, et al., 2013). Materials used for play also need careful attention to suit the needs of each child with a disability and allow easy manipulation.



3

Collaborative partnership between parents/caregivers and early childhood educators

Forming a home–school partnership

It is important to establish a home–school partnership, as a young child’s opportunity to learn includes what goes on at home and at school and is supported by the link between the two environments. When schools and families work together to support learning and early childhood educators support parents/caregivers to implement developmentally appropriate practices at home, children with disabilities tend to do better in school, stay in school longer and like school more. Some of the key aspects

of building this partnership are outlined in this section.

Establishing a rapport with parents/caregivers

A positive rapport between parents/caregivers and early childhood educators is essential for fostering parent–teacher collaboration (Staples & Diliberto, 2010). Two-way communication should develop naturally between parents/caregivers and early childhood educators, in which the parents/caregivers feel comfortable reaching out to and seeking assistance from the early childhood educators.

Building trust

Trust is the cornerstone of any strong collaboration. Both parents/caregivers and early childhood educators need to trust and feel trusted, admit when they do not know something or are wrong, and communicate with each other openly. The establishment of trust, respect and open communication may take some time, but early childhood educators must consistently express to parents/caregivers that their knowledge about their child is very useful for the early childhood educators and that the early childhood educators trust in parents'/caregivers' abilities as the key facilitators of their child's well-being.

Building on the strengths of the family

Young children with disabilities, like other children, come from diverse family backgrounds, such as of differing ethnicities, socio-economic backgrounds and religions. It is important that these differences are considered when working with families.

Caring for young children with disabilities can be demanding and their families may face many challenges in accessing needed services and support. These include living in settings with inadequate access to good quality early identification, inadequate referral to early childhood intervention services and inadequate support for parents/caregivers/families (Green, et al., 2005).

When working with parents/caregivers, especially those from marginalized groups, it is important to value and show respect for and appreciate their social, cultural and economic background. Early childhood educators should try to learn more about the family environment, including its dynamics, the family's routine and the language spoken at home in order to help plan activities for the child in her/his family context (Murray & Curran, 2008).

For the early childhood educator to get to know the child and family well, spending time with them and observing them is the best way. This will not only help in knowing the child's functioning level, but also her/his preferences,

likes and dislikes, people she/he is comfortable with and the activities that she/he enjoys.

It is important also to observe and find out more about the resources/materials easily available in and around the child's home. There can be numerous items in the house that can be used effectively to play with the child and foster learning. The early childhood educator can demonstrate to parents/caregivers how readily available household items can be used for learning activities and also encourage them to think of materials/aids that can be made using available resources and skills that they possess. For example, a parent with good carpentry skills may be able to build an adapted chair for a child with cerebral palsy.

The early childhood educator should identify the good practices implemented by parents/caregivers and show appreciation and encouragement for their efforts. At the same time, any misconceptions among family members or developmentally inappropriate practices that can hamper a child's learning and development should be corrected by giving them the right information. Parents/caregivers should be directed to appropriate specialists as relevant.

In contexts such as the COVID-19 pandemic and school closures when early childhood educators may not be able to go to children's homes and observe them and their families, it is important to find other modalities to reach out to parents/caregivers, such as over the phone or via social media (for example, WhatsApp). They can ask the parents/caregivers to share the child's routine and any challenges the child faces. Parents/caregivers can also be encouraged to provide photos/video recordings of the child's learning activities, based on which early childhood educators can have a fruitful discussion with them and find solutions together.

Providing emotional and instructional support

Some children with developmental delays or disabilities may enter preschool with family members already aware of their impairment,

while other families may not be aware of their child's disability, particularly if it is not visible. Parents/caregivers need guidance and instructional support, particularly during any preschool closure, and early childhood educators have a key role in providing them the necessary support. It is often the early childhood educator who, after observing the child, suspects that the child might have a disability and alerts the parents/caregivers to seek help. There are many ways in which an early childhood educator can support parents/caregivers in these cases.

- **Provide support towards acceptance**

Parents/caregivers of young children with disabilities react in different ways when they get to know that their child has a disability. Therefore, it is important for an early childhood educator to understand the parents'/caregivers' emotional status. The reactions can be any of the following in different stages and phases:

- Denial – *"No, it is not true."*
- Guilt – *"Have I done something wrong?"*
- Shame – *"Oh, how will I face people"* (Given the stigma often associated with disabilities)
- Ambivalence – *"Does my child need help and are you sure he has a disability – he does seem to respond to me?"*
- Helplessness – *"What will I do now? Where do I go for help? Who can help my child?"*
- Depression – *"Why me? All is over... we are doomed."*
- Acceptance – *"Ok, I understand that my child has a disability. Let me do my best to support my child."*

If positive support is offered, it can help parents/caregivers reach the 'acceptance' stage sooner. An early childhood educator can play a major role by providing both emotional and instructional support through WhatsApp and SMS chats, phone calls and meetings, if and when conditions allow for in-person gatherings, either one-on-one or through support groups with other parents/caregivers of children with disabilities.

- **Be a good listener**

Allowing parents/caregivers to speak out helps in understanding their family dynamics, feelings, aspirations and concerns. Parents/caregivers of a child with a disability may face considerable challenges emotionally and, sometimes, also financially and socially. On realizing that their child is perceived as 'different' from that of their friends and relatives, they may isolate themselves and feel that no one understands them.

By being a good listener, an early childhood educator can connect with the family and make the parents/caregivers feel comfortable and more open to suggestions and receiving support. It is important to have open communication about additional challenges posed by the pandemic (or other crises) without overwhelming the parents/caregivers.

- **Give assurance**

Parents/caregivers of children with disabilities can have a lot of questions and apprehensions about their development and learning. Early childhood educators can reassure parents/caregivers by putting them at ease and informing them that there are ways and means to support their child and sharing instructional strategies that they can easily implement in their daily routine at home.

Early childhood educators can help improve parents'/caregivers' confidence in managing challenging behaviour by strengthening their knowledge of their condition and equipping them with strategies to cope with the situation. It is important to reassure parents/caregivers that they are not alone during this difficult time and encourage them also to invest time in self-care for their own emotional well-being.

- **Stay updated**

Sometimes, parents/caregivers may not have the knowledge and ability to source correct information and access the required services for their child. Early childhood educators must update themselves constantly on the developments and latest evidence so as to guide parents/caregivers.

Developments and trends in the education of children with disabilities are rapid and being in touch with non-governmental organizations working with children with disabilities as well as any special educators in their location can help in this regard.

The COVID-19 pandemic and related closures of schools and other services led to different innovations and modalities to promote the learning and well-being of children at home. It is important for early childhood educators to be informed and share suitable resources with parents/caregivers and also to be receptive to innovative practices shared by them. Based on the context, different modalities can be used to connect with parents/caregivers on a regular basis, whether in person or through other means, such as phone calls or text messages. Text messages can also be used to connect parents/caregivers with support groups online or within their communities.

Involving parents/caregivers meaningfully

Meaningful participation by parents/caregivers in education entails establishing a shared agenda between them and educators to improve educational outcomes for young children, wherein parents/caregivers contribute as decision makers and key resources to co-create learning opportunities for their children.

Development of Individualized Education Plans (IEPs) is the first vital step for creating appropriate learning opportunities at home. IEPs need to be developed in close collaboration with parents/caregivers (and other service providers supporting the child), which entails involving them in assessment, setting goals and monitoring progress.

- **Involve parents/caregivers in assessment**

Parents/caregivers are in the best position to provide information about their child. The primary caregiver spends the most time interacting with the child and knows best what she/he likes, what she/he is trying to communicate and when she/he likes to do what. The information gathered by parents/caregivers in the child's natural environment provides a realistic picture of the

child. It is therefore important that early childhood educators rely on the information provided by the parents/caregivers in addition to their own observations and assessment.

There are a number of published assessment tools for assessing children in the early years. Although many of these are meant for early childhood educators to use, they can be shared with parents/caregivers. Early childhood educators can orient parents/caregivers on how to record assessment information at home.

However, as an early childhood educator works with parents/caregivers from varied backgrounds, expecting all of them to maintain assessment records may not always be possible. For example, this may not be feasible in low literacy contexts. It is important to find simple ways of involving them in the assessment and documentation process, for example, by asking them questions such as:

- What is your child good at?
- What does your child have difficulty with?
- What kind of behaviours does your child demonstrate?
- What changes have you seen in your child over time?

An early childhood educator can devise simple formats for assessment, incorporating short-term targets and indicators as shown in the IEP format in Annex 1, which the early childhood educator can use to discuss the child's developmental growth with parents/caregivers.

Parental beliefs should also be explored as part of the assessment (e.g., "Why do you think your child who is non-verbal cries when she/he is wet? Is there another way the child can communicate?"). The assessment should also include information on the child's strengths and preferences, medical issues, if any, and treatment and therapeutic support being given or required for referral, and the date of assessment should be recorded and documented.

Video recording has been used increasingly by parents/caregivers who have smartphones,

Box 3. Examples of how parents/caregivers can record and measure their child's progress at home for assessment

PARENTS/CAREGIVERS WHO HAVE SMARTPHONES could use them to record their child's response to assessment activities. For example, if the child needs to develop a pincer grasp, asking the parent/caregiver to observe and record how she/he is transferring beans from one bowl to another may be helpful.

Other innovative methods can be used to measure a child's progress. For example, parents/caregivers can be asked to drop a bead/seed in a bottle for each step of progress/achievement the child has made e.g., the child eating independently for the first time, colouring within the outlines in a picture, so that this progress is quantified. Thus, the parents/caregivers can explain their child's progress when the early childhood educator meets them (virtually or in person).

particularly since the pandemic began and during lockdowns. Parents/caregivers can be asked to record their child's behaviour and response to assessment activities and send the videos to early childhood educators (see Box 3).

Parents/caregivers need to be informed that assessment is the first step to setting goals for the child. It is also important to let parents/caregivers know 'what' to look for when assessing, in addition to building awareness on 'why' to assess. In this way, parents/caregivers will be able to participate meaningfully in assessing their child. When parents/caregivers recognize that their assessments are valued by the early childhood educator, they are more likely to trust the decisions of the early childhood educator and cooperate. It also gives them a sense of satisfaction as they mark the progress in their child.

It is essential not to leave out the child with a disability. The child can provide a lot of significant information about herself/himself if an early childhood educator, with the parents/caregivers, knows how to garner information from her/him. It is important to be natural, interact informally and observe every action/reaction by the child, even if observing virtually.

- **Involve parents/caregivers in setting goals**

Subsequent to the assessment to identify the child's interests, needs and assets, it is important to set both long-term and short-term goals in the

IEP, after due prioritization, in partnership with parents/caregivers. (See Annex 1).

Seven key characteristics for high-quality IEP goals that are noted in the literature (Rakap, 2014) are that they:

- (i) describe how the child will demonstrate the skill being taught;
- (ii) are observable and measurable;
- (iii) describe the condition (instructional context) in which the child will demonstrate progress, including outcome;
- (iv) describe the child's involvement in age-appropriate, naturally occurring activities (within the context of daily activities and routines);
- (v) specify how the skill addressed in the goal/objective will be generalized across different settings, materials or individuals (the child is able to perform an activity or display a behaviour across settings, with different people and at different times);
- (vi) are written in jargon-free, plain language; and
- (vii) have wording that emphasizes the positive aspects of the child's functioning (what the child can do).

The crux of the IEP is to break down long-term goals into specific measurable objectives to be achieved within a certain timeframe and select appropriate strategies and learning materials to achieve the identified objectives. The strategies could range from total support, such as physically

helping the child to perform a given activity towards the objectives or verbal prompts, gestures and modelling to gradually reducing the support and letting the child perform the tasks on her/his own.

The goals and objectives need to be measurable, for instance, 'reads two-word sentences'. Setting IEP goals and objectives on the basis of the child's assessment, and subsequently using them to plan intervention and evaluation activities will support individualized instructions and, as a result, child development and learning.

It is important that the goals should be reasonable and informed by the child's strengths. If the goals are unreasonable, the learning will not be meaningful. For example, consider a child aged 7 years with multiple disabilities (cerebral palsy and hearing impairment) having difficulty in mobility, communication and personal hygiene. The priority goals for this child would include conducting an audiological assessment, support for communication, reducing dependence for personal hygiene and interventions that can help her/his mobility.

Although the child is 7 years old, the priority goals should not automatically just be focused on grade-level learning outcomes, even though academic activities should also be planned based on the child's current conceptual level.

Early childhood educators should also take into consideration any additional goals for speech and physiotherapy based on support children with disabilities may be receiving from occupational therapists and others. It is important that early childhood educators seek relevant information about any therapy being given to the child.

Subsequent to the development of the goals, the early childhood educator would need to build the capacity of parents/caregivers to implement the planned learning activities at home. An IEP implemented at home with support and guidance from the early childhood educator in situations like the COVID-19 pandemic helps ensure continuity of developmentally appropriate holistic learning, which is the need of all young children.

This is particularly important when there is limited access to services outside the home.

It should be clarified to parents/caregivers that home learning is not the same as learning in a preschool setting. While more structured programmes are implemented in preschools, the IEP implemented at home should be flexible.

Some children may need adaptation of the materials used. For example, a child with difficulty in hand function, as in the case of some children with cerebral palsy, may need adaptation on the tooth brush handle, pencils, scissors or spoons to have a good hand grip to brush, write, cut or feed herself/himself, respectively (see Figure 2). These should be indicated in the IEP and the parents/caregivers guided to make such adaptations using locally available resources.

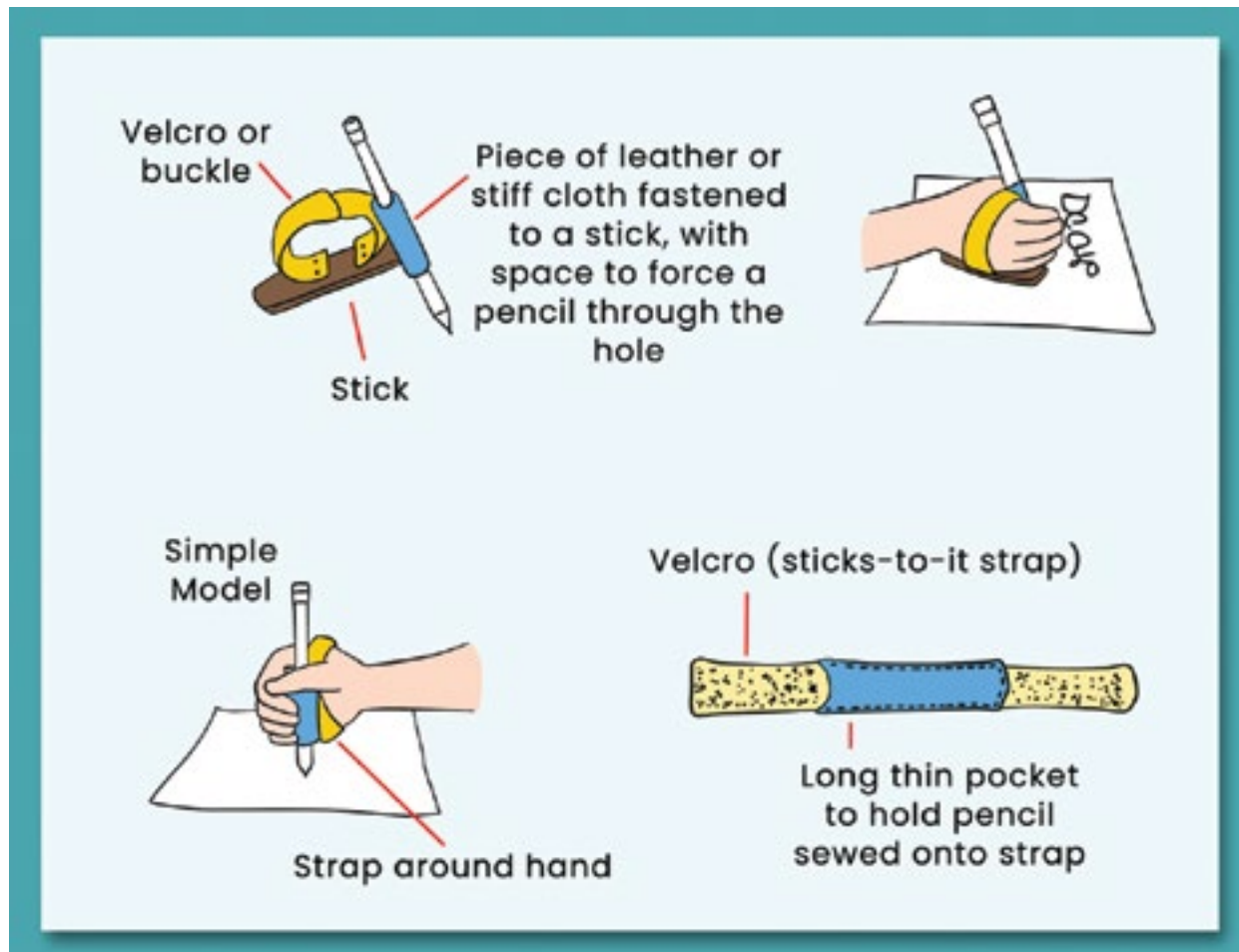
- **Involve parents/caregivers in monitoring progress**

Continuous assessment is important to know the child's developmental progress. Early childhood educators must partner with parents/caregivers to closely monitor the child's use of skills covered in the IEP by collecting evidence through multiple means. For example, early childhood educators can use the UNICEF ROSA-ARNEC Early Childhood Education Formative Assessment Package to assess the child and capacitate parents/caregivers to monitor the child's progress on some of the indicators at home.

Early childhood educators should seek information regularly from the parents/caregivers about their child's performance levels academically, socially, emotionally and behaviourally while at home. This information should be used to review IEP goals and objectives and plan the next teaching and learning activities. It is important to keep track of the various therapies stated in the IEP that are to be implemented by the therapist/s.

Parents/caregivers should be guided to motivate the child to improve her/his learning progress by rewarding her/him with praise and positive reinforcement (see Box 4).

Figure 2. Example of adaptation of a tool or utensil for children with difficulty in hand function



Box 4. Example of teaching an activity of daily living

MOHAMMAD, aged 6 years, with developmental delays has to learn how to brush his teeth. How could a parent/caregiver go about teaching this skill?

Step 1: Observe and find out his current level of functioning for brushing teeth.

Setting: Washbasin/sink with a mirror hung above

Current level of functioning: Mohammad can hold the brush and direct it to his mouth if the toothpaste is applied and the brush is placed in his hand. When asked to squeeze paste onto the brush, he squeezes too much. He can take the brush to his mouth and brush his front teeth, but does not brush the back teeth and the back of his teeth. His mother does the rest of the brushing and he follows instructions such as "open your mouth", "bend down" and so on. To rinse his mouth, his mother puts water in his mouth and then says "spit", but he swallows and then makes a spitting sound. He can wash the brush and put it in its place and wipe his face dry.

Step 2: Set objective.

On waking up and before going to bed, when given his toothbrush with paste applied,

Box 4 (continued)

Mohammad will brush his teeth independently, brushing all his teeth, rinse his mouth and spit out the water. He will do so after training him for about three months.

Step 3: Prepare an instructional plan.

a. Materials: Toothbrush with paste applied, a small stool in front of the washbasin so that he can stand on it and see his face in the mirror, towel.

b. Training: The parent can begin the training session at night when he/she is free from other work pressures, rather than doing it in the morning. Encourage Mohammad's siblings/others to join him and brush their teeth too so that they become a model for him to copy. Children learn best by imitating, and it will develop the habit of brushing teeth before going to bed in others too.

Let the siblings model rinsing and spitting so that Mohammad can imitate this. Ask them to do it a few times as a fun activity. Remember to tell Mohammad that spitting is done only in the washbasin. After he brushes his front teeth by himself, bring his attention to his siblings to see how the brush is moved to brush the back of their teeth. Give him enough time to copy this action and appreciate his efforts. Before he rinses his mouth, the parent can step in and brush his teeth to ensure that all his teeth are brushed. This support can be reduced gradually as the days pass and he gains competence in brushing.

Help him to rinse his mouth by prompting him to watch how his sibling or other family member does it and models the action. Tell him to bend over and spit the water out as the sibling (the 'model') does. Hold the child's neck slightly as he bends to spit so that he does not swallow. Though he may swallow initially, he will eventually learn to spit out the water like the model does. Praise him for every step he takes to brush his teeth. Once the child has accomplished the skill, praise him for having brushed his teeth all by himself, gradually fading away the praise.

Once Mohammad is able to brush his teeth independently at night, the parent may allow him to do this in the morning by himself as well, particularly if it would be difficult for the parent to spend time teaching him in the mornings as well. If the parent does have time in the mornings, the training sessions can be both in the morning and at night. Until he learns, brushing in the morning must be done by the parent.

Appreciate every effort or attempt made initially, and later praise only the successful steps. Encouraging the child to watch toothpaste/brush commercials on TV helps in motivating him to brush his teeth. Applying paste on the brush is a difficult task and it can be taught later once the child is comfortable with brushing.

Step 4: Record and monitor progress.

A chart can be developed to record the child's progress. For example, in the case of Mohammad, his parents can mark a '+' for each action he did independently in brushing his teeth each day. Parents can then see the plus marks – and the child's progress – gradually increasing. Areas in which progress has not been made should be discussed with the early childhood educator for solutions.

Step 5: Evaluate achievement of objective.

Evaluation: At the end of three months (or earlier if achieved), an overall evaluation of the brushing skills is to be done to identify the steps yet to be learnt. If the objective has been achieved, move on to the next objective, e.g., tongue cleaning, and follow the same steps.



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4

Activities to promote learning and well-being of children with disabilities

Incorporating learning experiences in the family routine

The home environment and everyday practices of the family offer many opportunities for learning. When children engage in experiential learning in their natural environment, it results in easy generalization of skills and reduces the need for training for transfer/application of skills.

Empowering parents/caregivers to embed developmentally appropriate activities in family routines can bring about a positive change by offering many learning opportunities to young children with disabilities, who are often excluded

from preschool education. This will ensure that they get a good start to their education alongside other children and the foundations are laid for lifelong learning.

Creating an effective home learning environment

Creating an effective environment for learning at home entails establishing learning routines at home, setting up appropriate learning spaces, teaching activities of daily living, conducting play-based learning activities and managing behaviour. Early childhood educators and parents/caregivers can select collaboratively

from the strategies and activities detailed in this section and individualize them to respond to the child’s developmental needs.

The home environment should be enabling and responsive to the needs of the child, including basic needs (physiological, safety, belonging and self-esteem), as well the specific needs arising from her/his functional limitations (see Annex 2 for a checklist for an effective home environment)

- **Establish a flexible routine for home learning**

Situations like the COVID-19 pandemic may have changed home routines in many households, posing additional challenges for some children with disabilities. Additionally, online learning provisions often provide less structure than the face-to-face method of preschool education.

While home-based learning should not have a structure as in the case of a preschool, it is important to recognize that many children with learning and attention issues, particularly those who struggle with executive functioning, will need targeted support in getting and staying organized and remaining on task. Setting flexible routines for home-based learning will help children in self-regulation and focus (National Center for Learning Disabilities, 2020).

Early childhood educators can help parents/ caregivers establish flexible routines for children by discussing the family’s schedule and identifying the best times for implementing planned learning activities. This will help children know work times and break times. Involving children in organizing the day’s timetable will help sustain their interest and motivate them as they become partners in planning their time.

Some approaches that may help in setting up a daily routine:

- Draw out a day-wise plan for the child.
- Earmark time for fun, play and learning.
- Include a reasonable schedule of chores for the child to do around the house.
- Provide opportunities for exercise and rest through the day.

- Alternate activities in a manner that there is no scope for fatigue due to overload. Ideally, a sitting activity should be alternated with a movement activity.
- Introduce a consistent winding-down routine in the daily plan.
- Limit screen time.
- Be adaptable in setting the routines and go with the child’s choice initially to make her/him comfortable and gradually structure the day as required.
- Be flexible. Do not force the child to undertake any activities.

Parents/caregivers can design picture cards of activities that can be placed on a timetable board or around areas where specific activities are conducted. The timetable board can have pockets or Velcro may be used so that the picture cards can be changed each day.

For children with blindness or deafblindness, ‘object calendars’ could be used, in which activities are represented by an object. For example, a spoon for mealtime, a soap/towel for wash time, a bead/block/ball for playtime and so on. The objects can be organized in a sequence so that the child can recognize the planned activity and follow the daily schedule.

Children with autism are generally comfortable with picture timetables and at ease when they see a predictable plan for the day. Other young children with or without disabilities in the household would also benefit from these picture timetables due to their concreteness.

A daily calendar could also be useful for keeping track of the child’s learning routine.

- **Set up a learning space for the child**

It is important to set up an appropriate, safe learning space for the child. Specific disabilities may require attention to different aspects of the learning spaces. Suggestions include:

For children with physical impairments

- Clear out areas, create open spaces within and outside the house so that the child can move around safely and/or use mobility equipment.
- Smoothen and level flooring surfaces as much as possible, so that there are few bumps or changes in surface levels.
- Provide a variety of seating options (floor, chair, side table, blanket, pillow) for comfortable positioning/seating of the child.

For children with hearing impairments

- Make sure visual communication is used to communicate with the child, including sign language and gestures.
- Seat the child in a manner that she/he can easily see the activities.
- Face the child and gain her/his attention before beginning an activity, e.g., show an object of her/his interest that will be used in the activity before it begins.
- Reduce extra noises and distractions. For example, turn off the television (unless being used for learning purposes) and radio and reduce other background noise when playing with/teaching the child. This will make it much easier for her/him to focus and also use any hearing she/he might have.
- Point to real life objects or pictures when reading or talking about a topic.
- Paste labels on objects throughout the house, through which the child can learn the names of things.

For children with visual impairments

- Arrange furniture in the environment in a way that provides hand holds to the child. Another alternative could be to place a rope along the wall to aid the child while walking around the house.
- When preparing for play and learning, reduce noise, e.g., switch off the radio, mobile phones and the sound of the TV, and remove unnecessary objects from the area where the child is playing.

- Key to learning for children with visual impairments is using toys, learning materials and other objects of different textures, shapes, sizes and weights as tactile and kinaesthetic inputs (through which the child can feel and handle objects). For example, give the child pieces of cloth of different materials, such as jute, wool, cotton, and let her/him feel and match like objects/materials.
- Place learning materials and toys in a space that the child can reach easily.
- Where possible, use contrasting (i.e., light and dark) colours to enable a child with low vision to distinguish different areas, for example, doors from walls.
- Avoid glare as much as possible, by drawing curtains, pulling down window blinds or hanging a cloth at windows.
- Show large pictures if the child has low vision.

For children with speech and language impairments

- When trying to develop vocabulary, use words in conjunction with showing the related objects and pictures.
- Use lots of eye contact and gestures.
- Use simple language, especially when giving directions.
- Break down directions into single steps or explanations into small sentences, speaking slowly and clearly.
- Repeat directions or explanations.
- Frequently check for understanding by having the child repeat what was said or explain what was said to her/him.
- Be patient when the child is speaking; rushing her/him may result in frustration.
- Develop a procedure for the child to ask for help, e.g., showing pictures/using signs or cues.

For children with cognitive or intellectual impairments

- Prepare a flexible daily schedule that accommodates varied attention levels – some short activities and some longer – and then allow the children to take breaks if concentrating for too long.

For children with difficulty in social skills and self-regulation

- Use soothing materials, e.g., providing herbs like mint to smell, for a child who can become overstimulated or fatigued.
- Minimize distractions (e.g., switch off the radio, TV when not in use for learning) and reduce overstimulation (e.g., avoiding cartoons with a lot of noise).
- Use visual schedules with pictures/icons to demonstrate each step of activities.
- Provide an interesting and appealing range of sensory materials for learning, such as sand or water, as available in and around the home.

Activities of Daily Living

Mastering Activities of Daily Living (ADL), i.e., daily routine activities of getting dressed, washing, brushing teeth and eating, is crucial to the general well-being of children with disabilities (see Box 5). Parents/caregivers and early childhood educators must bear the responsibility jointly of teaching children these skills to encourage them to become independent and gain self-confidence. As children with disabilities, particularly those with Down syndrome, cerebral palsy and intellectual disabilities, learn differently from children without disabilities, specific strategies may be required to support them to acquire ADL skills.

Strategies for teaching ADL

Learning happens best through doing and being unafraid of making mistakes or a mess. Let children try out different skills and activities. It is important to focus first and foremost on the successful completion of the activity as this will build the child's confidence. After a few times of the child successfully completing a given task, she/he can be guided to doing the task more neatly or with fewer mistakes.

Copying someone else is an important part of learning, so parents/caregivers may need to describe what they are doing while doing an activity. The child can then guide the parent/caregiver through the same activity in the same way when it is her/his turn.

A variety of strategies is used to teach ADL skills. Some strategies that can be used at home to develop a child's ADL skills include (see Figure 3):

• Modelling

Modelling is a technique where learning occurs through observation and imitation. Parents/caregivers can model the behaviour for the child by demonstrating it, showing what has to be done and coaching her/him in copying this behaviour. This helps the child visualize what is required of her/him. For example, when teaching a child how to brush her/his teeth, as in the example given in Box 4, parents/caregivers/siblings can demonstrate the appropriate method by brushing their teeth along with the child.

• Task analysis

Task analysis is a process for breaking down any given task into its parts. For example, brushing teeth includes finding a toothbrush, toothpaste and cup. Then it involves applying toothpaste on the brush, brushing the bottom teeth, brushing the top teeth front and back, rinsing, cleaning the brush, and putting everything away.

Parents/caregivers can create visual guides to help their child with a disability to make sense of, remember and get comfortable with the steps involved in a task. These guides can be made by drawing each step or using cut-outs of photos, pictures from magazines and newspapers, as feasible for the parents/caregivers.

• Forward/backward chaining

This method involves breaking down a behaviour into steps to simplify the learning process. The child masters each step before progressing to the next one.

In forward chaining, the child begins an activity by completing the first step with guidance when necessary. Once the child has mastered the step completely, she/he then proceeds to learn the next step.

In backward chaining, after progressively completing the steps of an activity with guidance, the child is then asked to complete just the last

Box 5. Key Activities of Daily Living

Getting dressed

Start with undressing (it's easier to take things off than to put them on). Here are some helpful tips:

- Put young children's clothing away in a set place, which helps with tidiness and memory. Good organizational skills are essential for children who are blind or partially sighted so that they can keep track of where their belongings are.
- Choose clothing that is easy to put on and take off. Clothing with zippers is easier for young children with disabilities to use than buttons, but both skills are important.
- Clothes with large buttons are better than small ones to start with.
- Choose clothes that have obvious fronts and backs – collars, logos, fastenings and decorations help in this, as does locating the labels. Put a bow/ribbon on the front of a dress, for example, to help the child know that it is the front.
- As a child gets older, she/he may need support to select appropriate attire for different events and times of the day. Parents/caregivers may sew buttons of different shapes and colours inside garments, which can be used as a cue by the child to select appropriate attire. For example, to match a blue top with blue bottoms, sew buttons of same shape and colour on the inside of both garments. The parent/caregiver can ask the child, "What would you like to wear to sleep?" or "What would you like to wear to school?". This can help the child think and learn about appropriate clothing, for example, when to wear pyjamas and when to wear day clothes.
- To help a child learn to wear slippers/shoes on the correct foot, one strategy can be to paint half of an animal on each slipper, such that the two halves make the whole animal when the child wears the slippers/shoes correctly.
- Teach the child to tie shoelaces in stages, with support, using the hand-over-hand technique (e.g., parent's hands guiding the child's hands).

Washing

Bath time is a great opportunity for young children to learn about body parts as well as keeping clean.

- If the child is afraid of water (wet or unfamiliar substances can be upsetting for children who are blind or partially sighted, for example), prepare her/him in advance by letting her/him touch water in a mug and asking "is your hand touching the water?". Put some water on the child's back, while telling her/him what you are doing: "I am putting water on your back."
- Continue the process of bathing while pointing to different body parts and naming them. After completing the bathing process, dry the child while once again pointing to and naming different body parts.

Brushing teeth

Breaking this down into several smaller tasks may help. Some children don't like the sensation of the brush or the toothpaste in their mouths, so making up a song or a story that says what's about to happen could give them a more enjoyable experience (see Box 4 for details on teaching brushing).

Box 5 (continued)

Eating

Eating is an important daily living skill to teach the child. Mealtimes should be fun and are a good opportunity to develop social skills, although eating can be a difficult or stressful experience for some. These tips may help set some healthy eating habits:

- Prepare the eating area and protect the floor with a plastic sheet or newspaper.
- Start with finger feeding and then work from behind, at first guiding the child's hand from the dish to the mouth and then gradually reducing the parents'/caregivers' involvement.
- Choose plates and bowls with a rim at first that children can grasp easily and cups or mugs that do not easily tip over.

step. Once the child has mastered the last step, she/he will then be asked to complete the step before that one. This is repeated until all the steps have been mastered. One of the main reasons to utilize backward chaining is to provide a sense of accomplishment for the child by successfully completing the last step of the task.

- **Shaping**

Shaping involves breaking the activity into steps and providing positive reinforcement to the child for each step that she/he accomplishes, thereby shaping the behaviour until the child masters all the steps. Parents/caregivers can give reinforcement, for example, in the form of verbal praise, favourite toys, and finally remove the reinforcement after the child has learned the behaviour.

For instance, start toilet training by providing positive reinforcement for the first step (i.e., for indicating that the child wants to use the toilet), then afterwards for additional steps, such as going to the toilet, removing her/his pants, urinating, putting her/his pants back on and washing her/his hands.

- **Prompting**

At first, a child with a disability may need a lot of help in remembering and completing each step in a task properly. Prompting involves providing this help, including, for example,

physical, hand-over-hand help. As the child learns, parents/caregivers can start to 'fade' the prompts. First, they'll stop providing hand-over-hand help and instead provide only verbal prompts like "don't forget to rinse the toothbrush". Then, they'll start to fade even the verbal prompts. The child has learned the task when no prompts are required.

Different kinds of prompts include:

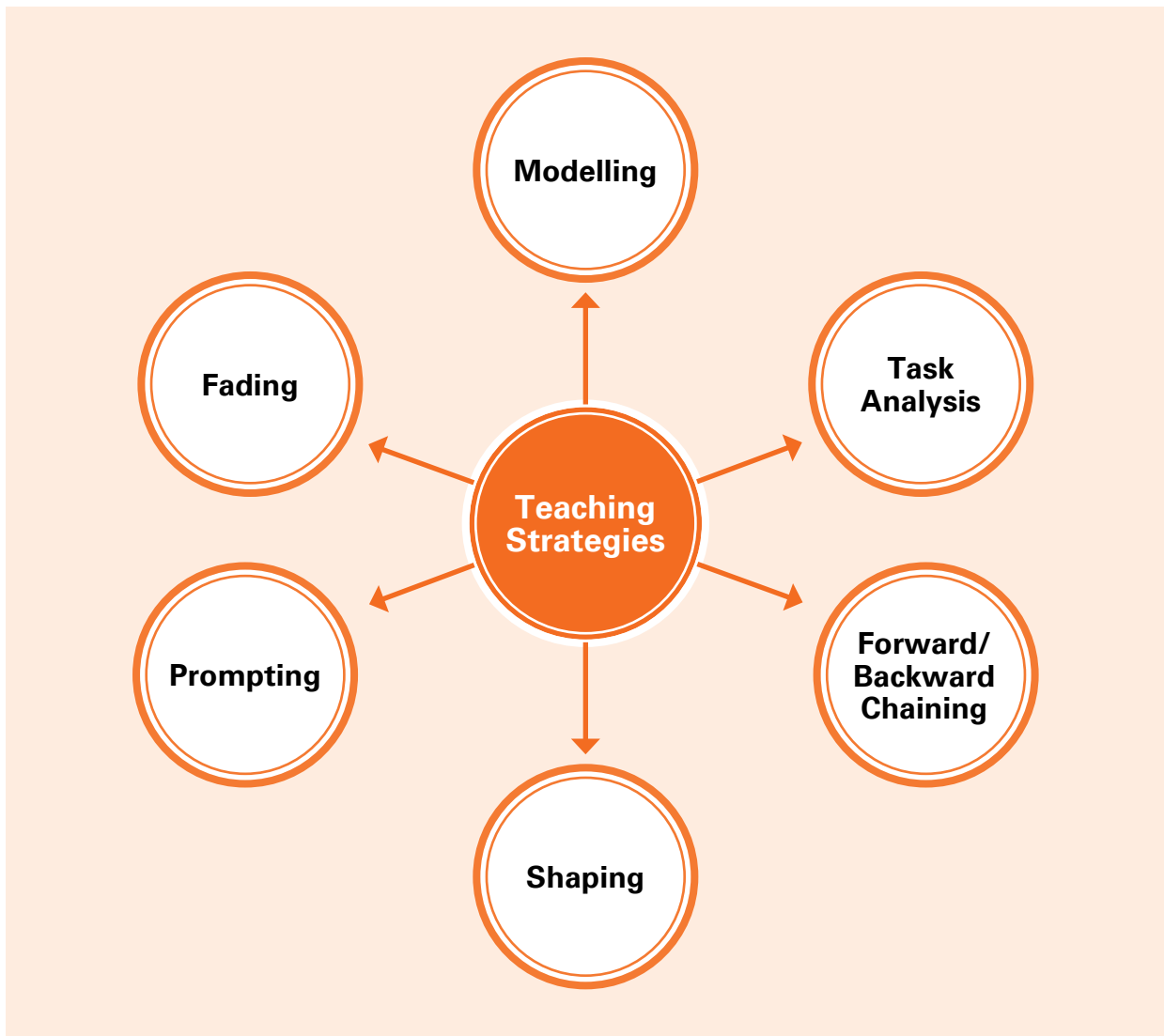
- **Verbal prompts**

Simplify instructions and provide reminders verbally. Things to note when using verbal prompts:

- Use words that are simple and easily understandable.
- Reduce the number of parts or steps in any instruction. For example, instead of saying "Go and pour a cup of water and drink it", first say "Go to the kitchen", then "take a cup from the shelf", then "bring the jug nearer to you", followed by "pour the water into the cup", and "put the jug back", and lastly "drink the water".
- Give instructions slowly.
- Repeat instructions when needed.

- **Visual aids**

Visual aids such as picture cards or drawings can be used as a prompt to help the child see

Figure 3. Teaching strategies to develop a child's Activities of Daily Living skills

and understand the different steps in a task and complete them. Visual aids can be used to supplement verbal cues. For example, steps for brushing teeth explained under modelling can be shown to the child through drawings.

- **Social stories**

Social stories are a step up from the visual guide described above. Rather than simply listing steps, parents/caregivers can use both pictures and words to describe an 'expected behaviour'.

Most social stories are customized to the individual. For example, "Every morning

after breakfast, Mohammed brushes his teeth. First, Mohammed knocks on the bathroom door. If no one is inside, he can go in" and so forth. Parents/caregivers can tell the social story about Mohammed as often as needed until the child knows it by heart and can complete all the steps without prompting.

- **Physical assistance**

Physical assistance is provided when both verbal and visual cues are inadequate. Hand-over-hand facilitation can be provided to guide the child physically. Hand-over-hand

facilitation is done by holding the child's hand and guiding her/him to perform the steps in an activity, e.g., while eating or using blocks.

- **Fading**

Fading is a training procedure in which physical assistance as well as verbal and visual prompts are gradually withdrawn. This is done to ensure the child can carry out activities without any supporting prompts or assistance. For example, verbal and visual prompts for Mohammed learning to brush his teeth may be removed once he can brush them independently.

Suggested home-based developmentally appropriate activities for children with disabilities

Family members, with the support of early childhood educators, can conduct several activities within their daily routines, using resources available at their home to promote learning and well-being of young children.

While selecting activities to conduct with the child, ensure that the activities are developmentally appropriate. Each child with disability is unique and has her/his own pattern and timing of development, interests, needs and assets, which must be taken into consideration, in addition to the barriers they face, when planning and conducting the activities.

Developmentally appropriate activities have the right degree of difficulty and challenge such that the child remains interested in doing them. They should neither be too difficult for the child, causing her/him to get frustrated and disheartened nor so easy that the child gets bored and does not acquire any new skills.

Parents/caregivers must also provide children with multiple and different experiences that will maximize their opportunities to better understand the people and world around them. The more ideas and memories that a child has about the way the world and relationships work, the easier it is to develop further ideas.

Parents/caregivers have a critical role in promoting conceptual development. For example, a child with deafblindness will have difficulty developing accurate ideas about the world unless she/he has at least one trusting, significant, meaningful relationship to serve as a centre from which to explore her/his immediate environment.

Table 1 provides some suggested home-based learning activities that parents/caregivers can carry out at home to promote the child's development in various domains. It also provides operational definitions of the domains. It is relevant to note that not all children with a specific disability will have exactly the same needs. Therefore, parents/caregivers and early childhood educators must choose and adapt the suggested activities based on the child's requirements.

Furthermore, while Table 1 outlines some activities against select domains of development, it is important to remember that the domains are interlinked and development in one domain affects the development in other domains as well. Therefore, while for ease of presentation, the activities have been categorized domain-wise and skill-wise, in reality, any activity will promote development in more than one domain although it may focus primarily on a given domain.

Table 1. Suggested developmentally appropriate activities for children with disabilities (aged 3 – 6 years/school entry)

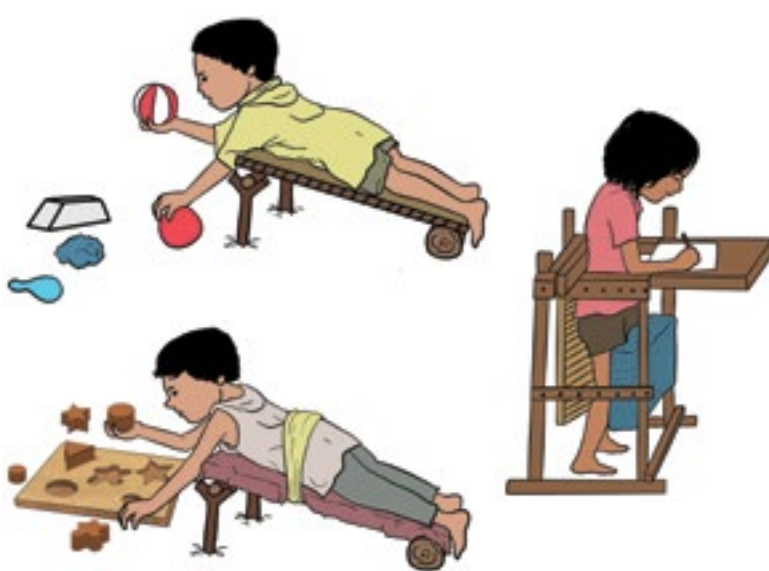
DOMAIN: GROSS MOTOR DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Head control</p> <p>Definition: Head control is the ability to keep the head and trunk in alignment.</p> <p>Head control provides a stable frame of reference for movement of other body parts.</p> <p>Significance: Head control is important for activities involving reaching or eye-hand coordination, such as feeding.</p>	<p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Therapeutic intervention is needed to improve head control and it is important that parents/caregivers of children with cerebral palsy are provided support through referrals to occupational therapists/physiotherapists. • Parents/caregivers should stimulate neck and upper body muscles of the child with cerebral palsy while she/he is lying on her/his side. Cushions and bolsters can be used to help the child lie on her/his side. • A range of postural supports, including floor wedges, seating systems and standing frames can be used, both to facilitate postures that encourage the development of head control and provide support in the absence of head control. 

Table 1 (continued)

DOMAIN: GROSS MOTOR DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Balance</p> <p>Definition: Balance is the ability of a child to keep a controlled position or posture during a specific task.</p> <p>Significance: Walking, climbing or even sitting all require the ability to balance. There are two types of balance – dynamic and static.</p> <p>Dynamic balance refers to the ability to stay in position during activities that require movement, such as walking.</p> <p>Static balance refers to the ability to maintain position during stationary tasks, such as standing or sitting.</p>	<p>Activities that may be helpful for children such as those with Down syndrome or cerebral palsy or difficulty with coordination and balance:</p> <ul style="list-style-type: none"> • Children with balance difficulties will benefit from support through occupational and physical therapy. • Parents/caregivers of children with cerebral palsy (ataxia) must aim to embed exercises to strengthen hand muscles and neck muscles towards developing balance in the daily routine. It is important to ensure that the therapy is turned into an enjoyable play activity using balance boards, such as putting a plank on two levelled boxes/pieces of wood that are stable and safe for the child to balance on. • Parents/caregivers should play physical games with children with Down syndrome so that they move around. For example, they can play games using balls or chasing games. • Exposure to lots of different movements like swinging and bouncing assist in vestibular system (balance in the inner ear) adaptation and growth for children with Down syndrome. • Parents/caregivers must aim to provide opportunities for children with dyspraxia to take forward and backward steps using steppers (e.g., using a wooden box made at home that the child can step up on and back down from) and by walking on a balance board and balance beams made from slanting wooden planks, logs, for instance.
<p>Sitting posture</p> <p>Significance: Independent sitting is an important milestone that can help children explore and play with objects more effectively and if not achieved, can delay development in other areas.</p>	<p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Special seating is key to supporting the learning of children with cerebral palsy. Adapted chairs are specially designed with the aim of finding a sitting position that gives the child an opportunity to control her/his arms and hands in an optimal way. • Parents/caregivers should be encouraged to use adapted seating while feeding or working with their child.



Table 1 (continued)


DOMAIN: GROSS MOTOR DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Walking</p> <p>Significance: Walking is more than just a milestone in motor development and is critical. Walking becomes the core of system-wide changes across many developing domains, such as perception, attention, memory, cognition and social behaviours that shift to accommodate the infant's new mode of moving through the world.</p>	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers should make sure the child feels secure and is encouraged to explore the environment, which is free from clutter. Since the child cannot see, she/he will need more stimulation in other areas, especially sound and touch, when beginning to reach towards things and move about. For example, the parent/caregiver can walk in front of the child ringing a bell. The parent/caregiver can also speak with the child and name objects in the environment, encouraging her/him to touch them. • Trailing is a technique that can be used with children with visual impairments to move around safely and orient themselves. The child can touch the wall nearest to her/him with the back of her/his fingers (e.g., knuckles of the index and middle fingers) as she/he walks, using the wall to guide to them. • Parents/caregivers can play games that will help the child gain confidence in moving and using her/his body, for example, make a swing by hanging a tyre using rope. A cloth belt can be used to hold the child in place so that she/he feels secure. • Parents/caregivers should ensure that the child walks on varied surfaces, i.e., bare floor, grass, even and uneven surfaces, with adult supervision. <p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Parents/caregivers can build outdoor parallel bars supported by logs/beams or indoor bars attached to a wall (in bamboo, wood or metal), which is height adjustable to support the child in walking. In addition, if required and available, walkers can aid the child in gaining independent mobility. 

Table 1 (continued)

DOMAIN: GROSS MOTOR DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Gross motor manipulative skills (reaching, grasping, manipulating objects)</p> <p>Definition: Manipulative skills are those where a child handles an object with their hand or another body part.</p> <p>Significance: These skills are basic to the development of fine motor skills as well as cognition.</p>	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> • Activities focused on making children with visual impairments reach for objects can develop their manipulative/grasping skills while at the same time also improve their understanding of their surroundings. • Parents/caregivers can use steel plates, spoons, keys for children to reach for and grasp, and which can also be banged together to make a sound as a fun way for them to play and develop these skills. • Through these activities, parents/caregivers can encourage their children to explore touching things around them to reduce their fear/anxiety while interacting with their external environment.
DOMAIN: FINE MOTOR DEVELOPMENT (includes small movements like holding a toy or using a crayon)	
<p>Hand preference</p> <p>Definition: Hand preference refers to the confident use of one hand over the other during tasks.</p> <p>Significance: Clear hand preference helps development of proficiency in fine motor skills.</p>	<p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Parents/caregivers can play with their children with a ball (e.g., throwing, catching) for them to move around and also develop stronger manipulative skills by improving their grasp. They can also play games such as tug of war when the children are in a stable posture with their back supported, feet on the ground, as well as hands free to hold/handle a rope or other objects. • Two-handed activities, wherein one hand is required for holding the object (i.e., helping hand) and the other undertakes the activity (i.e., doing hand), are important to carry out. This can include activities such as threading beads and opening jars and bottles. Children should be encouraged to carry out these activities with one dominant doing hand.

Table 1 (continued)

DOMAIN: FINE MOTOR DEVELOPMENT (includes small movements like holding a toy or using a crayon)	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Eye–hand coordination</p> <p>Definition: Coordinated control of hand and eye movement and the processing of visual input to guide reaching, grasping and other such movements.</p> <p>Significance: Acquisition of this skill is essential for everyday activities.</p>	<p>Activities that would be helpful to children such as those with visual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers can play with their children using jars/bottles and other containers to improve eye–hand coordination. <ul style="list-style-type: none"> ○ For example, the parent/caregiver can give the child a variety of unbreakable containers and bottles/jars of different sizes. ○ It is important to allow the child to feel the different shapes and sizes first. ○ The child then can be encouraged to close a few lids and bottle caps, guided to use her/his hands, while she/he becomes comfortable with using each of her/his hands. ○ It is important to use words such as ‘open’ and ‘close’, ‘bigger’, ‘smaller’ and describe the attributes of the objects for the child to gain an understanding of these concepts. • Scribbling, colouring, emptying jars/bottles/containers, buttoning or unbuttoning clothing will improve children’s coordination abilities and response towards sensory motor patterns. <hr/> <p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Parents/caregivers can use everyday objects, such as a wooden spoon and an upside-down saucepan to bang on, a plastic bottle with some rice in it as a rattle or silver foil to scrunch. • Using home implements such as tongs (which can be adapted) to pick up small balls and place into a jar is also a fun activity to do with children.
<p>Sensory processing</p> <p>Definition: Accurate registration, interpretation and response to sensory stimulation in the environment and one’s own body.</p>	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • Calming exercise: Counting to 10, taking the child away from the situation, listening to music, watching a calming video, reading a book or singing her/his favourite lullaby are a few activities that can help the child gradually improve receiving sensory messages and responding in a calm manner.

Table 1 (continued)

DOMAIN: PERCEPTUAL SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Significance: Sensory processing affects participation in daily life activities, routines and learning.</p>	<ul style="list-style-type: none"> • Understanding the signals/stimuli from the environment causing the child’s behaviour and redirecting (to the activities such as those noted above) is key. • Appropriate stimulation is necessary for the child. Practising time out activities and taking the child to a more private space and asking her/him to take several deep breaths and providing sensory materials, such as squeezing a ball of clay, to help her/him stay calm, or engaging in something she/he likes can be beneficial in managing an overwhelming situation for the child. • Developing a herb garden is beneficial as it is known to calm a child with autism. <p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> • Provide a touch encouraging environment where parents/ caregivers encourage children to use their hands to explore the world. • Parents/caregivers should watch/touch children’s hand and learn to understand or ‘read’ (i.e., understand) what they want by providing options. • Parents/caregivers can play turn-taking games – for example, the parent/caregiver can place the child’s hand on the parent’s/caregiver’s mouth and then blow. After which, the parent/caregiver can cue to the child to do the same by placing the parent’s/caregiver’s hand on her/his mouth and blowing. Allow opportunities for the child to initiate. Action rhymes, cradling and rocking and bouncing games can provide opportunities for stimulating the use of vision (for example, making eye contact), use of hearing (for example, by singing close to the child’s ear) where relevant, and for increasing tolerance of touch. • Parents/caregivers can make sensory boxes. For example, create tabletop boxes by using the children’s ingredient of choice (e.g., sand, water, rice, dry beans) and helping them get tactile stimulus by touching the sand or other material and naming each item they touch. • Activities such as finger painting are also good to engage in as children are exposed to new and different textures.

Table 1 (continued)

DOMAIN: COGNITIVE DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Memory</p> <p>Definition: Memory is the term given to the structures and processes involved in the storage and subsequent retrieval of information.</p> <p>Significance: It is a way for children to draw on their past experiences and stored information for use in the present.</p>	<p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Playing memory games with items that can be seen helps children with intellectual impairments. Parents/caregivers can undertake activities such as reading through picture cards. <hr/> <p>Activities that may be helpful for children such as those who are blind/deafblind:</p> <ul style="list-style-type: none"> • Parents/caregivers should encourage anticipation and memory by gesturing, signing and talking about things they and the children have experienced together. • Memory boxes with objects can be used as concrete references to help facilitate conversations about shared experiences. • Parents/caregivers can prepare a memory book with pictures and concrete/tactile objects the children associate with special occasions or events. A trip to a park might be remembered by a leaf and trip to the zoo by pictures of the animals the children liked best. Having a concrete object as a reference can enable and help children recollect and 'talk' about the shared experience.
<p>Attention span</p> <p>Definition: Attention is the ability to actively process specific information in the environment while tuning out other details.</p> <p>Significance: Attention is of great importance in the function of working memory. Lack of attention impedes learning across all domains.</p>	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • Parents/caregivers can plan activities that the children enjoy. They can follow a routine and provide positive reinforcement even when the children attend for a short time. • Developmentally appropriate activities will help children with autism develop concentration and focus. Parents/caregivers can undertake guided learning activities, such as thumb printing, vegetable printing, thread painting or clay modelling, to increase the children's attention span. • It is important to ensure children with autism have quiet spaces in which to play and learn so as to avoid external stimuli and distraction.

Table 1 (continued)

DOMAIN: COGNITIVE DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> • Parents/caregivers can draw attention of children with multisensory impairments using senses, such as smell and taste as well as spatial awareness. For example, when explaining the concept of mango, let the child feel the fruit, smell it and eat it. • During conversations, parents/caregivers can use opportunities that arise to establish mutual attention. They can draw the children’s attention using tactile cues and make sure that the children are alert to the stimuli. Once the parents/caregivers and children are focused on the same thing (a feeling, a movement, an object or a person), they can help the children explore and expand their focus of attention by using tactile modelling. This involves putting a child’s hand on a parent’s/caregiver’s hand to demonstrate an action. • Pointing is typically used to establish mutual attention with children who can see. Often, with children who are deafblind, mutual attention needs to be first established through touch. This is important even if the children have some residual vision. When exploring or touching an object, put the adult’s hand alongside the child’s or gently under the child’s last two fingers (not on top of her/his hand). This allows the parent/caregiver to explore with the child rather than force or direct her/his movements. <p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers can support the learning and development of children with intellectual impairments through play with real objects and symbolic play (playing with an object representing another real object, e.g., a toy car representing a real car). Drawing on areas of the children’s interest (such as a sport or toy that they like) can help engage them in the activities.

Table 1 (continued)

DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Numeracy skills</p> <p>Definition: Numeracy is the ability to recognize and apply maths concepts in all areas of life. Emergent numeracy skills include matching, sorting, noticing patterns, number concept and numbers.</p> <p>Matching</p> <p>Definition: Matching skills require children to display the ability to identify similarities and differences between objects.</p> <p>Significance: This early numeracy skill is a precursor to learning how to classify items and identify relationships between them.</p>	<p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> Parents/caregivers can teach matching using concrete objects. For instance, the children can be asked to pair socks or similar fruits/vegetables. Activities should start with objects that are easy to match, such as those with different primary colours. <hr/> <p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> Parents/caregivers can make their own matching games for the children by adapting the materials to match their physical and cognitive needs. <div data-bbox="782 961 1187 1234" data-label="Image"> </div> <ul style="list-style-type: none"> It is important to ensure that children with cerebral palsy are given manipulative objects to support hand function. For those with speech impairments, it is important to use an Augmentative Alternative Communication (AAC) device, for example a low-tech device such as AAC board, which can be created by sticking pictures to a board representing the children’s receptive vocabulary, e.g., hungry, water, toilet. The children can point to them to express themselves. <div data-bbox="729 1587 1238 1965" data-label="Image"> </div>

Table 1 (continued)

DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<p data-bbox="597 445 1362 512">Activities that may be helpful for children such as those with visual impairments:</p> <ul data-bbox="597 533 1362 638" style="list-style-type: none"> <li data-bbox="597 533 1362 638">• Parents/caregivers can provide children with visual impairments a ‘feely bag’, that is, a bag with objects they can match based on their texture, weight, or smell. <div data-bbox="709 688 1259 1129" style="text-align: center;">  </div> <ul data-bbox="597 1188 1362 1293" style="list-style-type: none"> <li data-bbox="597 1188 1362 1293">• Yarn/thread/string in different shapes can be glued on to cards or paper. The children can then feel the shapes on the cards and match cards with the same shapes. <div data-bbox="620 1325 1352 1864" style="display: flex; flex-wrap: wrap; justify-content: space-around;"> <div data-bbox="620 1325 940 1577" style="border: 1px solid black; padding: 5px; margin: 5px;"> <p data-bbox="636 1335 674 1377">1</p>  </div> <div data-bbox="1028 1325 1352 1577" style="border: 1px solid black; padding: 5px; margin: 5px;"> <p data-bbox="1044 1335 1082 1377">2</p>  </div> <div data-bbox="620 1612 940 1864" style="border: 1px solid black; padding: 5px; margin: 5px;"> <p data-bbox="636 1623 674 1665">3</p>  </div> <div data-bbox="1028 1612 1352 1864" style="border: 1px solid black; padding: 5px; margin: 5px;"> <p data-bbox="1044 1623 1082 1665">4</p>  </div> </div>

Table 1 (continued)


DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Sorting</p> <p>Definition: Sorting is a step further than matching as children group different objects with one or more attributes.</p> <p>Significance: Through sorting children learn to discriminate, which is critical for young children to acquire further literacy skills and mathematical understanding as well as for activities of daily life.</p> <p>The ability to sort using two or more attributes embodies higher order thinking and making a variety of different decisions. Early childhood educators may come across some children who may be able to match, but may not be able to sort.</p>	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • Basket full of fun: Parents/caregivers can take two boxes and ask the children to sort big and small bottles/containers or vegetables, such as onions and tomatoes. This activity can be furthered into sorting pieces of fabrics, such as silk, cotton, polyester, which feel different. • Similar to matching, start sorting activities by using concrete objects and ensure they are familiar to the children. Objects that have different textures, sizes, shapes and colours can be given to the children. This can be followed by sorting pictures of the same objects. • Cards with letters or numbers can also be given. If the children have difficulty in picking up the cards, attach a large pin to each card and give them a magnet attached to a string to fish for the card/s. This can be an enjoyable game for the entire family. <div style="text-align: center;">  </div> <p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Parents/caregivers can use adapted material that the children may be able to manipulate easily. • The children can be asked to point/gesture to cards or objects to demonstrate knowledge of sorting.

Table 1 (continued)

DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Classification</p> <p>Definition: The systematic arrangement in groups or categories according to established criteria about certain objects, colours or characteristics, such as tall–short, heavy–light.</p> <p>Significance: The ability to categorize information is useful for concept formation, language development and numeracy. Classification skills also allow children to apply logical thinking while categorizing everyday information.</p>	<p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> Similar to matching, parents/caregivers should initiate classification activities with concrete objects and ensure they are familiar to the children. <hr/> <p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> Parents/caregivers can create smell jars that the children can smell and classify into strong, mild or pungent smells. Taste jars can also be sorted and classified into salty, sweet or sour items. <hr/> <p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> Parents/caregivers can provide the children with items of varied textures that they can differentiate through touch and feel and classify into categories, such as soft, softer, softest and rough, rougher, roughest.
<p>Seriation</p> <p>Definition: Differentiating objects by size, length, height and positioning them accordingly. Seriation requires the ability to see differences and compare multiple objects using space perception.</p> <p>Significance: This skill is important for mathematical concept formation and activities for daily living.</p>	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> Parents/caregivers can present the children with familiar objects of different sizes and use language to indicate small, big, biggest. This can be done with common items, such as kitchen items, shoes, leaves and pencils. <hr/> <p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> Parents/caregivers can use concrete materials such as sticks of various lengths that the children can put in order from shortest to longest. Worksheets prepared for the children by the parents/caregivers must have a tactile element so that they can touch and feel, e.g., cut-outs of trees of different sizes outlined with glue.

Table 1 (continued)


DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Patterns and sequencing</p> <p>Definition: Ordering objects in simple patterns and sequences. Both visual memory and spatial perception are important for pattern making.</p> <p>Significance: The ability to recognize patterns supports maths skills. It helps children make predictions about what will come next in stories and during everyday routines.</p>	<p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Patterns are everywhere in the children’s surrounding – these can be pointed out to them. • Parents/caregivers can use concrete objects to make patterns and ask the children to copy the same, e.g., spoon, plate, glass. Occasionally the children can be given a task that requires them to remember patterns to give them practice to remember and then repeat the visual patterns. For example, laying out clothes in the same sequence as the day before. <hr/> <p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> • Tactile materials, such as egg trays and balls, in contrasting colours can be provided to the children to feel and copy the pattern. <div style="text-align: center;">  </div>
<p>One-to-one correspondence</p> <p>Definition: Involves the act of counting each object in a set once and only once with one touch per object.</p> <p>Significance: It is the foundation for number concept and establishes the principle for meaningful counting rather than rote counting.</p>	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> • Children can be given concrete objects (e.g., pebbles, potatoes) to count. • Once children have understood the concept of one-to-one correspondence through concrete objects, move to semi-concrete objects. For example, they can place pebbles or cut-outs of smiley faces on a given number of faces or flowers (or any other object) drawn on a piece of paper. <hr/> <p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers can place a series of plates and ask the children to put one sweet in each plate. They may also use the term ‘one sweet only’ to emphasize the concept.

Table 1 (continued)



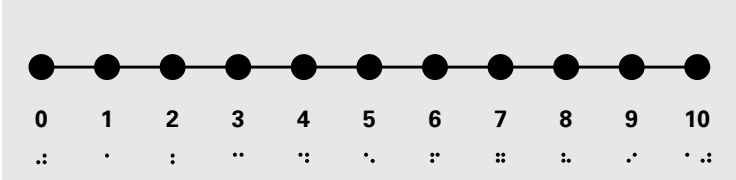
DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Counting and number concept</p> <p>Definition: Number concept refers to a general understanding of numbers as well as operations.</p> <p>Significance: Number sense is important for mathematical understanding to compute fluently and handle numerical information in daily life.</p>	<p>Activities that may be helpful for children such as those with visual impairments or who are deafblind:</p> <ul style="list-style-type: none"> Using home-made counting frames can help children build early math concepts and number operations.  <ul style="list-style-type: none"> Procuring tactile dice is useful not only to develop number concept, but also to play games.  <ul style="list-style-type: none"> Parents/caregivers can prepare a tactile number line using thread and buttons to provide children with experience of how numbers progress. They can also provide tactile number cards (with sandpaper/thread). 

Table 1 (continued)

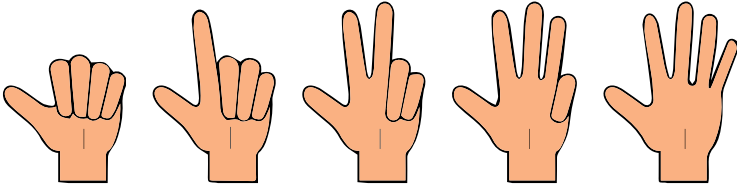
DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<p>Activities that may be helpful for children such as those with hearing impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers must aim to effectively provide not only the vocabulary to label objects, but also a language model for expressing concepts and ideas, using the children’s mode of communication. • Parents/caregivers can label objects in the environment with numbers and names. • Parents/caregivers can also use flashcards with numbers and matching objects. They can show the children a flash card with ‘1’ written on it and clap once, show flash card with numeral ‘2’ and clap twice. They can then ask the children to follow and do the same. Once the children have had enough practice, they can be asked to show ‘1’, ‘2’ and so on. • Parents/caregivers can teach the children to use their fingers to count. Fingers should be counted from the left and work to the right as shown below. This will help the children associate counting with their fingers with going from left to right on a page. <div style="text-align: center;">  <p>The image shows five sequential illustrations of a right hand, palm facing forward, demonstrating the process of counting from 1 to 5. In the first illustration, the thumb is extended. In the second, the index finger is extended. In the third, the index and middle fingers are extended. In the fourth, the index, middle, and ring fingers are extended. In the fifth, all five fingers are extended.</p> </div> <p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • Parents/caregivers can teach a song related to numbers so that the children learn the numbers by rote counting. Once they have learnt the numbers, the parents/caregivers can play a local or home-made musical instrument and ask the children to follow, e.g., “let’s bang on the pot 1 time”, “let’s shake it 2 times”. Wooden clappers or empty bottles or other containers filled with seeds can be made at home to serve as musical instruments. • Visual aids can also be used since children with autism learn best through pictographic and written cues, rather than verbal cues alone.

Table 1 (continued)

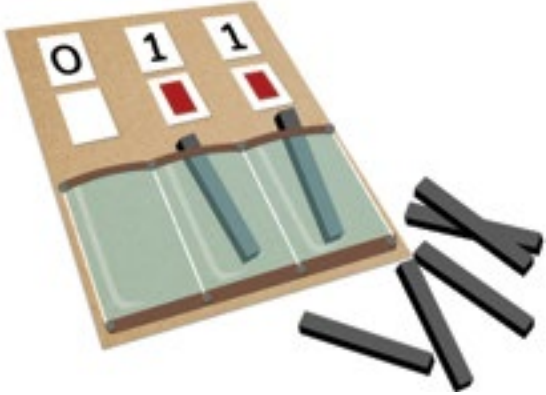
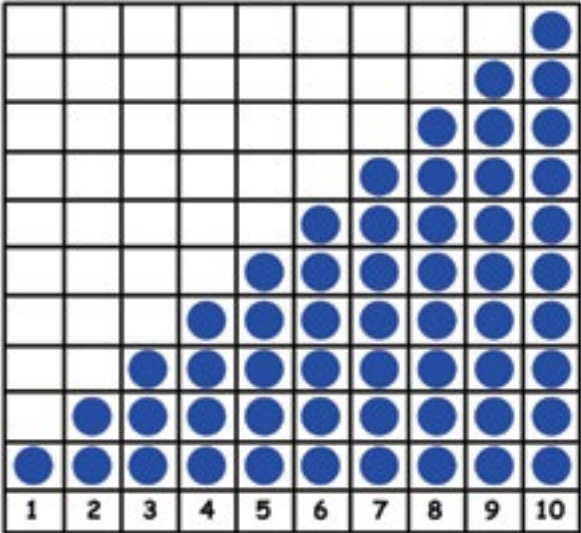
DOMAIN: EMERGENT NUMERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Since children are interested in counting things around them, parents/caregivers can start with concrete objects, such as windows in the room, eyes, noses. The children can be provided manipulatives to demonstrate they have understood the number concept. They can be asked, for example, to pick one pencil from a pack of pencils. • Simple cards can be made with different numbers written on them for a child to use to match the card with the similar number of objects.  <ul style="list-style-type: none"> • Children also can be provided adapted material on a flannel board to demonstrate their understanding that numerals represent a quantity. 

Table 1 (continued)

DOMAIN: LANGUAGE DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Receptive language</p> <p>Definition</p> <p>Receptive language is the ability to understand words and language. It includes the skills of:</p> <ul style="list-style-type: none"> ○ listening ○ attending ○ understanding/ following direction <p>Significance: Receptive language is important to communicate successfully. Without receptive language, children cannot develop expressive language.</p>	<p>Activities that may be helpful for children such as those with hearing impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers should be supported to communicate with their child using visual communication including sign language and gestures. • Visual reinforcement of communication: Parents/caregivers can use gestures or signs, along with verbal input, to make communication more meaningful. • Parallel talk: Parents/caregivers can describe the children’s action or activities, e.g., “you are building a tower”. • Hand cues: Children with hearing loss can be touched to alert them to the fact that someone is talking to them and that they need to pay attention and listen. Hand cues are also used to prompt the children to respond, either through imitation or spontaneous speech. • Reading picture books that interest the children while emphasizing the name of each item is important for them to develop language. It is important to use gestures or signs to act things out while reading to the children. Children can be asked where a particular object is after they have developed the needed vocabulary for the book. • Audio-assisted reading may also be used whereby the children are encouraged to read along with the audio recording or audio tape by moving their fingers along each line. <p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers can use routine activities (e.g., bathing, feeding, dressing) to build receptive language, for example by pointing to body parts while bathing, naming the food items while feeding, or looking at photographs/drawings of the children and family members related to a recent visit to the zoo or other outing. It is important to emphasize key words and ask the children to point to the relevant photo/drawing and repeat the word.

Table 1 (continued)

DOMAIN: LANGUAGE DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<ul style="list-style-type: none"> • Listening to sounds in the environment: Parents/caregivers can ask the children to close their eyes and listen to the sounds around them. After some time, the children can then be asked to open their eyes and say what sounds they heard around them. As the children respond, it is important to take cues to elaborate on the different sounds in the environment, for example barking of a dog. The activity can be extended to ask the direction from which the sound came. • Role play helps children with mild intellectual impairments to develop speech and non-verbal communication. Keep sentences simple when speaking to them. • To communicate with children with intellectual impairments, talk in short and simple sentences. • It is important not to mention too many details. • Parents/caregivers should talk slowly and ensure that the children understand them. Parents/caregivers should give them time to respond and try to understand even if they speak in single words. • Parents/caregivers can use visual supports such as objects, pictures and drawings corresponding to words. • It is important to encourage the children to communicate using speech and to give them enough time to indicate their needs before responding. <p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • It is important to encourage receptive language development in children with autism through activities such as singing rhymes and songs with actions, so that they will build vocabulary, ideas and concepts. • Oral storytelling: Storytelling helps promote oral language, literacy and communication skills. The development of oral language takes place before children develop literacy skills. Narrating oral stories to the children is important because oral language will help develop meaning for written language. • Parents/caregivers should keep language simple and short, provide clear instructions and emphasize key words that the children should take action on. It is important to be attentive when making conversation with children with autism and avoid other distractions (e.g., mobile phone, music, TV).

Table 1 (continued)

DOMAIN: LANGUAGE DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> Parents/caregivers can use hand-over-hand and hand-under-hand guidance, placing a hand above or under the child’s hand as she/he explores objects, make gestures or signs. Tactile signing: The child can be asked to place her/his hands on the signer’s hands to perceive the signs.
	<p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> Parents/caregivers may need to give special attention to their children with cerebral palsy to help them develop receptive language. They can play games, such as vocabulary building bingo (see the diagrams below), where a word is called out and children place a card or counter on the corresponding picture. These can be adapted on the basis of hand motor function, e.g., a child with poor hand function can do eye pointing to the picture when the word is called out. <div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <p>Picture Bingo</p> </div> <div style="text-align: center;"> <p>Word Bingo</p> </div> </div>

Table 1 (continued)

DOMAIN: LANGUAGE DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Expressive language</p> <p>Definition: Expressive language refers to use of words, sentences and gestures to convey meaning and messages to others. This includes:</p> <ul style="list-style-type: none"> ○ vocabulary ○ expression <p>Children may express by means other than speech, such as gesturing, signing or writing to express self-needs, feelings and sharing.</p> <p>Significance: Expressive language enables children to express their wants and needs, thoughts and ideas, argue a point of view, develop their use of language in writing and engage in successful interactions with others.</p>	<p>Activities that may be helpful for children such as those with hearing impairments:</p> <ul style="list-style-type: none"> • It is important that parents/caregivers catch their children’s attention and make eye contact while communicating using sign language and gestures as well as speech. • Parents/caregivers should use short concise sentences and encourage the children to express themselves through signing, gestures, drawings, sketches. <hr/> <p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • Parents/caregivers can talk to the children about what happened in their day and let them draw on a piece of paper stuck to a wall or point to pictures or verbalize their thoughts. They can be encouraged to use context-specific words and link words with actions. • Parents/caregivers can create opportunities for target response, for example, while having a meal, the children can be asked to say the word ‘water’ when they would like to drink some water. If they do not, then the parents/caregivers can model it and encourage them to say the same word. • It is important to play with the children frequently or teach any activity using a play-way method. Play helps develop vocabulary and articulation skills. • Parents/caregivers can use the Picture Exchange Communication System (PECS) to facilitate functional communication. PECS is a visual communication system that uses small photographs, line drawings or three-dimensional objects to represent words. PECS is used for a variety of communication purposes, including requesting something, expressing interest in doing certain activities as well as expressing emotions. • Parents/caregivers can develop a PECS communication book with spiral binding and Velcro strips. The children can then learn to use this to express their needs/emotions by pointing to the relevant pictures in it. They can be encouraged to use more than one picture to express in two/ three-word sentences to ask for needs as well as respond to questions. Parents/caregivers can expand vocabulary by introducing newer pictures contextually.

Table 1 (continued)

DOMAIN: LANGUAGE DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<ul style="list-style-type: none"> • Storytelling encourages children to use expressive language. This includes children’s use of signs, gestures, words to narrate an event or episode in a story.
	<p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • It is important to provide simple cards and a communication board for the children to communicate if they have no speech. Pictures of the children’s favourite things can be placed in different parts of the house or in a homemade book. The children can use them to ask for or to ‘talk’ about things.
	<p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> • Since children who are deafblind do not use conventional forms of expressive communication, such as speech, manual signs or gestures, parents/caregivers need to look for other indicators of their efforts to communicate. These may include affective responses: <ul style="list-style-type: none"> ○ Change in muscle tone, facial grimacing or smiling in response to an event. ○ Direct behaviours, such as reaching out for a toy of interest, pushing away a toy or reaching to be picked up. ○ Vocalizations such as grunts or open-vowel sounds. • Use object cues: Objects or parts of objects used in activities can be used to give information, make requests and provide feedback. Object cues should be used initially during activities and selected so that the children can easily make an association between an object and the activity it represents.
	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers should provide enjoyable reading time so that children with visual impairments can build their vocabulary and express themselves. • Parents/caregivers can play a game in which they and the children ask each other questions about a story they have read.

Table 1 (continued)

DOMAIN: EMERGENT LITERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Phonological awareness, phonics and word recognition</p> <p>Definition:</p> <p>Phonological/ phonemic awareness: Awareness of sounds in spoken words, as well as the ability to manipulate those sounds.</p> <p>Significance: Children who have phonemic awareness can hear, identify and manipulate the sounds in oral language. They are therefore well prepared to match letters to sounds to read as well as to spell.</p> <p>Phonics: The relationship between written and spoken letters and sounds.</p> <p>Significance: It is critical to develop the ability to decode the printed word, particularly unfamiliar words and text, and become independent readers</p> <p>Sight words: These are a collection of words that children recognize instantly and read them without sounding out the letters.</p> <p>Significance: Knowledge of sight words helps children become more fluent in reading as well as focus on comprehension rather than decoding.</p>	<p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers can make and provide experiences of varied environmental sounds to the children, such as bells, vehicles, plates and cups, animals, birds, in the living environment. • Parents/caregivers can use big picture books or talking books (if available) to help children notice and learn to recognize words and their sounds (phonemic awareness). In teaching phonemic awareness, reading is very important. • Identify beginning and ending sounds: Parents/caregivers can show a few pictures/ objects to the children and ask them to name the objects, drawing attention to the ‘beginning sound’. Once the children are familiar with the beginning sounds, focus on ending sounds. • Parents/caregivers can play games such as “I spy something starting with the sound ‘p’”. • If the children are facing difficulty in gaining phonemic awareness, sight word recognition can be supported, for example, by labelling things around the house <hr/> <p>Activities that may be helpful for children such as those with hearing impairments:</p> <ul style="list-style-type: none"> • If resources are available, parents/caregivers can support the learning of phonological awareness using sign language and emphasizing visual cues. • Lip reading: Parents/caregivers should gain the attention of the children before reading. Let them look at the parents’/ caregivers’ face when they talk. It is important to start with topics that interest the children, and to talk clearly and not shout or make exaggerated mouth movements. • Parents/caregivers can use objects as a visual cue, providing more than one mode of learning, such as incorporating sign language in addition to verbal instruction. For example, when bringing children’s attention to the initial sounds of words beginning with /c/, it might be helpful to show them a small toy cat or make the sign for cat to give them a concrete visual reminder of the sound being learned.

Table 1 (continued)

DOMAIN: EMERGENT LITERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<ul style="list-style-type: none"> It is beneficial for children with hearing impairments to develop structured content and instructional plans of phonics and word recognition. Activities that follow a sequence of instruction that progresses from easier to more difficult tasks and from larger to smaller units can be adapted by parents/caregivers taking support from their children’s special educator. For example: <ul style="list-style-type: none"> Rhyming words. Dividing sentences into words. Dividing words into syllables. Segmenting and blending onsets and rimes. Identifying beginning, medial and ending sounds in spoken words. Segmenting and blending individual sounds (phonemes) in spoken words. <p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> By singing songs, chanting rhymes, playing with words and listening to adults read word-play books, children with cerebral palsy will develop their phonemic awareness. In case a child with cerebral palsy does not have speech and/or bodily control, more creative ways are needed to help her/him demonstrate her/his knowledge and understanding. Instead of requiring the child to respond aloud, the parent/ caregiver can create response boards to allow her/him to point to her/his answers to demonstrate understanding of phonemic awareness. <div style="text-align: center;"> </div>

Table 1 (continued)

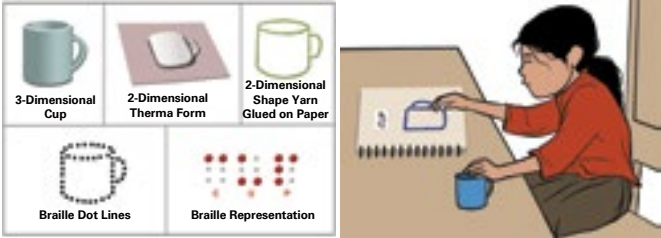
DOMAIN: EMERGENT LITERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> It is important to choose large print, colourful, tactile books (Braille where available) that relate to subjects the children with visual impairments are interested in and those that they can relate to. Real objects and tactile picture cards can then be presented to the children, corresponding to some of the key words that will raise phonemic awareness. 
<p>Print awareness</p> <p>Definition: An understanding that it is the print that reflects the words and not other parts of the book, like the pictures or the spaces between words.</p> <p>Print knowledge is knowing that print is read from left to right (in certain languages) and top to bottom.</p> <p>Significance: Print awareness is necessary for children to interact effectively with text.</p>	<p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> To build print awareness in children with visual impairments or deafblindness, parents/caregivers may use large print books or self-made books, which have been modified by adding texture and colour. Parents/caregivers can use tactile picture cards with raised printed sentences (e.g., using glue, yarn) so that the children can develop print knowledge. Moving their hand from top to bottom, left to right can actually help them learn faster about print awareness. Children with visual impairments can be encouraged to be actively engaged with reading and asked to find 'the top of the page', or help turn to the next page.
<p>Writing</p> <p>Definition: Handwriting involves many skills including eye–hand coordination, grasp, muscle memory and body control.</p> <p>Significance: Writing is an important means of communicating.</p>	<p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> Parents/caregivers can help the children become aware of how to write. For example, when making a list of things to do, let the children observe by putting their hands on the pen, Braille or stylus. Colouring: Parents/caregivers can create shapes with raised lines by using glue that is left to dry, or a yarn glued in place. The children can be asked to colour them in by rubbing a crayon over a screen so they feel it, or fill it with stickers that have fun tactile appeal, or gluing on buttons, seeds.

Table 1 (continued)

DOMAIN: EMERGENT LITERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<ul style="list-style-type: none"> • Scribbling: If the children have residual vision, they can scribble with crayons and markers. Textured material should be placed under the paper so that they feel the texture of the crayons. If the children have no sight, then they should be encouraged to write with a stylus or Braille. • Children with deafblindness will benefit from using particular writing tools, such as a felt tip pen that glides easier and is darker than a pencil. The pen or pencil can sometimes be modified by using a pencil grip. <p>Activities that may be helpful for children such as those with cerebral palsy:</p> <ul style="list-style-type: none"> • Parents/caregivers should strengthen the children’s muscle tone through activities such as scrunching, ripping and balling up paper. Daily activities such as watering plants at home with a spray bottle are useful as squeezing a spray bottle will help make the children’s hand muscles stronger. • In addition, based on the context, parents/caregivers may refer their child to an occupational therapist/physiotherapist who may provide writing aids. • Adapted pencils, such as pencils with sponges, triangle pencils, weighted pens, can be very helpful for the children. Putting rubber bands on thick crayons or pencils prevents slippage and aids grip. • Children with cerebral palsy need to be provided a comfortable position to be able to practise writing. • For some children, it is easier to write on a big sheet of paper. • To keep the paper in place, it may be helpful to tape it down to the tabletop. • Using different kinds of writing surfaces can make it easier for children to write. • For some children, a slanted surface is easier to use.

Table 1 (continued)

DOMAIN: EMERGENT LITERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<ul style="list-style-type: none"> It is important to use adapted writing tools and ensure that the children are provided adapted furniture for appropriate positioning. 
	<p>Activities that may be helpful for children such as those with Down syndrome:</p> <ul style="list-style-type: none"> Children with Down syndrome will benefit from using a squeeze ball and playing with play dough.  <ul style="list-style-type: none"> Parents/caregivers can also engage children with Down syndrome with certain board games to develop their pincer grasp. 

Table 1 (continued)


DOMAIN: EMERGENT LITERACY SKILLS	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> Parents/caregivers can use cut-out numbers made from sandpaper (the sandpaper should be smoothed so as not to hurt the children) for children to trace with their middle and index fingers and say the numbers. The children can be asked to repeat the action as this will help them develop the muscle and auditory memory for numbers. It is important to provide children with visual impairments writing tool/s, such as a felt tip pen that glides easier than a pencil and that is darker. The pen or pencil can also be modified by using a pencil grip.
DOMAIN: SOCIO-EMOTIONAL DEVELOPMENT	
<p>Identification and expression of feelings</p> <p>Significance: Identification and expression of feelings is important for communication and overall well-being.</p>	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> Parents/caregivers can create hand puppets/picture cards expressing different emotions and mimicking their expressions while playing with children with autism. Looking at facial expressions is a useful activity that can encourage the children to understand and recognize emotions. <div style="text-align: center;">  </div> <ul style="list-style-type: none"> Mirroring time: Parents/caregivers can touch their noses or stick out their tongues and have their children imitate them. They can make funny faces that the children can copy. Children with autism often have trouble reading expressions and interacting socially, so such activities can get them to observe others. Label emotions in natural contexts: When parents/caregivers are reading a book, watching a video or visiting friends with their children, they can point out emotions, e.g., "Look, she's smiling... she's happy!".

Table 1 (continued)

DOMAIN: SOCIO-EMOTIONAL DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
	<ul style="list-style-type: none"> • Social stories told through illustrations or comic strips that incorporate how the children feel and how others feel are very useful to explain social situations.
	<p>Activities that may be helpful for children such as those who are deafblind:</p> <ul style="list-style-type: none"> • Parents/caregivers can use actions and gestures along with songs to play act different emotions with the children. • Social skills must be taught in a kinaesthetic manner and parents/caregivers should allow the children to touch their face and understand how their face expresses different emotions (e.g., face muscles become tense when they are angry).
	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers may support the children recognize verbal cues such as tone of voice to identify emotions. They can label feelings and help the children identify their own emotions during the course of the day. • Role playing emotions with the children can help them identify emotions. For instance, the children can be asked to identify the emotion that is being conveyed. They can also be asked to choose a feeling they would like to act out or choose a tactile card with the relevant word or picture.
	<p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers need to provide their children with intellectual impairments opportunities to practise repeatedly proper social interactions in a step-by-step manner. They can use task analysis of the skill and role play and rehearsal to provide mastery. • Narrating stories: Using various characters and based on day-to-day situations can help the children experience various feelings and emotions and improve their emotional awareness. • Children’s toys (e.g., teddy bear/doll/soft toy) can be used to act out scenes. For example, hugging a teddy bear, then showing it falling and getting up and crying, while talking about the different emotions the teddy bear is feeling.

Table 1 (continued)

DOMAIN: SOCIO-EMOTIONAL DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Expression of needs</p> <p>Significance: Expression of needs is important for healthy relationships and well-being.</p>	<p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers can prepare picture cards depicting various needs, e.g., demand food when the children are hungry, wanting to go out to play. By illustrating and using them with the children daily, they can inspire the children to start indicating their physiological needs. Making these cards along with the children can be a fun activity. • Parents/caregivers can encourage the children to play Pictionary with the need cards and take turns to act out the word written on it. This playful activity would help the children learn more about expression and emotions and in turn to enhance expression of their needs.
	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • As children with autism may face difficulty in making themselves understood by others, it is important to support them with communicating choices. Many parts of their lives are necessarily highly structured and controlled by adults. The parents/caregivers can help their children make choices, for instance, by providing a menu of possible activities and tasks from which the children can choose.
	<p>Activities that may be helpful for children such as those with visual impairments:</p> <ul style="list-style-type: none"> • Parents/caregivers of children with visual impairments can describe a situation (e.g., “imagine you lost your book” or “you learned to do something you’ve always wanted to do”) and ask the children to talk about how they would feel and express their needs. Providing prompts in the initial stages may help the children to express their emotions and needs. • Parents/caregivers can discuss appropriate ways to express emotions and also talk about different ways to react to someone who is feeling a certain way.

Table 1 (continued)

DOMAIN: SOCIO-EMOTIONAL DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Managing feelings</p> <p>Significance: It is critical to manage feelings for emotional health and forming relationships.</p>	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • Introducing children with autism to coping skills is essential, especially when they feel overwhelmed. They need to be provided with a variety of coping skills, such as a tight hug, playing with their favourite toy or going for a walk. <hr/> <p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Using the same songs, objects, picture schedules, gestures or signs can help boost comprehension to ease a young child’s stress during transitions. For example, parents/ caregivers can sing a clean-up song; show a food item to a child who’s busy at play and walk to the table, saying “Time for lunch”; or make a handwashing gesture and say, “Time to wash hands”. • Visual prompts such as cards may be used to stop certain behaviours. • It is important to support children with intellectual impairments to manage their emotions by talking to them about feelings of anger and different strategies that they may adopt to cope with the emotion. For instance, the children can be taught deep breathing exercises and prompts, such as visual aids, may be used to remind them to use the strategy to aid the desired behaviour. • Parents/caregivers can teach replacement behaviours to children with intellectual impairments. For instance, when a child grabs another child’s toys, she/he can be taught to follow simple directions such as “Hands down”, “Fold your hands” or “Show me waiting hands”. • Gardening, laundering, laying the table with other siblings and mud play can help the children manage their feelings and regulate emotions.

Table 1 (continued)

DOMAIN: SOCIO-EMOTIONAL DEVELOPMENT	
Working definition and significance of skill/concept for early childhood development	Suggested home-based activities
<p>Relationships with adults and peers</p> <p>Significance: Healthy relationships are vital for developing strong social connections and for emotional well-being.</p>	<p>Activities that may be helpful for children such as those who have autism:</p> <ul style="list-style-type: none"> • Role play can be used to explain how a child with autism, for example, might say as a greeting to an adult who comes to the house or to make eye contact. The parent/caregiver can role play by acting as the guest and play act the greeting with the child a couple of times. The child needs to be encouraged to role play the target behaviour with the parent/caregiver after which feedback is provided to the child on how she/he performed. • Situations that involve a social problem can be role played with a possible solution, for example, having a piece of cake for two people and resolving it with both sharing the piece of cake. • Visual supports might help children with autism learn new skills or remember social skills they have already learned (e.g., turn taking). Visual cues can be used to support them, such as the sign for 'wait', a raised index finger to represent '1 minute' in conjunction with the word 'wait', or a visual representation of turn-taking such as straws in a plastic bottle. The children should be praised when they respond appropriately. <p>Activities that may be helpful for children such as those with intellectual impairments:</p> <ul style="list-style-type: none"> • Children with intellectual impairments can be taught specific skills, such as turn taking. It is important to use positive reinforcement by modelling turn taking while playing with them. Prompting the children to take turns and follow rules and praising them when they do will help them learn. • It is essential to take consent and notice the children's mood during any interactions with other adults apart from family members. • It is important to provide plenty of experiences to the children to interact with peers and learn the social skills they need.

Considerations when conducting home-based learning activities

- All young children learn from concrete experiences. Children with intellectual and developmental disabilities especially need more concrete experiences before moving on to abstract concepts. It is important to proceed from simple to complex and concrete to semi-concrete to abstract learning.
 - A multisensorial approach, which harnesses two or more senses, is an effective way to respond to varied assets, strengths and needs of learners with disabilities. This approach refers to learning activities that combine two or more sensory strategies for children to take in or express information. Since children have diverse needs, any given activity will not be effective for all children with a specific disability. It is important to differentiate the learning activities on the basis of a child's unique interest, needs and assets.
 - Parents/caregivers can identify the activities within daily life that can offer learning opportunities and present them in a focused way to stimulate the children's sensory system. They can involve the children in household chores and appreciate them for being helpful. Activities such as peeling boiled potatoes, shelling peas and stacking washed utensils, for example, are great fine motor activities and help teach concepts such as seriation and counting. The children can be a help at home that parents/caregivers can be proud of. The children too feel involved and contributing thus will raise their self-esteem.
 - It is important to match a child's assessment details with the daily routine of the family and then:
 - Identify the tasks in the routine that the child performs independently.
 - Identify the tasks for which the child needs partial or full support.
 - Note down the tasks the child can do when trained.
- These can become the training goals blended in the family's daily routine.
- It is important to let the children take the lead to get their maximum cooperation. When they feel that they are in control of the situation, the interest level is likely to be sustained.
 - Some children with disabilities, such as those with intellectual impairments, may not be able to generalize the concepts and may develop only splinter skills. In such cases, the children should not be pushed unnecessarily.
 - A domain is a broad area or dimension of development. There are many ways to organize development into domains. The social, emotional, linguistic, cognitive and physical domains were chosen for the continuum because they reflect areas of significance in the early years and are the most commonly used. Though presented separately, the five domains of children's development are interrelated and no one domain is more important than another.
 - There are several different types of cerebral palsy. These conditions are classified based on mobility limitations and affected body parts. Therefore, the planning and frequency of conducting the activities can be done along with a therapist or resource teacher, as per the context.
 - Practising skills and activities for head control or balancing for children with cerebral palsy may involve conducting exercises and sessions with a physiotherapist, occupational therapist or through family-centred intervention carried out by the family with their child at home.
 - Items used for conducting any activities with the children should be safe and made of non-toxic material.
 - Impairments are of various categories ranging from mild-moderate to severe. The severity and type of disability a child has will influence the focus of the intervention and the activities, including those for foundational learning and ADL. The levels of activities will change based

on the severity of the impairment. Hence the activity chart or routine can be created for the child with the support of a special educator or child development practitioner.

- Parents/caregivers of children with disabilities should consider visiting a dentist frequently and taking advice, especially on oral health management and damaged gum tissue.
- It is essential to teach the children about the concept of privacy and consent while teaching them skills like bathing, dressing or undressing.
- Parents/caregivers can decide the frequency and force of conducting the activities with the children, considering their ability to stretch or change sides or degree/level of the difficulties.
- Coping mechanisms among children with autism vary widely and it is important to make a list of things that seem to help children with autism calm down and relax.
- The activities suggested under perceptual skills in Table 1 also can be used with desired modification for children with low visual impairments or deaf blindness.
- Sensory integration therapy can be explored with the children's therapist if it has not been integrated into their routine. This therapy helps children with autism learn to use all their senses together – touch, smell, taste, sight and hearing – with improvement in repetitive behaviours.

Behavioural management

Children, including children with disabilities, may display challenging behaviours and do not always respond to the usual methods of discipline. This can include non-compliance to instruction; self-injurious behaviour such as hitting self; damage to people or property such as throwing objects, spitting; body rocking; talking to self; and other behaviours that are not appropriate to age, time and place. Learning acceptable and unacceptable behaviours are dependent on the kind of environment in which children grow.

• Promoting positive behaviour

A systematic plan is necessary for changing behaviour and parents/caregivers, as well as early childhood educators, need to be skilled in handling the children's environment to address the behaviour with appropriate intervention. Any behaviour intervention plan should be based on an understanding of the characteristics of the child with a disability, as well as knowledge of her/his strengths and needs.

A behaviour intervention plan is developed through a collaborative problem-solving process involving the early childhood educator and parents/caregivers, as well as other significant people in the child's life, including special educators, psychologists, classroom assistants and principals.

The major steps of the behavioural intervention process are:

- (i) identifying the challenging behaviour;
- (ii) identifying the function of the behaviour and contributing factors;
- (iii) identifying an alternative behaviour; and
- (iv) developing strategies for changing behaviour.

(i) Identifying the challenging behaviour

Parents/caregivers, with the support of the early childhood educator, need to identify and describe the behaviour in observable terms, including where and when it occurs, what usually happens before the behaviour occurs and the typical reactions of other people. They can determine if the behaviour actually poses a challenge:

- Is the behaviour potentially harmful to the child or others?
- Does it interfere with the child's learning or the learning of others?
- Does it result in negative reactions and/or avoidance by peers and adults?

Children may display more than one challenging behaviour. Expecting to change all behaviours may not be reasonable and priorities for intervention will need to be established.

(ii) Identifying the function of the behaviour and contributing factors

The function or purpose of a behaviour is not always obvious. After a child presents challenging behaviour, it may be beneficial to determine the function of (or reason behind) the behaviour.

- Escape: Does the child want to escape an environment, person or task?
- Attention: Does the child want to gain attention from peers or adults?
- Tangible: Does the child want a specific activity or item?
- Automatic: Is the behaviour inherently rewarding to the child? (For instance, some children with autism enjoy flapping their hands).

The process of collecting the information for a functional behavioural analysis involves:

- identifying antecedents (what happened just before the behaviour occurred, where the behaviour occurred and with whom the behaviour occurred);
- describing the behaviour; and
- identifying consequences (what happened after and as a result of the behaviour).

The information should be analysed to identify patterns, possible reinforcers and anything that may be triggering the behaviour. The assessment should include an analysis of the relationship between the challenging behaviour and the environmental conditions in which the behaviour occurs.

(iii) Identifying an alternative behaviour

Once the purpose of a behaviour has been determined, it is possible to identify an alternative, more appropriate behaviour that can serve the same function. For example, if a child pushes materials on to the floor to avoid a task that is too difficult, she/he may need to be taught another more acceptable way to get away from doing an activity that is connected

with feelings of failure, or better yet, be taught how to ask for assistance in an appropriate way. These alternative behaviours may not be in the student's repertoire. The focus of the behaviour intervention is instruction rather than discipline. The goal is to increase the student's use of an alternative, more appropriate means of achieving the same purpose.

The alternative behaviour is usually a more effective way to communicate or interact with other people and may be a more appropriate means of seeking sensory stimulation or an appropriate method for reducing anxiety (e.g., relaxation exercises, visual imagery, going to a quiet place). For instance, a student who bangs on the desk as a way of dealing with anxiety caused by uncomfortable proximity to other students can be taught to go to a prearranged quiet spot in the class as an alternative behaviour. The alternative behaviour may also involve using anger management and self-control techniques.

It should not be assumed that the student has the necessary skills to engage in the alternative behaviour. Systematic instruction and reinforcement are necessary.

Children with conditions such as hearing impairment, intellectual disability, cerebral palsy or autism may have difficulty to communicate in the same way as children without disabilities. This may leave the parents/caregivers trying to understand what the children need. Many a time, these children are unable to communicate their need or the adults around them fail to understand what they are trying to express. This leads to frustration in the children that may show up in challenging behaviour, such as throwing objects, screaming, injuring self or others.

It is important therefore that parents/caregivers and early childhood educators calmly identify what the children's need could be. Communication boards/diaries, keyrings of different colours, use of emojis and picture cards with symbols of praise can be of great help.

(iv) Developing strategies for changing behaviour

Challenging behaviours can often be reduced or eliminated by making changes in the environment. The assessment and analysis of the behaviour may indicate that it occurs within specific areas or during specific times, such as transitions. Sometimes the likelihood of the behaviour occurring can be minimized by making environmental accommodations. This suggestion does not mean that the entire classroom has to be changed for one student, but adjustments can be made depending on the student's individual needs.

Possible environmental adaptations include:

- removing distracting stimuli;
- decreasing sensory stimuli if feasible, e.g., noise from the outside;
- making changes in physical arrangements, such as seating;
- providing a clear and predictable schedule;
- alternating more difficult and demanding tasks with those that are easier and more enjoyable;
- providing choices; and
- providing access to favourite activities.

• Using positive strategies

Emphasizing the development of communication and positive behaviours in a predictable and rewarding environment can help reduce the frequency and severity of challenging behaviours. These strategies include:

- providing engaging, meaningful learning activities;
- allowing the child to make choices;
- pitching the learning activities at a level appropriate to the child;

- monitoring the child's response to the environment and adapting it to reduce the likelihood of anxiety responses before they happen; and
- reinforcing appropriate behaviour with reinforcements that are meaningful to the individual child.

When children engage in challenging behaviour, it may be useful to discuss the situation in a calm, assertive and even manner.

- Address the behaviour.
- Remind the child of the expectations in simple terms, with appropriate commands such as "pick up your toys" instead of "let us pick up the toys".
- Encourage the child to come up with her/his own solutions.
- Provide suggestions.
- If the challenging behaviour persists, follow through with logical consequences.

Further, it is important that early childhood educators and family members are consistent in employing behaviour management strategies so that children do not get mixed messages about what is acceptable or not acceptable.

Conclusion

While activities listed in this guidance note should work as a starting point for working with children with disabilities, we hope early childhood educators in collaboration with parents/caregivers will develop these further as they begin to implement them, while making use of resources available in their contexts.

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Annexes

Annex 1. Template for Individualized Education Plan (IEP)

Name of Child:	Date of Birth:	Class:	Start Date of IEP:		
Setting:	Name of Early Childhood Educator:		Resource Teacher/IE Coordinator:		
Profile of the child: Type of difficulty: Therapy/specialist services, if any: Assistive devices, if any: Basic needs: <ul style="list-style-type: none"> – Physiological (Any specific requirements for food, warmth, housing, etc., to be taken care of) – Safety (Any specific issues of physical or psychological protection to be taken care of) – Belonging (Child feels part of her/his family and class) – Esteem (Child receives respect, positive feedback from others and respect others and self) 			Photo		
Needs identified with parents/caregivers:					
Assets identified with parents/caregivers:					
Interests and preferences identified with parents/caregivers:					
Priorities/Long-term outcomes identified with parents/caregivers:					
Short-term targets/Outcomes identified with parents/caregivers:					
Adaptations required: Layout of room/furniture: Organization of equipment: Social factors/behaviour management:					
Expected progress of the child in relation to agreed learning outcomes	Strategies/ Details of intervention and how it will be implemented	Home-based actions agreed with families	Criteria for success	Areas of improvement and actions required	Date of review
	Method: Materials:	Method: Materials:		Existing difficulties: Actions required:	
	Method: Materials:	Method: Materials:		Existing difficulties: Actions required:	

Annex 2. Checklist for an effective home environment

Physical conditions and safety

The house is evenly lit and ventilated

Space is clean, tidy and inviting

Adequate space is available for the child, allowing for ease of movement. In case of small house, a small area is demarcated with safe boundaries

Safety protocols are followed (e.g., for COVID-19)

Layout accommodates the needs of the child

Required materials and resources are accessible to the child

Learning environment

Home environment provides play opportunities to the child

A space free of distractions, noise and clutter is available for the child to engage in learning activities

An Individualized Education Plan is prepared and tasks are agreed upon with the parents/caregivers

Play and learning materials are appropriate to the child's needs

Adaptations and accommodations have been made to suit the child's needs

Play and learning materials are safe, clean, non-toxic

A schedule has been created for/with the child

Blend of tasks is appropriate

Frequent, short breaks are given to the child to step away from learning tasks

Parents/caregivers engage with the child in her/his learning activities

Parents/caregivers participate in school meetings, virtually or in person, as the situation allows

Emotional well-being

There is good communication between parents/caregivers and child

Environment allows the child to feel secure

Child's independence is encouraged

Opportunities are offered to connect with peers and family members – either virtually or in person

Behaviour management

Any challenging behaviour is effectively managed

Motivators are in place

Both praise and reward are used and understood by the child

Reassurance is offered to the child

Annex 3. How parents/caregivers can promote well-being of children with disabilities at home

- Create a routine at home as changes in routines may confuse some children with disabilities.
- Make a daily schedule for your child using pictorial illustrations. Set timings to sleep and wake up, mealtimes and to study and play.
- Devote sufficient time with your child for learning/practising activities of daily life, such as brushing teeth, combing, dressing and undressing, bathing, as developmentally appropriate.
- Involve your child in household tasks, such as cooking, cleaning, gardening. Begin with simple tasks that your child can perform easily.
- Children with disabilities may need extra support to protect themselves in certain situations, for example in the context of COVID-19. Draw/illustrate safety instructions and place them around the house.
- Regularly follow cleanliness routines with your child. Model and train your child on how to wash her/his hands properly.
- Some young children with disabilities may find it difficult to follow instructions. Make a song/rhyme to demonstrate appropriate behaviours and ask them to imitate your actions.
- Continue with routine therapy/exercises with your child. Take guidance from your child's therapist, through phone or virtual sessions, if not feasible to meet the therapist in person.
- Reach out to other parents/caregivers with children with special needs and exchange tips that have helped you.
- Encourage your child to engage in at least one hour of adapted exercise according to her/his physical abilities.
- Remote learning can be challenging for some children with disabilities. Stay in touch with your child's teacher and make realistic learning goals for your child.
- Do not push your child excessively. In cases such as school closures for COVID-19, confinement to the home would require some adjustment. Some children may not cope as well as others and it is important to use learning aids, games, activities that your child enjoys.
- If your child exhibits behavioural or emotional issues, try to understand the message behind the behaviour and redirect the child to positive behaviours.
- Be patient, set boundaries and be consistent in implementing rules of behaviours.
- Engage the child in creative activities that allow her/him to express her/his emotions. Use feelings and emotions cards to discuss how the child and family members are feeling on a regular basis.
- In case a child has to be separated from the primary caregiver due to COVID-19 or illness, explain the situation in a simple manner and give assurance that she/he is safe and secure.

Supporting Learning and Well-Being of Young Children with Disabilities at Home



For further information

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