SUPPORTING CHILDREN’S LEARNING IN THE EARLY YEARS

Children ‘learn to talk, then talk to learn.’

(hanen.org)

Starting Early: Why it is so important?

- From birth to 5 years of age, children learn language by participating in back-and-forth interactions with the important adults in their lives.
- But if a child is communicating less than others his age, he’s unlikely to receive as much of this essential feedback. Because he isn’t talking, adults naturally communicate with him less, so he doesn’t get the helpful input he needs to build his language skills.
- Since children with delayed speech or language delays can’t participate fully during activities and conversations, they may fall even further behind if they are not provided with the help they need.
- Simply put, the earlier a child receives the help he needs, the better his language outcome will be.

Red flags for language delay

By 3-4 years, children should be

- Asking questions by 3 years of age.
- Using sentences (e.g., "I don’t want that" or "My truck is broken") by 3 years of age.
- Able to tell a simple story by 4 /5 years of age.

The top 10 assumptions about Early Speech and Language Development

1) Speaking “telegraphically” helps young children learn to talk.

►False

- Telegraphic speech involves using only content words with little or no grammar. For example, “Where coat?”], instead of “Where is the coat?”
- Research shows that telegraphic speech may hinder children’s learning of grammar and word meanings as it deprives them of the helpful cues and information that come from grammatical speech. For example, babies realise that words that end in ‘-ing’ are verbs, making it easier to figure out the word’s meaning.
- Try to use short, simple phrases or sentences with proper grammar.
2) Using “educational” products, such as DVDs or flashcards stimulates young children’s language development.

►False

- **Baby DVDs** – several DVDs geared towards infants and very young children have been marketed in recent years, with the aim of promoting babies’ development, including their language skills. However, the research on such DVDs to date has not provided evidence that these products produce better language skills. In fact, these DVDs may be the cause of somewhat smaller vocabularies in children who spend more time watching them.

- **Flashcards** - Learning a new word from a flashcard teaches a child to say a word in response to a picture. This, however, does not mean that the child will understand the full meaning of the word or how to use it appropriately in real-life situations. New vocabulary has to be learned in meaningful interactions during everyday life and repeated many times before becoming part of a child’s vocabulary.

3) Second- and third-born children are late to talk because their older siblings do the talking for them.

►False

- Several studies have shown that the language development and skills of first-born and later-born children are similar.

- In fact, some studies have shown superior skills in later-born children in the areas of pronoun use and conversation skills.

- So, while older siblings often interrupt and talk for their younger siblings, this does not seem to have a negative impact on the younger sibling’s development.

4) Boys talk later than girls.

►True

- It is true that boys produce their first words and sentences later than girls. However, these differences are only in terms of a matter of a few months.

- There is a normal range within which children acquire certain language milestones. “Girls tend to be on the earlier end, and boys on the later end, of this age range”, according to researchers Seyda Özçalskan and Susan Goldin-Meadow (2010). Therefore, boys are not actually delayed in their language development, just a little behind girls.

- So, if a young boy is lagging behind in his speech and language development, don’t assume that it’s because he’s a boy and that it’s perfectly normal. He may require some speech and language intervention.
5) More boys have language delays than girls.

► True

- There are more boys than girls with a variety of language difficulties.
- The incidence of language impairment is higher among boys than among girls, a ratio anywhere from 2:1 to 3:1.
- The incidence of Autism in boys is also higher, four times more common in boys than girls.

6) Twins are at greater risk for language delay.

► True

In a review of the research regarding the development of twins, Karen Thorpe summarized the following in her 2006 article:

- Twins, particularly male twins, have higher risk of language delay.
- Language delay is usually mild and it seems to reduce by middle childhood.
- There is great variation in language scores among twins.

Therefore, while not all twins have language delays, they are at greater risk for language delay.

7) Late talking children, who are otherwise developing normally, always “catch up” to other children their age.

(A “Late Talker” is a toddler under 30 months who has a small vocabulary for his or her age, but is developing typically otherwise.)

► False

- Research indicates that approximately 40-50% of children who are late to talk (who have typical skills in other areas) do not catch up on their own.
- Even when late talkers appear to catch up to other children their age, they are still at greater risk for difficulties with reading.
- Therefore, if you are concerned about a toddler’s language development, don’t listen to people who tell you to “wait and see”.

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8) Learning two languages at the same time (bilingualism) causes language delays in young children.

►False

- Children learning two languages at the same time will go through the same developmental patterns in both of their languages and at roughly the same time as children learning one language.

- Sometimes young children learning two languages mix words or grammar from their two languages, known as “code mixing” or “code switching”. This is very normal and does not indicate that the child is having difficulty with language learning.

- There may actually be benefits from bilingual language learning, as children who are fluent in two languages have strengths in “metalinguistic skills” (the ability to think about language), as well as in cognitive skills, such as attention.

Tips for parents/teachers of young children who communicate without words

- sing songs with the child and build in opportunities for him to take turns
  - sing a new song the same way a few times so the child learns the song and its ‘high point’. High points are the most interesting parts of a song. In ‘row, row, row your boat’, the high points are the rocking back and forth while you and the child sit on the floor, holding outstretched hands, and saying the last word after a long pause – i.e., ‘scream’.
  - Once the child is familiar with the song, pause before a high point and wait for him to respond.
  - To take his turn during songs, the child may wriggle, make a sound, look at you, point to something or perform an action. Accept anything as his turn and then continue immediately. The most important thing is that he takes a turn and has fun while doing

Tips for parents/teachers of young children who have just started talking

- Use many different kinds of words, not just the names of things – nouns, verbs, adjectives, prepositions, feelings…

- The child needs to learn a variety of words types to talk in short sentences

- Repeat these words and make them stand out when you use them by exaggerating your intonation and slowing down a bit.
  e.g. “Mummy is very TIRED (yawn). I must go to bed because I need to have a good SLEEP. Then I won’t be so TIRED.”
A tip for parents/teachers of young children who talk in sentences

- Expand your child’s vocabulary by introducing a new word to a daily routine.

  For example, if you want to help a child learn the word “lukewarm”, you can say, “The bath water is lukewarm – it is not too hot, just a little warm.”

  Repeat the word every time you perform that routine.

  Then plan how to generalise the word in other situations. For example, “I like my tea to be hot. Lukewarm tea is not hot enough and it does not taste good.”

How teachers influence children’s language

There are many ways teachers shape children’s language growth in preschool classrooms and these include:

- Using a lot of language throughout the day
- Using a wide variety of words
- Expanding on the things children say
- Explaining new concepts and challenging their thinking
- Reading books and having discussions about the story and characters
- Asking questions and making comments
- Encouraging children to have back-and-forth conversations

Classroom conversations matter

Researchers found that children who participated in more conversations during preschool had bigger vocabularies when they were in kindergarten. This mattered more than the amount of language the children heard everyday or the concepts they were taught. Being part of back-and-forth conversations with teachers and other children mattered most when it came to their vocabulary one year later.

Teachers encouraged conversations by doing the following:

- Being warm and responsive when children attempted to start a conversation
- Waiting for the children to communicate (instead of taking over the conversation) and looking at them expectantly to encourage the children to talk and to give them a little clue that it was their turn to talk
- Speaking slowly and not rushing the conversation
- Asking open-ended questions that encourage conversation (instead of questions that only encourage one-word answers)
- Helping children have conversations with other children
Teachers need:

- to sit down with the children, at their level, and encourage them to talk about their interests
- to give children an opportunity to express themselves by waiting for them, and then take back-and-forth turns with them during the conversation
- not to monopolize conversations
- to listen carefully and to respond with warmth and enthusiasm
- to keep the conversation going by asking open-ended, thought-provoking questions
- to create an environment and to set up activities where children are encouraged to talk to each other

The Four S’s

- Say less.
- Stress.
- Go Slow.
- Show.

Then Repeat, Repeat, Repeat.
Preparing pre-schoolers for school talk

It is never too early to have conversations with your child

- It’s not enough for children to just hear lots of words – children need to have many **back-and-forth conversations** with their parents throughout the day in order to learn language.
- Having a back-and-forth conversation with a child may seem like a small thing, but it turns out it’s **everything when it comes to helping them learn language**.
- A recent study showed that children who heard more words, had more conversations with their parents, had better language skills ten years later.
- Even babies can have back-and-forth conversations with their parents – by taking turns back-and-forth they are having a conversation.
- A child can start a conversation by:
  - Looking at you;
  - Pointing to something;
  - Making a sound;
  - Getting your attention with an action or gesture;
  - Using words.
- Continue the conversation by responding – **SAY WHAT THE CHILD WOULD IF HE COULDN’T**.
- The best thing about high quality interactions is that they’re most likely to happen during everyday situations like having a bath, walking to the park, or getting ready for bed.

Build your child’s vocabulary

Did you know that:

- A child’s vocabulary growth is directly linked to his or her overall school achievement?
- The size of a child’s vocabulary in kindergarten predicts his ability to learn to read.
- The more words a child knows, the more information the child has access to.
- Having a large vocabulary helps children think and learn about the world.

How to help a child learn new words

Here are some tips to keep in mind when modelling new vocabulary to a child:

- **Follow the child’s lead** – If you talk about what interests the child, it is more likely the child will pay attention and learn a new word. If the child is interested in playing with cars, you can model words like “push”, “beep beep”, or “fast” with a young child or more complicated words like “mechanic”, “speed”, or “traffic” with a toddler. You can provide explanations for preschoolers like “he needs to get a new tire because his tire is flat”, talk about events in the past such as “remember when we had to take our car in to be repaired?”, or events that will happen in the future such as “Our car is dirty. Maybe...
“Children need to hear a word several times before they start to use it” – Children’s understanding of words precedes their use of words. So, they will understand far more words than they can actually say. If you repeat words for the child on different occasions, it will give him more opportunities to hear and learn new words.

“Don’t bombard the child with words” – Just because quantity is important at some stages of development, this doesn’t mean that you should shower your child with constant talk. You should aim for a balanced conversation between you and your child – you say something, then your child says or does something, and so on. It is important to *wait* after you say something so you give your child a chance to respond in his own way.

“Help the child understand what a new word means” – By giving details about new words or explaining what words means, you build your child’s understanding of new words. For example, if you are playing with cars and introduce the word “passenger”, you might say something like “a passenger is someone who rides in a car or a bus or a train. A passenger goes for the ride but doesn’t drive the car or the bus.” Relating new words to a child’s personal experiences also helps him connect with new words. For example, if you are talking about the word “nervous,” you might say something like “Remember when you started preschool – you felt nervous. But eventually when you were more comfortable there, you didn’t feel nervous anymore.”

“Actions can speak louder than words” – If you accompany your words with actions, gestures, or facial expressions, it will help the child understand the meaning of the words. For example, when modelling the word “weary”, you could do a sleeping action (hands under your head) or yawn so that the child understands what the word means. Your voice can also add meaning to a word. For example, if you say the word “frightened” or “terrified” with a shaky voice that sounds like you are scared, it will help the child understand what you mean.

The bottom line… it’s not just *how much* you say, but also *what* you say and *how you say it* that makes a difference for your child’s vocabulary growth.

Keeping one step ahead of your child will promote his vocabulary skills, and also set him on the path for success in school.

**Can children with language impairments learn two languages?**

- “My child has been exposed to two languages since birth. Will this make my child’s language delay even worse?”
- “Can I introduce a second language to my child? He already has a delay in his first language.”
- “Should I stop speaking my home language to my child?”
• **simultaneous bilinguals**: children who acquire two languages before the age of three
• **sequential bilinguals**: children who learn a second language after the first language is well-established (generally after the age of three).

To date, studies regarding simultaneous bilingual children with a variety of language difficulties show that these children **do not have any extra delay or difficulties** than monolingual children with similar language difficulties.

**Parents should be encouraged to communicate with their children in their home language**, and that professionals working with the child should support the family’s home language.

Children with language impairment are frequently directed towards monolingual school options. However, the research to date (albeit limited) indicates that **children with language difficulties may do just as well in bilingual education settings** as in monolingual settings. Whether learning one language or two, children with language impairment need extra support with language learning.

> “Evidence on children with specific language impairment, admittedly rather limited at this time, suggests that...these children can acquire functional competence in two languages at the same time, within the limits of their impairment. Therefore, children with specific language impairment living in families where knowing two, or more, languages are useful and important, should be given every opportunity to acquire two languages”.

Dr. Genesee (2009) goes on to explain that:

> “bilingual children need continuous and regular exposure to both languages to ensure their complete acquisition”

and that:

> “special consideration should be given to minority languages. It is advisable to provide more exposure to minority than majority languages in the home to offset the lack of exposure to these languages in the community...”.
Occupational Therapy

What is Sensory processing disorder or Sensory Integration?

Sensory processing (sometimes called "sensory integration" or SI) is a term that refers to the way the nervous system receives messages from the senses and turns them into appropriate motor and behavioural responses. Whether you are biting into a hamburger, riding a bicycle, or reading a book, your successful completion of the activity requires processing sensation or "sensory integration."

Sensory integration is the organisation of sensation for use. Our senses give information about the physical conditions of our body and the environment around us. Sensations flow into the brain like streams flowing into a lake.

The brain must organise all of these sensations if a person is to move and learn and behave normally. The brain locates, sorts and order sensations somewhat as a traffic policeman directs moving cars.

When sensations flow in a well organised or integrated manner, the brain can use these sensations to form perceptions, behaviours and learning.

Sensory Processing Disorder (SPD, formerly known as "sensory integration dysfunction") is a condition that exists when sensory signals don't get organised into appropriate responses. Pioneering occupational therapist and neuroscientist A. Jean Ayres, likened SPD to a neurological "traffic jam" that prevents certain parts of the brain from receiving the information needed to interpret sensory information correctly. A person with SPD finds it difficult to process and act upon information received through the senses, which creates challenges in performing countless everyday tasks. Motor clumsiness, behavioural problems, anxiety, depression, school failure, and other impacts may result if the disorder is not treated effectively.
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Sensory experiences include touch, movement (proprioception), body awareness, sight, sound, smell, taste, and the pull of gravity (vestibular). Distinguishing between these is the process of sensory integration (SI). While the process of SI occurs automatically and without effort for most, for some the process is inefficient. Extensive effort and attention are required in these individuals for SI to occur, without a guarantee of it being accomplished. When this happens, goals are not easily completed, resulting in sensory integration disorder (SID).

The normal process of SI begins before birth and continues throughout life, with the majority of SI development occurring before the early teenage years. The ability for SI to become more refined and effective coincides with the aging process as it determines how well motor and speech skills, and emotional stability develop.

What are our senses?

Auditory: investigates how the brain responds to sound
Visual: examines how the brain responds to vision
Gustatory/Taste: the brain’s response to various tastes
Olfactory/Smell: the brain’s response to information obtained through smell
Tactile/Touch: considers the response to tactile stimuli
Proprioception: The proprioceptive system gives us information about our body position and movement.
Vestibular: The vestibular system engages in a number of reflex pathways that are responsible for making compensatory movements and adjustments in body position. It also engages pathways that project to the cortex to provide perceptions of gravity and movement (balance).

Strategies and Ideas for Sensory Processing Disorder

The following are basic strategies which can be utilised with children exhibiting sensory processing difficulties however please note the professional report (occupational therapist) and their recommendations according to the child’s needs are to be implemented

Sensory Diet, What is a sensory diet?

 réseau* Just as a child needs food throughout the course of the day, he/she needs sensory input, and opportunities for getting away from stimulation, spread out over the whole day. A “sensory diet” is a carefully designed, personalised activity plan that provides the sensory input a person needs to stay focused and organised throughout the day. In the same way that you jiggle your knee or chew gum to stay awake or soak in a hot tub to unwind, children need to engage in stabilizing, focusing activities, too.

 réseau* Arousal is the ability to attend, concentrate and perform tasks in a manner suitable to the situational demands. Just like our body needs food to operate, so does our brain. The food for our brain however is provided through our senses. Arousal depends on the variety of ‘food’ the brain is being fed.

 réseau* Our level of arousal and concentration varies, depending on the sensory input (or sensory food) we receive. Sometimes we aren’t receiving enough input so we begin to fall asleep. Other times we receive too much input and are very active. Sometimes we are being active to increase the amount of input. The challenge however is to find the input that will put us at ‘just right.’

 réseau* A balanced sensory diet is like a fitness plan. It will enhance every child’s ability to function smoothly. Similar to snacks, some sensory based activities might change our mood or state of
alertness for short periods of time. Be being aware of the activities that can alter our arousal level we can adjust it to ‘just right’

Example of different arousal levels

Each child has a unique set of sensory needs. Generally, a child whose nervous system is causing her to be hyperactive needs more calming input, while the child who is more underactive or sluggish needs more arousing input. A qualified paediatric occupational therapist can use her advanced training and evaluation skills to develop a good sensory diet for your child. However, it’s up to the parents, teachers, LSE or other professionals involved with the child to implement it every day.

The effects of a sensory diet are usually immediate AND cumulative. Activities that perk up the child or calm him down are not only effective in the moment; they actually help to restructure the child’s nervous system over time so that he/she is better able to:

- Tolerate sensations and situations he/she finds challenging
- Regulate his/her alertness and increase his/her attention span
- Limit sensory seeking and sensory avoiding behaviours
- Handle transitions with less stress.

Examples of strategies

**Alerting (for student with low level of arousal)**

- Crunching: dry cereal, popcorn, chips, crackers, nuts, pretzels, carrots, celery, apples or ice cubes.

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wash face with cold water

Bouncing on a therapy ball

Sitting on a moveable surface

Jumping up and down on a trampoline

Rocking on hands and knees

Rolling inside barrel

Loud, fast paced, rhythmic music

Bright Lighting

Spinning (in place, sit and spin, office chair, merry go round or tire swing). Allow for about 15 revolutions in one direction, take a few seconds and then spin the other direction. (It is very important to monitor spinning activities and ask child's permission before spinning).

Walking on uneven surfaces to get to and from places in the classroom by using cushions or even a long inflatable raft on the floor to walk over. Outside encourage walking on grass, sand or a ‘clatter bridge’ on the playground.

Taking frequent breaks during more difficult tasks that require sustained attention (marching, hopping, skipping, jumping and running in place).

Encouraging an active recess playtime with swinging, running, sliding and climbing.

Playing with messy textures, such as hand or feet painting.

Playing games blindfolded, such as: can you feel it--hide small squishy bugs in bean box and have kids find them or show them a car, coin or toy and ask them to find the one that matches in the bean box.

Dance-Freeze to music.

Adult affect (tone of voice, facial expression) is high, happy, moving faster, a lot of praise, higher voice that is sing-song “Oh Wow Ben!! You really are a good jumper!”.

Labelling movement to encourage movement “You are bouncing!”.

Hanging by arms from monkey bars with supervision then dropping to ground with supervision.

Games like tug of war, or hot potato with weighted ball.

A cool classroom is alerting.

Providing activities to increase intensity, frequency, or duration of sensory experiences.

Providing appropriate channels for needed activity and intensifying sensory aspects of task and context, such as: Alternate active and passive activities in schedule.

Providing socially appropriate outlets for sensory needs, such as helping to run errands, collecting art supplies, moving chairs and desks, and helping to clean tables.

Planning activities that require more sequencing after recess or physical education classes so that movement will stimulate the thinking centres of the brain.
Calming (for students with high level of arousal)

Never discipline a “sensory seeker” by taking away break time/PE, this will only lead to intensifying random movements, fidgeting and outbursts.

✔️ Sucking: a hard candy, frozen fruit bar or spoonful of peanut butter
✔️ Sucking thick liquids through a straw
✔️ Drinking from a sports bottle
✔️ Pushing against walls with the hands, shoulders, back, buttocks and head
✔️ Rocking swaying or swinging slowly back and forth
✔️ Cuddling or back rubbing
✔️ Taking a warm bath
✔️ Soft voice
✔️ Warmth – hot water bottle, heated rice pack.
✔️ Rubbing out whiteboard work/running errands to/for other teachers is an excellent strategy for extra movement.
✔️ A few easily accessible squeeze toys can be useful for children who like to fiddle with something in his/her hand. (Toys such as balloons filled with rice, soft squash balls, ‘dog’ tags or koosh balls).
✔️ Hanging by the arms on the monkey bars for 20 – 30 seconds at a time.
✔️ Pushing/carrying heavy objects i.e. books or desks or against a wall.
✔️ Carrying back packs weighted with books. This should be for 15 – 20 minutes at a time with an hour or two in between.
✔️ A reading corner with a bean bag makes a great place to escape from too much stimulation and get ready for more focussed work. (They may enjoy reading or sitting under it more than on top of it).
✔️ Approach from the front to warn the child that touch is coming.
✔️ Firm pressure to shoulder at back is better than a gentle touch.
✔️ The child’s desk should be out of the way of traffic towards end of the room so that the child has a good view of those approaching.
✔️ Put the child “in charge of” back of line, ensure back of line is not viewed as punishment but place of worth.
✔️ Sit at front of class with less distraction or in quiet area when possible.
✔️ Diming or turning out lights and use natural light from windows.
✔️ Sitting on seat cushion (can be alerting depending on child).
✔️ Giving a child a bear hug, cuddling or back rub.

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Sucking on a mouth chewy, frozen fruit bar.

Wheel barrow walking (give support under child’s thighs, shoulders slightly bent and fingertip face forward).

Crab walking and balancing bean bags on belly. Tell child to keep bottom up off the floor.

Minimizing extraneous stimuli (noise, visual, lots of kids in one place, etc.) in environment, especially during tasks that are difficult for the child already.

Providing separate or structured spaces that prevent the child from experiencing a lot of unpredictable touch (carpet square for each child at circle, hula hoops or tape mark squares).

Posting daily schedule using pictures to provide structure and expectations clearly.

Taping an alphabet or number strip to desk.

Attaching pictures with words to drawers, bins, shelves and cubbies.

Presenting new activities at eye level and ask child to repeat directions before beginning work.

Avoiding putting posters, pictures, memos in front of the classroom where children need to focus on the teacher.

Heavy Work

All students can benefit from movement activities in the classroom that provide input to the proprioceptive receptors in the joints and ligaments. In addition to providing exercise, these types of “heavy work” movements make it easier for the student to focus and attend.

Heavy work activities (i.e., proprioceptive input) are used for children with sensory processing difficulties to help increase attention, decrease defensiveness and modulate arousal; hence heavy work is safe and can be used from students who have both a high level of arousal and a low level of arousal, to help the student to have a just right level of arousal.

Proprioceptive input is the performance of tasks that involves heavy resistance and input to the muscles and joints, and is essential in helping our bodies assimilate and process both movement (vestibular) and touch (tactile) information.

Proprioception is a form of sensory input to the muscles and joints that makes us aware of our “position in space” (i.e., where we are in relation to other objects or people). Students who have difficulty interpreting proprioceptive input have trouble grading and planning their movements and regulating their level of arousal.

Heavy work activities include:

1. Whole body actions involving pushing, pulling, lifting, playing and moving
2. Oral actions such as chewing, sucking and blowing
3. Using the hands for squeezing, pinching or “fidgeting”

The following is a list of heavy work activities/proprioceptive activities that may help regulate a student’s arousal level, concentration, ability to fall asleep or sit still and attend to a task.
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Keep in mind the type of heavy work activities, timing and duration is most effective when directed by a professional (such as an Occupational Therapist) knowledgeable about this type of proprioceptive input.

**Seated activities**

- Use elastic bands on the fingers and doing “finger exercises”
- Sit on hands
- Chair push-ups
- Prior to seatwork, have student pinch, roll, pull theraputty or squeeze balloons filled with flour. Give student firm pressure on shoulders
- Take chewy candy breaks – such as wine gums or crunchy foods such as dry cereal, vegetables
- Sip from a water bottle with a straw
- Use a beanbag chair in the classroom during silent reading or independent work tasks.

**Whole body activities**

- Place chairs on desks at the end of the day or take down at the beginning of the day.
- Wash desks and/or dry erase board
- Help rearrange desks in the classroom
- Help the gym teacher move mats, hang them up, set-up or take down equipment
- Carry heavy notebooks to the office or from class to class
- Run around the track at school
- Have student move several packs at a time of photocopy paper from storage area to the school copy centre
- Perform sports activities that involve running and jumping
- Have students push against a wall
- Star jumps
- Animal walks (crab walk, bear walk, army crawl)
- Walk up a ramp or incline
- Use theraband or tubing attached to a door and pull it, then let it snap.
- Two children can play “tug of war” with jump rope or heavy theraband. (If you use the theraband, children need supervision so they don’t purposely let go of theraband and “snap” the other child).
- Play a game of “play wrestling”: pushing game where two people lock hands facing each other and try to see who can push and make the other person step back first. Use other body parts

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also, but be sure to have rules (no hitting, no biting, no scratching, one person says stop then both stop).

Play “row, row, row your boat” sitting on the floor, pushing and pulling each other.

Have two children sit on the floor, back to back, with knees bent and feet flat on the floor. They interlock their arms, and then try to stand up at the same time.

Play jumping games, such as hopscotch and jump rope.

Push on large therapy ball with someone else giving resistance from the other side.

**Websites**

https://www.youtube.com/watch?v=cSPmGPlyykU
https://www.youtube.com/watch?v=EtuvhQZfmCI
https://www.youtube.com/watch?v=ep8iLnV7JVo
https://www.youtube.com/watch?v=26guG6wr5so
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https://www.youtube.com/watch?v=D1G5ssZJVUw
https://www.youtube.com/watch?v=P4q8dNwsR3E
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