

INTERVENTIONS BY A SHADOW TEACHER FOR A CHILD WITH ADHD AND AUTISM - A CASE STUDY

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Abstract:

Inclusive education provides opportunities for children with disabilities to participate meaningfully in an inclusive setting. Children with neuro-developmental disorders such as Attention Deficit Hyperactivity Disorder (ADHD) and Autism need individualised support to participate in the academic and social activities of the school, which is usually provided by the resource teachers or shadow teachers. Since the general teacher often struggles to provide individual attention during classes and other school activities, some schools recommend shadow teachers for children with special needs. This qualitative case study examines the pre-intervention challenges, the role and interventions adopted by the shadow teacher to assist a child with ADHD and Autism academically, socially, emotionally, and behaviourally, and the outcomes achieved through these interventions. The key interventions used by the shadow teacher were task modification, structured time management, guided social interactions, visual support, sensory regulation, and positive reinforcement in collaboration with the class teacher, parents, and counsellor. Findings indicate a notable improvement in academic performance, emotional regulation, behaviour control, and social participation. The study strongly recommends the provision of a shadow teacher to support children who need individualised support within an inclusive setting.

Keywords: ADHD, Autism, Inclusive education, comorbidities

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Introduction :

This case study is about the findings of intervention strategies adopted by a shadow teacher to help in the social and academic development of a six-year-old girl with comorbidities such as ADHD, Autism, and speech delay. This paper highlights the need to understand the intervention strategies used by a shadow teacher who accompanied the girl during school hours to support the child's academic development.

The review of research studies provides limited research on the interventions employed by a shadow teacher for children with such comorbidities; research primarily focuses on intervention strategies employed by the teacher, special educator, or clinical interventions. Also, researchers found limited studies

with respect to comorbidities such as ADHD and Autism. Most studies focus on the Western context, and very few case studies are available for the Indian context.

Objectives of the Study:

- To examine the role played by the shadow teacher to support the child with comorbidities such as ADHD, Autism, and speech delay.
- To study the interventions used by the shadow teacher to support the child with comorbidities such as ADHD, Autism, and speech delay.
- To study the outcomes of the interventions adopted by the shadow teacher to support the child with comorbidities such as ADHD, Autism, and speech delay.

Methodology:**Research Design:**

The present study adopted a qualitative case study design to examine a child's academic, behavioural, social, and emotional experiences in a natural school setting. This case study documents in detail the interventions used by the shadow teacher to support a child with comorbidities such as ADHD, Autism, and speech delays in an inclusive setting, along with the outcomes of these interventions.

Participant and Setting:

The participant of the study was a six-year-old girl diagnosed with ADHD, borderline Autism, and speech delay. The girl was studying in grade 1 at a private English-medium school in a Mumbai suburb. The classroom comprised forty peers, the class teacher, and the shadow teacher who provided individualised support to the child throughout the school day.

Duration of the Study:

The shadow teacher's observation of the child and the interventions used to address the child's challenges lasted for one academic term, approximately 5 months. This time allowed the shadow teacher to plan, implement, review the strategies, and observe changes in the child's functioning in the academic and social contexts.

Data Collection Methods:

The shadow teacher used non-standardised tools to collect data about the child, which were appropriate for a single child case study. The tools used were as follows:

- Continuous Observation throughout the school day
- Anecdotal records of children's behaviour, academic performance, and social interactions
- Notes taken by the shadow teacher based on behavioural tracking to identify emotional triggers throughout the school day
- Feedback from the class teacher, peers, and mother

- Review of samples of children's work and classroom interaction and participation

The above multiple sources of data helped in triangulation and enhanced the credibility of the findings

Procedure:

The researchers conducted the present case study in three phases:

In the pre-intervention phase, the shadow teacher collected data regarding the child's academic performance, behavioural patterns, social interaction, and emotional triggers to establish baseline data about the challenges faced by the child.

In the intervention phase, the shadow teacher used individualised intervention strategies to assist the child in overcoming difficulties. The interventions used were as follows: task modification, structured time management, visual supports, sensory regulation, guided social interactions and positive reinforcement. The shadow teacher decided on these strategies with the support of class teachers, parents, and the school counsellor.

In the post-intervention phase, the shadow teacher observed the child's academic performance, behavioural changes, and social interactions and made notes.

Ethical Considerations:

The study ensured adherence to ethical principles. Before data collection, the shadow teacher obtained informed consent from the child's parents. The shadow teacher kept all information confidential, and a pseudonym protected the child's identity. The shadow teacher ensured the child's safety, dignity, and well-being by using the study solely for academic and educational purposes.

Background: Riya is a six-year-old girl, studying in grade 1 of a private school in Mumbai. She belongs to a middle-class family. Riya is very close to her mother as compared to her father and grandparents.

Riya likes to play, read visually appealing books, watch television, and use the computer. She speaks both Hindi and English. It is usually observed that children with ADHD have poor Language skills, which contributes to their social impairment (Staikova et al., 2013). The poor language skills observed in the case of Riya could be the reason, for Riya preferring reading visually appealing books.

The girl is slim and of average height for her age. She has short, neat hair that is easy for her to manage. Her skin is a normal Indian skin tone.

She is very active and has more energy than many other children her age. She loves swimming & other sports, and she had started with gymnastics. She would often look around in class or out the window, getting distracted. If something were shiny, colourful, or looked interesting, she would stare and think about it for a long time.

Riya has difficulties with social interactions, following multi-step instructions, maintaining focus for extended periods, and regulating emotions in stressful situations, and has experienced rare cases of self-harm. Riya was diagnosed with ADHD, borderline Autism, and a speech delay. The child has so much energy that one could get exhausted just watching her. Jacobson and Reid (2010) found that learners with ADHD frequently experience severe academic deficits. Before the intervention, the child struggled with focusing on group activities, processing information quickly, learning from mistakes, delayed gratification, impulse control during class, and lacking social skills. Due to these challenges, Riya was assigned a shadow teacher to provide individualised support throughout the school day.

Riya is attached to her parents, especially her mother. She is also more scared of her mother than anyone else and listens to her more. She usually sits down with her mother to do her homework properly. She is very caring- if someone cries or is upset in front of her, she

would come to wipe their tears or hug them. Parents of children in the age group of 5 to 9 years, with ADHD, Autism, and comorbid ADHD and Autism experience higher levels of parenting stress as compared to children without ADHD and Autism (Miranda et al., 2015). Riya's parents, especially her mother, experienced higher stress as compared to children without ADHD.

With teachers, Riya was more responsive towards her class teacher and shadow teacher. She would listen carefully to the teachers and never avoid anyone. With peers, she did not really talk or play with other children in groups. She did not always understand how to interact with them. However, if her best friend told her something, she would try to follow it as much as she understood. She was never aggressive with other children and often helped them, like picking up their books or pencils.

With the shadow teacher, Riya trusted her and felt comfortable in her presence. During situations like fire drills or trips to other places, such as dance/activity classes, she would hold the shadow teacher's hand and cooperate with the group. She listened to the shadow teacher, followed instructions, and worked well when the shadow teacher guided her.

Role of the Shadow Teacher: The shadow teacher provided one-on-one support to the student during the class and the activities. She worked closely with the classroom teacher to adapt lesson plans, offering additional instructions and breaking tasks into smaller, manageable steps. She also provided emotional support, helping the student regulate the behaviours and stay engaged during lessons. Her presence in the classroom ensured that the student felt supported in a structured, consistent manner.

Key Interventions and Strategies: Children with ADHD are at risk for experiencing problems with social functioning that are associated with adverse outcomes in adolescence and adulthood. To date, the

most common ADHD treatments for children, adult-mediated interventions and psychostimulants, has limited success in minimising the social impairments associated with ADHD.

Research studies have shown that intensive psychosocial intervention strategies have positive effects on executive functioning, such as attention, verbal and visual working memory, planning ability, and flexibility, in children with ADHD (Miranda et al., 2011).

To address the student's attention difficulties, the shadow teacher implemented several strategies to help the student stay on task. At times, whenever possible, the shadow teacher used the Pomodoro Technique (which improves focus and productivity by breaking work into short, timed intervals) and provided frequent sensory breaks to reduce overstimulation. Also, whenever possible, the shadow teacher included visual cues in tasks. The shadow teacher also helped the student with social interactions by providing guidance on turn-taking, communication skills, and conflict resolution during group activities. At times, the shadow teacher used positive reinforcement to encourage desired behaviours and help the child feel a sense of achievement. In this case, the shadow teacher had made a chart paper to track her progress, which was kept in the classroom. Teachers and the shadow teacher gave a star or a stamp with various emojis when Riya performed or completed the task well, or when she behaved well throughout the class. In techniques for emotional regulation, the shadow teacher tried using calm, nonverbal cues and offering the student a quiet space when she felt overwhelmed.

The shadow teacher also provided ongoing support to help manage her frustration. At times when the student displayed behaviours such as screaming and self-harm, the shadow teacher kept track of when Riya exhibited such behaviours and tried to understand if there were any triggers- like social issues, sensory overload,

transitions, or lack of focus. The shadow teacher tried to regulate the student's emotions by providing sensory tools, such as fidget toys and clay, and squeezing a stress ball. Also, the shadow teacher collaborated with the student's school counsellor and parents to better understand the student's history, sensory needs, and any existing behavioural plans. The shadow teacher maintained an open line of communication with the student's family, helping ensure consistency in approaches and providing insight into any changes in the student's home life that could affect her behaviour at school.

Outcomes and Progress: Upon implementation of the multimodal and collaborative strategies, Riya showed significant improvement in academics, social skills, and behavioural issues. For instance, she showed improvement in the time she took to complete tasks, in completing tasks independently, and in reading and recitation skills. With respect to social skills, Riya showed considerable improvement in collaborative tasks, understanding her peer behaviour, following them, and getting guided by them. However, some areas need improvement, such as communication with peers and teachers, which would require continuous support from the school counsellor and speech therapist collaboratively.

Discussion: This case study focuses on multiple academic, social, emotional, and behavioural difficulties faced by a child with comorbid conditions such as ADHD, Autism, and speech delay. A shadow teacher supported the child to address her difficulties in an inclusive setting. This study highlights the key intervention strategies the shadow teacher used to help the child overcome her difficulties. The primary difficulty the child faced was inattention and distractibility, which affected the child's ability to comprehend academic instructions and complete academic tasks. The child had difficulty with sustained attention, especially while working in a group. The

shadow teacher used techniques such as breaking complex tasks into simple, manageable activities and providing visual cues, which helped the child understand instructions and complete tasks while working in groups. These techniques reduced the child's cognitive load and supported executive functioning, such as task completion and effective classroom participation.

The other significant challenge was emotional regulation and behavioural control, which also included episodes of screaming and self-harm. These triggers happen as a result of sensory overload, transitions, and communication-related frustration. The shadow teacher helped Riya overcome these issues by identifying her emotional triggers and providing calming strategies, such as sensory techniques, non-verbal cues, and shifting her to quiet areas where she could regain her composure. These strategies helped the child to develop coping mechanisms, thereby reducing the intensity and frequency of disruptive behaviour.

Another major challenge faced by the child is social interaction. The child had difficulty initiating and maintaining social interaction and did not understand the nuances of turn-taking and group participation. Due to this challenge, the child would find it difficult to participate fully in the classroom. The shadow teacher helped the child with this difficulty through guided peer interaction, appropriate social behaviour, and immediate feedback on social behaviour. Over time, due to these interventions, the child showed improved participation in classroom social interactions. This study reiterates that pre-service and in-service teacher training should equip primary and secondary school teachers with knowledge of the characteristics, prognosis, and treatment of children with ADHD, enabling them to include and manage these children successfully (Mohr-Jensen et al., 2015).

Thus, it is seen that a shadow teacher's support, in the form of individualised, structured, and collaborative support within an inclusive classroom, significantly reduced the students' difficulties in academics, interaction, and behaviour.

Recommendations: The findings of this case study strongly recommend the use of individualised, collaborative multimodal strategies to overcome the challenges faced by children with ADHD and Autism. The researchers found this strategy helpful for children with heterogeneous and complex needs, and teachers can use it to mitigate these needs through academic, social, behavioural, and emotional support. This finding is in alignment with research studies that indicate that, instead of a single intervention strategy, a combination of interventions proves helpful for children with difficulties typically faced with conditions such as ADHD and Autism (Cousins & Weiss, 1993; Enns et al., 2017).

The shadow teacher is particularly effective in providing one-to-one, immediate support within the inclusive classroom, thereby promoting inclusion rather than segregation. The shadow teacher acted as a mediator between the teachers, parents, peers and counsellor through the use of key interventions used by the shadow teacher was task modification, structured time management, guided social interactions, visual support, sensory regulation and positive reinforcement in collaboration with class teacher, parents and counsellor and the progress the child made due to the support provided by the shadow teacher. Findings indicate a notable improvement in academic performance, emotional regulation, behaviour control, and social participation. Thus, schools implementing an inclusive approach should consider the support of shadow teachers to ensure children with such comorbidities, such as ADHD and Autism, improve in their social and academic functioning.

Conclusion : In conclusion, the shadow teacher has played a significant role and proved an invaluable resource, providing individualised support and helping the girl thrive in the classroom. With continued collaboration amongst the shadow teacher, the teaching team, the therapist, and the child's family, the student will continue to make progress in overcoming challenges and achieving her academic and social goals. Moving forward, attention should be given to areas for improvement, such as emotional regulation and social communication, to ensure continued success.

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