The ANIMATION CURRICULUM

Phase 2 School Participant Overview

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Executive summary

Teachers are facing increased numbers of students who require additional support in the classroom. Consequently, students with special educational needs and disabilities (SEND) can end up being segregated for alternative provision, either in separate spaces in mainstream schools, or in special schools that may not fully support their specific needs. As a result, these students may receive an inferior education, miss out on crucial peer socialisation, develop lower self-esteem, and lack many of the basic social and cognitive skills needed for independent living. These challenges can lead to an increased risk of being out of work for long periods with limited employment opportunities, an increased risk of mental health challenges and addictions, and having more frequent involvement with the criminal justice system.

Our proposed solution is to provide teachers an alternative delivery approach that creates an inclusive learning environment for students with SEND and their neurotypical peers without the need for segregation. In the long term, this could reduce the 17.6% of students in the UK considered persistently absent and 33.3% of students chronically absent in some Canadian school districts.

This approach has three aims:

1. Brings the SEND students back into the classroom by delivering a group-based, engaging activity that suits them as well as their peers
2. Leads to measurable improvements in students' engagement and learning
3. Is student-led, taking pressure off teaching staff, and is an initiative/intervention that teachers want to use regularly with future cohorts of students

The proposed study intends to enhance the learning experience of up to 1,200 primary school aged students, and the teaching experience of up to 40 educators, across three continents.

Introduction

Children with SEND are at risk of falling behind their peers in school and being isolated due to behavioural difficulties or for placement into special educational needs provision. They would likely benefit from a classroom intervention that is tailored to a neurodevelopmental profile, provides helpful sensory stimulation and creative, play-based learning, which can be delivered to mixed groups without having to separate SEND students from their peers.

The Animation Curriculum (TAC) is an immersive seven-module, cross-curricular programme acting as a mode of delivery. TAC centres around narrative building and storytelling, through which a whole class of students completes a series of tasks and actions producing a series of outputs. This approach is multi-sensory, tactile and multimodal with a strengths-based approach for those with additional needs.

Between April and July 2025, TAC was delivered in two mainstream primary school classes, one in North-East England (students aged 7-8 years), and one in British Columbia, Canada (students aged 9-10 years). This study focussed on the engagement of students with Fetal Alcohol Spectrum Disorder (FASD) in comparison to their peers. FASD has a broad range of characteristics which cross over with multiple other conditions including Autism, ADHD, attachment disorders, language disorders, and early life adversity. Individuals with FASD typically also have a range of these kinds of diagnoses, therefore, interventions that are designed to be effective for individuals with FASD are likely to be effective for individuals with broader SEND characteristics.

Our results from this first evaluation phase showed that students with FASD, students with other forms of neurodiversity, and neurotypical students were engaged with the activities throughout, found them enjoyable and took pride in their work. Teachers' feedback was highly positive – they described TAC as being easy to use, student led, and a useful and enjoyable way to deliver their existing curriculum, with one teacher stating, "this is one of the most inclusive things I've ever done in teaching".

We are now seeking funding for a larger-scale, second-phase feasibility trial in which we will deliver TAC in up to 20 schools across the UK, Canada and the UAE, and compare it with standard educational practice in another 20 schools. The primary aim of this study will be to evaluate the feasibility of conducting a larger, definitive randomised controlled trial to demonstrate that TAC is effective and can be implemented by school boards across the three participating countries.

We aim to begin phase 2 between April and July 2026, upon confirmation of funding. This timeline allows us to continue our conversations around recruitment and utilise existing relationships with schools participating and expressing interest in phase 1. The first year of the project focusses on recruitment of the Research Fellow to support the team, recruitment of schools, co-design with participating schools and then training of teachers. In class delivery of TAC will then begin in the Autumn of 2027, lasting the duration of the academic year. We have then planned approximately one year to complete data collection, analysis and evaluation, and preparation of research papers and conference presentations.

What is The Animation Curriculum?

The theoretical underpinning and initial framework of The Animation Curriculum (TAC) was developed through Dr Jessica Rutherford's PhD (Rutherford, 2023) completed at Loughborough University, UK. TAC adopts the animation film-making process, which is creative, tactile, slow, repetitive and centres around narrative building and storytelling, to offer a strengths-based approach for those living with FASD. Through its development, TAC had an educational focus however the adaptable framework can be utilised in numerous settings as a communication or therapeutic tool when supported by appropriate professionals. Drawing on lived experience supporting and educating individuals with FASD, published literature and a co-design element with experts in related fields, the animation film-making process has been utilised to develop a seven-step curriculum in which each lesson has a specific structure of delivery and both artistic and educational outcomes.

Students are not learning how to create an animated film. They are completing seven separate interventions that target different learning inputs which if put together, produces an animated film that communicates their learning and displays team working and social skills, organisation and time management, story structuring, task prioritisation, creativity, imagination and much more.

The seven modules of The Animation Curriculum are:

1. Story and Script Writing
2. Creative Production
3. Storyboard
4. Animatic
5. Sound
6. Animate
7. Edit, Finalization, Export, Review

Dr Carolyn Blackburn and other prominent voices in the FASD field highlight many features of the animation film making process as best practice approaches when supporting those with FASD in education (Blackburn et al, 2012), leading to a natural meeting of these two areas. TAC evolved with a structured framework which can be adapted to specific student populations to deliver almost any topic of education, with focus initially placed on mainstream primary schools.

Phase 1

A feasibility study of The Animation Curriculum was carried out in 2025 thanks to a generous donation from The Mohapatra Family Foundation. This initial study focussed on the acceptability of and engagement with The Animation Curriculum when applied in two mainstream classroom settings. Two schools were recruited to the study, one in British Columbia, Canada and another in North-East England. Inclusion criteria for participation in phase 1 of this study were to have a participating class of students aged between 7 and 10 years, and to have at least one student with diagnosed or suspected (by a medical professional) FASD.

Results

Results from Phase 1 were positive in all three areas of testing. We asked both teachers to complete The Engagement Scale after each session, once for the child with FASD, and once for the class as a whole. The Engagement Scale measures awareness, curiosity, investigation, discovery, anticipation, initiation, and persistence on a five-point scale from 0 (not focussed) to 4 (fully sustained), with high scores indicating higher levels of engagement. Whilst there were some differences between the two schools (the UK teacher tended to provide slightly higher scores than the Canadian teacher) and between different sessions (children were most engaged whilst producing the animation and least engaged during storyboarding), scores for the children with FASD and the class as a whole were equally high (averaging around 3.0-3.5 out of 4). The animations produced by both classes of children can be viewed on The Animation Curriculum website here.

We also conducted interviews with the teachers and Learning Support staff, who reported that they were delighted with the activities and that not only were the children fully participating and enjoying themselves, but they were also doing a good job of taking turns and took pride in their work. The teachers reported that it was not difficult for them to implement TAC in their classrooms and rather than adding to their workload, it enabled them to deliver the content they were going to teach anyway, via a novel, interesting, and enjoyable activity. They also reported feeling well supported by the research team, that they had all the tools they needed to implement TAC, and said they would be likely to use TAC again in the future. One finding that we had not considered before this phase was that each classroom not only had a child with FASD and typically developing peers, there were also children in these classrooms with other forms of

neurodivergence such as Autism and ADHD, and TAC seemed to be beneficial for all of these children.

Conclusions

As a result of phase 1 findings, TAC will no longer focus solely on individuals with FASD. Whilst this area remains of high importance for the research team, we now seek to understand the impact of learning through this approach for all students identified as SEND. Other than that, we are confident that TAC has the potential to be an acceptable and effective intervention and that continuation to a phase 2 feasibility trial is justified.

Dissemination of findings

Jessica and Alan presented phase 1 results at the CANFASD Canadian National FASD Conference, 2025 in Toronto. We then hosted an open webinar (which can be viewed here) in November 2025 which was attended by 16 stakeholders from four countries. Jessica will be presenting phase 1 results at the FASD United conference in Seattle, USA in April 2026, as well as at the Society for Animation Studies conference in Pittsburgh, USA in June 2026. We are hoping to present to the European FASD Conference in Amiens, France in September 2026 and a paper reporting the phase 1 study is under preparation for publication in an academic journal.

Phase 1 Lessons Learned

Technical Support

TAC was supported in British Columbia, Canada by the Provincial Outreach Programme for FASD (POPFASD) who connected us directly to schools attended by children living with FASD. POPFASD continued to support on the ground throughout delivery and offered technical equipment and support in the form of Amazon tablets (which the children used to produce the animations). This support had a wide impact and while their specific support cannot be replicated in other countries, we have made significant changes to TAC training and supporting materials addressing many of the questions and challenges that arose. POPFASD have stated they are keen to support this research going forward.

Recruitment of schools

Recruitment of schools outside of Canada was more challenging, and after pursuing leads from personal contacts within the FASD community in the UK (to schools where we knew of a child with a diagnosis), we were eventually connected with the Virtual School Head[1] of Redcar and Cleveland, UK, who is keen to support us further and is now gathering interest from schools for Phase 2 participation.

In addition, Alan is now in conversation with Virtual School Heads in the East Midlands, Cambridgeshire, and South Yorkshire, who have expressed interest in the project and the University has strong connections with Salford City Council who may be able to assist with recruitment of local schools.

Transferability

Throughout phase 1 we identified a strong reliance on Jessica, as the author of this programme, to closely support participating schools and manage challenges. To address this, supporting documentation and teacher training has been updated with clearer guidelines around the hardware and software to be used, but phase 2 plans now include a Post-Doctoral Research Fellow, whose role will begin by supporting Jessica but which will gradually take over more and more responsibility and independence so that we can assess the transferability of this role. Jessica will work on 80% FTE during the first year to support the project manager and will then

[1] A Virtual School Head is a local authority officer in the UK who strategically leads the education of children who are currently or were previously living in the care system.

phase down to 50% FTE by year 3. We are currently in conversation with potential candidates for this role.

Expert Advisory Panels

In Phase 1, we held a Public and Patient Involvement and Engagement (PPIE) panel that included a young person living with FASD, along with some parents and caregivers of children with FASD. This is something that is recommended in all research that focusses on people and this project, like all of our research projects, is strongly rooted in lived experience.

We also had a steering group of senior colleagues which included three full professors, two primarily academics and one psychiatrist.

For phase 2, we plan to increase this again to draw on other fields of expertise with the addition of Miranda Eodanable, Educational Psychologist with specialism in FASD, Dr Alicia Brindle, Paediatric Occupational Therapist and Morag Burns, Speech and Language Therapist, to offer analysis from each of these three areas.

Phase 2

Introduction

The Animation Curriculum research team at The University of Salford, made up of Dr Jessica Rutherford, Dr Alan Price and Professor Penny Cook, now seeks additional funding to move forward to Phase 2 of this project.

Intervention development and testing in this field is typically divided into three phases:

In phase 1, the intervention may be designed and developed (although TAC was already developed during Jessica's PhD) and there will be some small-scale, preliminary assessment of *acceptability* (to assess whether the users or participants broadly approve of it) and *feasibility* (to assess whether the intervention can be delivered and the research team can manage the project).

In phase 2, the research team starts to use a trial design, which means we compare one group of participants who are randomly assigned to receive the intervention (the intervention group) and another group who are randomly assigned to receive either treatment as usual or another existing intervention (the control group). Sometimes, the control group will be offered the intervention after the trial (waitlist design). The primary aims of phase 2 are to assess the feasibility of conducting a larger trial in phase 3, and to determine the methods of that trial by assessing suitable control conditions, outcome measures and procedures. Data on efficacy collected during phase 2 would not usually be considered reliable, but it may indicate a signal of efficacy, and it will be used to calculate the required sample size for a phase 3 trial.

In phase 3, the fully powered (in terms of sample size) randomised controlled trial will be designed to demonstrate whether the intervention can be said to be effective.

Proposed details of Phase 2

Aims

- To co-design and fulfil the implementation and evaluation of a feasibility trial of TAC.
- This phase 2 project will begin by co-designing the delivery and evaluation of TAC in schools in the UK, Canada and the UAE.
- This phase is a mix of co-design, implementation, and evaluation
- To assess the feasibility of delivering to an expanded number of schools
- To assess potential outcome measures for a phase 3 trial

- To get schools on board and have ownership of the project – to build this around their preferred measures of success (TAC is malleable so it can do what the schools want it to do)
- To assess efficacy (effect size) for preparation for the phase 3 trial

Procedures and expected timeline

Year 1

In the early stages of this phase, we aim to apply for institutional ethics approval from the University of Salford, recruit the Research Fellow, work with partners to finalise the methods of the study, identify outcome measures, and recruit schools. After that we will collect baseline data and randomise schools to either the intervention or control condition. Schools receiving the intervention will complete training on how to deliver TAC in their classrooms, which is delivered online in the format of pre-recorded videos to allow educators to complete it in their own time. This will be followed by a lead-in period (one school term) during which the school staff in the intervention group will practice using TAC with their current class of students (note this is practice for the teachers and we will not be collecting data at this point).

Year 2

The school staff in the intervention group will deliver TAC to their new class of children for the duration of the academic year (note that this needs to be done with a new class, not the same children used in the practice stage). The control group will continue with their usual practice at this time (treatment as usual). After this, we will collect follow-up data from both groups and provide TAC to the control group. After a delay of three additional months, we will collect our extended follow-up data.

Year 3

In the final year, we will conduct interviews with school staff, analyse the quantitative (outcome measures) and qualitative (interview) data, calculate the required sample size for phase 3, hold meetings with our advisory groups to discuss our findings and any proposed changes to the intervention or research design, write up reports for the funders and stakeholders, write and publish out findings in journal articles, and present our results at international conferences. We will also prepare for phase 3 and begin to seek funding.

School Participants

Potential Timelines

Until funding has been confirmed, we are unable to commit to a start date for this project. However, we hold ongoing conversations, have detailed plans and supporting documentation in place so that if funding is received between April – July (of any year) we are able to begin implementing our Year 1 plans within a matter of weeks. We will then follow the plan outlined on the previous page.

Inclusion Criteria

Each participating class must have

- At least one student with special educational needs or disability (SEND) holding an Education Health Care Plan (EHCP) or regional equivalent
- Students aged between 7 and 10 years
- At least one student with diagnosed or suspected (by a medical professional) FASD
  Please note, this criterion does not apply to schools in the Middle East
- A teacher keen to participate in a research study, who wants to learn and implement this new approach and who can commit to two years of participation

What does participation mean for you?

Participating in Phase 2 of The Animation Curriculum testing not only places you as an educator and your school at the forefront of this innovative research, but also provides the following;

- An opportunity for students to explore a topic in a new, creative way
- A chance for any students with additional needs to feel fully included in an engaging yet challenging project amongst their mainstream peers
- Full training and support in applying this new approach to curriculum delivery
- Free lifetime use of TAC for participating educators
- Your school to feature in any external publications (at your request)
- The final animation produced by your class to feature on TAC website and in promotional reels

- Opportunities to share your thoughts on the approach at regional and international conferences
- Support in organising an end of year screening of your class's final animation with a gallery display of the artwork created. This may be internal for school staff and students, or open to the public. We can even support with press releases and local news features.

We are keen for participating schools to continue using TAC long after our study is complete, our only ask is that you keep in touch to let us know that you are still using it and what your experience is. We would always love to see anything produced by students using TAC!

Once training and supporting documentation have been handed over, these are yours to use throughout your career and we hope you take any opportunity to train your colleagues within the school to use the approach too.

Longer-term aims

The long-term aim for TAC is for it to be available online and accessible for a small cost, for schools worldwide. It would be available from the TAC website with full supporting documentation and training.

TAC would then be run as a not-for-profit business, with all income being reinvested for further development of the programme and research of its use in other areas. Jessica hopes to one day test TAC with individuals living with aphasia, early onset dementia, and other language disorders and neurological conditions, as well as in a therapeutic setting, particularly with individuals living with the impact trauma.

Contact us

For more information and to view TAC student films, please visit www.theanimationcurriculum.com.

The TAC research team includes Dr Jessica Rutherford and Dr Alan Price, both members of the FASD research team at The University of Salford. To find out more about our work, please visit www.hub.salford.ac.uk/fasd/.

If you have any questions or wish to arrange a meeting with the TAC research team, please email Jessica; j.rutherford1@salford.ac.uk or Alan; a.d.price3@salford.ac.uk.