

# INCLUSIVE EDUCATION

COMPILED

By

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# MODULE 1

## INTRODUCTION TO INCLUSION

### 1.1 Objectives

**To enable students to**

- **Identify the diverse learner**
- **Understand the concept of inclusion**
- **Understand the meaning and importance of inclusive education**
- **Differentiate between special education, integrated education and inclusive education**

In the world we live, we experience a wide range of diversity. Diversity is apparent in people, the environment, and all forms of life. With the advancements in technology, the world seems smaller and has also increased the interaction between people from different cultures.

For an effective education of the future generation, the educational system must be successful in teaching all children to communicate and interact with people from different surroundings and with different capacities. Diversity is a vital feature of our world and a defining characteristic of the field of special education.

### 1.2 Diverse learners in education: culturally, socially and biologically diversity

Human beings are all diverse. Educators must make sure that cultural, social and biological differences are not mistaken for disabilities that affect academic performance.

Culture is a broad and comprehensive concept that includes all the ways of being. Culture is learned throughout life as one participates in family and social networks (Gollnick & Chin, 2006). Cultural practices are mutual within a specific group and may or may not be shared across groups. It is significant to be aware of that cultures are always changing because individuals, groups, and the surrounding environment are always changing.

Culturally diverse students refers to **“students who may be distinguished [from the mainstream culture] by ethnicity, social class, and/ or language”** (Perez, 1998, p. 6). As such, this term may refer to students who are from racial/ethnic minority groups, students whose primary language is not English, and students who are from low-income or poor households. All students are culturally diverse regardless of their ethnicity, race, or socioeconomic status.

### **1.3 Educational approaches and measures for meeting the diverse needs**

All teachers want their students to learn, but not all students learn in the same way. Sometimes these differences are as simple to define as a visually impaired student needing audio textbooks. More often than not, however, the need is neither so obvious to define or to address. In fact, frequently the different learning preferences go unrecognized, even by the students themselves. All teachers want their students to learn, but not all students learn in the same way.

Universal Design for Learning (UDL) advocates for removing barriers to learning and adding flexibility in the class.

- **Collaborate with colleagues:**

Need for effective collaboration among different teachers, will go a long way for removing barriers to learning and adding flexibility in the class. One must also be familiar with the individualized educational plans for necessary modifications to be made.

- **Cultivate consistency:**

Some consistency across classes can be helpful for students who have IEPs (Individualized Education Program) and those who simply need familiar routines and structure.

- **Develop a student-centered mindset:**

Keeping the students at focus is of primary importance. Hence things must be planned as per needs of the learner.

- **Set aside time to focus on study skills and extra support:**

Students with IEPs(Individualized Education Program) attend a class that focuses on development of organizational and study skills. Making strategic decisions, teachers must time to review concepts and guide students in understanding homework assignments and how to structure time.

- **Use multiple forms of assessment:**

Forms of assessment includes classwork, homework, participation /preparation, and projects). This guarantees multiple opportunities to demonstrate knowledge and understanding in a variety of ways.

- **Draw on other professionals' expertise:**

Serving all students effectively require teachers to pull in others promptly when students need specialized assistance. Teachers should be aware of the

time, need and the person to contact. The team must regularly call upon the speech and language therapist, reading teachers, occupational therapist, school psychologist, and guidance counselors to advise us or to work with students on specific issues.

- **Partner with families:**

Last, but certainly not least, it's vital to involve families in the process of reaching all students. Teachers need to be flexible that is if a parent or guardian is unable to come into the school, we set up phone meetings, check-ins with the team over email, and/or weekly progress reports.

## **1.4 Concept of remedial education, special education, integrated education and inclusive education**

- **Remedial Education:**

Remedial education is also known as developmental education, basic skills education, compensatory education, preparatory education and academic upgrading. It is instruction provided to students who need more support in core areas such as reading and maths. Remedial education is assigned to help students in order to achieve expected competencies in core academic skills such as literacy and numeracy. Remedial education can be designed for all students with or without special needs.

- **Special Education:**

Special education is also known as special needs education, aided education, exceptional education or Special Ed. In the education of students with special educational needs, the individual difference is catered too. The teaching procedures are arranged in such a way that they are especially individually planned and monitored systematically. They have intervention programmes to help individual with special need to achieve higher and become self sufficient which would not be possible in traditional classroom education.

- **Integrated Education:**

Integration signifies the process of interaction of disabled children with normal children in the same educational setting. Integration also means 'mainstreaming' or Normalisation. It is the educational programme in which exceptional children attend classes with normal children on either a part or full time basis. It is the placement of the disabled children in ordinary schools with some specialized educational help services. An integrated education does not

create a feeling of differentiation among disabled children. It eradicates the feeling of inferiority among the disabled children. It provides peer learning along with the normal children. It permits the disabled children a chance to enjoy school life with normal children thus ensuring social integration. It inculcates affection, love and respect for disabled children among normal children.

- **Inclusive Education:**

Inclusive Education is a broader and wider concept than integrated education. It includes all the students in the mainstream education. It takes place when children with and without disabilities participate and learn together in the same classes. Research reveal that good things happen when both these children, i.e. with and without disabilities attend classes together. In an inclusive education special planning can be done in mainstream education like special infrastructure, special designed classroom or a special curriculum. Eg. The hearing impaired children could be provided with audio aids for hearing the books in Braille could be provided to the visually impaired children.

## **1.5 Foundations of inclusive education: Meaning, concept, need of evolution of inclusion**

- ❖ **Meaning of Inclusion**

**According to Merriam Webster dictionary inclusion is** the act or practice of including students with disabilities in regular school classes. For Cambridge Dictionary inclusion means the act of including someone as a part of a group.

- ❖ **Concept of Inclusion**

In 1948 with the declaration adopted by the UN General Assembly on the "International Bill of Rights" the concept of inclusion was conceived. It recognizes that the all human beings are born free and equal in dignity and rights. This declaration fundamentally seeks to deal with the issues of discrimination at all levels in every facet of society

Inclusion is the acceptance of all people irrespective of their disabilities. It is about understanding people for who they are and their capabilities, rather than how they walk, talk or even behave. It permits people to value the differences in each other by appreciating that each person is creative and unique.

Inclusion is the creation of an enabling environment that provides for the acceptance of children with and without disabilities to play and interact every day without any prejudices whatsoever, even if these children are receiving therapeutic services.

### ❖ **Need of evolution of inclusion**

Children with special needs thrive in a standard classroom environment for a variety of different reasons. It allows children to develop friendship with their peers and feel less social tension about their disabilities. Researches reveal that children who placed in standard classroom have higher self esteem than children who are isolated to different classrooms simply because of their special needs. Studies indicate that children with special needs actually learn more in regular classroom environments, provided they get the help and support they need in and out of the classroom when it comes to academic subjects

❖ Inclusive Education is important for the following reasons:

- **Children Want to Be Included**

Almost all children feel the strong need to be included. Children sent to special schools because of their special needs may develop lower self image and this could stay with them to the rest of their life, thus leading to lifelong interpersonal problems and problems related to employment and daily life.

- **Children Have the Right to Be Included**

Children have the right to quality education, no matter what special needs they may have. No children with special needs can be denied education into the standard classroom environment if the family wants the best for their child. According to the Children with Disabilities Act, emphasis that children with special needs have the right to be educated with nondisabled children of their own age. This Act also focuses on the importance that children should have access to the same general curriculum taught to students without disabilities.

- **Focus on Your Child's Needs**

Parents are being more and more acceptable to the idea of inclusive education and know that their child's need to be kept at the paramount. Hence they are more likely to put their children in the standard classroom environment.

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## **1.6 Definition, concept and importance of inclusive education**

According the UNESCO's action in the field of inclusive education frame work in 1994 stated that

"... Schools should accommodate all children regardless of their physical, intellectual, emotional, social, linguistic or other conditions." (Article 3, Salamanca Framework for Action).

"Regular schools with this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building

and inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system." (Article 2, Salamanca Statement)

#### ❖ **Concept of Inclusive Education:**

The concept of inclusive education is controversial topics for many parents and educators. The idea behind inclusive education is that the students with special needs will be placed in the same classroom environment with other students of their own age but who do not have special needs. There are two main branches of thought within inclusive education

- a. Mainstreaming: is a process that allows children with special needs to enter certain standard classrooms after they show the ability to keep up with the rest of their peers.
- b. Full inclusion: puts students with special needs in standard classroom environments without any testing or demonstration of skills. This thought believes that all children belong to the same classroom environment no matter what.

#### ❖ **Importance of Inclusive Education**

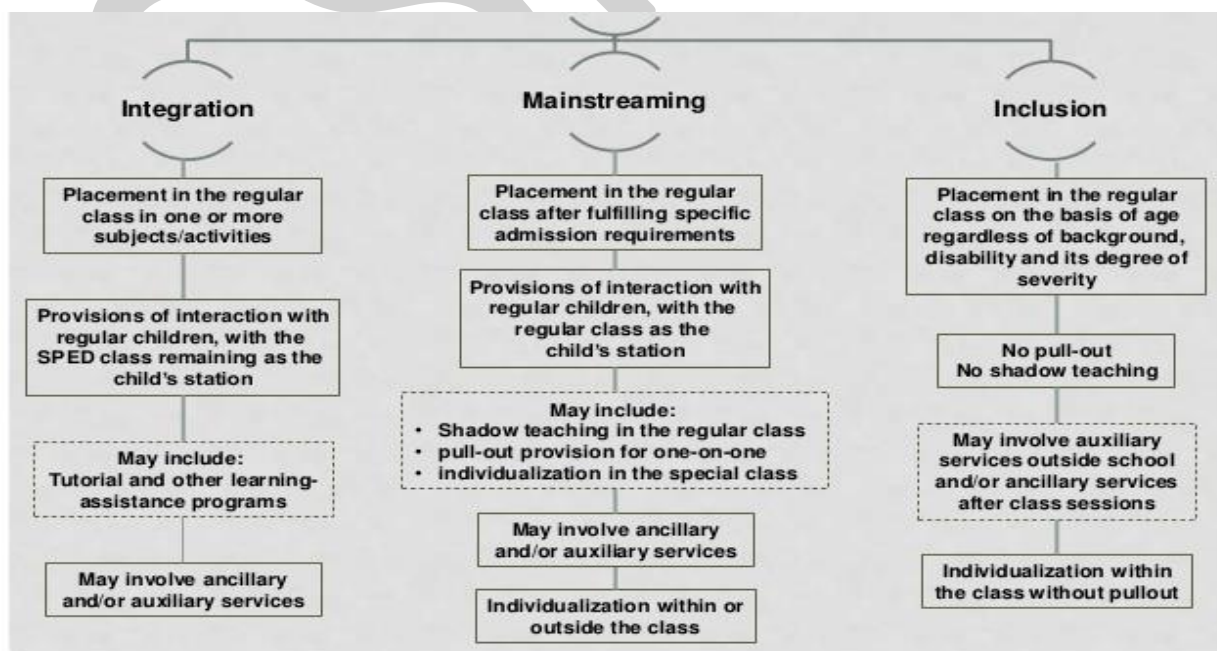
Inclusive education is importance since all children away from education will be benefitted from education. In this education, both the disabled or challenged students may get a support and help from normal students. Students that are excluded from the school because of their disableness get a change to be with normal children and enjoy school life. Inclusive education develops individual strengths of each child and with high and appropriate expectations for each child. The teachers work on developing individual goals while participating in the life of the classroom along with other students of their age. Inclusive education involves the parents of the child in their education and the activities of the school. Inclusive education is important as it fosters a school culture of respect and belongingness. It provides opportunities for all to learn about and respect individual differences. This reduces the impact of bullying and harassment. It develops friendship with a varied set of other children, each having their own individual needs and abilities. Inclusive education appreciates diversity and thus has a positive affect in the school and the community.



## 1.7 Difference between special education, integrated education and inclusive education

CRITERIA	SPECIAL EDUCATION	INTEGRATED EDUCATION	INCLUSIVE EDUCATION
Aim	Including special children in special school	is not integrating all the children who are away from education	including all the children who are away from education
Education	special education is designed specifically for students with special needs	Children with some disability are integrated in normal school only	Children with some disability are included in normal schools but with some special facilities for them All the students away from education are included in the mainstream schools.
Concept	Broad	not very broad	broader
Planning	Formal planning is required	No formal planning	Formal planning is required
Infrastructure	Special infrastructure	No special infrastructure	Special infrastructure
Staff training	trained staff	trained staff	trained staff
Curriculum	Special curriculum	special curriculum	Special curriculum

## 1.8 Comparison between mainstreaming, integration and inclusion



## **MODULE 2**

# **POLICIES AND PRACTICES FOR PROMOTING INCLUSIVE EDUCATION**

### **2.1 Learning Objectives**

After going through this unit, it is expected that you will be able to:

- Understand the policies framed for inclusion in India;
- Understand the implications of policies for inclusion;
- Understand the Concessions and facilities for children with special needs.

### **2.2 Content Outline**

- Policies prior to SSA: IEDC, 1974; NPE, 1986 & 1992; PIED, 1987; DPEP, 1994; PWD Act, 1995; National Trust Act (1999)
- Sarva Shiksha Abhiyan (SSA, 2000) with respect to inclusive education
- National Curriculum Framework for School Education (NCFSE, 2000)
- Constitutional Amendment (2001)
- Comprehensive Plan of Action for Children and Youth with Disabilities (2005)
- National Policy for Persons with Disabilities (2006)
- UN - Convention on the Rights of Persons with Disabilities (UNCRPD India, 2007)
- Right to education (2009)
- Concessions and facilities for children with special needs: Academic and Financial

### **2.3 Introduction**

The concept of inclusion is implemented as a legal requirement in India, to protect the interests and rights of persons with disabilities. Various Central Government schemes - especially those for Universalisation of Elementary Education - have been advocating the inclusion of children with disabilities into the mainstream educational system. Though there were a few policies and programmes introduced before Sarva Shiksha Abhiyan (SSA, 2000), the major change in the actual implementation of inclusive practices in school occurred after the introduction of the SSA. In this module we shall understand the policies and programmes that were formed before and after the SSA.

## **2.4 Policies Prior to Sarva Shiksha Abhiyan (SSA)**

### **2.4.1 Integrated Education for Disabled Children Scheme (IEDC, 1974)**

This was a Centrally Sponsored Scheme and was launched in 1974 by the then Department of Social Welfare. The Scheme was however transferred to the Department of Education in 1982. Under the scheme, children with special needs were sought to be integrated in the normal school system. Hundred per cent assistance was provided to the States / Union Territories for education of the children suffering from certain mild disabilities in common schools with the help of necessary aids, incentives and specially trained teachers.

The Scheme of Inclusive Education for Disabled at Secondary Stage (IEDSS) has been launched from the year 2009-10. This Scheme replaces the earlier scheme of Integrated Education for Disabled Children (IEDC) and would provide assistance for the inclusive education of the disabled children in classes IX-XII

#### ***Salient feature of the scheme:***

The children with special needs were provided the different educational allowances and facilities under this scheme for books and stationery, uniform, transport, reader, escort and equipments. Children with special needs residing in school hostels within the same institution where they were studying were also paid boarding & lodging charges as admissible under the State Govt. rules/schemes.

### **2.4.2 National Policy on Education (NPE, 1986 & 1992)**

The National Policy on Education (N.P.E.) was centred on the fundamental issue of equality of education. Section 4.9 of the Policy clearly focused on the needs of the children with disabilities. The objective of the policy was to integrate the physically and mentally challenged with the general community as equal partners, to prepare them for normal growth and to enable them to face life with courage and confidence.

#### ***Salient features outlined in the policy:***

- Wherever possible, the education of children with motor handicaps and other mild handicaps will be common with that of others.
- Special schools with hostels will be provided, as far as possible at district headquarters, for severely handicapped children.
- Adequate arrangements will be made to give vocational training to disabled students.

- Teachers' training programmes will be reoriented, in particular for teachers of primary classes, to deal with the special difficulties of the handicapped children.
- Voluntary effort for the education of children with disability will be encouraged in every possible manner.

The N.P.E. was followed by Plan of Action (P.O.A.) in 1992. The P.O.A. suggested a pragmatic placement principle for children with special needs. It is postulated that a child with disability can be educated in a general school only and not in special school. Even those children who are admitted to special schools for training in plus curriculum skills should be transferred to general schools once they acquire daily living skills.

#### **2.4.3 Project Integrated Education for the Disabled (PIED, 1987)**

This was the first pilot project on integrated education in India. Launched in 1987, P.I.E.D. was a joint venture of the Ministry of Human Resource Development and UNICEF. This project was implemented in one administrative block each in Madhya Pradesh, Maharashtra, Nagaland, Orissa, Rajasthan, Tamil Nadu, Haryana, Mizoram, Delhi Municipal Corporation and Baroda Municipal Corporation. In these 10 blocks, 6,000 children with special needs were integrated in regular schools.

#### **2.4.4 District Primary Education Programme (DPEP, 1994)**

The Centrally-Sponsored Scheme of District Primary Education Programme (DPEP) was launched in 1994 as a major initiative to revitalise the primary education system and to achieve the objective of Universalisation of primary education.

District projects were prepared in 42 districts spread over the seven states of Assam, Haryana, Madhya Pradesh, Karnataka, Maharashtra, Tamil Nadu and Kerala. The Planning process in these states has been intensive and extensively drawn up by organizations like NCERT, NIEPA and IIMs.

#### ***Salient features of the programme:***

- Emphasizing the local area planning with district plans being formulated in their own right instead of being derived from a state plan project document;
- Infusing greater rigor and professional inputs in planning and appraisal;
- More focussed targeting in educationally forward districts and districts where total literacy campaign have been successful;
- More focussed coverage was initially focussed on primary stage (Classes I-V) with stress on girls and for socially disadvantaged groups; and

- Emphasizing capacity building and networking of district, states and national level institutes in the fields of education management and social services to provide the resource support for the programme.

#### **2.4.5 Rehabilitation Council of India Act (1992, Amended 2000)**

The Rehabilitation Council of India (RCI) was set up as a registered society in 1986. In order to give statutory powers to the Council for carrying out its duties effectively the Rehabilitation Council of India Act, 1992, was passed by the Parliament which came into force with effect from 22nd June 1993. The amendment in the Act in 2000 gave the additional responsibility of promoting research to the Council.

The mandate given to RCI is to regulate and monitor services given to persons with disability, to standardise syllabi and to maintain a Central Rehabilitation Register of all qualified professionals and personnel working in the field of rehabilitation and special education. The Act also prescribes punitive action against unqualified persons delivering services to persons with disability.

#### **2.4.6 The Persons With Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act (PWD ACT, 1995)**

In accordance with the provisions of the Persons With Disabilities Act, 1995, non-specialist schools, whether at the elementary, secondary or higher levels can, with appropriate support within the education community adapt themselves to work with children with disabilities. It aimed to make mainstream education not just available but accessible, affordable and appropriate for students with disabilities.

#### ***Salient features of the act with respect to inclusive education:***

- Every child with disability shall have the right to free education till the age of 18 years in integrated schools or special schools.
- Appropriate transportation, removal of architectural barriers and restructuring of modifications in the examination system shall be ensured for the benefit of children with disabilities.
- Children with disabilities shall have the right to free books, scholarships, uniform and other learning material.
- Special schools for children with disabilities shall be equipped with vocational training facilities.
- Non-formal education shall be promoted for children with disabilities.
- Teachers Training Institutions shall be established to develop requisite manpower.
- Parents may move to appropriate forum for the redressal of grievances regarding the placement of their children with disabilities.

#### **2.4.7 National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities (1999)**

This Act provides for the constitution of a national body for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities. Such a national body will be a trust whose objectives are as under:

- To enable and empower persons with disability to live as independently and as fully as possible within and as close to the community to which they belong;
- To strengthen facilities to provide support to persons with disability to live within their own families;
- To extend support to registered organisation to provide need based services during the period of crisis in the family of persons with disability;
- To deal with problems of persons with disability who do not have family support;
- To promote measures for the care and protection of persons with disability in the event of death of their parent or guardian;
- To evolve procedure for the appointment of guardians and trustees for persons with disability requiring such protection;
- To facilitate the realization of equal opportunities, protection of rights and full participation of persons with disability;

#### **2.5 Sarva Shiksha Abhiyan (SSA, 2000)**

Sarva Shiksha Abhiyan is an effort to universalise elementary education by community-ownership of the school system. It is a response to the demand for quality basic education all over the country. The SSA programme is also an attempt to provide an opportunity for improving human capabilities to all children, through provision of community-owned quality education in a mission mode.

##### ***Objectives of the programme:***

- To provide useful and relevant elementary education for all children in the 6 to 14 age group by 2010.
- To bridge social, regional and gender gaps, with the active participation of the community in the management of schools.
- To ensure all children are in school, Education Guarantee Centre, Alternate School, ' Back-to-School' camp by 2003.
- To focus on elementary education of satisfactory quality with emphasis on education for life.
- To ensure universal retention by 2010.

❖ ***Salient features of the programme:***

• **Institutional Reforms –**

The states had to make an objective assessment of their prevalent education system and carry out several changes to improve the delivery system for elementary education.

• **Institutional Capacity Building –**

Improvement in quality requires a sustainable support system of resource persons and institutions. The SSA worked upon major capacity building for national, state and district level institutions like NIEPA / NCERT / NCTE / SCERT / DIET.

• **Improving Mainstream Educational Administration –**

It calls for improvement of mainstream educational administration by institutional development, infusion of new approaches and by adoption of cost effective and efficient methods.

• **Priority to Education of Girls –**

Education of girls, especially those belonging to the scheduled castes and scheduled tribes and minorities, were one of the principal concerns in Sarva Shiksha Abhiyan.

• **Focus on Special Groups –**

There was a focus on the inclusion and participation of children from SC/ST, minority groups, urban deprived children disadvantaged groups and the children with special needs, in the educational process.

• **Role of teachers –**

Setting up of Block Resource Centres / Cluster Resource Centres, recruitment of qualified teachers, opportunities for teacher development through participation in curriculum-related material development, focus on classroom process and exposure visits for teachers are all designed to develop the human resource among teachers.

• **A continuum of educational options –**

Learning aids and tools, mobility assistance, support services etc. are being made available to students with disabilities. This includes education through an open learning system and open schools, alternative schooling, distance education, special schools, wherever necessary home based education, itinerant teacher model, remedial teaching, part time classes, Community Based Rehabilitation (CBR) and vocational education.

## **2.6 National Curriculum Framework for School Education (NCFSE, 2000)**

National Council of Educational Research and Training (NCERT) provides the framework for making syllabi, textbooks and teaching practices within the school education programmes in India. In accordance with the Constitutional vision of India and the Five Year Plans, the various National Curriculum Framework documents have been recommended from time to time. The main objective of these documents is curriculum renewal and development so that the curriculum meets the learners' needs, societal expectations, community aspirations and international comparisons. The National Curriculum Framework for School Education (NCFSE, 2000) and later the National Curriculum Framework (NCF, 2005) thus came into being.

### ***Salient features of the documents:***

Seeking guidance from the Constitution of India as a secular, egalitarian and pluralistic society, founded on the values of social justice and equality, certain broad aims of education have been identified in these documents. These include:

- Independence of thought and action,
- Sensitivity to others' well-being and feelings,
- Learning to respond to new situations in a flexible and creative manner,
- Predisposition towards participation in democratic processes, and
- The ability to work towards and contribute to economic processes and social change.

The present NCF proposes five guiding principles for curriculum development:

- (i) Connecting knowledge to life outside the school;
- (ii) Ensuring that learning shifts away from rote methods;
- (iii) Enriching the curriculum so that it goes beyond textbooks;
- (iv) Making examinations more flexible and integrating them with classroom life;
- (v) Nurturing an overriding identity informed by caring concerns within the democratic polity of the country.

NCFSE (2000) and NCF (2005) recommend inclusive education for all without specific reference to pupils with Special Education Needs (SEN) as a way of providing quality education to all learners. It recommended inclusive schools for learners with special educational needs by making appropriate modifications in the content, presentation and transaction strategies, preparing teachers and developing learner friendly evaluation procedures.



## **2.7 Constitutional Amendment (2001)**

The 93<sup>rd</sup> Constitutional Amendment Bill was passed in November 2001. A major stride was witnessed in the evolution of the Bill into the 86<sup>th</sup> Constitutional Amendment Act in May 2002. With this Act, for the first time in India, education was made a fundamental human right for children in the 6-14 years age group. Thus it became mandatory for all children to be brought under the fold of education including children with disability.

The following article was inserted after Article 21 of the Constitution, namely:

"21A. The State shall provide free and compulsory education to all children of the age of six to fourteen years in such manner as the State may, by law, determine."

### ***Benefit of the Constitutional Amendment:***

Right to Education was a part of the directive principles of the State Policy under Article 45 of the Constitution, which is part of Chapter 4 of the Constitution. And rights in Chapter 4 are not enforceable. For the first time in the history of India this right was made enforceable by putting it in Chapter 3 of the Constitution as Article 21. This entitles children to have the right to education enforced as a fundamental right. Later this was put into action through the Right to Education Act (2009).

## **2.8 Comprehensive Plan of Action for Children and Youth with Disabilities (2005)**

The Ministry of Human Resource Development was instrumental in developing a Comprehensive Action Plan on the Inclusion in Education of Children and Youth with Disabilities (2005). The different departments at the Central level were involved in the process of developing their work plans. Roles and responsibilities for implementing agencies and their partners, the roles of NGOs and parents groups were drafted. Monitoring guidelines, success indicators, etc. were reviewed. The role of special schools, special educators and other support professionals were also assessed within the changing scenario.

### **❖ Goal of Action Plan for Inclusion**

The main Goal of the Action Plan for Inclusion is recognizing education for all children as a fundamental right, to ensure the inclusion of children and youth with disabilities in all available mainstream educational settings, by providing them with a learning environment that is available, accessible, affordable and appropriate to help develop their learning and abilities.

### **❖ Target Group**

- 1) Infants and children with special needs in the age group 0-6 yrs.
- 2) Children with special needs in the age group 6-14yrs.

3) Young persons with disabilities in the age group 14 to 21 yrs. who are part of the educational stream.

❖ **Objectives of Action Plan for Inclusion**

The main objectives of the Action Plan are:

- To ensure that no child is denied admission in mainstream education.
- To ensure that every child would have the right to access an Aanganwadi and school and no child would be turned back on the ground of disability.
- To ensure that mainstream and specialist training institutions serving persons with disabilities, in the government or in the non-government sector, facilitate the growth of a cadre of teachers trained to work within the principles of inclusion.
- To facilitate access of girls with disabilities and disabled students from rural and remote areas to government hostels,
- To provide for home based learning for persons with severe, multiple and intellectual disability,
- To promote distance education for those who require an individualized pace of learning,
- To emphasize job-training and job-oriented vocational training, and
- To promote an understanding of the paradigm shift from charity to development through a massive awareness, motivation and sensitisation campaign.

❖ **Salient features of the plan:**

The Action Plan for Inclusion formulated the following interventions programmes to ensure continuation in the efforts of the Government of India towards an Inclusive Education system. The focus for these interventions is the inclusion of children and youth with disabilities in mainstream educational institutions.

- Enrolment and retention of all children with disabilities in the mainstream education system.
- Providing need based educational and other support in mainstream schools to children in order for them to develop their learning and abilities, through appropriate curricula, organizational arrangements, teaching strategies, resource use and partnership with their communities.
- Support higher and vocational education through proper implementation of the existing reservation quota in all educational institutions and creation of barrier free learning environments.
- Disability focused research and interventions in universities and educational institutions.

## **2.9 National Policy for Persons with Disabilities (2006)**

The National Policy recognizes that persons with disabilities are valuable human resource for the country and seeks to create an environment that provides them with equal opportunities, protection of their rights and full participation in society.

The focus of the policy is on prevention of disabilities; physical, educational, vocational and economic rehabilitation; women with disabilities; children with disabilities; creating barrier-free environment; issuing of disability certificates; social security; promotion of non-governmental organizations (NGOs); collection of regular information on persons with disabilities; research; sports, recreation and cultural life; amendments to existing acts dealing with the persons with disabilities; prevention, early detection and intervention of disabilities.

### **Salient features of the policy with respect to education for persons with disabilities:**

1. Free and compulsory education to be provided to all children with disabilities up to the minimum age of 18 years. Mainstreaming of the persons with disabilities in the general education system through Inclusive education.
2. Improve identification of children with disabilities, their enrolment in appropriate schools and their continuation till they successfully complete their education, to provide right kind of learning material and books to the children with disabilities, suitably trained and sensitized teachers and schools which are accessible and disabled friendly.
3. Providing scholarships to students with disabilities for pursuing studies at post school level.
4. Facilities for technical and vocational education designed to inculcate and bolster skill development.
5. Persons with disabilities will be provided access to the Universities, technical institutions and other institutions of higher learning to pursue higher and professional courses.
6. Human resources will be trained to meet the requirement of education for children with disabilities under inclusive education, special education, home-based education, pre-school education, etc. Training programmes of different specialization and levels shall be developed.

***The plan of action for education of persons with disabilities includes the following:***

- Make schools (building, approaches, toilets, playgrounds, laboratories, libraries, etc.) barrier free and accessible for all types of disability.
- Medium and method of teaching will be suitably adapted to the requirements of most disability conditions.
- Technical/ supplementary/ specialized system of teaching/learning will be made available within the school or at a common centre easily accessible to a cluster of schools.
- Teaching/learning tools and aids such as educational toys, Braille/talking books, appropriate software etc. will be made available. Incentives will be given to expand facilities for setting up of general libraries, e-libraries, Braille-libraries and talking books libraries, resource rooms etc.
- National Open School and distance learning programmes will be popularized and extended to other parts in the country.
- Sign language, Alternative and Augmentative Communications (AAC) and other modes as a viable medium in inter personal communication will be recognized, standardized and popularized.
- Schools will be located within easy travelling distance. Alternatively, viable travel arrangements will be made with the assistance of the community, State and NGOs.
- Parent-Teacher counselling and grievance redressal system will be set up in the schools.
- There will be separate mechanism to review annually the intake and retention of the girl child with disability at primary, secondary and higher levels of education.
- Many children with disabilities, who cannot join inclusive education system, would continue to get educational services from special schools. Special schools shall be appropriately re-modelled and re-oriented based on technological development. These schools will also help prepare children with disabilities to join mainstream inclusive education.
- In some cases due to the nature of disability (its type and degree), personal circumstances and preferences, home-based education will be provided.
- Course curriculum and evaluation system for children with various disabilities shall be developed keeping in view their capabilities. Examination system will be modified to make it disabled friendly by exemptions such as learning mathematics, learning only one language, etc. Further, facilities like extra time, use of calculators, use of Clarke's tables, scribes etc would be provided based on the requirement.

- Model Schools of Inclusive Education will be set up in each State/ U.T to promote education of persons with disabilities.
- In the era of knowledge society, computers play very important role. Efforts will be made so that every child with disability gets suitably exposed to the use of computers.
- Children with disabilities up to the age of 6 years will be identified and necessary interventions made so that they are capable of joining inclusive education.
- Educational facilities will be provided in psychosocial rehabilitation centres for mentally ill persons.
- Many schools discourage enrolment of students on account of their disability due to lack of awareness about the capabilities of disabled persons. Programmes will be taken for sensitization of teachers, principals and other staff members in all schools.
- Special Schools presently being supported by the Ministry of Social Justice & empowerment will incrementally become resource centres for inclusive education. Ministry of Human Resource Development shall open new special schools depending upon the requirement.
- Adult learning/ leisure centres for adults with severe learning difficulties will be promoted.
- Three percent reservation for persons with disabilities in admission to higher educational institutions shall be enforced. Universities, colleges and professional institutions will be provided financial support to establish Disability Center to take care of educational needs of students with disabilities. They will also be encouraged to make classrooms, hostels, cafeterias and other facilities in the campus accessible to students with disabilities.
- Include a module in induction and in-service training programmes of teachers on issues relating to management of children with disabilities.

The Ministry of Human Resource Development will be the nodal Ministry to coordinate all matters relating to the education of persons with disabilities.

## **2.10 UN - Convention on the Rights of Persons with Disabilities (UNCRPD India, 2007)**

UNCRPD is an international instrument that provides persons with disabilities the same human rights that everyone else enjoys. It marks a radical shift in defining and understanding disability - it moves from a medical/social perspective to a human-rights based approach. India ratified UNCRPD on the 1st of October, 2007. The purpose of the convention is to promote, protect and

ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

***Salient features of the convention:***

- The Convention marks a 'paradigm shift' in attitudes and approaches to persons with disabilities.
- Persons with disabilities are not viewed as "objects" of charity, medical treatment and social protection; rather as "subjects" with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society.
- The Convention gives universal recognition to the dignity of persons with disabilities.
- Provides absolute guarantee of rights.
- Underscores indivisibility of Human Rights – i.e. civil-political rights and socio-economic rights are inseparable / indivisible.
- It brings about the acceptance of diversity as an integral part of human rights; the concept of interdependence and most importantly, it emphasises on the capability of each individual.

## **2.11 Right to Education (2009)**

The Right of Children to Free and Compulsory Education Act (2009) is an act to provide free and compulsory education to all children of the age of six to fourteen years. The Right of Children to Free and Compulsory Education Act came into force from April 1, 2010. From this day the right to education was accorded the same legal status as the right to life as provided by Article 21A of the Indian Constitution.

The National Commission for Protection of Child Rights (NCPCR) has been mandated to monitor the implementation of this Right.

***Salient features of the act:***

- Every child of the age of six to fourteen years shall have a right to free and compulsory education in a neighbourhood school till completion of 8 years of elementary education.
- No child shall be liable to pay any kind of fee or charges or expenses which may prevent him or her from pursuing or completing the elementary education.
- There are special provisions for children not admitted to, or who have not completed, elementary education.

- Any cost that prevents a child from accessing school will be borne by the State which shall have the responsibility of enrolling the child as well as ensuring attendance and completion of 8 years of schooling.
- No child shall be denied admission for want of documents;
- No child shall be turned away if the admission cycle in the school is over and no child shall be asked to take an admission test.
- Children with disabilities will also be educated in the mainstream schools.
- Prohibition of holding back and expulsion; prohibition of physical punishment and mental harassment of the child.
- All private schools shall be required to enroll children from weaker sections and disadvantaged communities in their incoming class to the extent of 25% of their enrolment, by simple random selection. No seats in this quota can be left vacant.
- These children will be treated on par with all the other children in the school and subsidized by the State at the rate of average per learner costs in the government schools (unless the per learner costs in the private school are lower).
- All schools will have to prescribe to norms and standards laid out in the Act and any school that does not fulfill these standards within 3 years will not be allowed to function.
- All private schools will have to apply for recognition, failing which they will be penalized to the tune of Rs 1 lakh and if they still continue to function will be liable to pay Rs 10,000 per day as fine.
- Norms and standards of teacher qualification and training are also being laid down by an Academic Authority. Teachers in all schools will have to subscribe to these norms within 5 years.

## **2.12 Educational Concessions for Children with Special Needs**

The different policies and acts of the state and central government along with the different school boards have given resolutions for providing educational concessions to Spastic, Blind, Physically Handicapped, Autistic, Dyslexic and candidates with disabilities as defined in the Persons with Disabilities Act (1995) referred to as 'special category candidates'. Some of them are as follows:

- Exemption from studying third language up to middle school level (i.e. Class VIII) is given to special category candidates.
- At secondary school level a special category candidate has an option to opt for one language and any four of the following electives: Mathematics, Science, Social Science, Another Language, Music, Painting and Home Science.
- Oral exams can be taken from Std. I to std. IX.

- Permission to use an amanuensis; the amanuensis is a student of class lower than the one for which the candidate will be taking the examination. The Centre Superintendent of the Examination Centre chooses a suitable amanuensis and forwards his/her particulars to the Regional Officer concerned for consideration and approval; the services of amanuensis are provided free of cost to candidates. The amanuensis may be paid remuneration as prescribed from time to time by the Boards. The candidate may be permitted to use the services an amanuensis in all or any of the papers.
- The Special category candidate may be exempted from drawing maps, diagrams and graphs and their marks are given accordingly. They are permitted to draw the diagrams etc. themselves, if desired by them.
- Special category candidates appearing for X or XII examination are allowed additional time of 60 minutes for a paper of 3 hours duration and 40 minutes for a paper of 2 hours duration.
- The Centre Superintendent shall make the sitting arrangements for special category candidates on the ground floor, as far as possible.
- Question papers of Maths and Science in Braille for Class X for Blind candidates and separate question papers in enlarged print for Mathematics and Science in Class X are provided for candidates having visual impairment in the CBSE board.
- To facilitate easy access, a few selected schools are made examination centres for special students; candidates can also select a centre close to his / her house.
- Blind candidates also may have the facility to use computer or a typewriter for writing answers;
- It is not mandatory for these candidates to do the calculations themselves. Use of calculator is permitted.
- Question paper may be read out to the student, but not explained.
- At the time of promotion the child gets 20 grace marks instead of 15.

### **2.13 Summing Up**

In this unit we discussed the different policies and programmes that were implemented in support of inclusive education. A gist of these policies is as follows:

- Policies prior to SSA included: IEDC, 1974; NPE, 1986 & 1992; PIED, 1987; DPEP, 1994; PWD Act, 1995; National Trust Act (1999)
- The Sarva Shiksha Abhiyan (SSA, 2000) pledges that every child with special needs, irrespective of the kind, category and degree of disability, is provided education in an appropriate environment. The SSA programme is an attempt



to provide an opportunity for improving human capabilities to all children, through provision of community-owned quality education in a mission mode.

- NCFSE (2000) and NCF (2005) recommend inclusive education for all without specific reference to pupils with Special Education Needs (SEN) as a way of providing quality education to all learners.
- The Amendment to the Constitution in 2001 makes education a fundamental right for those in the 6-14 age group, which covers children with disabilities.
- A Comprehensive Action plan for inclusive education of children and youth with disabilities (2005) advocates inclusive education. It envisages converting selected schools into model inclusive schools in order to demonstrate what is necessary and possible and then make all schools "disabled-friendly" by 2020.
- National Policy for Persons with Disabilities (2006) recognizes that persons with disabilities are valuable human resource and seeks to create an environment that provides them with equal opportunities, protection of their rights and full participation in society.
- UN - Convention on the Rights of Persons with Disabilities (UNCRPD India, 2007) helps promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.
- The Right of Children to Free and Compulsory Education Act (2009) provides free and compulsory education to all children in the age group of six to fourteen years and entitles all children to have the right to education enforced as a fundamental right.

Legislation in favour of inclusion has also been supported by circulars issued by various state and central boards of education. These legislations and policies reiterate the fact that there is a need for mainstreaming of the persons with disabilities in the general education system through inclusive education.

## 2.14 Exercises

Q.1 Match the following:

A	B
a) SSA (2000)	1) Equal opportunities and protection of rights of disabled.
b) RCI (1992, amended 2000)	2) Prevention, early detection and intervention of disabilities.
c) PWD Act (1995)	3) Regulate and monitor services given to persons with disabilities.
d) National policy for persons with disabilities (2006)	4) Universalise elementary education.

**Answer key:** a – 4; b – 3; c – 1; d – 2

Q.2 Descriptive Questions:

1. Explain the role of Sarva Shiksha Abhiyan (SSA, 2000) for children with special needs.
2. Describe the legislative provisions for learners with special educational needs according to the National Policy for Persons with Disabilities (2006).
3. Explain the salient features of the Right to Education Act (2009).
4. Enumerate educational concessions for learners with special educational needs.

### 2.15 Suggested Reading

- Action plan for inclusive education of children and youth with disabilities (2005) from [http://mhrd.gov.in/inclusive\\_education](http://mhrd.gov.in/inclusive_education)
- Inclusive Education of the Disabled at Secondary Stage (n. d.) from [http://mhrd.gov.in/inclusive\\_education](http://mhrd.gov.in/inclusive_education)
- Integrated Education for Disabled Children Scheme (1974) [http://mhrd.gov.in/policy\\_initiatives](http://mhrd.gov.in/policy_initiatives)
- National Centre for Promotion of Employment for Disabled People (n .d.) from <http://www.ncpedp.org/eductn/ed-scheme02.htm>
- National Curriculum Framework for School Education (2000) from [http://mhrd.gov.in/inclusive\\_education](http://mhrd.gov.in/inclusive_education)
- National Curriculum Framework Review (2005). Education of children with special needs, National focus group, Position papers, National concerns, 3. New Delhi: NCERT.
- National Policy for Persons with Disabilities (2006) from <http://socialjustice.nic.in/disabled/tm>
- National Policy on Education (1986) from <http://www.education.nic.in/policy/npe86-mod92.pdf>
- National Policy on Education Plan, Annual report (2004-05) from <http://www.education.nic.in/Annualreport2004-05/PolicyPlan.pdf>
- National Trust Act for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities (n. d.) from <http://www.nationaltrust.org.in>
- Persons with Disability Act (1995) from <http://socialjustice.nic.in/>
- Project Integrated Education for the Disabled (1987) from [http://mhrd.gov.in/policy\\_initiatives](http://mhrd.gov.in/policy_initiatives)
- Rehabilitation Council of India Act (1992). RCI information booklets from [http://www.rehabcouncil.nic.in/programmes/info\\_guide.htm](http://www.rehabcouncil.nic.in/programmes/info_guide.htm)
- Right of Children to Free and Compulsory Education Act (2009) from [http://mhrd.gov.in/policy\\_initiatives](http://mhrd.gov.in/policy_initiatives)

## **MODULE 3**

### **INTRODUCTION TO CHILDREN WITH SPECIAL NEEDS**

#### **3.1 Learning Objectives**

After going through this unit, it is expected that you will be able to:

- Identify the children with special needs
- Understand the needs of children with special needs

#### **3.2 Content Outline**

- ❖ Definition and characteristics of children with:
  1. Sensory motor needs: hearing, visual and physically challenged
  2. Intellectual needs: (gifted, talented and mentally challenged children)
  3. Developmental needs: (autism, cerebral palsy, learning disabilities)
  4. Social and emotional problems, scholastic backwardness, underachievement, slow learners
  5. Children with special health problems, environmental/ecological difficulties
  6. Children belonging to other marginal groups
- Importance of early detection, Functional assessment for development of Compensatory skills

#### **3.3 Introduction**

The term 'Children with Special Needs' refers to children who need special help or care in some form. 'Children with Special Needs' is an umbrella term used for a staggering array of diagnoses. Children with special needs may have mild learning disabilities or profound cognitive impairment; they may have food allergies or a terminal illness. A child's special needs may include developmental delays that catch up quickly or remain entrenched. It may also refer to children with occasional panic attacks or serious psychiatric problems. No matter the reason, the designation is useful. It can help the teacher and parents to obtain needed services, set appropriate goals, and gain an understanding of the child and his/her needs.

## 3.4 Definition and Characteristics of Children with Special Needs

### 3.4.1 Sensory Motor Needs

Sensory disabilities arise when a child is unable to successfully perform due to impairment to the senses. Sense organs include organs of taste, smell, sensations of heat, cold, touch, pain, pressure, sight and hearing. Various sense organs receive information from the environment and, along with the brain, are a part of our Central Nervous System, a highly organised and complex system of our bodies. Among the senses, impairments to the senses of sight and hearing, i.e. visual impairment and hearing impairment have considerable implications for teaching-learning in the classroom. We rely significantly on both these senses, of hearing and sight, for our learning.

Physical or Motor disabilities arise when a child is unable to participate due to impairment of the physical organs affecting mobility, movement, and / or dexterity. These may include impairment or absence of the muscles, bones or limbs.

#### ❖ Children with Hearing Impairment

Hearing impairment is the inability of an individual to hear sounds adequately. This may be due to improper development, damage or disease to any part of the hearing mechanism. Hearing impairment refers to both complete and partial loss of the ability to hear. Hard of hearing refers to conditions in which individuals are partially unable to detect or perceive at least some frequencies of sound which can typically be heard by others. Deafness is the complete loss of hearing ability in one or two ears.

**Table 3.1 Categories of hearing impairment**

S. No.	Type of Impairment	DB level	Speech discrimination	Percentage of impairment
1.	Mild	26 to 40 dB in better ear	80 to 100% in better ear	Less than 40%
2.	Moderate	41 to 60 dB in better ear	50 to 80% in better ear	40% to 50%
3.	Severe	61 to 70 dB Hearing impairment in better ear	40 to 50% in better ear	51% to 70%
4.(a)	Profound	71 to 90 dB	Less than 40% in better ear	71% to 100%
(b)	Total deafness	91 dB and above in better ear	Very poor discrimination	100%

\*Source: ayjnihh.nic.in

### ***Characteristics of children with hearing impairment:***

- Discharge from ear / malformation of the ear.
- Pain / Irritation in ear.
- Trying to listen from a closer distance.
- Ask for the instructions repeatedly.
- Not able to write down properly from an oral dictation.
- Trying to listen to the echo reflection rather than to the speaker.
- Frequently ask a colleague to show his workbook.
- Problems in paying attention in the class.
- Favour one ear for listening purposes.
- Problems when anyone speaks from behind.
- Child speaks loudly or too softly.
- Exhibit voice problem and mispronunciation.
- Child gives irrelevant answers.
- The child keeps away from his age mates.
- The child is unable to respond when called from the other room.
- The child understands only after few repetitions.

If the child shows one or more of these characteristics, s/he should be carefully examined by a qualified ENT specialist, an audiologist, and also by a speech therapist for complete evaluation.

### **❖ Children with Visual Impairment**

Visual impairment is a term used to describe any kind of vision loss, whether it's someone who cannot see at all or someone who has partial vision loss.

In Visual impairment (or vision impairment) the vision loss of a person may be due to disease, trauma, or congenital or degenerative conditions that cannot be corrected by conventional means, such as refractive correction, medication, or surgery.

According to the Persons with Disability Act, 1995, blindness refers to a condition where a person suffers from any of the following conditions, namely; total absence of sight; or visual acuity not exceeding 6/60 or 20/200 (Snellen) in the better eye even with correction lenses; or limitations of the field of vision subtending an angle of 20 degree or worse.

According to the Persons with Disability Act, 1995, person with low vision means a person with impairment of visual functioning even after treatment or standard refractive correction but who uses or is potentially capable of using vision for the planning or execution of a task with appropriate assistive device.

The terms "partially sighted", "low vision", "legally blind" and "totally blind" are used by schools, colleges, and other educational institutions to describe students with visual impairments. They are defined as follows:

1. *Partially sighted* indicates some type of visual problem, with a need of person to receive special education in some cases;
2. *Low vision* refers to impairment of vision less than 6/18 to 6/60 with best correction in better eye, or impairment of field vision. It is a severe visual impairment, not necessarily limited to distance vision. Low vision applies to all individuals with sight who are unable to read at a normal viewing distance, even with the aid of eyeglasses or contact lenses. They use a combination of vision and other senses to learn, although they may require adaptations in lighting or the size of print, and, sometimes, Braille;
3. *Legally blind* indicates that a person has less than 20/200 vision in the better eye after best correction (contact lenses or glasses), or a field of vision of less than 20 degrees in the better eye; and
4. *Totally blind* students learn via Braille or other non-visual media.

**Table 3.2 Categories of visual impairment**

Categories		Better Eye	Worse Eye	Percentage Impairment
Category O	Mild	6/9 to 6/18	6/24 to 6/36	20%
Category I	Moderate	<6/18 to 6/60	6/60 to Nil	40%
Category II	Severe	<6/60 to 3/60 or Field of Vision 10°-20°	3/60 to Nil	75%
Category III	Profound	3/60 to 1/60 or Field of Vision 10°	Finger Counting at 1 ft. to Nil	100%
Category IV	Blind	F.C. at 1 ft. to Nil. Field of Vision 10°	F.C. at 1 ft. to Nil.	100%
One Eyed Person		6/6	F.C. at 1 ft. to Nil or field of vision 10°	30%

Note: F.C. = Finger Count.

**Characteristics of children with visual impairment:**

- Continuous watering of the eyes.
- Recurrent redness in the eyes.
- Frequent irritation in the eyes / frequent blinking.
- Squinting, Crossed or turned eye.
- Inappropriate stumbling upon objects or bumping into other people.
- Titling of the head or closure of one eye to see objects.
- Difficulty in counting the fingers of an outstretched hand at a distance of one meter.
- Moving head side to side while reading.

- Difficulty in recognizing distant objects.
- Difficulty in doing fine work requiring perfect vision.
- Holding books too close or too far from the eyes.
- Frequently ask other children when taking down notes from the blackboard.
- Exhibit difficulty in reading from the blackboard.
- Hitting against the objects on the side.
- Pupils of the eyes that are excessively large or small.
- Nystagmus (eyes that bounce around, dancing eyes, or strange eye movements).
- Doesn't blink at sudden bright lights.
- Eye pressing (rubbing or poking eyes).
- Not making eye contact when spoken to.
- Self-stimulating activities such as rocking, bouncing, and head nodding.

If the child shows one or many of these characteristics, s/he should be properly examined by a qualified ophthalmologist to see if the existing condition can be improved by medical treatment or by using spectacles.

#### ❖ **Physically Challenged Children**

A child who is physically challenged or has an orthopaedic impairment refers to a child who has the defects (malformations or malfunction) in bones, muscles or joints because of which the child may not be able to use the limbs effectively. Children with orthopaedic impairment are also referred to as physical impairment, crippled (deformation or loss of the lower limbs), loco-motor handicap (inability to use the lower limbs for locomotion and movement) and neuromuscular impairment (dysfunction of the nervous system which affects the muscle co-ordination).

#### ***Characteristics of children with orthopaedic impairment:***

A physically challenged child may have one or more of these characteristics:

- Deformity in the neck, hand, finger, waist or legs.
- Difficulty in sitting, standing or walking.
- Difficulty in lifting, holding or keeping things on floor.
- Difficulty in moving or using any part of body.
- Difficulty in holding a pen.
- Jerks during walking.
- Lacks bodily coordination.
- Epileptic movements or tremors.
- Frequent joint pains.
- Any part of the body is amputated.

The child should be carefully examined by a qualified orthopaedic surgeon and referred to a physiotherapist or prosthetic / orthotic technician as needed.

### 3.4.2 Intellectual Needs

The way a child learns is impacted and, also influenced, by how different sense organs, parts of our bodies and the brain, are co-ordinating or how they are affected. Since intellectual impairments and giftedness are primarily associated with the working of the brain and/or how brain processes the information received, these are addressed under cognitive and intellectual needs. The conditions that affect learning due to the brain's functioning have been under research as well as educational studies for a long time.

#### ❖ Gifted and Talented Children

Giftedness refers to any ability significantly higher than average. It is usually believed to be an innate, personal aptitude that cannot be acquired through personal effort. Giftedness may be general or specific to a particular field. Intellectual giftedness is not the only form of talent. Howard Gardner's theory of multiple intelligences proposes several kinds of non-intellectual "intelligences", such as bodily - kinaesthetic intelligence and interpersonal intelligence.

"Gifted and talented" children can thus be defined as those who by nature of outstanding abilities are capable of high performance. The term "outstanding abilities" may refer to general intellectual ability, specific academic aptitude, leadership ability, ability in the visual or performing arts, creative thinking, or athletic ability.

#### ***Characteristics of Gifted children:***

- **Above average ability (general):**

High levels of abstract thought; adaptation to novel situations; rapid and accurate retrieval of information.

- **Above average ability (specific):**

Applications of general abilities to specific area of knowledge; capacity to sort out relevant information; capacity to acquire and use advanced knowledge and strategies while pursuing a problem.

- **Task commitment:**

Capacity for high levels of interest, enthusiasm; hard work and determination in a particular area; self-confidence and drive to achieve; ability to identify significant problems within an area of study; setting high standards for ones work.

- **Creativity:**

Fluency, flexibility and originality of thoughts; open to new experiences and ideas; curious; sensitive to aesthetic characteristics; willing to take risks.



- **Physical characteristics:**

Developmental tasks are accomplished earlier than normal; superior in height and strength; mentally more alert and often labelled eccentric because they think divergently; greater attention span and memory in their field of talent/giftedness; social skills may have good interpersonal skills or may feel isolated; vocationally excellent in their area of interest; high levels of energy when involved in their area of interest/talent.

- **Other characteristics:**

Achieve tasks on an advanced schedule; creative – divergent thinking, unusual ideas and a strong imagination; exceptional talent in one more specific area of interest; leadership qualities – initiate activities and make plans to achieve goals; may exhibit an intense interest in visual and performing art and charismatic.

- ❖ **Mentally Challenged Children**

An individual is considered to have intellectual impairment (mentally challenged) if his /her intellectual functioning level (IQ) is below 70-75, significant limitations exist in two or more adaptive skill areas and the condition is present from childhood.

**Table 3.3 Categories of Mentally Challenged Children**

<i>Clinical Classification</i>	<i>Educational Classification</i>	<i>IQ Range</i>	<i>Mental Age</i>	<i>Focus of Training</i>	<i>Education Achievement</i>	<i>Adaptive Behaviour</i>
Profound	Life Support	<20	<3.08	-	-	Dependent for self care
Severe	Trainable	20-34	3.09-6 Years	Self care skills	Academic training	Self care under effective supervision
Moderate	Trainable	35-49	6.01-8.05 years	Self care skills Practical Skills	Equivalent of II or III grade children	Independent in self care, engage in semi-skills or simple skilled jobs
Mild	Educable	50-69	8.06-10.10 years	Vocational training, Personal social skills, Functional education	IV - V grade level. Cannot handle money without supervision	Independent in self care, engage in semi - skilled or simple skilled jobs
Border line	Slow-learner	70-80	10.11 - 13.03 Year	Academic skill Vocational training	Some pass 10th standard through open school	Achieve adequate social and vocational adjustment. Capable of skilled and semi-skilled jobs

### ***Characteristics of mentally challenged children:***

- If a child has undue problems in eating, dressing and toilet activity independently by the age of 6 years
- Problems in holding a pencil/or using a pair of scissors.
- Unable to play and frequent tantrums while playing with the peers.
- Usual inattentiveness to spoken speech or when addressed.
- Requires too many repetitions to remember simple things.
- Exhibit problems in expressing the needs in a clear language unlike the other peers.
- Unable to concentrate on tasks even for a short period of time.
- Inappropriate oral responses.
- Difficulty in learning new things.
- Poor comprehension of lessons taught in the class.
- Difficulty in conceptualization.
- More efforts are required in learning or practicing as compare to the peers.
- Takes an unreasonable amount of time in perfecting any work.
- Very poor academic achievements.
- Show an undue dependency on visual clues or material for learning.

The child should be properly assessed by a qualified psychologist or a teacher who is specially trained to take care of mentally challenged children.

### **3.4.3 Developmental Needs**

The term developmental disability means a severe, chronic disability of an individual 5 years of age or older that is attributable to a mental or physical impairment or combination of mental and physical impairments; is manifested before the individual attains age 2; is likely to continue indefinitely. When applied to infants and young children it means individuals from birth to age 5, who have substantial developmental delay or specific congenital or acquired conditions with a high probability of resulting in developmental disabilities if services are not provided.

It results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency. It reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, supports, or other assistance that is of lifelong or extended duration and is individually planned and coordinated.

- **Children with Autism**

Autism is a complex developmental disability that typically appears during the first three years of life. It is also referred to as pervasive developmental disorder. It is a brain disorder that affects a person's ability to communicate, form relationships with others, and respond appropriately to the environment. Core features include impaired social interactions, impaired verbal and nonverbal communication and restricted and repetitive patterns of behaviour. People with autism are not physically disabled and 'look' just like anybody without the disability.

Autism is a spectrum disorder that encompasses a wide continuum of behaviour. Symptoms may vary from quite mild to quite severe. Mild autism is known as

- ***Asperger's syndrome.***

Prevalence is limited but it appears to be more common in males. It is characterized by severe and sustained impairment in social interaction, development of restricted and repetitive patterns of behaviour, interests, and activities. These characteristics result in clinically significant impairment in social, occupational, or other important areas of functioning. However there are no clinically significant delays in language or cognition or self-help skills or in adaptive behaviour, other than social interaction.

- ***Rett's syndrome***

*Rett's syndrome* is relatively rare, affecting almost exclusively females. After a period of normal development, sometime between 6 and 18 months, autism-like symptoms begin to appear. The little girl's mental and social development regresses—she no longer responds to her parents and pulls away from any social contact. If she has been talking, she stops; she cannot control her feet; she wrings her hands. Some of the problems associated with Rett's syndrome can be treated.

Very few children who have an autism spectrum disorder diagnosis meet the criteria for ***childhood disintegrative disorder*** (CDD). It has a strong male preponderance. Symptoms may appear by age 2, but the average age of onset is between 3 and 4 years. Until this time, the child has age-appropriate skills in communication and social relationships. The long period of normal development before regression helps differentiate CDD from Rett's syndrome.

***Characteristics of children with autism spectrum disorders:***

- **Communication**
  - Is unable to start or sustain a conversation
  - Develops language slowly or not at all

- Repeats words
- Reverses pronouns
- Uses nonsense rhyming
- Communicates with gestures instead of words
- Has a short attention span
- **Social interaction**
  - Shows a lack of empathy (can't understand that other people feel differently or know different things)
  - Has difficulty making friends
  - Is withdrawn
  - Prefers to spend time alone rather than with others
  - Is less responsive to social cues such as eye contact or smiles
- **Sensory impairment**
  - Has heightened or decreased senses of sight, hearing, touch, smell, or taste
  - Mouths objects
  - Rubs surfaces
  - Has diminished response to pain
  - Does not startle at loud noises
  - May withdraw from physical contact because it is over-stimulating or overwhelming
- **Play**
  - Shows a decreased level of pretend or imaginative play
  - Shows a decreased level of imitation of the actions of others
  - Prefers solitary or ritualistic play
- **Behaviours**
  - Uses repetitive body movements
  - Shows a strong need for sameness
  - "Acts out" with intense tantrums
  - Has very narrow interests
  - Demonstrates perseveration (an obsessive interest in a single item, idea, activity, or person)
  - Displays an apparent lack of common sense
  - Shows aggression to others or self
  - Is overactive or is very passive

## ❖ **Children with Cerebral Palsy**

Cerebral palsy is a condition caused by damage to the brain, usually occurring before, during, or shortly after birth. "Cerebral" refers to the brain and "palsy" to a disorder of movement or posture. It is not progressive. Depending on which part of the brain is damaged and the degree of involvement of the central nervous system, one or more of the following may occur: tonal problems, involuntary movement, spasms, problems with gait and mobility, seizures, impairment of sight, hearing and/or speech, and mental retardation.

### ❖ **Types of cerebral palsy**

#### 1. **Spastic Cerebral Palsy-**

It is characterised by stiff and difficult movement. It occurs in about 70% of cases. The spasticity is due to upper motor neuron involvement and may mildly or severely affect motor function. Depending on which limbs are affected the syndrome may produce hemiplegic (affects one side of the body), paraplegia (affects lower extremities), quadriplegia (loss of use of all four limbs), or diplegia condition (affects either both arms or both legs).

Affected limbs usually are underdeveloped and show increased deep tendon reflexes, weakness, and a tendency toward contractures. A scissors gait and toe walking are characteristic. In mildly affected children, impairment may occur only during certain activities (e.g. running). With quadriplegia, an associated impairment of oral, lingual, and palatal movement, with consequent dysarthria (slurred or slow speech), is common.

#### 2. **Athetoid Cerebral Palsy-**

It involves involuntary and uncontrolled movement. It occurs in about 20% of cases. Slow, writhing, involuntary movements may affect the extremities (athetoid) or the proximal parts of the limbs and the trunk (dystonia); abrupt, jerky, distal movements (choreiform) also may occur. The movements increase with emotional tension and disappear during sleep. Dysarthria occurs and is often severe.

#### 3. **Ataxic Cerebral Palsy-**

It is a disturbed sense of balance and depth perception and occurs in about 10% of cases. Weakness, in-coordination, and intense tremors produce unsteadiness, a wide-based gait, and difficulty with rapid or fine movements.

#### 4. **Mixed CP -**

Many people with cerebral palsy may have a combination of these. This is referred to as mixed cerebral palsy. It is not uncommon, and is most often a mixture of spasticity and athetoid movements, with tight muscle tone and involuntary reflex.

## ❖ **Children with Learning Disabilities**

A "learning disability" is a disorder in one or more of the basic psychological processes involved in understanding and using language spoken or written which may manifest itself in an imperfect ability to listen, think, speak, read, spell, or do mathematical calculations. In learning disability the brain "processes" information differently than most other learners. Certain kinds of information get stuck or lost while travelling through the brain. It causes a "discrepancy" between the ability and achievement of the learners. This means that the learner is smarter than the performance in school tests.

### ***Types of learning disabilities:***

#### **1. *Developmental reading disorder (Dyslexia):***

A language-based disability in which a person has trouble understanding written words. It may also be referred to as reading disability or reading disorder.

#### ***Characteristics of children with dyslexia:***

- Problems with reading, making sense out of written language.
- Lack of awareness of sounds in words, sound order, rhymes or sequence of syllables.
- Difficulty in decoding words – single word identification.
- Difficulty encoding word spellings.
- Poor sequencing of numbers, of letters in words, when read or written, e.g. b-d, sing-sign, left-felt, soiled-solid, 12-21.
- Problems with reading comprehension.
- Difficulty expressing thoughts in written form.
- Delayed spoken language.
- Imprecise or incomplete interpretation of language which is heard.
- Difficulty in expressing thoughts orally.
- Confusion about directions in space and time (right and left, up and down early and late, yesterday and tomorrow, months and days).
- Difficulty with handwriting.
- Difficulty in math - often related to sequencing of steps or directionality or the language of math.

#### **2. *Developmental writing disorder (Dysgraphia):***

Disorders of writing are referred to as dysgraphia. Problems with handwriting or with writing in a way that makes no sense to others or themselves. Extremely poor handwriting or the inability to perform the motor movements required for handwriting.

### ***Characteristics of children with Dysgraphia:***

- Difficulty with alphabet symbols
- Does not remember how to write certain letters or numerals
- Distorts shapes of certain letters or numerals
- Overall writing effort is awkward and uneven.
- Has difficulty transferring from manuscript to cursive style.
- Continues to print manuscript style long after introduction to cursive style.
- Fragments certain letter or numeral forms.
- Writing is virtually illegible.
- Has difficulty distinguishing between capital and lowercase letter forms
- Mixes capital and lowercase forms.
- Confusion with directionality
- Writes certain letters, numerals, or words in mirror image.
- Tends to write on mirror side (left side) of vertical midline when moving to next column.
- Marks from bottom to top when forming certain letters or numerals.
- Erases or overprints habitually to change directions of certain letters or numerals.
- Adds unnecessary letters or sound units to written words.
- Repeats the same letters or syllables in written words.

### 3. ***Developmental mathematical disorder (Dyscalculia):***

Dyscalculia is a broad term for severe difficulties in math. It includes all types of math problems ranging from inability to understand the meaning of numbers to inability to apply math principles to solve problems.

### ***Characteristics of children with dyscalculia:***

- Normal or above average verbal skills and a good visual memory for the printed word.
- Difficulty understanding maths concepts, rules and sequences, especially time and money.
- A tendency to make substitutions, transpositions, omissions and reversals when reading and writing numbers.
- A poor sense of direction (e.g. confusing left and right, getting easily lost, losing things) and time (e.g. often arriving late).
- Difficulty recalling names and faces.
- Poor mental maths skills.
- Poor coordination when involved in activities requiring change of direction such as aerobics, exercise and dance sessions.
- Difficulty with keeping score in games or working out strategies in chess.

The child should be examined by a qualified psychologist, paediatrician or a special educator for initial screening and further consultations. One of the main characteristic of children with learning disabilities is that their verbal skills are often much better than the writing skills. Therefore, they should be formally tested in order to elucidate their disability in detail.

### 3.4.4 Children with Social and Emotional Problems

#### Attention deficit disorder / attention deficit hyperactivity disorder

Attention Deficit Disorder (ADD) / Attention Deficit Hyperactivity Disorder (ADHD) is a neurobiological disorder characterized by developmentally inappropriate impulsivity, attention, and in some cases, hyperactivity beginning in childhood, "typically" by the age of 7. Children with ADHD often have a 2-4 year developmental delay and frequently have other coexisting conditions. To be diagnosed with ADHD, individuals must show at least 6 of the characteristics in either or both of the categories below. Symptoms must be more frequent or severe than in other children the same age. Symptoms must be present for at least 6 months.

**Table 3.4 Characteristics of Children with ADD and ADHD**

<b>ADHD predominately inattentive type</b>	<b>ADHD predominately hyperactive-impulsive type</b>
Fails to give close attention to details or makes careless mistakes	Has difficulty remaining seated.
Has difficulty sustaining attention.	Fidgets with hands or feet or squirms in chair.
Does not appear to listen.	Difficulty engaging in activities quietly.
Struggles to follow through on instructions.	Acts as if driven by a motor.
Has difficulty with organization.	Talks excessively.
Avoids or dislikes tasks requiring sustained mental effort.	Blurts out answers before questions have been completed.
Loses things.	Difficulty waiting or taking turns.
Is easily distracted, interrupts or intrudes upon others.	Is forgetful in daily activities.

#### ❖ **Oppositional and defiant disorders (ODD)**

Oppositional defiant disorder (ODD) is an ongoing pattern of disobedient, hostile and defiant behaviour toward authority figures which goes beyond the bounds of normal childhood behaviour. Children who have it may appear very stubborn.



### **Characteristics of children with ODD:**

- Excessive, often persistent anger
- Frequent temper tantrums or angry outbursts, may threaten others
- Disregard for authority
- Often annoy others on purpose
- Blame others for their mistakes and are easily annoyed
- Resentful and often take revenge from others
- Makes unreasonable demands
- Cannot accept 'no'
- Cannot delay gratification

In order for a child or adolescent to qualify for a diagnosis of ODD these behaviours must cause considerable distress for the family and/or interfere significantly with academic or social functioning. Interference might take the form of preventing the child or adolescent from learning school material or making friends, or placing him or her in harmful situations. These behaviours must also persist for at least six months.

### **❖ Mood disorders**

Mood disorders are amongst the most common health problems facing children as they grow up. Mood disorders in children are capable of disrupting how they act and behave at home, at school and with friends. They lose interest and pleasure in their day-to-day activities, have low self-esteem and are hypersensitive to rejections or disapprovals. In addition they have difficulty understanding and maintaining relationships and tend to isolate themselves from their family, friends and other acquaintances.

Some of the types of mood disorders commonly observed in children are:

- **Episodic depression:**

This is a chronic disorder, characterized by consistent depressed, irritable mood which normally persists for at least a year. It is a pattern-based disorder, so some days a child is depressed and the other days they can appear as carefree as other children. Some of the symptoms are similar to those of major depressive disorder such as irregular eating and sleep patterns. Children experiencing longer episodes of depression usually have poor performance in class and lower grades.

- **Episodic manic:**

It is a period of highly depressive or irritable mood, and symptoms include persistent sadness, irritability, change in eating patterns, weight gain or loss, irregular sleep patterns, and negative thoughts. A single spell of major

depression normally lasts for 1-2 weeks, yet it is likely to recur if the person is not treated properly. Major depression can suppress mental development, making it difficult for children to adequately express themselves. You can expect bouts of anger, extreme mood swings, misbehaviour, disobedience, and other extreme reactions.

- **Bipolar Disorder:**

Although more common in adults, children can suffer from bipolar disorder as well. It is characterized by cyclic mood changes, from manic (aggressive, over-active) to depressive to manic to depressive and so on. This mood switching can be rapid or gradual. Bipolar disorder mostly affects a child's thinking and judgment abilities. It can also lead to embarrassment due to extreme behaviour.

- ❖ **Children with Scholastic Backwardness and Underachievement**

An underachiever is a person who fails to achieve his or her potential or does not do as well as expected. Academic underachievement may be seen in individuals who have not realized their apparent potential because of learning disabilities, ADHD, and many other educational problems

Scholastic backwardness is one of the commonest educational problems encountered in children and consists of the fact that the child's performance at school falls below the expectations i.e. according to the level of intelligence. The causes for a child being poor in academics are varied and range from physical causes to psychological causes the later being more common.

***Some common reasons for scholastic backwardness:***

- *Early conditioning and Family environment:* The family environment is one of the most important factor for a child doing well in academics and parents play a very important role. Proper study environment, appropriate encouragement, spending quality time with their children will give the desired result. At times parents can have great expectations from their child and can push the child unnecessarily leading to fall in academic levels.
- *School environment:* Environment not suited for academics like harsh teacher, demanding parents, overcrowded class rooms, lack of encouragement from school authorities, poor health leading to repeated absence from school, bullying in school, being severely reprimanded at school and separation anxieties are some of the factors for academic decline.
- *Intelligence:* Children who have intellectual disability can have problems in academics as taught in regular school. On the opposite end of the spectrum

children who have very high IQ scores can become bored and feel lack of stimulation in the school curriculum lag behind in academics

- *Attention deficit hyperactive disorder (ADHD):* Children suffering from ADHD can suffer from poor academic performance.
- *Sensory and physical challenges:* Auditory and visual disturbances can lead to academic backwardness which at times can be difficult to spot in the early years of schooling. Frequent physical illnesses leading to frequent absenteeism lead to a fall in academics.

### **Slow Learners**

A slow learner is a child of below average intelligence, whose thinking skills have developed significantly more slowly than the norm for his/her age. This child will go through the same basic developmental stages as other children, but will do so at a significantly slower rate. However, this development, while being slower, nevertheless will be relatively even.

#### ***Characteristics of Slow Learners:***

- *Developmental:* May have immature language patterns or speech problems; functions at ability but significantly below grade level.
- *Social:* Is prone to immature interpersonal relationships; poor judgement, immature social behaviour, prefers company of younger children.
- *Personal:* Has difficulty following multi-step directions; Lives in the present and does not have long range goals; shows frustration, aggression, anxiety.
- *Academic:* May show proficiency with particular tasks rather than a subject areas, poor memory, difficulties understanding several steps in a task; works well with "hands-on" material (i.e. labs, manipulative, activities.); has a poor self-image; works on all tasks slowly; masters skills slowly; some skills may not be mastered at all; scores consistently low on achievement tests.
- *Learning:* Needs to have new information linked to old, difficulties transferring information learned in one situation to other situations; has few internal strategies (i.e. organizational skills, difficulty transferring and generalizing information.)

### **3.4.5 Children with Special Health Problems**

- **Epilepsy**

Epilepsy is a symptom of a neurological disorder which causes a malfunction of the electrical signals that control the brain. It is characterized by seizures. A seizure may last anywhere from few seconds to several minutes. A seizure may appear as a brief stare, an unusual movement of the body, a

change of awareness, or a convulsion. The two categories are partial (this is when the seizure activity begins in a particular spot in the brain) and generalized (this is when the seizure activity affects the whole brain with no obvious starting point). A doctor will probably order an EEG (a test where wires are glued to the scalp to record the electricity given off by the brain).

- **Spina Bifida**

Spina Bifida is a birth defect called a neural tube defect (a disorder involving incomplete development of the brain, spinal cord, and/or their protective coverings). It is caused by the failure of the foetus's spine to close properly during the first month of pregnancy. The spinal opening can be surgically repaired, but the nerve damage is permanent, and may result in varying degrees of paralysis of the lower limbs, learning disabilities, bowel and bladder complications, and hydrocephalus.

There is no cure for Spina Bifida because the nerve tissue cannot be replaced or repaired. Treatment may include surgery, medication, and physiotherapy. Many children with Spina Bifida will need assistive devices such as braces, crutches, or wheelchairs. Surgery to close the newborn's spinal opening is generally performed within 24 hours after birth to minimize the risk of infection and to preserve existing function in the spinal cord.

- **Down's syndrome**

Down syndrome, also known as trisomy 21, is a genetic disorder caused by the presence of all or part of a third copy of chromosome 21. It is typically associated with physical growth delays, characteristic [facial features](#) and mild to moderate intellectual disability. The average IQ of a young adult with Down syndrome is 50, equivalent to the mental ability of an 8- or 9-year-old child, but this can vary widely. Some of the characteristics of Down syndrome are almond shaped eyes, small ears, small head size, short, broad hands with a single transverse palmar crease (single crease line that extends across the palm of the hand).

- **Multiple sclerosis**

It is a disorder of the central nervous system caused by progressive damage to the outer covering of nerve cells. The disease involves repeated episodes of inflammation of nervous tissue in any area of the central nervous system (brain and spinal cord). The inflammation destroys the covering of the nerve cells in that area (myelin sheath), leaving multiple areas of scar tissue (sclerosis) along the covering of the nerve cells. This results in slowing or blocking the transmission of nerve impulses in that area. This results in decreased nerve

functioning, which can lead to a variety of symptoms because the location and extent of each attack varies. There is usually a stepwise progression of the disorder, with episodes that last days, weeks, or months alternating with times of reduced or no symptoms (remission). Recurrence (relapse) is common although non-stop progression without periods of remission may also occur.

- **Environmental/Ecological Difficulties**

Children are more vulnerable than adults to environmental risks because of a number of factors:

- Children are constantly growing. They breathe more air, consume more food, and drink more water than adults do, in proportion to their weight.
- Children's central nervous, immune, reproductive, and digestive systems are still developing. At certain early stages of development, exposure to environmental toxicants can lead to irreversible damage.
- Children behave differently from adults and have different patterns of exposure. Young children crawl on the ground where they can be exposed to dust and chemicals that accumulate on floors and soils.
- Children have little control over their environment. Unlike adults, they may be both unaware of risks and unable to make choices to protect their health.

Children's health problems resulting from exposure to biologically contaminated water, poor sanitation, indoor smoke, rampant disease vectors such as mosquitoes, inadequate food supply, and unsafe use of chemicals and waste disposal, rank among the highest environmental burden of disease worldwide. Significant progress in reducing the environmental burden of disease on a global scale can only be achieved through focusing on the key risk factors, through a holistic approach.

#### **3.4.6 Children Belonging To Other Marginal Groups**

Marginal groups include individuals who are not considered very important in society and are therefore not included in the main part of society or of a group. Marginalization is the social process of becoming or being made marginal especially as a group within the larger society. Marginalization comprises of those processes by which individuals and groups are ignored or relegated to the sidelines of Political debate, Social negotiation and Economic bargaining.

Marginality is an experience that affects millions of people in India. Marginalised people have relatively little control over their lives, and the resources available to them. This results in making them handicapped in delving contribution to society. A vicious circle is set up whereby their lack of positive and supportive relationships means that they are prevented from participating in local life,

which in turn leads to further isolation. Marginal groups can always be identified by members of dominant society and will face irrevocable discrimination. They have physical and/or cultural traits that set them apart, and which are disapproved of, by a dominant group.

❖ ***Vulnerable marginalised groups:***

Children with disabilities have had to battle against centuries of biased assumptions, harmful stereotypes, and irrational fears. The stigmatization of disability resulted in the social and economic marginalization of generations of children with disabilities. Children belonging to some other vulnerable marginalised groups are:

- *Girls:* Gender inequality exists under different economic, cultural, historical, legal & religious conditions. Girls may be excluded from education, incorporated into certain jobs and occupations and marginalized in others. In general they have been marginalized in every country and culture. Girls belonging to lower classes, lower castes, illiterate, and the poorest region have different levels of marginalization than their better off counterparts.
- *Schedule Castes:* The caste system has been a hierarchical social system based on underlying notions of purity and pollution. The marginalization of Dalits influenced all spheres of their life. They have been made dependent on others for their livelihood. They lived in a state of oppression, social disability and helplessness. Low literacy rates, poor housing conditions, and other physical, psychological, emotional and cultural aspects lead to their segregation & marginalisation
- *Scheduled Tribes:* The Scheduled Tribes like the Scheduled Castes face structural discrimination within the Indian society. Unlike the Scheduled Castes, the Scheduled Tribes are a product of marginalization based on ethnicity. In India, the Scheduled Tribes population is considered to be socially and economically disadvantaged. They are mainly landless with little control over resources such as land, forest and water. They constitute children of a large proportion of agricultural, casual, plantation and industrial labourers. This has resulted in poverty among them, low levels of education, poor health and reduced access to healthcare services
- *Other groups:* There are some groups like abandoned children, beggars, street children, child labourers child prostitutes, delinquent children, imprisoned children, migrant and nomadic children, orphans and children of sex workers who face additional forms of discrimination. Commercial and sexual exploitation and other forms of violence and abuse are very common amongst these children.

### **3.5 Importance of Early Detection, Functional Assessment for Development of Compensatory Skills**

Scientific research consistently shows that the first three years of life are critical for the development of brain structure and functioning. It is therefore vital that delays and disabilities are identified as early as possible so that the children receive the benefits of early detection and intervention. The emphasis should be on screening infants from birth through 2 years of age in order to create their complete developmental profile. This helps to identify children who should receive more intensive diagnosis or assessment.

Some health conditions associated with disability may be detected during pregnancy where there is access to prenatal screening, while other impairments may be identified during or after birth. Screening or surveillance of children's development may take place during visits to general child health-care professionals.

There may be targeted early identification procedures, such as screening for visual and hearing impairments in health-care or education settings. Public health activities, such as immunization campaigns, may also provide opportunities for early identification. Some families may also become concerned about their child's development if there are delays in the achievement of key developmental milestones such as sitting, walking or talking.

Unfortunately many children with disabilities particularly those with "mild to moderate" disabilities, are not identified until they reach school age. Systems for early identification are required in order to facilitate timely access to services to support the development of children at significant risk for developmental delays. It is important to ensure that early identification does not contribute to further discrimination and exclusion from mainstream services such as education. Ethical issues may also arise unless screening leads to: comprehensive assessment; the design of appropriate intervention plans; and timely and appropriate management and care. Comprehensive tracking and follow-up systems can ensure that children who are identified through screening subsequently receive assessments and appropriate services.

#### **❖ Functional Assessment**

Assessment is collecting and bringing together of information about a child's needs which may include social, psychological, and educational evaluations used to determine services. It means assessment is a systematic method of gathering information in order to describe functioning, determine needs and set priorities and goals. Functional Assessment is an informal way of

collecting information about the child regarding how he functions in a given context. It is done through observation, interviews or questionnaires.

The purpose of assessment is to identify children with disabilities; To know what to teach and the best method to teach; To identify appropriate programme and strategies; To classify and place the child in the appropriate programme; To be aware of child's strengths and weaknesses; To develop an Individualised Educational Plan (IEP).

Accurate assessment is an important starting point for better understanding and anticipating the needs of children with disabilities and their families. Assessment is not an end in itself. Rather its goals are to obtain useful and accurate information about a child's sensory-motor, cognitive, communication, social-emotional skills, functioning skills and surrounding environment. It assists parents, health-care providers, teachers and others to understand better, plan for and support the development and inclusion of a child with a disability. Assessment should be linked to intervention and should be an ongoing process of systematic observation and analysis. Parents are key partners in the early intervention, assessment and planning process, and may require counselling and support on how to address the needs of their child following an assessment.

It is important to understand that a child's evaluation and assessment need to meet certain expected criteria to be identified as experiencing a particular disability and to receive related and required educational interventions and services. Any kind of difficulties and disorders require detailed examinations, tests and diagnosis. It is important to be careful before labelling a child with a disability. Mislabelling or identifying incorrectly would result in a child's needs not being understood. In many of our settings not being able to understand how the child makes sense of the world and learns, often results in the student being discriminated against. These misunderstandings can prevent the students in our schools from getting the educational interventions that would otherwise help them to begin learning in the classrooms.

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### **3.6 Summing Up**

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In this module we have attempted to understand the characteristics of children with special needs in terms of sensory motor needs, intellectual needs, developmental needs, social and emotional needs, special health needs, children with environmental /ecological difficulties and children belonging to other marginal groups. We also learnt the importance of early detection and functional assessment for development of compensatory skills in children with special needs.



### 3.7 Exercises

Q.1 Underline the correct answer from the options given below:

a) Alisha is 8 years old but has not attained toilet training and has difficulty in eating and dressing independently. Alisha shows the characteristics of a child with:

- 1) ODD      2) Intellectual needs      3) Epilepsy      4) Speech Disorder

b) Karan has been diagnosed with only loco-motor impairment. He experiences difficulty in:

- 1) Standing and walking      2) Lifting things from the table  
3) Making eye contact      4) Establishing social relationships

c) Disha has been diagnosed with dyscalculia. She experiences difficulty in:

- 1) Reading printed text      2) Verbal skills  
3) Distinguishing letter forms      4) Understanding maths concepts

d) Reena is a child with ataxic cerebral palsy. She has difficulty with respect to:

- 1) Stiff and difficult movement      2) Involuntary movement  
3) Disturbed sense of balance and depth perception      4) Uncontrolled movement

**Answer key:** a - 2, b- 1, c - 4, d - 3

Q.2 Descriptive Questions:

1. How would a teacher identify children with intellectual needs?
2. Explain the importance of early identification and intervention with regard to children with special needs.
3. Elaborate the characteristics of children with visual impairment.
- 4, Describe the characteristics of children with dyslexia.

### 3.8 Suggested Reading

- Centre for Studies on Inclusive Education (1996) from <http://www.csie.org.uk/>
- Dierks, K. et al (2007). Disability awareness toolkit. Centre on disability studies, University of Hawaii, Manoa, from [www.ist.hawaii.edu](http://www.ist.hawaii.edu)
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- Inclusion booklet from <http://www.senseintindia.org/htmls/pdf/Inclusion.pdf>
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## **MODULE 4**

### **RESOURCES FOR INCLUSION**

#### **4.1 Objectives**

To enable students to:

- Explain the resources required for inclusion
- Identify the roles of various personnel involved
- Describe the various managerial skills required for resource mobilization

#### **4.2 Introduction**

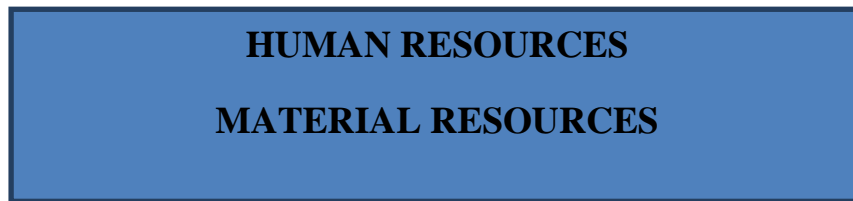


"A Resource is a source or supply from which benefit is produced It is a support or aid especially one that can be readily drawn upon when needed .Resources are the collective wealth of a nation or the means of producing wealth in the countryAn economic or productive factor required to accomplish an activity, or as means to undertake an enterprise and achieve desired outcome. Three most basic resources are land, labor, and capital "Inclusion of children with special needs is essentially the responsibility of the regular education system. Yet, special education professionals, parents of children with special needs as well as parents of non-disabled peer groups, students without disabilities and the community as a whole have to be empowered for inclusive education to be successful.

#### **4.3 Concept and importance of human and material resources**

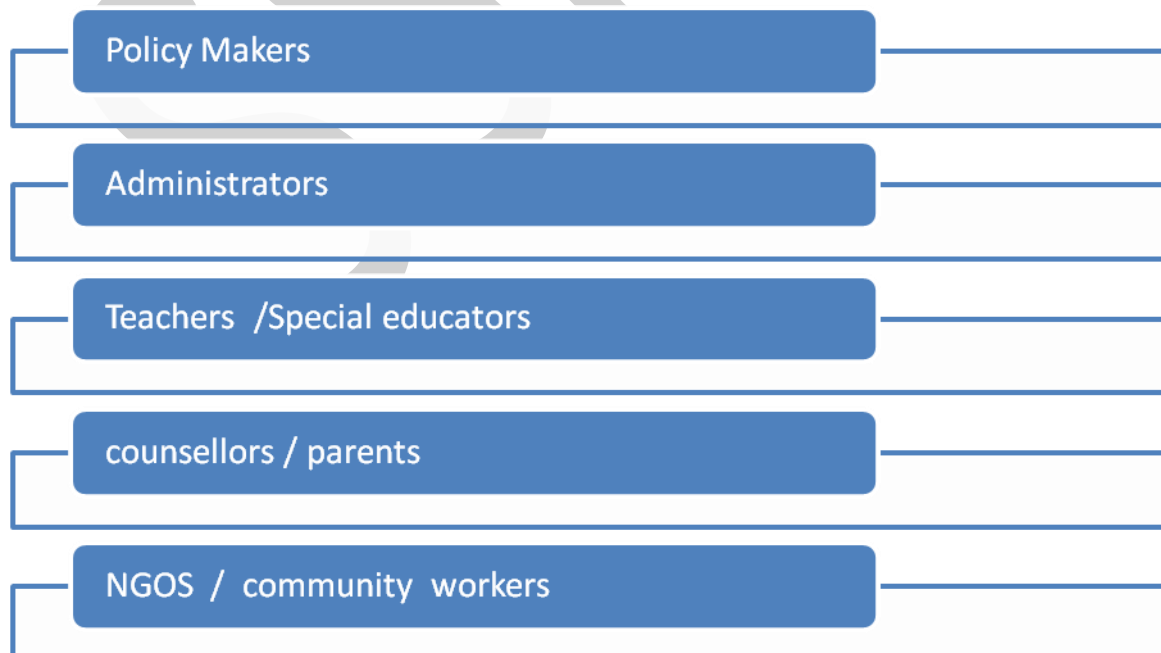
The inclusive school is a school that its stakeholders adopt and comply with educational principles and school policies that are inclusive. It fosters partnership with parents and local community and its bodies. It also include adapted programs and adequate services targeting non-academic aspects of all students including those with additional educational requisites. It takes takes

measures to make curriculum and instruction appropriate with the capacities and educational needs of all students including those with additional educational requisites. Hence two types of resources are important.



### 4.3.1 Human resources

Human performance in organizations reflects on the knowledge, skills, behaviors, and values. Since the abilities and skills will help the schools to better performance and productivity, any expenditure on education and development is a long term investment that as long as the inclusive school can benefit from it Human resources are the most important and valuable assets, every inclusive school has in the form of its employees. Dynamic, competent and motivated human resources build dynamic institution and enable institution to achieve its goals. Success, performance and resulting productivity of any school are directly proportional to quantity and quality of its human resources. It includes all the stakeholders.



**Human resource management includes**

### **Support within schools for teachers**

- Ensuring adequate staffing levels to provide teachers with the time and resources needed to achieve effective inclusive education
- Provision of strong support from school leadership, with ownership by the governing body, and all school policies consistent with the goal of inclusive education
- Involvement of family and community as resources in classrooms to support individual learning programmes and increased individual attention that children with disabilities often need.

### **Establishing resources to provide specialist support**

- Building multi-disciplinary support through a range of different specialist services, organizations and resource centers, and professionals working collaboratively to provide a comprehensive and seamless service to support inclusive education.
- Development of collaborative practice and provision through networks of learning communities
- Utilising parental expertise as a significant source of support both to other families and to schools
- Improving teachers' conditions of service to ensure that they are adequately supported, paid and respected

### **Parental Involvement in Schools**

- An important role to play – visiting the school, observing during classroom therapy sessions, participating in meetings
- Often have to overcome some teacher perspectives eg. feeling parents are intrusive
- Physical presence of the parents in the school is important
- Improved communication with teachers will positively affect development of social, academic and developmental skills of the child.

### **Provide professional development on family and community engagement**

- Offer training for parents and community stakeholders on effective communications and partnering skills.
- Provide better information on school and school district policies and procedures.
- Ensure timely access to information, using effective communications tools that address various family structures and are translated into languages that parents/families understand.

- Hire and train school-community liaisons who know the communities' history, language, and cultural background to contact parents and coordinate activities.
- Collaborate with higher education institutions to infuse parent, family, and community involvement in education into teacher and administrator preparation programs.
- Develop an outreach strategy to inform families,

### 4.3.2 Material resources

The educational resources available in a school tend to be related to the system's overall performance as well as schools' average level of performance. An adequate physical infrastructure and supply of educational resources does not guarantee good learning outcomes, the absence of such resources could negatively affect learning. What matters for student achievement and other education outcomes is not necessarily the availability of resources, but the quality of those resources and how effectively they are used. Material resources are physical and concrete ways which help to achieve a goal. Material resources are tangible assets that offer products or services in question. Among them, there are the raw materials, facilities, teaching learning material, machineries and the ground. Inclusive education is reliant on student access to curriculum. Schools must create opportunities using activities, space and materials so that all students can learn.

#### Physical infrastructure and educational resources

##### ➤ Physical infrastructure:

Education has consistently been **recognized** as the cornerstone of development for any country or region, and one of the highest return rewarding development activities. Education outcome is influenced by a number of factors, infrastructure being one of them. School infrastructure, its design, quality and day to day management is significant in enabling school system to deliver improved education outcomes. It broadly encompasses land and building, quality of facilities and the overall design. As a child spends his/her maximum time in school as a student. The school infrastructure then becomes a major factor behind how a child sees the world as he/she grows up

Schools, being the second home, serve a number of purposes in a child's life. From boosting their confidence to making them learn the importance of team work and socialization, schools do it all. Away from home, schools become

the place for children to spend their maximum time.. Physical conditions can leave both positive and negative effects on the students' all-inclusive development. School buildings, classrooms, playgrounds and libraries are the most important aspect of school infrastructure. Spacious and refurbished buildings and well- ventilated classrooms are a must in schools.

➤ **Parameters for quality school infrastructure**

- **Comfort for students, teachers, and administrators** spaces for teachers and students, with an adequate temperature, ventilation, and lighting, with water, electricity, and Internet services, as well as sanitary services and the respective drainage of sewage waters.
- **Spaces for the development of rehearsals and practices** such as libraries, and natural sciences, information technology, science labs.
- **Spaces for the development of talents** and entertainment, sports, and culture.

In inclusive schools should provide children with special needs with comfortable, safe, and controlled learning, it is important to create continuity in the environment so that they would have equal access to education like typical students. Therefore, the specific infrastructure, such as barrier-free facilities, wheelchair access, a comfortable classroom, and safety aspects, should be taken into account for purposes of teaching and learning. The integration of special education programs needs much improvement especially in the accessibility of special needs students so that their right to have an education does not remain neglected.

➤ **Class room**



In an inclusion classroom, the general education teacher and [special education teacher](#) work together to meet your child's needs. All students can benefit from the additional resources and supportive techniques used in an inclusion classroom.

To facilitate inclusion in a classroom by appropriately arranging the physical environment.

**1. Place Student Desks in Groups—**

Put desks in small groups (2–4 desks per group) so that all students have the opportunity for cooperative learning, collaboration, and discussion. As well, place the teacher's desk on the periphery of the classroom. Teachers in an inclusive class rarely sit down during their day and don't need their desks getting in the way!

**2. Provide Centers—**

Centers appeal to various learning styles, but they must be accessible and open. As well, the materials and manipulatives at each center must be appropriate and stored where all students can reach them. Placing books on a high shelf is limiting for a smaller student or one who is in a wheelchair.

**3. Meeting Spot—**

Create one area of the classroom where the students can come together to have discussions, develop social skills, and participate in large group activities. This space must have enough room for ALL the students to gather.

**4. Classroom Decor—**

An inclusive classroom needs to be decorated in a way that does not create distraction and sensory overload. Too many bright colors, posters, clutter, and furniture can easily distract the most focused child!

**5. Safety/Emergency Preparedness—**

Ensure adequate space for all students to move safely around the room. Clear clutter, stabilize furniture, tape down wires and cables, and place signs and symbols around the room that point out exit and entry ways in case of an emergency.

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**Resources in inclusive schools, material resources and human resources**

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Although attitudes, teaching styles, and inclusive activities are important components of inclusion, the special needs child's physical environment can help or hinder the process. This in turn can affect feelings of belonging, success, and self-esteem. Carefully planning out the physical space of the classroom strongly supports an inclusive learning environment. One of the first things a teacher should do at the beginning of the school year is organize, arrange, and decorate the classroom. The physical environment of a classroom plays a part in the ownership students feel about their school and more specifically their class. The classroom environment should do as much to foster cooperation and acceptance



as the instructional method the teacher uses. Requirement of inclusive classroom are as follows :-

- **A Large Table**

There is no piece of furniture more important in an inclusive classroom than a table large enough for small groups of students. Having a table allows the teacher to bring students together and provide them with various types of instructional programming that meet the needs of the group. In addition, students can meet at the table to work together on projects, have discussions or use as an alternate work space. The table is usually placed in a prominent area of the room, and facilitates many opportunities for students to be members of a group.

- **Classroom arrangement for Visual Impairments**

Children with visual impairments may be a part of classroom. Ensure that they are seated in a place near the blackboard. It is also ideal to sit next to a window, where the sunlight falls on the table. If this is not possible, you could arrange a special lamp for the table of a child with visual impairment. Place another child next to him or her, to help them during class. Teacher may need to say words as you write them on the board. Plan hands-on multisensory activities for learning. This will also benefit the rest of the class.

- **Hearing Impairment**

Children with hearing impairment may require special equipment to help them communicate. The teachers and the other students must be able to communicate with the child using this equipment. In some cases, the teachers and other students can be taught sign language. Plan activities that all the children can enjoy doing. Studying in an inclusive classroom makes it easier for such children with special needs to live and work independently later in life.

- **Wheelchairs**

A child on a wheelchair in the classroom needs some modifications in the layout and structure. Make sure there is enough space between all the furniture to move and maneuver the wheelchair easily. Make sure the classroom materials like art, stationary, books and toys are at an accessible height to the child on the wheelchair. Make sure that the child on the wheelchair has a lap board, or a table of a comfortable height for writing and working. Ideally your classroom should have at least one table under which the wheelchair fits in, and also other children can sit around it and work together on a group activity Toilets should be wheelchair accessible.

- **Learning Disabilities**

Children with learning disabilities need a hands on multisensory approach to learning. They may not learn well enough with just blackboard teaching, and may need other adaptations for inclusion classrooms. They may also need some

flexibility in terms of breaks and may learn better if allowed to alternate physical activity with concentrated learning.

- **Other Physical Disabilities**

Children may have other physical disabilities which you need to accommodate for. If you have a child using an aid to walk, check the flooring and ensure that things are not lying on the floor. Help the class to cultivate a habit of checking the floors frequently to prevent accidents. Children with hand function difficulties may need a special writing board, thick pencils etc. Talking to the parents will help you understand the specific needs and difficulties of the child and will help you cater to them

- **Library**

An inclusive library collection that reflects the diversity of your school and supports teaching and learning, Select resources with consideration for your readers' culture, language, gender identity, sexual orientation and special education needs. Providing access to a wide variety of resources with authentic perspectives helps students understand themselves and their world

- **school library can include the interests of all students by providing resources:**

1. that accurately reflect their culture
2. written in English by authors from another culture
3. in a student's home language
4. in more than one language, for example, bilingual materials, or copies of both the original and translated editions of texts

- **Provide stories and information in a range of formats, appropriate for different ages and abilities. This could include:**

1. books and eBooks — fiction and non-fiction, including picture books, sophisticated picture books, easy reads, chapter books and large print books
2. audiobooks and eAudiobooks
3. databases, for example, EPIC databases such as Britannica School
4. websites
5. games
6. CDs, and DVDs with captions
7. illustrations, images and other objects (realia)

- **Alibrary should be reader-friendly that is:==**

1. spacious and light
2. well-designed to cater for a variety of reading activities and events
3. clearly laid out to encourage independent use
4. comfortable with flexible seating for different-sized students
5. easy to navigate with colour, signage and display to attract and support students

6. arranged for maximum appeal and easy access to collections
7. warm in winter, cool in summer and well-ventilated. If possible, it has access to the outdoors.

- **Laboratories**

Designing inclusive laboratories A broad principle for planning lab sessions is to incorporate approaches and opportunities that could suit a wide range of students

1. Building in flexibility Are there different ways of reaching the same outcome? Could some aspects of the lab, that might not be accessible for all, be modified if necessary? Building in flexibility from the start will make it easier to address particular circumstances,
2. Team working Students who are working in teams can help share tasks and activities. This division of labour can help with flexibility Making laboratories welcoming to all students helps everyone feel confident to learn, collaborate and question.
3. Establishing an inclusive culture within labs should be done explicitly and with all those who participate and work in them. Preparatory activities might include
4. Offering diversity and equality training for all those who work with students (including technicians and demonstrators)
5. Agreeing ground rules amongst students in a lab that will help establish a supportive and positive atmosphere for all.

- **ICT laboratories**

ICTs offer a great potential to support lifelong learning for all groups of students, including those who have special educational needs. The application of ICTs must enhance independence, integration, and equal opportunities for such people and in this way will facilitate their inclusion in society as valued, respected, and contributing members. People with disabilities learn life and social development skills to facilitate their full and equal participation in education; The learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring The education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual. Training of Education staff should include disability awareness and the use of augmentative and alternative modes or formats of communication, educational techniques and materials to support people with disabilities.

- **Language laboratory**

The language laboratory is an audio or audio-visual installation used as an aid in modern language teaching.

➤ **Characteristics of a good Language Laboratory in inclusive set up:**

**1. Attention:**

Attention on subject is increased resulting in better retention of the concepts. As the language lab allows the student to listen to the program stimulus individually, each individual student's attention is focused on the program material being studied, ultimately increasing the attention span of the student and teaching the student to listen and analyze the content of the lesson.

**2. Acoustics:**

It provides equal opportunity to all the students to hear the instructor irrespective of place where they are seated. There will be less miscommunication because of direct nature of the sound transmission.

**3. Building Student Experience:**

Students can build on their existing experiences and gain further knowledge of computers while learning in the computer language lab.

**4. Developing Listening skills:**

Listening skills are an essential element in becoming linguistically fluent. The language lab helps students develop good listening skills and aids the process of communication..

**5. Efficiency:**

The teacher can monitor individual students (and talk to them) much more efficiently

**6. Individualization:**

Labs provide the capability for dividing the class into several groups. These groups can be listening to different programs on varying subject matter and at different levels of interactivity

**7. Different voice:**

The lab provides the students with a variety of model voices rather than just the voice of the teacher

**8. Variety:**

The language lab provides variety from regular classroom situations. The teacher's role is changed and the students are more active for longer periods of time. The use of visual stimulus coupled with selective audio materials increases the attention span of the students.

## Teachers resource center

Teachers resource centers should:

- develop county-level policy on educating children with disabilities, within the national and provincial education policy framework
- develop procedures and regulations relating to: screening and identifying children with disabilities who will need specialist support in education; the development and implementation of individual education plans (IEPs); the assessment of school/ teacher performance in meeting the needs of children with disabilities, etc.
- monitor regular schools for the purpose of providing targeted assistance as well as for assessment of progress in inclusion
- co-ordinate with county government, Disabled Persons' Federation, hospitals and Civil Affairs Departments on the tasks of finding children with disabilities, collecting and sharing data, and improving referral and integrated services
- train general teachers and resource teachers in regular schools so they can better support children with disabilities
- develop assistive teaching and learning materials and provide assistive equipment
- provide rehabilitation services for school-aged children with disabilities, either in the center or through outreach services provide consultancy for parents, and organize parent training and awareness-raising events.

## Educational resources

- **Digital Media and the Internet:**

Educational videos and programs on a wide variety of subjects can be both rented and purchased. Many teachers use videos in the classroom to provide their students with a visual and auditory experience to enhance what they have already learned in the classroom. Many channels on television also offer specialized programming in a wide range of subject areas. In addition, there are a number of Internet sites that offer educational videos for use both in and out of the classroom.

- **Technology:**

Technology is vital to the 21st century classroom. Not only does it allow students to keep up with our changing world, it provides accessibility to the curriculum for learners with special needs. Whether it be a computer, iPad, audio/visual equipment or assistive devices, technology can play various roles in the inclusive classroom. It can offer educational software, provide an accessible curriculum to children with special needs and help differentiate lessons. Highly

engaging, technology appeals to most groups of students and supports inclusion in numerous ways.

- **Manipulatives:**

Inclusive classrooms provide curriculum for different types of learners. For some learners, they prefer a “hands-on” approach to help them understand lessons. Manipulative can support this process by allowing students to demonstrate their knowledge, develop new levels of understanding and explore deeper concepts. Manipulatives can be easily grouped, placed into plastic containers and put on shelves around the room. Useful for all ages, manipulatives are an easy way to make a classroom more inclusive.

- **Visual Aides:**

Visual aides are, undoubtedly, very important items in the inclusive classroom. They attract student interest, explain an idea or help a student understand a lesson. Visual aides come in many forms and there should be a variety available in a classroom to facilitate inclusion. Some examples include: schedules, posters, number lines, charts, diagrams, graphic organizers and different types of paper such as lined, plain or graph. A visual aide can also be a SMART Board, television or iPad. Inclusive classrooms always have numerous types of visual aides handy to help deliver, accommodate or modify a lesson.

- **Positive Behavior Management System:**

A positive behavior management system can support and maintain a safe, optimal learning environment. It allows the teacher to highlight and reinforce the strengths of individual learners. In addition, it provides students with cues to good behavior. Supporting student behavior, maintaining a calm learning environment and providing predictable routines assist in giving all learners optimal learning conditions. For a detailed description of a positive behavior management system used in inclusive classrooms,

- **Books:**

Inclusive classrooms recognize that students learn in different ways in different rates. Not only do teachers want to provide lessons that address the varying abilities, but also provide classroom materials that all students can use. As well as textbooks, an inclusive classroom should also provide books that can be read for enjoyment. Offering books (or audio books) that are age-appropriate, interesting and can be read by readers at different levels are an important way of making a classroom more inclusive.

- **Job Chart:**

Teachers need to have a method of choosing students for classroom-based activities in a fair manner. There are many strategies for this, but one simple and easy way that ensures all children in the classroom have an opportunity to be included is called Popsicle Sticks. This method involves putting

each child's name on a popsicle stick (found at craft stores) and placing all the sticks in a jar. Whenever the teacher requires students to make teams, complete a task, or answer a question, a popsicle stick is randomly chosen from the jar. This strategy ensures that every child in the classroom has a chance of being asked to complete the task and done so in an unbiased manner.

- **Games:**

Games such as card games, board games and classroom games are often used by teachers to reinforce a new concept. However, they also play a large role in teaching students social skills and team work. Because game choices are

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## **Human resources**

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- **Policy Makers**

The first and foremost step in initiating inclusion is to bring about policy changes in educational administration. For an objective decision on policy changes, it is essential to conduct a situation analysis, gather opinions from concerned people, look into existing legislation to consider changes if needed and conduct pilot studies to find out the feasibility of the proposed change. For instance, if the opinion of majority of the group reflects merging general and special educational systems, it would require field-testing, which in turn will reflect the educational, economic, social and political viability of the proposal. In addition, it will help in identifying resources, building partnerships and recommending changes in legislation.

**Policy makers will be in a position to plan for:**

1. Human resource projection at central, state and district level.
2. Positioning of human resources – grass root level workers and field staff to provide direct teaching in schools, itinerant teaching or home based training for totally non ambulatory children, supervisory staff at village, district levels and planning and monitoring teams at state and central levels.
3. Role clarity and job description of the various functionaries.
4. Number of positions at each level and objective planning based on need.
5. Reporting and feedback systems. z financial implications and provisions.
6. Continuous impact studies to promote improved services, keeping pace with developments and trends.
7. Recommendation to the government on policy decisions based on the findings.
8. Recommendation on adaptations in curriculum and evaluation systems. This is a major concern of policy makers.
9. Building partnership with NGOs in providing quality education through inclusive schools

- **Administrators**

A school administrator is an educational leader who promotes the success of all students by facilitating the development, articulation, implementation, and stewardship of a vision of learning that is shared and supported by the school community.

1. They have a personal vision of inclusive education, and they advance this vision to become a shared vision in the organization.
2. They enhance the kind of school culture that encourages parents and learners to participate.
3. They actively initiate the change or strongly support others in doing so.
4. They build the kind of school organization where teamwork, collaborative problem solving and the sharing of ideas of teaching and learning are necessitated.
5. They make it possible to develop and try new inclusive pedagogical methods through flexible resource use (physical, time and financial resources).
6. They promote training for inclusion.
7. They ensure that teachers, parents and pupils communicate and understand each other

- **Teacher**

The teacher has to provide high quality, holistic support and focused involvement with the children with special needs based on a joint perspective, mutual understanding and networking. Teachers with the support of the principal of school, colleagues, special educators and parents should develop effective ways of overcoming barriers to learning and supporting effective teaching through observing the quality of teaching and standards of pupils' achievement and by setting targets for enhancement. Teacher works as a catalyst between the principal of the school and children with special needs and their parents

- **Role of a teacher**

1. Overseeing the day to day operation of the scheme IEDSS in particular and inclusive education in general.
2. Coordinating the provision of support services for children with special needs
3. Regular liasioning and seeking advice from fellow special educators in regard to the education of child with special needs
4. Liasioning with other special educators'of other schools for updating the information and knowledge.
5. Keep constant liasioning with different Non-Government organization working in this field for aiding support services for child with special needs
6. Maintain the database of child with special needs



7. Develop the assessment portfolio of child with special needs
8. Prepare a list of required materials and equipment before the beginning of the session
9. Organize continuous, periodic and regular parent meeting
10. Ensuring that a child with special needs joins in the activities of the school together with other pupils.
11. Identification of the children with disabilities in the classroom.
12. Referring the identified to the experts for further examination and treatment.
13. Accepting the children with disabilities.
14. Developing positive attitude between normal and disabled children.
15. Placing the children in the classroom in proper places so that they feel comfortable and are benefited by the classroom interaction.
16. Removing architectural barriers wherever possible so that children with disabilities move independently.
17. Involving the children with disabilities in almost all the activities of the classroom.
18. Making suitable adaptation in the curriculum transaction so that the children with disabilities learn according to their need.
19. Preparations of teaching aids/adaptation of teaching aids which will help the children with disabilities learn.
20. Parental guidance and counselling and public awareness programme through school activities.
21. Collaborating with medical and physiological persone , social works, parents and special teachers.
22. Construction of achievement and diagnostic tool.
23. Adaptation in evaluation for children with special needs.
24. Providing remedial instruction to the children who require it.

- **Special educators**

Inclusive classrooms are a blend of students without disabilities and students with special needs. A special needs student will be accompanied by a special education teacher, who acts as the liaison between the student and the teacher. These special education teachers have specific roles and responsibilities when it comes to helping students with disabilities learn and thrive in a traditional classroom setting.

### 1. Lesson Planning

A special education teacher works with the classroom teacher to make lesson plans for her students. Children with special needs who are mainstreamed into an inclusive classroom will learn the same things as the

rest of the students. Making lesson plans together allows a special education teacher to modify the information to meet the academic needs and abilities of her special needs students while also ensuring that they are staying on track so they can successfully move on to new topics with the rest of the students.

## **2. Classroom Support**

Special education teachers provide one-on-one help to special needs students. Once the classroom teacher has completed a lesson, the special education teacher will help her students complete any assigned classwork, as well as provide additional instruction when necessary. Special needs teachers often provide support, such as translating what the classroom teacher is saying into sign language, depending on the type of disability a student has

## **3. Behavior Interventions**

Some special needs students also have disabilities that can have an impact on how they behave in an inclusive classroom. For example, a student with autism might panic if the classroom gets too loud or if the classroom routine changes unexpectedly. Special education teachers are well versed in their students' disabilities and can help calm them

## **4. Progress report**

Special education teachers are often required to give progress reports and updates to parents. This is because the teachers work so closely with the students that they know exactly what's going on in the classroom

- **Counselor**

Counselor is a person have a broad array of skills beyond assessment that can benefit students who are having difficulties. He/ she provides a variety of services such as learning strategy suggestions, program development, implementation support and problem-solving consultation to teachers, parents, and school staff Support others to help students also help parents and school staff to understand how children develop and learn children at home and school  
Role of a counselor

1. Problem-solve with school teams to eliminate barriers so students can engage in learning Collaborate with teachers to identify problems and implement solutions
2. Identify for school staff effective instruction and behaviour management strategies that will facilitate successful student learning Help school staff to identify early academic skill deficits so they can respond early
3. Design and deliver prevention programs for at-risk children (e.g., self-esteem, home-school communication)

4. Help to create safe, healthy and supportive learning environments (tolerance and appreciation of diversity)
5. Work directly with children, teachers, administrators and families
6. Develop individual and classroom learning interventions
7. Deliver academic and behavioral interventions
8. Deliver school-based counselling, social skills and mental health services

- **Parents**

Parents have a right to be involved in their child's education and to participate with the school in decisions concerning their child and the school community. Parental involvement is very important. Parent involvement is defined as: ☞ Being aware of and involved in schoolwork also understanding the relationship between parenting skills and student success in schooling. A commitment to consistent communication with educators about student progress.

**Activity**

Prepare a plan considering various resources available to start inclusive school in rural Maharashtra.

**Exercise**

1. What are the basic infrastructure requirements for inclusive school?
2. Special educators play important role in inclusive education elaborate with example.
3. "Special education teachers are support to class teachers" do you agree with the statement justify your answer
4. In good inclusive set up it is important to appoint counsellors – express your views

**4.2 Types of services, approaches, strategies, personnel involved and their specific role and responsibilities**

Inclusive classroom includes students with disabilities and for many without the success in the classroom lies in having appropriate adaptations, accommodations, and modifications made to the instruction and other class inclusion

➤ **EDUCATIONAL SUPPORT**

**I. Teachers**

Teachers are educators who maintain a general education classroom with the enrollment of at least one student with special needs while establishing and maintaining a community environment where each of their students is welcome and attended to. The duties of an inclusion teacher demands the ability to

multitask with a high level of performance. Understanding inclusion teacher duties attached to this position will improve the quality of student function and the overall success inclusive education.

The inclusion teacher duties and responsibilities are as follow:

➤ **Collaboration**

- Attends to the requirements detailed in the education plans of their special needs students, such as a Transition plan, Individual Family Service Plan, or Individual Education Plan in coordinate on with implementation and review by the special education team (parents, special education teacher, specialized personnel, service providers and many times the student).
- Plans lessons and classroom activities with the help of the special education teacher according to a curriculum through medications and redesigns as needed.
- Gathers information on the student's strengths and weakness and develop ways to address them by reviewing past performances on state tests, semester exams, or report cards and the student's personal history.
- Opens a line of communication between the student's parent to provide progress and request feedback to share with the special education teacher and other team members.
- Meets with team members and solicits the support of the school principal and special education supervisor for help with materials and resources necessary to make inclusion beneficial for all involved.
- Sets up a cooperative teaching arrangement that uses a variety of styles to fit student need, resources, time, and teacher skill for a dynamic learning experience prior to the student's introduction and throughout their time in the environment.

➤ **Accommodations and Modifications**

- Modifies lessons, materials, and tests as needed per the student's education plan. An example of a modification is to use lower level reading materials for a lesson or shortening the number of multiple choice options on a test.
- Accommodates the student's needs such as allowing for extra time to turn in assignments for homework, on tests, or providing a separate area for testing.

➤ **Meeting Standards**

- Identifies and synthesizes classroom instruction with state requirements while meeting the needs of the student.
- Provides alternate assessments as mandated by law when students cannot participate in testing with their peers.
- Seeks, attends, and adheres to professional development required by the state department of education, as well as any other programs that will benefit the classroom as a whole.

## **II. Special educators**

Special education teachers work with students who have a wide range of special needs and disabilities. These specially-trained educators create and apply appropriate curricula and assign activities that are specific to each student's abilities and needs.

### ➤ **Duties and responsibilities are as follow:**

- **Lesson Planning**

A special education teacher works with the classroom teacher to make lesson plans for her students. Children with special needs who are mainstreamed into an inclusive classroom will learn the same things as the rest of the students. Making lesson plans together allows a special education teacher to modify the information to meet the academic needs and abilities of her special needs students while also ensuring that they are staying on track so they can successfully move on to new topics with the rest of the students.

- **Classroom Support**

Special education teachers provide one-on-one help to special needs students. Once the classroom teacher has completed a lesson, the special education teacher will help her students complete any assigned classwork, as well as provide additional instruction when necessary. Special needs teachers often provide support, such as translating what the classroom teacher is saying into sign language, depending on the type of disability a student has

- **Classroom Management**

Even though the focus of a special education teacher's job is the special needs students in the class, he is also responsible for helping the general education teacher manage the classroom. Other students must listen to and respect the authority of the special education teacher. He also helps set the classroom rules and routines, working with the teacher to create a classroom climate that benefits students with special needs.

- **Other Responsibilities**

**Special education teachers** often have responsibilities that other teachers do not. These teachers must regularly review and develop Individualized Education Plans -- or IEPs -- and hold meetings to discuss these plans with parents, administrators, counselors and other individuals involved in the education of a child with special needs. They must regularly administer skills tests and other assessments to determine the progress of special needs students or to determine whether students who are not currently enrolled in a special

education program need their services. It's the special education teacher's job to make sure that laws such as the Individuals with Disabilities in Education Act are precisely followed.

### **III. Visiting teacher service**

Local mainstream schools are often the only places where visually impaired and deaf and hard of hearing children have a chance of receiving education. However, these children attending a mainstream school need additional support in order to cope with the demands. Since a great majority of early learning comes through vision and auditory learning, children who are blind or hearing impaired will be slower to learn many skills than their sighted peers. Intervention at the preschool stage is thus very important as well both to encourage these children to learn and develop, and to prepare them for mainstream schooling. Visiting teachers provide support to these children. Visiting teachers are usually qualified school teachers who have had some formal training in the education of children with visual impairment or hearing impairment.

#### **➤ Duties and responsibilities:-**

- These teachers travel to mainstream schools to provide individual tutoring in reading and writing Braille (using a frame and stylus) for blind children and those with severe low vision. They transcribe class work, tests, and examinations to and from Braille for both teachers and children, provide advice to class teachers on how to meet children's needs in the classroom. Advocating for and encouraging self-advocacy by students with hearing loss throughout their school years.
- Working with pre-school children at home visiting teachers play an important role in this development process by spending time with visually impaired children at home in order to prepare them for primary school education. They provide tutoring in pre-Braille skills. Provide regularly scheduled, direct withdrawal instruction in the development of auditory skills, speech and language, as required, including the pre-teaching of classroom curriculum.
- These teachers are often an important link between families and clinicians. They can provide health professionals with useful background information about a child's circumstances and visual functioning. They also follow up children who have been prescribed spectacles or low vision aids, provide parents with information on where to buy aids
- Liaising effectively with teachers, parents and support staff, such as educational assistants, deaf/blind interveners, interpreters, and note takers. They provide individual and family counselling on how to raise a child who is visually impaired. They can also help the family to see their child in a positive

light and to develop a supportive attitude towards their child. This will help with schooling and independence. These teachers also provide practical support to families, such as organizing hospital and eye clinic visits for parents.

- In-servicing school teams, including classroom teachers, on the educational impact of hearing loss and making suggestions about classroom acoustics. In-servicing students' peers, as appropriate.
- Developing strategies with classroom teachers to most effectively enable the student to access curriculum. Communicating goals and strategies to parents as educational partners.
- Fostering emotional well-being and encouraging social interaction with hearing peers within the school community. Providing opportunities, where possible, for social interaction among peers.

## **Health support services**

Health support services include nursing, physiotherapy, occupational therapy, speech-language pathology and dietetics. They also include personal support services which include personal hygiene activities and routine personal activities of living, provided to children.

### **I. Psychologist**

#### **➤ Duties and Responsibilities**

##### **• Consultation –**

1. Support others to help students
2. Help parents and school staff understand how children develop and learn
3. Work with parents so they can assist their children at home and school
4. Problem-solve with school teams to eliminate barriers so students can engage in learning
5. Collaborate with teachers to identify problems and implement solutions
6. Identify for school staff effective instruction and behaviour management strategies

##### **• Prevention –**

1. Take steps to prevent problems
2. Help school staff to identify early academic skill deficits so they can respond early
3. Design and deliver prevention programs for at-risk children
4. Help to create safe, healthy and supportive learning environments

##### **• Intervention –**

1. Work directly with children, teachers, administrators and families
2. Develop individual and classroom learning interventions

3. Deliver academic and behavioural interventions
  4. Deliver school-based counselling, social skills and mental health services
  5. Coordinate with community resources to provide students with complete, seamless services
  6. Design and implement crisis response plans
- **Advocacy** –
    1. Appropriate educational programs and placements
    2. Funding for adequate resources
    3. Education reform
    4. Community services and programs

## **II. Therapist**

### **• Language therapist**

Speech/language pathologists are professionally trained to screen, identify, assess, diagnose, refer, and provide intervention for students who are at risk for articulation, fluency, voice, language, communication, swallowing, and related disabilities. In addition to engaging in activities to reduce or prevent communication disabilities, speech/language therapists also counsel families, caregivers, and other professionals about these disorders and their management.

### **• Physiotherapist**

Physiotherapist is concerned with the gross motor skills and mobility of a child. In cases where there has been an obvious physical difficulty the child will have been receiving support well before starting school. The physiotherapist is often involved with children who have dyspraxia, are blind or have cerebral palsy, hydrocephalus, congenital syndromes, such as Downs Syndrome, and progressive muscular conditions such as muscular dystrophy.

Occupational therapist Occupational therapists are regulated health care professionals who work with children in inclusive settings, As children grow and develop, they learn to do many things, including taking care of themselves, managing their school work, playing sports or developing a leisure interest /hobby. Sometimes, children have more problems than is typical for their age with motor skills. Occupational therapist provides education and resources to teachers and parents about how children typically develop motor skills and how to promote this development in the classroom and at home. He/ she will help teachers learn to recognize and help children who may have a motor skills problem which is making some daily activities a challenge to learn or master. They observe the students in inclusive school set up. .He/ she re-evaluates a student's progress throughout the therapy processes.\



### III. NURSES

The role of the school nurse is multifaceted and supporting children with long term conditions is just one of many activities they are responsible. A specialized practice of professional nursing that advances the well-being, academic success, and lifelong achievement of students.

1. The school nurse provides direct care to student. The school nurse provides care for injuries and acute illness for all students and long-term management of students with special health care needs.
2. The school nurse promotes a healthy school environment
3. The school nurse provides health education by providing health information to individual students and groups of students through health education, science, and other classes.
4. Assessment of health complaints, medication administration, and care for students with special health care need

#### **curriculum consultant services**

**In inclusive classroom we need** multilevel curriculum and instruction occurs when a student with disabilities and nondisabled peers participate together in a shared activity. and students have individually appropriate learning outcomes at multiple levels, but all within the same curriculum area (e.g., science). While one student may be learning at a basic knowledge or comprehension level, another student simultaneously may be working on an application or synthesis level. Learning experiences also should be planned according to needs of the students hencesupport of curriculum consultant is very important.

#### **Activity**

Prepare a detail plan to provide educational support services in inclusive primary school.

#### **Exercise**

1. Why it is important to provide health support service in inclusive education.
2. Explain the role of visiting teachers in inclusive education
3. Therapist plays important role in inclusive schools – elaborate with examples
4. If you are appointed as a curriculum consultant what will be your job responsibilities and nature of work?

## 4.3 Types of approaches and strategies, personnel involved and their specific role and responsibilities

### Introduction

Inclusive teaching strategies refer to any number of teaching approaches that address the needs Valuingof students with a variety of backgrounds, learning styles, and abilities. These strategies contribute to an overall inclusive learning environment, in which students feel equally valued. Inclusive strategies enable a learner with disabilities to participate in learning experiences on the same basis as a learner without disabilities.

### Types of approaches

Communication and Interaction

cognition and learning

behaviour emotional social Learning

sensory and or physical

#### 1. Communication and Interaction

In inclusive set up very situation and every student is different. Students with speech, language and communication needs may need support with understanding and using language, speaking clearly and fluently, and interacting with others Inclusive communication recognizes that people communicate differently and encourages the use of a variety of techniques. It incorporates all forms of communication, both verbal and non-verbal; non-verbal communication is often just as important to the meaning as what is being said. Communication and Interaction helps to establish and maintain satisfactory interpersonal relationships, gain peer acceptance, establish and maintain friendships, and

terminate negative or pernicious interpersonal relationships. Children with language and learning disabilities bring inherent, neuro-psychological barriers to the acquisition of the prevailing linguistic and cultural codes for their first language, as well as for a second language. As educators we must, therefore, accept responsibility for being as linguistic and culturally fair as possible in assessing a child's general potential for learning in the inclusive classroom. An analysis of a child's background culture and language may assist the educator in identifying possible points of conflict between the linguistic and cultural features of a child's first language

### **points are important**

- Use reflective listening skills: ask open questions, summarize what the other person has said or asked in order to ensure correct comprehension
- When communicating with a person who has difficulty speaking, be patient and provide them with time to complete their sentences
- Always face the individual to whom you are speaking
- Turn down, or off, background noise or music
- Ensure that only one person speaks at a time during conversations or discussions
- Repeat other students' questions and comments to ensure everyone has heard
- Read aloud material presented visually
- Give both oral and written instructions
- Pace your delivery
- When students have assistants such as note takers or interpreters, address questions and comments directly to the student
- If necessary, allow brief breaks to allow students and sign-language interpreters to keep up
- Be flexible - if one communication strategy doesn't work try another  
When speaking with a person who uses a wheelchair or crutches, pull up a chair to put yourself at eye level.

### **• Role and responsibility of Teachers**

For an effective communication team of teachers will work together as equal partners in interactive relationships, with both involved in all aspects of planning, teaching, and assessment. Areas for this collaboration will include curricula and instruction, assessment and evaluation, and classroom management and behavior. Teachers use cooperative and collaborative techniques. In collaborative teaching the general education and special education teachers each bring their skills, training, and perspectives to the team. Resources are

combined to strengthen teaching and learning opportunities, methods, and effectiveness

- **Role and responsibility of peers**

Peer tutoring in special education is a strategy where higher performing students are paired with lower performing students or students with disabilities to review or teach academic material. This strategy has been proven to help students on both sides master content and gain self-confidence in specific skills. Peer tutoring has been implemented with students of all ages and levels in all subject areas. Introducing a peer tutoring program to help students with disabilities and their typical peers may be an effective and efficient way to boost academic achievement. Teachers and administrators should consider the different ways to implement a program as well as the advantages and weaknesses as they determine whether a peer tutoring program would be a good fit in their schools and classroom. Peer tutors become teachers, which increases their own understanding of the material

1. Peer tutoring helps the students build relationships, which builds communication and social skills.
2. Some students with disabilities respond better to peers than adults.
3. Students with disabilities get more individual attention than one teacher can provide on their own.
4. Because of increased individual attention, students with disabilities also get immediate feedback and positive reinforcement more frequently, which results in higher academic performance.

## **2. Cognition and learning**

Learning is a complex task that requires a student to use and apply a range of cognitive skills. In inclusive schools students population is diverse. It is important to cater to the needs of an individual student. For example the students who have only learning problems have processing difficulties that usually affect a specific skill area, such as phonological processing skills (e.g., dyslexia). Although these students struggle with learning certain skills, they usually are able to produce work that is of acceptable quality, because they do not have problems planning and regulating their attention or study skills.

- **Role and responsibility Teachers**

1. Provide clear, detailed instructions (verbal and written) where appropriate
2. Regular prompts to initiate critical thinking and to stay on task may be required in workshops/practical's/tutorials

3. Step by step guides and/or assistance may be useful where problem solving is required
4. Allow lectures to be recorded if requested by a student and where possible make copies of your lecture notes available
5. Provide a quiet distraction-free environment, if possible e.g. allow students to leave the room for small group activities
6. Avoid putting the student on the spot by targeting them for questions or reading aloud in classes (unless the student has indicated their willingness to participate e.g. raised their hand)

- **Teacher collaboration**

When working with students who have disabilities in inclusion classrooms, special education teachers and subject teachers may work together, or collaborate, to teach students with and without disabilities. If a student has poor receptive language skills and is unable to effectively understand and remember the verbal information spoken by the teacher, she/he will not be able to show adequate learning progress or achievement. Hands-on classroom activities, and tasks based on a student's preferred learning style (verbal, auditory, or kinesthetic), will help her to more accurately demonstrate individual learning outcomes. Authentic assessments that focus on performance-based activities, which reflect class instructional tasks, help students demonstrate their knowledge and progress. This is possible only if general teachers and subject collaboration with special educators.

- **Role of a parent**

Parents exert a major influence in the course of children's cognitive development, both for normally developing children and for children with specific communication handicaps. Further, particular parental childrearing strategies derive systems which the parent has constructed on the basis of his/her own childhood experiences, as well as on the basis of experience.

### **3. Behavior , emotional and social learning**

Cognitive-behavioural approaches that encourage children to regulate their behaviour by teaching them self-monitoring, self-instruction, anger management and self-reinforcement skills are effective in producing adaptive behaviour change (e.g. increased on-task behaviour, reductions in anti-social behaviour). The behavioural approaches of positive reinforcement (where appropriate behaviour is immediately rewarded), behaviour reduction strategies (such as reprimands and redirection), and response cost (a form of punishment in which something important is taken away) appear to be effective in increasing

on-task behavior .Behavior , emotional and social learning can be defined as the process of socialization and education related to personal, interpersonal and problem-solving skills and competencies. This process takes place in formal and informal settings and is influenced by a complex interplay of individual, situational and cultural factors. Beside a person-centered focus, effective Behavior, emotional and social learning interventions are provided within supportive learning environments and are directed at enhancing the social-emotional environmental factors that influence learning. The role of SEL will be investigated with respect to children with emotional-behavioral difficulties and their social and cultural context.

It is important to understand students behavior in inclusive set up. Behavior is defined as the way one acts or conducts oneself, especially towards others. It is often a response to a particular situation or stimulus. It cannot be addressed separately from learning and wellbeing. Managing classroom behavior is difficult for all teachers, but those who teach inclusive classrooms face an even bigger challenge. They must balance the needs of special education students alongside nondisabled classmates. Students with emotional disturbance and behavioral problems exhibit a wide range of characteristics. The intensity of the disorder varies, as does the manner in which a disability or problem presents itself. While some students have mood disorders, such as depression, others may experience intense feelings of anger or frustration.

- **Role and responsibility of a teacher**

1. Break long presentations into shorter segments. At the end of each segment, have students respond in some way.
2. Extend the amount of time that a student is given to complete a particular task. Break down assignments into smaller ones. As students finish each mini-assignment, build in reinforcement for task completion.
3. Wait to distribute the next assignment until students have been successful with the current one. Reduce the number of practice items that a student must complete, once the student has demonstrated mastery.
4. When students make mistakes, help them to learn from those mistakes. Be careful not to "overcorrect," or require compensation beyond the point where the student can demonstrate mastery, and praise any progress toward the desired behavior change.
5. Follow low-interest activities with high interest activities so that students get breaks from difficult or less interesting activities from time to time
6. Build upon student interests. Students often learn by relating material to real-life situations that they find interesting. Building interest factors into

projects, activities, and illustrative examples is important for increasing students' motivation.

7. Managing the classroom A sound classroom management system can provide exactly the structure students (especially those with emotional disturbance and behavioral problems) need for managing their own behaviors.

**Important components of a management system are**

Arranging the physical environment;

I. Setting rules and expectations

II. Helping students comply with rules and expectations

III. Scheduling the day

IV. Establishing routines and procedures

V. Building a positive classroom climate that provides all students with a variety of opportunities for success.

• **Role and responsibility of a psychologist**

To be effective, the psychologist needs to work at the individual casework level, at a group level and at a systems level. Collaboration and consultation between the teachers, the management and the psychologist is essential for good practice. An integral part of their work is to act formally and informally as a consultant to help students, staff and family.

**1. Positive Behavioral Support-**

Psychologists work on multi-element, positive programming approaches. This process may involve intensive and long-term work. A comprehensive, multi-element intervention has many stages including a functional analysis of presenting problems, careful prioritization of intervention goals, altering the environment which may be contributing to the presenting problems, teaching new skills to the child, creating additional supports to staff and family, providing more satisfying opportunities and choices for the child and ensuring regular reviews of all interventions.

**2. Therapy and Therapeutic Intervention**

To devise treatment strategies for children and this may involve therapeutic intervention that will develop their self esteem, self control, personal independence and general psychological wellbeing. Counseling and psychotherapy for individuals or groups is one such intervention.

#### **4. Sensory and physical learning**

Students with physical disabilities are now taught in inclusive classrooms with their peers. Educating them can require modifications and different methods of teaching. Read below to learn strategies for creating an effective learning environment to educate children with physical disabilities. Physical disabilities in students can include a wide range of both congenital and acquired disabilities and health issues.

##### **➤ Visual impairment**

(VI) refers to the condition arising due to significant loss of vision. VI includes children who have major vision loss even if they use corrective glasses. The nature and degree of visual impairment will vary from child to child; so, to learn effectively, each student with VI may require specific adaptations to teaching learning practices and materials, depending on the type and degree of vision loss.

##### **• Role and responsibility of a teacher**

1. Reserve a seat in the front row of the classroom (or, closer to the teacher). ■  
Keep the passages and available open spaces in the classroom clear.
2. When speaking with the VI child specifically, address her/him by name.
3. Modify/adapt assignments
4. Provide students with tactile graphs and diagrams
5. Consider alternative assignments For example: the teacher may rely on blackboard to write questions or problems for the class to copy and answer in their own notebooks; the student with VI, alternatively, can work on the worksheet prepared with questions or problems, and answer them directly.
6. Keep in mind, there may be instances when the VI student may not have had exposure to the material discussed in class and for which the child may not have a prior experiences or references for example, food in altered form: popcorn v/s whole corn, sliced mango v/s the whole fruit/shape; materials and sources: water-ice, vapor; curd-buttermilk; milk-cows, occupations (tailor, doctor, engineer). Use educational aids like talking books, tape-recorders, computers excuse off-color, contrast and texture. Minimize noise so that students with VI can hear Teacher speak.
7. Provide large print, Braille versions when needed so that the VI child can follow the classroom's text-based teaching and lessons along with the sighted peers.
8. Assign a peer to provide help or assist when needed.
9. Use real objects to allow the student to learn and experience through touch
10. Provide students with tactile graphs and diagrams where available.



➤ **Hearing impairment**

(HI) refers to the condition arising due to significant loss of the sense of hearing. Children with HI include those who experience a significant loss in hearing, even if they use hearing aids. As with any impairment, the nature and degree of hearing impairment will vary from child to child, so in order to learn effectively, each student with HI may require specific adaptations to teaching practices and materials, depending on the type and degree of hearing loss.

• **Role and responsibility of a teacher**

1. Get to understand the nature of your HI student's hearing loss and how you can include the student with the rest of your class.
2. Focus on development of language, communication and concepts in students with HI.
3. If possible, seek assistance from locally based experts, educators, family members, special educators, speech and hearing specialists, to enhance teaching in the inclusive classroom. Use assistive device where available, to facilitate teaching-learning in the classroom.
4. Arrange the classroom so that students can see each other, e.g., organizing the class in a circle or semicircle allows all students to see each other.
5. Avoid drawing too much attention to the learners with HI, while maintaining inclusivity of all learners in the classroom.
6. When showing diagrams, pictures etc., use slower speech so that the HI child can follow your expressions and also look, study the illustrations.
7. Use shorter sentences, clearer speech. Associate words with real objects, pictures; for example, the colour concept
8. Use pictures (flash cards), real objects, real experiences, dramatisation, and activities. ■ You can write key points on the board or chart.
9. When utilizing group work, make sure that the student with HI can follow all the group members' discussions.
10. Develop communication amongst children through play activities. Organise groups in smaller numbers.
11. Remind the group members to take turns in speaking to allow the student with HI to follow and participate with all. Encourage children to develop communication strategies so that they can get into the style of students

➤ **Physical disability** means loss (partial or full) of bodily functions like walking, speech, fine motor skills, bladder control, hand movements etc. It may be present at birth or may develop later due to accident, injury or disease. A child may have one or more than one disability. The disability may

be visible like loss of limb, or hidden like epilepsy. Children having the same physical disability may have abilities different from each other and may require different interventions.

- **Role and responsibility of a teacher**

1. Provide a supportive and welcoming environment by sensitizing other students and creating a sense of responsibility in them.
2. Children should be comfortably seated and with proper posture.
3. Free movement of students within the class must be ensured. Students can be shown pictures or other visual cues, concrete objects, a few at a time, for better understanding.
4. Audio books, daisy books or books on computer, as found suitable, can be used for reading. Alternatively, a classmate can read aloud to the child. Make use of computers for teaching learning, if possible.
5. For children with problems in writing, modified (large grip) pencils may be provided. A classmate can help by taking notes. Carbon paper can be used for making copies. Extra time for writing should be given if the child is able to write on his / her own and there should not be undue emphasis on the quality of writing as long as it is legible.
6. Students can use adapted brushes, modified pencils and thick markers that can be gripped easily, for drawing. Alternatively the children can use stamping methods or paste cut outs. The books, papers, brushes etc. can be fixed on the table with the help of tape etc. so that they do not slip down.
7. For assessment, have students present the material orally or if required, with the help of a scribe. Use objective type, multiple type questions using yes/no or true/false answers
8. Peer support and/or group work will help in performing various activities like studies, eating, moving around and also sports activities.
9. Plan alternatives for athletic or cultural activities to encourage participation of all students. For example, while playing cricket, the student can act as umpire. While performing a dance show, the student can perform on a wheelchair or crutches.
10. Repeat instructions and recheck after student completes one or two exercises. Mathematics can be taught using concrete objects, matching, sorting and identifying exercises. In teaching language, written outline, graphics and pictures to support text are helpful. The student may repeat by mumbling to himself/herself. This helps in better grasp.
11. Make the classroom accessible. Alternative modes of communicating such as audio recorder, or support for note taking, gestures, pictures, computers may be used.

12. Provide accessible seating and a table in the classroom.
13. Make writers available for written work and for tests and exams. Give additional time for completing assignments/ exams.

### **Strategies in inclusive education**

Inclusive teaching and learning refers to modes of teaching and learning that are designed to actively engage, include, and challenge all students. For success of inclusive education depends upon how various strategies are implemented in the classroom

#### **❖ Include Diverse Content, Materials, and Ideas**

In inclusive education the physical placement of students with disabilities in general education classes is not an end in and of itself, but rather a means to an end. The power of inclusion lies in how educators respond to individual differences. Inclusion calls for divergence in terms of the strategies used in teaching. Factors such as race, ethnicity, class, gender, and language also contribute to the classroom mosaic and may influence the cultural characteristics that students bring. Given the pervasive manner in which culture influences thought and behavior

#### **• Responsibility of teachers**

1. When teachers are preparing lectures, questions for discussions, assignments or exams, and case studies, include language, examples, socio-cultural contexts, and images that reflect human diversity.
2. Model openness to the new ideas and questions your students bring into the course, which can broaden and deepen your own knowledge of your discipline and its relevance. Help students understand that knowledge is often produced through conversation and collaboration among disparate points of view.
3. Teacher should not be biased. Use ongoing informal and formal assessments to help inform instruction and monitor student progress.
4. Teach learning strategies along with content material. Strategy instruction may be defined simply as instruction in how to learn and perform "Learning strategies help students to learn and perform by providing them with a specific set of steps for
  - (a) approaching new and difficult tasks,
  - (b) guiding thoughts and actions,

#### **• Responsibility of curriculum developer**

##### **1. Accommodation:**

Accommodation is this simplest form of adapting curriculum. It

addresses students who are able to comprehend and perform at the regular curriculum's levels of content and conceptual difficulty but require differentiation in instructional techniques and the medium in which each student demonstrates their depth of understanding.

## **2. Adaptation:**

Adaptation is appropriate for students whose needs and learning goals are in line with the content of the regular curriculum but require a moderate modification of the depth of conceptual difficulty of that content

## **3. Parallel Curriculum Outcomes:**

Implementing parallel curriculum outcomes implies a greater modification of conceptual difficulty than adaptation. However, similar to adaptation, the content subject is the same, allowing that student to participate in classroom activities alongside other students

- **Use a variety of co-teaching methods**

1. Interactive Teaching - Teachers alternate roles of presenting, reviewing, and monitoring instruction.
2. Alternative Teaching - One person teaches, reteaches, or enriches a concept for a small group, while the other monitors or teaches the remaining students.
3. Parallel Teaching - Students are divided into mixed-ability groups, and each co-teaching partner teaches the same material to one of the groups.
4. Station Teaching - Small groups of students rotate to various stations for instruction, review, and/or practice

- **Responsibility of a teacher and special educators:**

### **1. Collaboration:**

Special educators are part of the instructional or planning team. Teaming approaches are used for problem-solving and program implementation. Regular teachers, special education teachers, and other specialists collaborate (e.g., co-teaching, team teaching, teacher assistance teams).

### **2. Co-teaching**

Co-teaching is typically perceived as two educational professionals working together to service a group of heterogeneous learners. Special educators and general teachers work together

### **3. Planning of content delivery and evaluation**

Planning of content delivery and evaluation is done in a team Work collaboratively with special education teacher to assist in development of a support plan that meets the needs of all students in the classroom, assist in the

development of the Para educator's schedule, and supervise the Para educator's completion of designated activities when in the general education classroom.

#### **4. Classroom Management**

Classrooms in the 21st century have by law become inclusive, comprised of general education and special needs students. Included students are those who present with mild to moderate learning and behavioral challenges. Inclusive classrooms are more than just placing a student in the classroom but also fostering an environment which supports everyone. Strategies need to be implemented to create this welcoming environment and to ensure that all students are getting an appropriate education. All students should feel as if they are a member of the classroom community. It is important for the teacher to make all students feel welcomed into the classroom.

- **Responsibility of a teacher**

1. Creates a structured classroom. This may include designating separate areas for group and individual work and centers for reading or art, as well as creating a daily class schedule.
2. Displays classroom rules.
3. Posts the daily schedule incorporating color.
4. Provides opportunities for purposeful movement.
5. Develop classroom cues for settling down to work, getting out materials, and quieting down.
6. Plans for transition times (between subjects or tasks, before and after lunch, changing classes).
7. Helps students organize their materials by using checklists, folders, and containers to keep materials organized in desks.
8. Visualizes and monitors student activities.

- **Structuring Lessons**

Differentiate instruction by using flexible grouping, providing activities that appeal to various learning-style preferences, giving students choices, and creating alternative activities and assessments

#### **Responsibility of a teacher**

1. Employs active learning strategies such as "think, pair, share" to promote recall and understanding of new learning. This strategy allows students to reflect individually on a question, pair up with a partner to share and compare answers, and finally give the best answer
2. Uses the instructional sequence of "I do" (teacher model), "We do" (group practice), and "You do" (individual practice).
3. Use graphic organizers to assist students with organizing information in meaningful ways.,

**Activity**

1. Structure lesson of any subject of standard Five for visually impaired and children with visual impaired
2. Reflection Differentiate the concept of Inclusion and integration with example of your experience as a general teacher

**Exercise**

1. What are the different approaches in inclusive education explain the role of a general teacher in communication and interaction
2. Explain with example role of a special educator in cognitive learning.
3. Explain physical and sensory learning approach
4. What is co teaching what are the various methods of co teaching.
5. Discuss with example -- Responsibilities of special educators are equally important as general teacher.
6. Why it is necessary to use diverse content and material.

**4.4 Resources in inclusive schools:****Material resources and human resources,****Introduction**

Inclusive education is about ensuring the rights to education of all learners, regardless of their individual characteristics or difficulties, in order to build a more just society. However this means that inclusive education initiatives often have a particular focus on those groups who have traditionally been excluded from educational opportunities. Amongst these vulnerable groups, children with disabilities and special educational needs are often the most marginalized within education systems and within society in general. Traditionally, they have experienced exclusion, discrimination and segregation from the mainstream and from their peers. They have often been placed in separate classes and schools or indeed, have been denied access to education of any sort. The inclusive education approach is particularly important for these groups. Hence variety of material resources are important.

**4.3.1 Material resources : REFER 4.1.1****4.3.2 Human resources: REFER 4.1.1****• FAMILY**

A child with either a gift or a disability obviously demands more time, attention and financial expenditure than the average child. In some cases, the demands or needs may be so overwhelming as to interfere with normal family interaction. In other situations, the presence of an exceptional child may bring a

special sense of purpose and commitment to the family. One thing is certain: there will be some reaction

- **Parental Responses**

There are a variety of possible parental reactions to having an exceptional child, ranging from over involvement to denial to realistic acceptance. In the case of handicapping condition, the family experience. Grief and disappointment that the child is not the wished-for and expected normal child. This is a perfectly normal reaction, and one that may recur at predictable points in the child's life. Depending on the personal fantasies of the individual parent, these moments may occur during holidays, the wedding of their normal child, watching normal children play, or hearing mothers of normal children chat about their child's successes or failures.

- **Siblings**

Siblings of the exceptional child, as well as others, often take their cues from parental behaviour and attitudes. They may accept or reject the "special person" in the family, and they certainly might be resentful of overindulgence of the exceptional child by one or both parents. Realistic acceptance of and participation in caring for the handicapped child, with responsibilities geared to be the abilities and maturity of the sibling (s), creates a happier family situation. Siblings cannot and should not be expected to devote all of their spare time to the exceptional with their sibling occasionally and help with therapy. They should not always have to include the exceptional child in their peer-group activities, any more than an older brother should have to include a younger one in his activities.

- **Grandparents**

Grandparents, like the parents, tend to be initially disappointed at having a handicapped grandchild. Their hopes for posterity have been dashed, and, again like some parents, they perceive this as a negative reflection on themselves. However, grandparents can be a source of strong emotional support for the parents and provide extra pairs of hands in helping to care for the exceptional child. Much of their influence on the child and the family, of course, depends upon their physical proximity.

**Exercise**

'To make inclusive education success full it is important to involve grandparents and siblings along with parents " do agree with the statement justify your answer

## **4.5 Exploring and utilizing the services and resources available in the community**

### **Introduction**

Communities are as diverse as schools, and in order to promote their involvement we need to become aware that difference and diversity is normal and should be respected. We need to know the members of the community. Obviously any community includes the parents and guardians their extended families, neighbors near the school. Communities may not be aware of the difficulties schools face, and to what extent certain children have education related problems that could be solved through increased support from families and communities. This requires openness and information sharing from both sides and the acceptance of joint responsibilities. An inclusive approach to education recognizes that the community has a real contribution to make and that they have a right to be involved in the decision making process. A great challenge is to seek the involvement of the families of the most marginalized students who often face marginalization themselves. It thus becomes necessary to give them a sense of confidence and self-worth.

### **Exploring and utilizing the services available in the community**

- **Therapy Services**

Therapy services are increasingly consultative in nature. Instead of working directly with the student, the therapist provides input and direction to the teaching assistant and/or classroom teacher on specific tasks that will assist the student. Students are often taken out of the classroom for therapy, which may interfere with their inclusive education. The goal, for the majority of students, should be to meet therapy needs within the regular classroom whenever possible. For students needing more intensive therapies, an appropriate time and alternative location should be identified in an effort to minimize the interruption to their education.

- **Physiotherapy are**

Disability Services for Students physical impairment includes "any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory, including speech organs, cardiovascular. Loss of mobility

- **Speech language therapy**

Services are traditionally viewed as taking place within a specialized room or



location. The speech language pathologist might see a child individually or in a small group of children in a special location often called the Speech Room.

- **Behaviour therapy is** in increasingly high demand and the need cannot be met with existing resource staff. It is imperative that for the optimal benefit of the child and family that behavior support services be addressed collaboratively by the child's team to ensure consistency across all environments. The lack of availability of behaviour therapy is a significant concern, given the tendency of some schools to use segregated classrooms as a permanent alternative when behaviour problems occur. Psychologists and psychiatrist provide these services

- **Support Programs**

These programmers provide a variety of supplemental resources and are intended to assist districts to meet the extraordinary special educational needs of students. These programs provide specific services for students with special needs throughout the province, either on an outreach basis or at a provincial center..

- **Student Support Groups**

Student Support Group's role is to identify child's needs and consider any adjustments to the curriculum regularly review and evaluate your child's needs (for example, once a term) let the principal know about your child's additional education needs and the resources required to meet those needs and develop an Individual Learning Plan, discuss it with teachers and help to implement the plan.

- **Special Education Technology services**

It is a Provincial Resource Program established to assist schools by supporting educational programs through the use of technology. These services are primarily available to students with a physical disability; and/or visual impairment.

- **School mentoring**

Mentoring program for teachers in inclusive schools are expected to acquire sufficient capabilities to assess students with special needs and provide educational services that suit their needs and characteristics to optimize the development of students' potential. Mentoring programme helps the school to obtain an illustration of students' condition and characteristics, which includes the level of learning difficulties and potential and also provide skills for teachers in recognizing students' characteristics and constructing Individual Learning Plan

that suits the needs of every student as a way of providing the best educational service for students with special needs.

- **Peer mentoring**

A peer Mentor is another student who can serve as a resource, a helping hand, a sounding board, and a referral service. The job of peer mentors is to provide support, encouragement. Mentors are chosen because they are academically successful and because they possess good communication, social and leadership skills. As a consequence, mentors serve as positive role models for the students, guiding them towards academic and social success. Peer mentoring may improve student retention rates

- **Exploring and utilizing resources available in the community**

Teachers always face the task of pulling together the diverse understandings their students bring to the classroom. The use of community resources provides a shared memory for the class. For example, going on a field trip is only part of the total experience. As students and teachers talk about the trip and think about it after it is over, they are building shared understanding. The event becomes part of the common knowledge of the class and can be referred to in subsequent lessons. What was learned is, thus, reinforced and extended in later discussions as the teacher refers to field observations.

- **Science Centers**

A learning activity must have a purpose or reason so field trips should be thought of as part of the curriculum. As such, they should provide something to think about as well as something to do or some place to go. If possible, the teacher will want to visit the science center before the field trip to help her balance the needs of the teaching unit with the resources of the site. She can then focus on those exhibits that demonstrate the concepts she is teaching and match the students' cognitive levels. Learning activities are prepared for use before, during, and after the field trip and include student orientation material, such as a map, a list of exhibits to be visited (although they could visit others), and the educational objectives of the trip.

- **Outreach.**

Many students do not live near a zoo, nature center, or museum for a field trip to be practical, but numerous sites listed in the Directory offer outreach programs. A visit to your classroom by Wildlife on Wheels

- **Near the School.**

Community resources include unconventional sites, such as the tile factory or a hardware store, fabric store, farm, or ranch. While extended field trips can be rewarding, short school yard trips can be equally valuable. These allow children to discover answers for themselves in a familiar context. Whether your

school is urban, suburban, or rural, it reflects the habitat of its neighborhood-the hard-topped surfaces, the soils, grasses, and trees, the weather, and so on.

- **Materials through the Mail.**

By necessity, most learning activities occur in the classroom. Organizations listed in the Directory can provide materials that enrich the curriculum and provide unique experiences for children. These inexpensive or free materials may be overlooked since they are not produced by educational publishing companies.. Numerous national organizations have also developed curriculum materials; guidance materials from professional organizations are useful ties to the workplace.

- **Guests.**

Guest speakers from the community can provide new information and experiences to students and link the school to the world outside. The teacher should spend time with the guest before the visit so they can discuss the age level of students and kinds of activities and information appropriate for this age group; the needs of the guest during the visit and his or her general comfort level with children; the topic of the presentation and the students' general knowledge about this topic; and what the teacher can do before to make the visit a success

**Activity**

1 Make a list resources in your community that you or your colleagues can use while teaching following subjects

- History
- English
- Mathematics

**Exercise**

1. Explain how various therapy services in the community are helpful in inclusive education
2. For successful inclusive education programme it is important to explore and utilize resources from the community – elaborate with examples

## **4.6 Mobilization of Resources for inclusion**

- **Introduction**

It is important for those wishing to develop more inclusive provision to find ways of resourcing the transition process itself. This is different from the establishment of long-term funding mechanisms since it is more concerned with initiating new projects and developments. It is also about finding a range of

resources - human, intellectual and material, as well as financial - that can support the change process.

- **Identifying resources**

An early step in the transition process might be the identification of a pool of resources which will be available to support the implementation of legislative change or to pump prime experimental developments. These may be funded by 'new' money allocated from the national budget or result from the 'ear-marking' of an element in the existing education budget. Within devolved systems, a requirement for the creation of similar resource-pools can be placed on local authorities and/or schools. Alternatively, access to the national pool can be made dependent on the pursuit of inclusive policies.

- **Building partnerships**

Central government will not have the financial resources to sustain the change process, while in all countries, central government will need to mobilize human and intellectual resources that it does not directly control. This is even more true where the impetus for inclusive education comes from outside government. It is essential, therefore, that partnerships are formed between key stakeholders who can support the transition process. These include:

1. all parents teachers and other education professionals
2. professionals in other services who will be affected by the move to inclusion (e.g. Health, Social Services)
3. teacher trainers and researchers
4. national, local and school-level administrators and managers
5. civic groups in the community and members of minority groups at risk of exclusion

- **Top-down and bottom-up approaches to involvement**

Involve stakeholders is through a 'top-down' approach in which national government gives a vigorous lead, articulates fundamental principles and disseminates those principles to partner groups. However, this 'top-down' approach has its limitations. In particular, it may only reach limited numbers of partners and it puts the onus on the government to 'sell' its policies to groups who have had only a limited role in formulating them. An alternative is to take a more 'bottom-up' approach. This means enabling partners to be involved in developing examples of inclusive education and, subsequently, to have a real role in formulating policy. There is close co-operation between parents and the authorities in developing community-based programmes for disabled children. A logical next step is for such parents to become involved in supporting inclusive education projects in schools. Sometimes, parents of children with difficulties can find themselves in dispute with schools and authorities as they press for

better provision. In some cases such parents - and the parental organizations which represent them - have been invited into the policy-formulation process. They might be involved simply in negotiating provision for their child, or in becoming part of schools' governing body, or in joining local or national policy-review groups.

- **Involving international organizations and NGOs**

International organizations and NGOs can play a range of roles in the transition to inclusion. International agencies including the World Health Organization (WHO), United Nations Educational, Scientific and Cultural Organization (UNESCO), World Bank, United Nations Economic and Social Council (ECOSOC), International Labour Organization (ILO), United Nations International Children's Fund (UNICEF), and regional bodies to promote inclusive approaches to policy, practice and investment strategies NGOs are generally comprised of some individuals who have for some reasons and motivations started to work either on behalf or with the people with disabilities. • Grass root organizations /Disabled People's Organisations (DPO) /parents organisations, women's groups etc., who are mainly peoples organisations, comprised of individuals, who came together by particular interest or common characteristics. They can:

1. help align national developments with current international thinking I provide access to international expertise and experience I
2. work at national level with ministries in formulating inclusive education policies I
3. support inclusive education projects with advice and resources in order to catalyze national developments
4. support the implementation of national inclusive education policy with advice and resources.

- **Making the most of limited resources**

In many countries the development of inclusive provision does not necessarily require large amounts of new money and other resources. The key factors seem to be that:

1. Existing funding is redirected towards developmental projects such developments become self-sustaining in the long term
2. Incentives are built into resourcing mechanisms for schools, local authorities and others to involve themselves in inclusive developments.
3. Teachers and pupils are the greatest resources available for promoting inclusive practice make maximum use of their capacities.
4. Build on existing practice make better use of local knowledge and building on existing practice is where all development must start.

5. Schools should be places where teachers and pupils are engaged in activities that help them to become more successful at understanding and dealing with the problems they meet.
6. Respect for diversity creates a welcoming environment for all. Inclusive education for students with disabilities can only be successful when those students feel that they are truly a part of the school community. This requires open and honest discussion about difference, and an institutional respect for people of all backgrounds and abilities.

### **Exercise**

1. What resources are available to support the transition process? Who are the key stakeholders and what partnerships could be formed to support change?
2. How can international organisations and NGOs be involved in the transition process?
3. Explain various methods of resource mobilization
4. your organization has minimum resources for inclusive education how you will make most of these limited resources?

## **4.7 Identifying the required resources for children with varied special needs**

### **• Introduction**



Assessing a child's developmental progress is an ongoing process that provides information about the child's interests, preferences, strengths, and needs. This information is used to plan appropriate and meaningful activities to promote each child's development and learning. Most students with special needs are not recognized as requiring special education and related services. To make inclusive education programme successful it is important to identify the required resources for children with varied special needs

### **• Physical Disability**

A physically disabled person is defined as a person who has a disability of locomotors and neurological origin which constitutes a disadvantage or restriction in one or more aspects of daily living activities, including work.

Resources required --

- a) **Prosthetic devices** such as artificial arms and legs are used to replace missing body parts. The different types of prosthetic aids are for upper extremity – above elbow and below elbow and lower extremity – above knee and below knee.
- b) **Writing aids** are wrist and elbow supports, finger splints etc.
- c) **Orthotic devices** are attachments such as leg brace or splint that assist a body functions. Other types of adaptive equipment such as wheel chairs, machines that turn pages and long forceps used to reach objects that would otherwise be out of reach are also available. The aids used for upper extremity are Braces and Splint (finger, wrist, hand immobilizers, area plane splint, hand splints), while those used for lower extremity are calipers (AFO, KAFO, HKAFO), knee cages, a gaiters, braces, surgical modified boots. Aids used for spinal cord are called spinal orthotic.
- d) **Assistive Devices** are any devices or aids that can directly help persons with disabilities gaining greater independence in undertaking activities of daily living, pursuing education, acquiring movement in the built environment, working and engaging in leisure activities.
- e) **Aids for reading:** Independent reading may be a problem for those students who have weak grip or weak muscles. If it is difficult to hold a book or paper, rest it on a cantilever table covered with non-slip fabric or a small wooden collapsible book rest. For news papers or large sheet of paper a free-standing frame with clips may be used. A rubber thimble or alternatively a mouth-stick and thimble may be used to turn pages of a book.
- f) **Aids for writing:** The ordinary pen or pencil may be used with modifications for better grip. Clipboards can be used to keep the paper in place. Magnetic writing board can also be made to hold the paper in place. Writing aids like wrist and elbow supports etc. could also be recommended. Some students who have physical impairment due to cerebral palsy may require special furniture and various supports

- **Intellectually impaired**

Intellectually impaired means a condition of arrested or incomplete development of mind of a person which specially characterized by sub normality of intelligence

- **Resources required**

1. **Psychological tests:**

As Intellectually impaired children are cognitively impaired, assessment of information processing, intelligence, concept development, etc. ,is vital for their educational intervention

2. **Play therapy set, Montessori teaching set, Kindergarten set:**

A number of concept development activities can be taught to children with mental retardation through toys, games, building blocks, etc. Therefore, basic Kindergarten teaching aids, Montessori teaching aids, etc. may be made available in programmes for mentally retarded children

### **3. Television and VCR:**

Any kind of visual information that is presented to children with Intellectually impaired is vital for their effective learning. Therefore, television and VCR are important for providing visual oriented information to such children. In addition to this, the child's image may also be shown to him/her through TV in order to change certain mannerisms

### **4. Toys:**

Toys are important role as these children lack cognitive skills

### **5. Computers:**

Computers can serve as interactive tools for these children

## **• Visually impaired**

### **1. Writing Devices**

Different types of Braille writers are used by totally blind. Some are Braille slate and stylus, Vasanta cube, Natesan block, Vikas composer and Brailer. Braille is a writing system for the visually impaired Natesan Block: is a block used for practice of Braille by new beginners. word up to five alphabets can be formed. Alphabet Plate it has the alphabet of a selected language inscribed on it in the normal form alongside with the corresponding embossed

### **2. Mathematical Devices:**

Taylor frame, Abacus and Geometrical devices are used for understanding mathematics

### **3. Talking phones:**

It has talking software that converts the cell phone into a talking mobile phone, make and receive calls, Write and read SMS, MMS, and e-mail messages.

## **❖ Hearing impairment**

Hearing impairment means loss of sixty decibels or more in the better ear in the conversational range of frequencies. Audiometer, Speech trainer, Hearing aids, Hearing aid test box, Assessment tests Group hearing aids, Toys for playing, Model of ear, Computers are Some of the devices listed below are teaching-learning devices whereas some are used in assessment

### **Activity**

1. Make poster of Braille alphabets and some frequently used signs and numeral codes
2. Find out the Aids and appliances used by different types of Hearing Impairment children in your school



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