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SECOND YEAR
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UNIT - 1

CONCEPT OF INCLUSIVE EDUCATION

1. Discuss the concept, meaning, definition and importance of inclusive education.

Ans. Meaning: Inclusive education means that all students attend and are welcome by their neighbourhood schools in age appropriate, regular classes and are supported to learn, contribute and participate in all aspects of the life of the school.

Concept: The concept of inclusive education and understanding children with special needs. 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.

The concept of inclusion is based on the believed that - (a) learning problems are natural and so such children need not be excluded or separated (b) individual differences persist among the so called normal children also (c) learning is evolutionary in nature and hence different ways or needed to different learners.

Definitions: Children, regardless of ability, are taught in general education classrooms with same - age peers

Inclusion allows all students equal access to the curriculum through differentiated, adapted and/or modified lessons.

Children of all abilities are included in all activities throughout the school, such as class activities, recess, lunch time, assemblies and field trips.

Importance of Inclusive Education: Inclusive education is important because -

+ The students in the inclusive classroom demonstrate increased acceptance and appreciation of diversity. + It involves the parents in their education and in the other activities of the schools. + Children show greater development in moral and ethical principles and create warm and caring friendships. + Inclusive education develops individual strengths and gifts, with high and

appropriate expectation for each child. + It provides opportunities to learn about and accept individual differences, lessening the impact of harassment and bullying. + Mutual respect and understanding strengthen when children of differing abilities and cultures play and learn together. + It develops friendships with a wide variety of other children, each with their own individual needs and abilities. + Children in the inclusive classroom show increased self-esteem.

2. What is the concept of impairment, disability and handicap.

(Or)

Write the differences among the terms impairment, disability and handicap.

Ans : The World Health Organisation (WHO) has defined the terms 'Impairment' 'Disability' and 'Handicap' in 1980 through the publication of the International classification of Impairments, Disabilities and Handicaps (ICIDH), which is a manual of classification relating to the consequences of diseases. The ICIDH proposes the concepts and definitions of impairment, Disability and Handicap, and discusses the relation between these dimensions. It is based on a linear model implying progression from disease, impairment and disability to handicap.

Disease → Impairment → Disability → Handicap



ICIDH Model (WHO 1980)

Definitions

Impairment: According to the ICIDH, impairment is any loss or abnormality of psychological, physiological or anatomical structure of functions, generally taken to be at organ level.

Disability: Disability is any restriction or lack of ability (resulting from an impairment) to perform an activity in the manner or within the range considered normal for a human being, generally taken to be at the level of the individual.

Handicap: The ICIDH defines Handicap as a disadvantage for an individual, resulting from an impairment or

disability that limits or prevents fulfillment of a role that is normal (depending on age, sex and social cultural factors) for an individual.

EXPLANATION OF TERMINOLOGY

A handicap reflects the demands placed on the individual in a particular situation. An individual may indeed have a disability but may not have a handicap, except in certain situation. The person who has a visual impairment due to damage to optic nerve retina is handicapped when it comes to reading but is able to enjoy social conversation and music etc. Like any other non-disabled person.

Explanation of Concepts: Suppose a person suffers a burn on his forearm while working in the kitchen. If the burn is deep and the damage has percolated through the skin tissues to nerves, the functioning of the forearm may be affected. The person would suffer disability in his/her hand due to the impairment caused by the burn. This means that he/she would have problem in working with that hand depending on the extent of damage. However, the person would be able to do all those activities that require the use of only one hand (e.g. brushing hair, eating and writing etc.). He/she would experience a handicap only while performing those tasks that require the use of both hands, such as, cutting vegetables, buttoning shirts, driving a vehicle etc.

Handicap refers to the restriction resulting from a disability. Often the restriction is not inevitable consequence, but is socially and environmentally imposed. A man in a wheelchair has a disability but is handicapped only when he needs to enter a building, which has steps but no ramps.

A child who has difficulty in keeping up with classmates may be handicapped in terms of promotion from one grade to another. A child with visual impairment may be handicapped when playing cricket if the opposite team members have perfect sight. However, the same child may be able to function normally in social interaction.

The problems that a person faces as result of impairment and disability is called the handicap, but a handicap is situation specific. Table provides the conceptual difference among impairment, disability and handicap.

Condition	Concerned with	Represents
Impairments	Abnormalities of body structure, organs appearance and system functioning	Disturbances at organ/tissue level
Disabilities	Limitations/loss of functional performance and activities	Disturbance at personal level
Handicaps	Disadvantages resulting from impairment and disabilities	Situation specific limitations

3. Write the concepts of special education, integrated education, mainstreaming and inclusive education
(Or)

Write a note on (a) special education (b) integrated education (c) main streaming (d) inclusive education.

Ans : Special Education: Special education means specially designed instruction which meets the special educational and related needs of an exceptional child. It is distinguished from regular educational programme meant for non exceptional children by some unusual quality, something uncommon, note worthy. It is something special - special materials, special training techniques, special equipment and special help and/or special facilities may be required for special categories of children having special needs.

Example: Visually impaired children may require reading materials in large print or Braille. Hearing impaired children may require hearing aid, auditory training, lib reading etc.

Definition: It is applied to an individual who possess a trait or characteristic that deviates from normal individual

- Crow & Crow.

Many European and American physicians and educators contributed greatly to the development of special education, most prominent among them were J.M.G Itard, E. Seguin, Sigmund

Freud, ANNE Sullivan. Samuel Gridley Howe, T.H. Gallaudet, Philippe Pinel.

Requirements: Special education requires + special educators + special curricula + special facilities + special instructional methods + special instructional material.

Importance of special education: + The educational programmes try to meet the special needs of the exceptional children + It develops self reliance and self efficiency among exceptional children + It helps the exceptional children to master skills needed to make a living + It helps to deal with the learning problems of the physically and mentally handicapped children.

Integrated education: The concept of integrated education in India has emerged during the mid 1950s. It is based on the medical model of disability and it emphasizes placement of children with disabilities in main stream schools. The major thrust is on attendance. NPE 1986 emphasized equal opportunity to all to education.

Integration means providing educational opportunities to disabled also along with normal children in the same educational setting. It is an educational process in which exceptional children and children with special needs participate along with normal children in educational process.

Nature of Integrated Education: + It is an arrangement in which disabled children are considered as important as their non-disabled peers. + It ensures civic rights to the disabled in order to raise their standards of living. + It accepts the disabled child as an individual in his own rights.

Scope of Integrated Education: + Children with loco motor handicap + Educable mentally retarded + Children with learning disability + Mildly and moderately hearing impaired.

Advantages: + It is less expensive + scope for normal mental growth.

Main streaming: The concept of main streaming owes its origin in the work and ideas of Samuel Gridley Howe, an American physician, who took keen interest in the education of blind and deaf children. It was in 1975 that the concept of main

streaming was introduced in the education for all the Handicapped Act (USA).

The concept of main streaming is based on the conviction that: (1) Disabled children have a wide range of special educational needs. (2) The special educational needs of disabled children vary greatly in intensity and duration. (3) Disabled children should be educated with non-disabled children.

Components of Mainstreaming: According to this operational definition, there are three components of mainstreaming. 1. Integration 2. Educational planning and programming 3. Clarification of responsibilities.

Efficacy of Mainstreaming: Main streaming depends on the following conditions: 1. There should be temporal, social and instructional integration of handicapped children. 2. The regular teachers must accept and agree to implement mainstreaming in their classrooms and schools supportive services and personnel should be provided both to the children and the regular class teacher. 4. In all cases parents should be involved in the care training and placement of their handicapped children.

Inclusion Education: The concept of inclusion is based on the idea that students with disabilities should not be segregated, but should be included in a class room with their peers. A student in an inclusive room usually needs only to show that the individual is not losing out from being included in the classroom. The supporters of inclusion pay more attention to life preparation and social skills than on the acquisition of level-appropriate academic skills. "The full inclusion of all children in ordinary schools can come about only as a result of a reform of the school and the education system as a whole. It is the whole education system and not just one aspect of it which should be reformed to make inclusive education possible". **Salmanca, Spain 1994.**

4. Discuss the need for inclusive education in India for children with special needs.

Need for Inclusive Education in India for children with special needs.

Regular schools with inclusive orientation are the most effective means of combating discriminatory attitudes, creating

welcoming communities, building an 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.

Inclusive education is a process of strengthening the capacity of the education system to reach out to all learners. It involves restructuring the culture, policies and practices in schools so that they can respond to needs of the diverse learners. For a school, to be Inclusive, the attitudes of every one in the school, including administrators, teachers, and other students, are positive towards students with disabilities. Inclusive education means that all children, regardless of their ability level, are included in a mainstream classroom. In the inclusive class rooms teachers adjust the curriculum and the class room approaches to meet the needs of the learners. The inclusive schools can reduce the dropout rate and improve the achievement of the students. Inclusive education services allow children with disabilities to stay with their family and to go to the nearest school, just like all other children. This is important to their personal development. Because interrupting a disabled child's normal development may have far more severe consequences than the disability itself.

Need There are two reasons for inclusive education.

1. Ideological
2. Technical

Ideologically inclusive education is needed to bring in unity in diversity. Schools have to recognize the variations among children. They have to care for providing equal opportunity to each and every individual to grow. There is need to provide learning opportunities through discussion, exchange of ideas, group activities etc. All parents want their children to be accepted by their peers, have friends and lead "regular" lives. Inclusive settings can make this vision a reality for many children with disabilities. When children attend classes that reflect the similarities and differences of people in the real world, they learn to appreciate diversity. Respect and understanding grow when children of differing abilities and cultures play and learn together. Technically schools are important places for children to develop friendships and learn social skills. Children with and without disabilities learn

with and from each other in inclusive classes. In inclusive classrooms, children with and without disabilities are expected to learn to read, write and do math. With higher expectations and good instructions children with disabilities learn academic skills. Because the philosophy of inclusive education is aimed at helping all children learn.

Rule 6 of the UN Standard Rules for persons with Disabilities states that 'States should recognize the principle of equal primary, secondary and tertiary educational opportunities for children, youth and adults with disabilities in integrated settings. They should ensure that the education of persons with disabilities is an integral part of the education of persons with disabilities is an integral part of the educational system. General education authorities are responsible for the education of persons with disabilities in integrated settings. Education for persons with disabilities should form an integral part of national educational planning, curriculum development and school organization. The Indian 'Equal opportunities and Rights of persons with Disabilities Act' 1995, rule 26, also states that the education of children with disabilities up to the age of 18 years in an appropriate environment is mandatory on the part of the respective governments.

It also emphasizes measures like

1. Transport facilities to the students with disabilities or alternative financial incentives to parents or guardians to enable their students with disabilities to attend schools.
2. The removal of architectural barriers from schools, colleges or other institutions imparting vocational and professional training.
3. The supply of books, uniforms and other materials to students with disabilities attending school.
4. The grant of scholarship to students with disabilities.
5. Suitable modification in the examination system to benefit students with disabilities.

UNIT - 2

TYPES AND CHARACTERISTICS OF CHILDREN WITH SPECIAL NEEDS

3. Write the concept of children with Special Learning Needs ? Write its types and characteristics.

(Or)

Identify the different types of children with special needs and discuss their problems.

Ans. There are different types of children who fall under special needs category. Some of them are children with

1) Hearing Impairments : Hearing Impairment is a generic term indicating a hearing disability that may range in severity from mild to profound. A deaf person is unable to process linguistic information through audition with or without hearing aid. A hard of hearing person has residual hearing that enables him/her to process linguistic information through audition with hearing aid.

Types : 1) Based on the type of hearing Loss 2) Based on degree of severity 3) Based on the age of onset

Characteristics : Hearing impairment is a common but serious problem affecting children of all ages a) Speech delays b) communication difficulties c) Selective Hearing

2) Visual Impairments : Visual Impairments has been defined in terms of blindness and Low vision. Blindness has been defined as a condition when a person suffers from absence of sight, or visual activity not exceeding 6/60 or 20/200 in the better eye with corrective lenses or limitation in the field of vision subtending an angle of 20° or less.

Types ; According to the CDC and the W.H.O. the classification of visual activity and impairment includes.

- Low visual activity means vision between 20/70 and 20/

400 with the best possible correction, or a visual field of 20° or Less.

- Blindness is defined as a visual acuity worse than 20/400 with the best possible correction or a visual field of 10° or less.

- Legal blindness in the US means visual acuity of 20/200 or worse with the best possible correction, or a visual field of 20° or less.

- Visual acuity of 20/70 to 20/400 is considered moderate visual impairment or low vision.

Characteristics : + Visual impairment would obstruct the child's development in various areas i.e. cognitive, language, Motor and Social development + Visual impairment would also affect the accurate assessment of the child's ability + Approximately 1/3 to 1/2 of Visually Impaired children have more than one handicap conditions.

(3) Autism: Autism is a neurodevelopmental disorder characterized by impaired social interaction, verbal and non verbal communication and restricted and repetitive behavior.

Types: 1. Asperger's disorder 2. Kanner's syndrome 3. Pervasive developmental disorder 4. Rett's syndrome 5. Childhood disintegrative disorder.

Characteristics: + They may exhibit abnormal responses to objects, for instance exaggerated fears. + Some children with autism may exhibit periodic emotional outbursts. + Children with autism can be self-abusive-banging their heads, slapping, orbiting themselves.

4. Attention deficit disorder (ADD): Attention deficit hyperactivity disorder is a mental disorder of the neurodevelopmental type. It is characterized by problems paying attention, excessive activity or difficulty controlling behavior which is not appropriate for a person's age.

Types: 1. ADD with hyperactivity 2. ADD without hyperactivity

Characteristics: + Restlessness + Short attention span
+ Disorganization + Incessant activity + Poor impulse control

5. Emotional disturbance: Emotional disability means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance.

+ An inability to build or maintain satisfactory interpersonal relationships with peers and teachers. + An inability to learn that cannot be explained by intellectual, sensory or health factors.

Multiple Disabilities: Multiple disabilities refer to a combination of two or more disability conditions that have a combined effect on the child's communication, mobility and performance of day to day task.

Characteristics: + Visual problems + Hearing problems + learning problems + Odd behaviours + Communication problems + Medical conditions like eye, ear infections etc.

Types: The combination of any two or more disabilities like. a. Mental retardation with visual impairment. b. Mental retardation with hearing impairment. c. Autism with cerebral palsy. d. Autism with hearing impairment. e. Visual impairment with hearing impairment f. Cerebral palsy with visual impairment.

7. Orthopedic impairment : The term orthopedic impairment due to congenital anomalies, diseases, or other causes.

8. Other health impairments: Other health impairment means having a disability caused by disease, condition, disorder or injury that substantially affects strength, vitality or alertness.

2. **Write a note on children with physical challenges.**
i.e. (a) visual (b) hearing (c) loco-motor and neurological (or) Explain different physical challenge children

Ans : Visual challenges Meaning and definition:
According to dictionary blind means absence of sight or inability to see. But in reality many persons who are blind for all practical purposes may have light perception or little residual vision.

Definitions: Low vision children are those who have limitations in distance vision, but also able to see

objects and materials when they are within few inches or at a maximum of a few feet away.

-Dr. Natallie Baraga

An individual with low vision is one who is still visually impaired after best possible correction but who may increase visual functioning through the use of optical aids non optical aids environmental modifications and/or techniques.

- Dr. Annecorn.

Characteristics of visually impaired children:

Language development: 1. Many studies show that the language development of the blind is unimpaired. The blind child is still able to hear language and may even be more motivated than sighted child to use language because it is the majority in which he or she communicates with parents and peers. 2. Even though their language development is unimpaired it is different from the normal child's language.

Intellectual ability: 1. The blind are not markedly lower in intelligence than the sighted 2. The tactual sense is the primary way a variety of concepts acquired by the blind child.

Types: Visual impairment can be classified into 2 types as per PWD 1995 Act.

1. Blindness: It refers to a condition where a person suffers from any of the following conditions namely total absence of sight, or visual activity not exceeding 6/60 or 20/200 in the better eye with correcting lenses, or limitation of the field of vision subtending to an angle of 20° or worse.

2. Low Vision: Person with low vision means a person with impairment of visual functions even after treatment or standard refraction correction but who uses or potentially capable of using vision for the planning or execution.

Children with hearing challenges: According to the PWD Act 1995, hearing impairment is defined as loss of 60 decibels or more in the better ear in conventional range of frequencies.

According to the conference of the educational administrators serving the deaf (CEASD) the pathological definition adopted are,

1. A deaf person is one whose hearing is disabled to an extent (70 db or greater) that precludes the understanding of speech through the year alone, with or without the use of a hearing aid.

2. A hard of hearing person is one whose hearing is disabled to an extent (usually 35 to 69 db) that understanding of speech through the ear alone with or without the use of hearing aids. Hearing loss may occur because of (a) Impairment of sound conduction path. (b) Sensory neural impairment (c) Perforation or damage of ear drum.

Characteristics of hearing impaired: ✦ Exhibits speech defects ✦ They are generally lazy ✦ Confuses in following directions ✦ Ignores directions and confuses with directions ✦ They addict to day dreaming.

Classification of hearing impaired: The hearing impaired children have been classified under various sub-groups from various angles.

(a) **Classification based on the degree of hearing loss:** Depending on the degree of hearing loss the hearing impaired children are classified into two groups such as the deaf, and the hard-of-hearing.

(b) **Classification based on age of onset:** Hearing impairment may occur since birth or it may be acquired at any age in life. Thus depending on the age of onset we have two groups of hearing impaired children such as congenitally deaf, adventitiously deaf.

(c) **Classification based on language experience:** Hearing impaired children are also classified into the following two groups depending upon the language experience they have acquired pre lingual deaf, post lingual deaf. (d) Classification based on the location of the problem (e) Central deafness.

Loco-motor and neurological challenges: According to the PWD Act 1995, loco motor disability means disability of the bones, joints muscles leading to substantial restriction of the movement of the limbs or some form of cerebral palsy. Signs of loco-motor disability are paralysis, UN steady movements of limbs, poor muscle coordination loss of limbs etc.

5) Physical disabilities and neurological challenges may include anyone of the following.

1. Muscular Dystrophy : Muscular dystrophy is a group of disorders characterized by a progressive loss of muscle mass and consequent loss of strength

2. Arthritis: Arthritis is inflammation of one or more of your joints.

3. Spina bifida: It occurs when the bones of the spine don't form properly around part of the baby's spinal cord

4. Osteogenesis imperfecta : It is known as brittle bone disease

5. Paralysis : It is usually due to damage to the nervous system

Characteristics : ✦ Lack of neck control ✦ abnormal muscle tone ✦ legs are crossed like scissors ✦ unable to lift the head ✦ poor balance reactions

Classification : There are two types of classification

1. Classified according to the limb involvement :
✦ monoplegia ✦ Hemiplegia ✦ Paraplegia

2. Classification is according to the muscle tone :
✦ Hypertonia ✦ Hypotonia ✦ Atethosis

3. Write a note on children with intellectual challenges i.e. (a) Gifted children (b) Mentally challenged (c) Autism (ASD) (d) Learning difficulties (LD)

(Or)

Explain different intellectual challenge children

Gifted children :

Meaning and definition : The term gifted child has been defined by different scholars and psychologists in the following words:

The term gifted or talented stands for those whose performance is consistently remarkable in some potentially valuable activity - Witty (1940)

The talented or gifted child is one who shows consistently remarkable performance in any worthwhile line of endeavour . - Havighurst (1958)

The intellectually gifted can be defined in terms of test scores or demonstrated performance or as the upper 1 or 2 percent of the general population as measured by some designated intelligence and/ or achievement test

- Teleford and sawrey (1977)

Characteristics : + They pose varied interests + They have better physique + They experience more successes + They are well adjusted + They are capable of abstract thinking + They exhibit higher mental abilities

Types :

Type 1 : The successful : The successful's are the most easily identifiable and may account for up to about 90% of the Identified gifted students in school

Type 2 : The challenging : The type 2 gifted are the divergently gifted who possess high levels of creativity

Type 3 : The underground : The Type 3's refers to gifted students who deny their talents or hide their giftedness in order to feel more included with a non gifted peer group.

Type 4 : The Angry : They express themselves by being depressed or withdrawn and responding defensively

Type 5 : The Twice - Exceptional Students Identified as Type 5 are gifted students who are physically or emotionally handicapped in some way or have a hearing disability

Type 6 : The Autonomous learner : The Type 6 gifted are the autonomous learners who have learnt to work effectively in the school system

Mentally Challenged Children: The term mental retardation or mental deficiency has been defined in several ways some definitions of mental retardation are

"Mental retardation" means a condition of arrested or incomplete development of mind of a person which

is specially characterized by sub normality of intelligence". -Persons with disabilities Act, 1995.

Mental deficiency is a condition of sub-normal mental development, present at birth or early childhood and characterized mainly limited by intelligence and social inadequacy. - Page (1976)

Characteristics: + Slow reaction + Poor memory + Lack of concentration + Slow in understanding and learning + Lack of co-ordination poor motor development. + Slow in speech development.

Types: Chart showing types of mental retardation and educational placement scope.

Medical Terms	Psychological Terms	Educational Terms	Educational Placement
1. Borderline	IQ 90-70 MA-12 yrs	Slow learners	Regular schools
2. Mild MR	IQ 70-50 MA-10 yrs	Educable mentally	Regular Primary school
3. Moderate MR	IQ 50-30 MA- 8 yrs.	trainable Mentally Retarded	Full time in special school
4. Severe MR	IQ 30-20	Wstodial	Full time in Special school
5. Profound MR	IQ below 20 MA-below 3 yrs		Special school

Autism (ASD): Autism is a neurodevelopmental disorder characterized by impaired social interaction, verbal and non verbal communication and restricted and repetitive behavior.

Characteristics: + They may not imitate others + They may not point or use other hand gestures + They may avoid or lack eye-contact + They may not speak at all + Their ability to focus is limited.

Types of Autism: 1. Aspergers disorder 2. Kanner's syndrome 3. Pervalse developmental disorder 4. Rett's syndrome 5. Childhood disintegrative disorder.

Learning difficulties (LD): The NJCLD uses the term to refer to a discrepancy between a child's apparent capacity to learn and his or her. The NJCLD (National Joint Committee on Learning disabilities) defines the term learning disability as "A heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of speaking, writing or mathematical abilities.

Characteristics: Reading skills: ✦ They are weak vocabulary skills ✦ They face difficulty identifying important ideas in context.

Mathematical Skills: ✦ Their basic calculation skills are poor ✦ Their mathematical fluency is poor.

Written Expression Skills: ✦ They have poor writing fluency ✦ They find it difficult to organize written information.

Oral Language Skills: ✦ They have difficulty articulating thoughts or ideas orally. ✦ Their ability in the recall of facts or details is disorganized.

Types of learning disabilities: 1. Motor disabilities
2. Language Disability 3. Abstraction disability 4. Sequencing disabilities 5. Processing disability. 6. Specific learning disability.

4. **Explain ADHD and juvenile children.**

(Or)

Write about ADHD and Juvenile children.

Ans : Attention-deficit/hyperactivity disorder (ADHD) is a brain disorder marked by an ongoing pattern of inattention and/or hyperactivity - Impulsivity that interferes with functioning or development. ADHD includes a combination of persistent problems, such as difficulty sustaining attention, hyperactivity and impulsive behavior. Children with ADHD also may struggle with low self-esteem, troubled relationships and poor performance in school. Symptoms sometimes lessen with age. However, some people never completely outgrow their ADHD symptoms. But they can learn strategies to be successful.

1. Impulsivity: Means the individual makes hasty actions that occur in the moment without first thinking about them and that may have high potential for harm or a desire for immediate rewards or inability to delay gratification.

6) **2. Inattention:** Means the individual wanders off task, lacks persistence, has difficulty sustaining focus, and is disorganized; and these problems are not due to defiance or lack of comprehension.

3. Hyperactivity: Means the individual seems to move about constantly, including in situations in which it is not appropriate; or excessively fidgets, taps or talks.

Characteristics: They do not seem to listen when spoken to directly. ✦ They avoid or dislike tasks that require sustained mental effort. ✦ They are easily distracted by unrelated thoughts or stimuli. ✦ Overlook or miss details, make careless mistakes in school work, at work, or during other activities. ✦ They are forgetful in daily activities such as, returning calls, keeping appointments etc.

Individuals with symptoms of hyper activity-Impulsivity may often: ✦ They are unable to play or engage in hobbies quietly. ✦ They face trouble in waiting for their turn. ✦ They talk nonstop. ✦ Run or dash around or climb in situations where it is inappropriate or, in teens and adults, often feel restless.

Juvenile delinquency : Juvenile delinquency is participation in illegal behavior by minors. Juvenile delinquency can be separated into 3 categories.

1. Criminal behavior, crimes dealt with by the criminal justice system. 2. Delinquency, crimes committed by minors, which are dealt with by the Juvenile courts and justice system. 3. Status offences that are only classified as such.

There are two different types of offenders that emerge in adolescence one is the repeat of offender, referred to as the life-course-persistent offender, who begins offending or showing antisocial or aggressive behavior in adolescence and continues into adulthood and the age specific offender, for whom Juvenile offending or delinquency begins and ends during their period of adolescence. Juvenile delinquency occurrences by boys and largely disproportionate to the rate of occurrences by girls.

Risk factors: The two largest predictors of juvenile delinquency are parenting style and peer group association.

Parenting style: ✦ Neglectful parenting, characterized

by a lack of monitoring and thus of knowledge of the child's activities. ♣ Permissive parenting, characterized by a lack of consequence - based discipline and encompassing two subtypes.

Peer group Association: Peer group association, particularly with antisocial peer groups, as is more likely when adolescents are left unsupervised other factors that may lead a teenager into Juvenile delinquency include poor or low socio-economic status; poor school readiness or performance, failure, peer rejection or ADHD.

Individual risk factors: Individual psychological or behavioural risk factors that may make offending more likely include low intelligence, impulsiveness, or the inability to delay gratification, restlessness etc.

Family environment and peer influence : Family factors that may have an influence on offending include, the level of parental supervision the way how parents discipline the child, parental conflict or separation, criminal parents, and the quality of the parent-child relationship.

5. **Write about children with socio-cultural deviations (S.C, S.T, Minorities) and linguistic minorities**

(Or)

Explain the children with socio-cultural deviations (S.C, S.T, Minorities) and linguistic minorities.

Ans : The term "Backward" children and backwardness has been defined in many ways.

Backwardness in general, is applied to cases where their educational attainment falls below the level of their natural abilities.

- Barton Hall (1947)

Backward pupil is one who, compared with other pupils of the same chronological age shows marked educational deficiency.

- Schonell (1948)

The scheduled tribes (STS) and Scheduled Castes (SCS) are various officially designated groups of historically disadvantaged indigenous people in India. The terms are recognized in the Constitution of India. The terms are recognized in the constitution of India and the various groups are designated.

In one or other of the categories the S.C's and S.T comprise about 16.6% and 8.6% respectively of India's population.

Central Advisory Board of Education Recommendations: Education is directly related to development of an individual and the community. It is the most important single factor for economic development as well as social emancipation.

It was in the content the Central Advisory Board of Education recommended in 1976.

1. SCs and STs are not homogeneous groups differentiated programmes are necessary for them. 2. Universalization of elementary education of SCs and STs is necessary, particularly in selected areas. 3. Since educational infrastructure is nonexistent in many cases in the tribal areas, a network of educational Institutions of single-teacher schools and hostel facilities according to the density of school network need to be planned for each micro unit.

Measures adopted for educational development of SCs and STs and Minorities: + Relaxation in age and marks for admission + Reserving seats in educational institutions including engineering medical colleges + For special coaching to students, aspiring for admission to professional courses or preparing for central and state level competitive examinations.

NPE 1986 measures for the education of SCs and STs and Minorities : + Facilities in hostels *Establishing residential schools on a large scale + Recruitment of teachers from SCs and STs + Incentives to SC and ST families to send their children to school regularly till they reach the age of 14 + Priority to opening primary schools in the tribal areas.

Deficiencies in education programmes for the SCs and STs and Minorities :

1. **Meager scholarship :** Money spent on education is much more than the money received as scholarship.

2. Ineffective reservations : All reserved seats are not filled up due to non-availability of the required qualified candidates.

3. Cultural and social barriers. 4. High percentage of drop-outs 5. Medium of instruction.

Linguistic minorities : There are many divisions in Indian society because of language is one of the divisions to reckon with. The main reason to consider it seriously is that the territory of the country itself has been defined on the basis of language only. This happened in 1956. At present around 325 languages are spoken throughout the country out of which 18 are scheduled ones, with such a large number of languages, it is logical that a large number of languages which are spoken only by small groups of the total population. These will evidently be those groups which are called the linguistic minorities.

Rights of linguistic minorities: ✦ Article 30 is vital to the protection and preservation of rights of the minorities. ✦ Even though, Hindi is made the official language of India, primary education everywhere is given in the mother tongue. ✦ The minorities have been given the right to establish and administer educational institutions of their choice ✦ Article 29 gives the religious and linguistic minorities right to establish and manage educational institutions of their own.

UNIT - 3
IDENTIFICATION, ASSESSMENT
AND EDUCATIONAL PROVISIONS

1. Discuss the Identification, assessment and Education of Visual Impairment, Hearing Impairment, Loco-motor and Neurological children.

(Or)

Explain the identification, Assessment and education of children with physical challenges (a) visual (b) hearing (c) Loco-motor (d) neurological

Ans : Visual Impairment: Education of the visually impaired children in India is one century and two decades old. There are many facilities for blind children for education.

Identification: Given below are a few indicators which may enable the parent and teachers to identify children with visual impairment. ✦ Rubs eyes excessively ✦ Watery eyes ✦ Squints ✦ Looses his place while reading ✦ Blinks more frequently ✦ Eyes are often red ✦ Bumps into objects or people.

Identification: Excessive rubbing of the eyes, red eyelids, watery eyes, tilts head forward holds objects and books close to eyes, requires help to copy notes from the black board, blinks, squints, bumps into people and objects, poor eye-coordination keeps book close to the eyes.

Assessment: Assessment is a major challenge which the teachers working with the visually impaired children have to face. Development assessment uses chronological age as a basis of comparison. It is not possible to evaluate visually impaired and sighted children on a set of common measures, even if they have been adapted for that population.

The most important initial screening device for detecting eye problem is one that would measure visual acuity. Tests to measure intellectual abilities are perkins-Binet-Carl Davis-

revision. Wechsler's intelligence scale for children. Vithobha Pannikar performance test of intelligence for the blind. The Blind Learning Aptitude test (BLAT) (CA6 -20).

Behavior and social development characteristics can be assessed by using some of the following tests: Bayley scale of infant development, Denver development screening test.

Education of visually impaired:

Teaching strategies: + Instructions are to be modified for auditors/tactile presentation + The teacher can use raised line drawings for temporary tactile presentations + Overhead projector helps to show step-by-step instructions + Teacher can use an opaque projector whenever possible to enlarge a text or manual.

General strategies: + The teacher has to read overheads aloud and describe the content of slides + While showing a video tape, the actions are to be described + A screen magnifier may be used to enlarge print on a computer screen.

Hearing impairment: Hearing impairment is characterized by increasing inability to detect or process auditory stimuli as the hearing loss increases in severity.

Identification: + They have difficulties in the comprehension and use of language. + Master language skills slowly. + Have difficulty in interpreting information + Academic achievement with adaptations and modifications in the curriculum usually equals that of the hearing population.

Assessment: + An audiometric assessment is done by an audiologist to determine the extent of hearing loss + IQ assessment may be done by the psychologist to determine the intellectual capacity of the child + Educational areas such as reading, writing, maths may be assessed by the special educator to determine the child's level.

Types of Assessment:

Audio logical: + speech + language + cognitive + academic

Language assessment: This may be observed by oral testing, dictation may be used as a method of testing, listening comprehension, receptive expression.

Education of the hearing impaired: † Specialized curriculum is to be implemented † The students must be trained in manual skills † Proper use of hearing aids is to be encouraged of † Training must be provided in lip reading skills.

Loco-motor impairment: Orthopedic impairments are the most common physical disabilities.

Identification: † Frequent pain in joints † poor motor control † Due to paralysis they may have language and/or fluency disorders † may be often absent from school due to medical/health problems or surgeries.

Assessment: † Assessment by the educational psychologist for the intellectual functioning † Assessment by the special educator for the educational areas like reading writing, math etc. † Most of the students with a physical handicap can be easily included in the regular classroom as they do not have any learning problems.

Educational programmes: † There must be provision in the school for physiotherapy † It desirable to organize motivational programmes † wherever necessary hospital classes can be planned.

Neurological Impairment: A neurological disorder is any disorder of the nervous system structural, biochemical or electrical abnormalities in the brain, spinal cord or other nerves can result in a range of symptoms.

IMPORTANCE OF EARLY IDENTIFICATION:

A very young child will respond better to early treatment than to later treatment, when the abnormal condition may have become more established. Recognizing the importance of early treatment it will be clear that the correct handling of the child by his/her parents, instructors and therapists is of equal importance. The early physical management of these children is mostly done by the parent with guidance of the therapists.

The rate of human learning is most rapid during developmental years. The most teachable moments or readiness stages are during primary school level. The minute suspicion of 'at risk' arises; therapy -

- ✦ Can start from day one ✦ Will help to reach the optimum level ✦ Will bring better results ✦ Arrests the deterioration.

ASSESSMENT OF BASE LINE:

Sl.No			
1.	Child has difficulty in a. Sucking b. Swallowing	Yes Yes	No No
2.	Child has drooling	Yes	No
3.	Child has head control	Yes	No
4.	Child has stiff legs	Yes	No
5.	Child has stiff hands	Yes	No
6.	Child has floppy (loose) muscles	Yes	No
7.	Child finds difficult to sit	Yes	No
8.	Child has difficult in standing	Yes	No
9.	Child has good grip	Yes	No
10	Child releases objects easily	Yes	No

2. Explain the identification, assessment and education of children with intellectual challenges (a) Gifted (b) mentally challenged (c) Autism (d) learning difficulties (L.D)

(Or)

Discuss identification, assessment and education of children with gifted children, mentally challenged, Autism, learning difficulties (L.D)

Ans : Gifted children: Some professionals define gifted as an intelligence test score above 130, two or more standard deviations above the norm, or the top 2.5% others define gifted based on scholastic achievement, a gifted child works 2 or more grade levels above his or her age.

Identification of gifted children: Gift children are usually identified by subjective and objective method, such as the following. ✦ Intelligence scores ✦ Creativity measures ✦ Self-nomination ✦ Nomination of peers ✦ Nomination by parents ✦ Measures of special aptitude.

Identification check list for parents: Parents can identify their gifted children before they enter the primary school with the help by the following check list as suggested by Witty (1995). + Interest in and liking for book + The early use of a large and accurately employed vocabulary + The early development of ability to read + Keen observation and retention of information about things observed.

Identification check list for teachers: Koogh and Dehaan (1995) have suggested the following check list: + Learns rapidly and easily + Performs difficult mental tasks + Is alert, keenly observant and responds quickly + Asks many questions + Retains what he has heard or read without much drill.

Assessment: Assessing gifted children is similar to and different from assessing other types of children. Though areas to be assessed are similar for all, for gifted children, the assessment techniques and tests require special characteristics. Assessment of gifted includes standardized test administration.

Assessment is highly dependent up on training, theoretical orientation, personal experience research knowledge and clinical experience of the professional.

Factors involved in the assessment of giftedness include age of the child, parental information, intellectual abilities, educational ability and other abilities.

Educational programmes for the gifted: + Skipping grades + Employing special teachers + Encouraging independent study + Holding vacation schools + Providing special opportunities courses etc. + Offering careful and balance criticism + Avoiding repletion

Mentally Challenged Children: Mental retardation refers to significantly sub-average general intellectual functioning, resulting in or associated with concurrent impairments in adaptive behaviour, and manifested during the developmental period.

Identification: Certain behavioral signs give an indication of the presence of mental retardation: + Difficulty in developing abstract concept, absence of clarity + Difficulty in reading small print + Inability to delayed gratification and satisfaction by immediate reward + General academic retardation characterized

by slow rate of learning ✦ Poor problem solving skills as slow reaction to environmental demands ✦ Uses one eye more than the other for reading or completing other assignments.

Assessment: Assessment of the mentally retarded includes basically intelligence and adaptive behavior along with developmental material provided by parents, teachers, social workers and other professionals. The widely used intelligence tests are Stanford Binet and the Weschler intelligence scale for children (R or III). Kaufman assessment Battery for children.

Education of Mentally Challenged Children: Education of the mentally retarded children is to be planned according to the severity of the condition.

The trainable retorted children: ✦ The teaching activities must be concrete material ✦ They must be trained in oral communication skills ✦ They may be encouraged to solve puzzles or riddles ✦ More importance is to be given the training of house hold skills ✦ It is better to delay the teaching of academic skills up to 10 or 11 years.

Mildly retarded or educable mentally retarded: ✦ Repetition of the lesson or the deed helps in strengthening the impressions ✦ Informal preparation and activity based learning have to precede the formal instruction.

Autism: The term Autism derives from the Greek word autos meaning self. Autistic children indeed appear to be living in the world of their own. The most striking feature noticeable in a child suffering from autism is his complete detachment from his surrounding people and incidents.

Identification, assessment and education of children with autism: The symptoms of autism are observable from early childhood. There are screening tests designed to detect developmental delays in the general pediatric population autism - specific screening tools designed for either the general population or high-risk populations screening includes.

✦ Competency - based tools, such as interviews and observations ✦ Norm - referenced parent and teachers measures. The Diag Nostic evaluation for individuals at risk for ASD includes.

*Medical and mental health history of the family *a comprehensive speech and language assessment

Comprehensive assessment for autism may include

1. Naturalistic observation: The observation of the individual in every day social settings with others.

2. Parent/teacher/self-report measures: Which involve rating scales, checklists etc.

Education:

1. Discrete trial teaching (DTT): DTT targets skills and behaviors based on an established curriculum.

2. Assistive technologies used for students with autism.

3. Pivotal response treatment (PRT): PRT is a child-directed intervention that focuses on critical or pivotal behaviors that affect a wide range of behaviors.

Learning difficulties (L.D): The National Joint Committee on learning Difficulties (NJCLD) defines the term learning difficulties as: A heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, reading, writing or mathematical abilities.

Identification: The three indicators of LD have to be identified:

a. Low achievement b. Discrepancy between ability and achievement c. Scattered assessment profile indicating variable performance indifferent areas. There are certain behavioural indices of learning disabilities in children.

*Easily distractible *Inability to focus on one activity *Problems of left and right, up and down orientation *Clumsiness in thinking *Language and organisation difficulties *Impulsive behaviour in talk and action.

Assessment:

Types of Assessment:

1. General assessment: a. criterion tests b. work sheets c. check lists d. direct observation e. general information.

2. Functional assessment: a. recalling ability b. calendar quiz c. evaluating the child's level of learning d. perceptual motor

ability.

3. Specific assessment: a. test on prefixes b. test on auditory discrimination c. informal inventory for mathematics.

Importance of assessment: + Helps in IEP planning + provides an idea on the kind of support the child needs + helps in obtaining feedback through evaluation.

Education : Educational programmes mainly involve + peer support + parental involvement + development of self esteem and self worth + Incentives for proven achievement + Individual attention given to the children raises their esteem and involvement in the activities.

3. How do you identify, assess and educate the children with emotional and behavioral deviations with special reference to ADHD and Juvenile delinquency?

Ans : Attention deficit hyperactivity disorder (ADHD) is characterized by attention skills that are developmentally inappropriate, impulsivity and in some cases hyperactivity. ADHD is a Neuro-biological disability that affects upto 3% of school children, without identification and proper treatment. ADD can have serious consequences including school failure, school dropout, depression, conduct disorder, failed relationships and even substance abuse.

Identification of ADHD: Although toddlers and preschoolers on occasion, may show characteristics of ADHD. Some these behaviors may be normal for their age or developmental stage. These behaviors must be exhibited to an abnormal degree to warrant identification as ADHD. Even with older children, other factors can produce behaviors resembling ADHD.

Swarup and Chopra identified the following typical behaviours of children with ADHD.

+ Distractibility + Fails to finish tasks + Fidgets constantly + Leaves class room when being seated is expected + Difficulty in coming to task + Careless mistakes in school work + Appears to be constantly in motion. + Temper tantrums.

Assessment : When evaluating patients for ADHD, it is typical to use multiple stages of assessment prior to formal diagnosis.

Education: + Classroom accommodations + Self-management strategies + Social skills training + cognitive behavior modification

Identification, assessment of children with juvenile delinquency :

+ use of vulgar language + shop lifting + drug abuse + too much interest in violent acts spending time idly beyond limits.

Education : + The individuals must be trained in self management skills to control their impulsive behaviour + Governments are under an obligation to make public Education accessible to all young persons + Education system should extend particular care and attention to young persons who are at social risk.

4. Explain the identification assessment and education of children with socio- cultural deviations and linguistic minorities

Ans. Children with socio-cultural deviations have more complex needs which should be fulfilled for their proper level of development and education.

According to Galanter (1984) children belonging to the socially and culturally disadvantaged groups have been subjects to imposition of disabilities and lack of opportunities.

Identification of socio - cultural deviations : The following check list of behavioural characteristics is useful for teachers to identify socially disadvantaged children

Identification checklist for teachers : + Appears lifeless and incurious + Appears deceptively unintelligent + Fails to profit from classroom instruction + Shows a lack of interest ; Involvement and / or motivation for academic success + Has lack of confidence and competence in expressing him self assessment.

1. Deprivation index - whiteman and Deutsch This scale even though developed in USA yet is of relevance after appropriate adaptation

2. **Cultural Deprivation index** - Rath and samant

3. **Prolonged Deprivation scale** - Misra and Tripathi.

It relates to 15 years of socio-cultural experiences.

Education : Educational provisions for these children can be conceived by way of (a) Preschool education (b) school readiness programme (c) ICDS (d) Interventions (e) ECCE programmes (f) remedial instruction (g) curricular adaptations (h) motivation

Linguistic minorities : Vygotsky (1978) considered language as the most specific and important one in the overall development and educating of children.

Identification : + By cumulative academic achievement deficient + By the progressive decline in Intellectual functioning + Language problems faced by the child in school and community

Assessment : By creating suitable activities that relate to their culture, traditions and language

Education : + Appointment of Expert teachers + Teachers that are familiar with their mother - tongue + Teachers who know their culture and traditions + Teachers that are capable of adopting latest classroom teaching techniques

5. **What are the challenges and prospects in identification and assessment of children in inclusive education.**

Ans. It is important to identify students learning needs early. In other cases student with special needs will be identified once it becomes apparent. Informal assessments include observations, file reviews etc and formal assessments include measures, adaptive measures etc are important in identifying needs of education program.

Assessment and identification should lead to better learning opportunities for your child. It is better to make parents part of the assessment and evaluation process.

The challenge of modifying deeply held attitudes : Attitudes of the non - disabled are proving to be a major barrier in the social integration of persons with disabilities. " The more severe and visible the deformity is, the greater is the fear of

contagion, hence the attitudes of aversion and segregation towards the crippled" (Desai, 1990). Such attitudes reinforced by religious institutions may militate against any attempts to include students with disabilities into regular schools. Kannan, (2000) states that in order to harness the great potential of more than 30 million people with disabilities, it is essential that "prejudice, mental and irrational myths concerning disability is eradicated."

Dissemination and Public Education : People, including parents and school personnel, are largely unaware of the full intent of the recent legislation passed by Indian Parliament. A large number of school personnel are also not aware of funding available to include students with disabilities in regular schools, unless people especially parents of children with disabilities and school personnel are made knowledgeable about the various provisions enshrined in the Act, the Central and State government's commitment to providing integrated education will be in vain.

The challenge of providing adequate levels of training to key stakeholders : The majority of school personnel in India are not trained to design and implement educational programs for students with disabilities in regular schools. Most teacher training programs in India do not have a unit on Disability Studies (Myreddi & Narayan, 2000). The universities; which do cover some aspects of special education in their teacher training programs, fail to train teachers adequately to work in integrated settings.

Inadequate resources : The majority of schools in India are poorly designed and few are equipped to meet the unique needs of students with disabilities. The lack of disability friendly transportation services and accessible buildings are considered by some to be far greater problems than social prejudice and negative attitudes.

Prospects : Inclusive education is a developmental approach seeking to address the learning needs of all children youth and adults with a specific focus on those who are vulnerable to marginalization and exclusion.

An increasing number of publications, policy papers, workshops etc. have supported the ideology of inclusion.

Some organizations and people, however, doubt whether the ordinary classroom can provide quality education for disabled children by showing examples of positive experiences, which clearly demonstrate that inclusive education most definitely addresses quality issues in education.

All governmental entities, donors and NGOs should endorse the universal right to education for all children, youth and adults with a disability.

It is necessary to identify and disseminate effective practices and stimulate research and studies related to inclusive education. This include

- a) Quality teacher education.
- b) Curriculum and pedagogy.
- c) School organization including adequate accessible facilities
- d) Aids and appropriate materials.

If inclusion is to be successful, the following parameters need to be taken care of :

- 1) Encouragement provided by the community for including children with disabilities in local schools.
- 2) Readiness of the general education system to accept responsibility for education of children with disabilities.
- 3) Willingness of parents of children with disabilities to send their wards to local schools.
- 4) General classroom teachers to be equipped to manage the education of children with disabilities.
- 5) Enrolment rate of children with disabilities at least on par with that of nondisabled children.
- 6) Retention of children with disabilities in schools.

UNIT - 4
POLICY PERSPECTIVES FOR
CHILDREN WITH SPECIAL NEEDS

1. What are the international legislations of Salamanca declaration, UNESCAP, UNCRPD
(OR)

Write a note on

- (a) Salamanca declaration.
- (b) UNESCAP (The United Nations Economic and Social commission for Asia and Pacific)
- (c) UNCRPD (The United Nations Convention on the Rights of persons with disabilities)

Ans. More than 300 participants from 92 Governments and 25 International organizations met in Salamanca Spain to discuss how to serve all children particularly those with special educational needs. The meeting was organized by the Government of Spain with the cooperation of UNESCO. The conference had discussed and formulated certain principles, policies and practices with special reference to special needs education.

The Salamanca Statement (1994)

✦ Regular schools with this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities. ✦ Building an 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.
✦ All governments must give the highest policy and budgetary priority to improve their education systems to enable them to include all children regardless of individual differences or difficulties. The governments must adopt as a matter of law or policy the principle of inclusive education, enrolling all children in regular schools, unless there are compelling reasons for doing otherwise. The governments must develop demonstration projects

and encourage exchanges with countries having experience with inclusive schools. † The government has to establish decentralized and participatory mechanisms for planning, monitoring and evaluating educational provision for children and adults with special education needs. † They have to encourage and facilitate the participation of parents, communities and organization of persons with disabilities in the planning and decision making processes concerning provision for special educational needs. † They have to invest greater effort in early identification and intervention strategies, as well as in vocational aspects of inclusive education. † They have to ensure that, in the context of a systemic change, teacher education programmes, both pre-service and in-service, address the provision of special needs education in inclusive schools. † UNESCO, as the United Nations agency for education: To ensure that special needs education forms part of every discussion dealing with education for all in various forums, to mobilize the support of organizations of the teaching profession in matters related to enhancing teacher education as regards provision for special educational needs.

Silent feature of the Declaration

† Every child has a fundamental right to education, and must be given the opportunity to achieve and maintain an acceptable level of learning.

† Every child has unique characteristics, interest, abilities and learning needs.

† Education systems should be designed and educational programmes implemented to take into account the wide diversity of these characteristics and needs.

† Those with special educational needs must have access to regular schools which should accommodate them within child centered pedagogy capable of meeting these needs.

Framework for Action : This Framework for Action on Special Needs Education was adopted by the World Conference on Special Needs Education organized by the Government of Spain at Salamanca from 7th to 10th June 1994.

1. Its purpose is to inform policy and guide action by

- governments, international organizations, national aid agencies, nongovernmental organizations, national aid agencies, nongovernmental organizations and other bodies in implementing the Salamanca Statement on principles, policy and practice in special needs education.
2. The framework draws extensively upon the national experience of the participating countries as well as upon resolutions, recommendations and publications of the United Nations system and other inter governmental organizations.
 3. The guiding principle that informs the framework is that schools should accommodate all children regardless of their physical, intellectual, social, emotional, linguistic or other conditions.
 4. This should include disabled and gifted children, street and working children, children from remote or nomadic populations, children from linguistic, ethnic or cultural minorities and children from other disadvantaged or marginalized areas or groups.
 5. Special needs education incorporates the proven principles of sound pedagogy from which all children may benefit. It assumes that human differences are normal and that learning must accordingly be adapted to the needs of the child rather than the child fitted to preordained assumptions regarding the pace and nature of the learning process.
 6. A child centered pedagogy is beneficial to all students and as a consequence to society as a whole. Experience has demonstrated that it can substantially reduce the drop out and repetition that are so much a part of many education systems while ensuring higher average levels of achievement.

The Framework for action comprises the following sections :

- I. New thinking in special need education
- II. Guidelines for action at the national level
- A. Policy and organization

- B. School factors
 - C. Recruitment and training of educational personnel
 - D. External support services
 - E. Priority areas
 - F. Community perspectives
 - G. Resource requirements
- III. Guidelines for action at the regional and international level.

UNESCAP (United Nations Economic and Social Commission for Asia and Pacific)

The Economic and Social Commission for Asia and the Pacific (UNESCAP Or ESCAP) is located in the United Nations Building in Rajadamnern Nok Avenue in Bangkok, Thailand. It is one of the five regional commissions of the United Nations economic and Social Council. It was established in 1947 (then as the UN Economic Commission for Asia and the Far East (ECAFE) to encourage economic cooperation among its member states. The name was changed to the current in 1974. ESCAPP has 53 member states and nine Associate members. As well as countries in Asia and the Pacific, it includes France, the Netherlands, the United Kingdom and the United States.

ESCAP works to overcome some of the regions greatest challenges by providing results oriented projects technical assistance and capacity building to member States in the following areas :

1. Macro Economic Policy and Development.
2. Trade and Investment.
3. Transport.
4. Social Development.
5. Environment and Sustainable Development.
6. Information and Communications Technology and Disaster Risk Reduction.
7. Statistics.
8. Sub-regional activities for development
9. Energy

ESCAP promotes rigorous analysis and peer learning in

core areas of work. It translates the findings into policy dialogues and recommendations : and provides good development practices, knowledge sharing and technical assistance to member States in the implementation of these recommendations. ESCAP uses its convening power to bring countries together to address issues through regional cooperation, including:

1. Issues that all or a group of countries in the region face, for which it is necessary to learn from each other.
2. Issues that benefit from regional or multi-country involvement.
3. Issues that are transboundary in nature, or that would benefit from collaborative inter country approaches;
4. Issues that are of a sensitive or emerging nature and require further advocacy and negotiation.

ESCAP provides a forum for its member states that promotes regional cooperation and collective action assisting countries in building and sustaining shared economic growth and social equity In addition ESCAP gives stronger participation to the smaller and of then left out voices of the region the least developed countries the small island states and landlocked states. ESCAP's norm setting and policy work ultimately impacts people's lives in a positive way by helping countries shape and implement a more balanced and inclusive development agenda for the region.

UNCRPD (The United Nations Convention on the Rights of Persons with Disabilities)

The Convention on the Rights of Persons with Disabilities is an international human rights treaty of the United Nations. It is intended to protect the rights and dignity of persons with disabilities. Parties to the convention are required to promote, protect, and ensure the full enjoyment of human rights by persons with disabilities and ensure that they enjoy full equality under the law. The convention has served as the Major catalyst in the Global Movement from viewing them as full and equal members of society with human rights. It is also the only UN human rights instrument with an explicit sustainable development dimension. The Convention was the first human rights treaty of the third millennium.

The text was adopted by the UN General assembly on 13 December 2006, and opened for signature on 30 March 2007. It came into force on 3 May 2008. As of December 2016, it has 160 signatories and 171 parties, which includes 170 states and the European Union. The Convention is monitored by the committee on the Rights of Persons with Disabilities.

Guiding Principles of the Convention

There are eight guiding principles that underlie the Convention.

1. Respect for inherent dignity, individual autonomy including the freedom to make one's own choice, and independence of persons.
2. Non-discrimination.
3. Full and effective participation and inclusion in society.
4. Respect for differences and acceptance of persons with disabilities as part of human diversity and humanity.
5. Equality of Opportunity.
6. Accessibility
7. Equality between men and women.
8. Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identity.

Right to Education : The Convention states that persons with disabilities should be guaranteed the right to inclusive education at all levels, regardless of age, without discrimination and on the basis of equal opportunity. It further states that the member states and parties should ensure that

1. Children with disabilities are not excluded from free and compulsory primary education or from secondary education.
2. Adults with disabilities have access to general tertiary education, vocational training, adult education and lifelong education.
3. Persons with disabilities receive the necessary support, within the general education system, to facilitate their effective education.

4. Effective individualized support measures are put in place to maximize academic and social development.

It also states that States Parties should take appropriate measures, such as:

1. Endorsing 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.
 2. Supporting the learning of sign language and promoting the linguistic identity of the deaf community.
 3. Advocating that education of persons, particularly children, who are blind and/or deaf, is delivered in the most appropriate languages and means of communication for the individual; and
 4. Employing teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train education professionals and staff about disability awareness, use of augmentative and alternative modes and formats of use of augmentative and alternative modes and formats of communication, and educational techniques and materials to support persons with disabilities.
2. **What are National Legislations of NPE - 1986, POA - 1992, RCI Act - 1992, PWD Act - 1995 with latest amendments, National Trust Act - 1999, RTE Act - 2009.**

(Or)

Write a short note on

- (a) NPE - 1986 (b) POA - 1992 (c) RCI Act - 1992
(d) PWD Act - 1995 (e) National Trust Act - 1999
(f) RTE Act - 2009.

Ans. The NPE (1986) and POA relating to integrated Education: The NPE (1986) under lines that fact that despite the enormous expansion of primary education in the post - Independence period, the population of disabled children has not been adequately served as a part of UPE out lining the steps for ensuring equal educational opportunity for the

handicapped the NPE states that the objective should be to integrate the physically and mentally handicapped with the general community, to prepare them for normal growth, and to enable them to face life with courage and confidence. It envisages that;

(1) Wherever possible education of children with loco motor handicap and other mild handicaps will be common with that of others. The children with severe handicaps are proposed to be enrolled in special schools with hostels at district headquarters.

(2) As education in special schools is very costly, it will be ensured that only those children whose needs cannot be met in common schools are enrolled in these schools. As soon as the disabled children in special schools acquire the communication skills and study skills, they will be integrated into common schools. It is assumed that with the improved efficiency of the common school system the capacity of the common schools to cater to the needs of the disabled children will also improve.

(3) Since special schools are costly and preparation of special teachers and other specialists will take time, efforts should be made to increase enrolment of language handicapped and other mildly handicapped children and their retention in common schools by 25% each year during the current plan period.

(4) to achieve the above purpose.

(5) the POA envisages the following steps;

✦ Organising advocacy programme for administrators and teachers in the common school system. ✦ Training of teachers on the management of disabled children orientation of administrators. ✦ Providing supervisors services to the teachers managing this group of children. ✦ Developing alternative learning materials for children and teachers' hand book. ✦ Supplying additional materials/equipment to the school. ✦ Developing psychological services for the assessment of disability. ✦ Mobilising support from other departments such as health, industry, social welfare and voluntary organizations.

The following provisions including incentive have been proposed in the POA:

- Provision of aids and appliances in the area to be covered.

- Adequate provision for the payment of transportation allowance (Rs.50 per month)
- Removal of architectural barriers in school building where at least 13 handicapped children are enrolled.
- Attendance incentives as given to girls and S.T children.
- Provision for admission of children older than the eligibility (upto 8-9 years instead of 6 years)

The programme of Action (POA) 1992:

1. NPE and POA gave due importance to improvement of educationally backward areas.
2. The programme of action (POA) 1992 aimed to fulfill the objective of universal enrolment and retention of children and successful completion of education up to 14 years.
3. POA also suggested decentralized planning and good management of primary education.
4. The NPE and POA perceived the problem of women education in India and therefore stressed the need for equal opportunities for all.
5. The NPE and POA emphasized on the importance of technology and formulated policy regarding the utilizations of computer education in our country.
6. The policy and programme stressed on the importance on non-formal and distance education modes to achieve the goal of universal education.
7. The NPE and POA laid considerable stress on the need of value education and inculcation of proper perspective about the country's cultural traditions.
8. Both the policy and programme laid importance of higher education and research work.
9. Vocational education was given importance by the POA to increase individual competency and national productivity.
10. It emphasized that teacher training facilities should be provided to eligible candidates in the teaching profession. It also suggested that the service conditions and salaries of teachers should be improved.

RCI Act - 1992

The Rehabilitation Council of India (RCI) was set up as a registered society in 1986. On September, 1992 the RCI Act was enacted by Parliament and it became a Statutory Body on 22 June 1993. The Act was amended by Parliament in 2000 to make it more broad based. The mandate given to RCI is to regulate and monitor services given to persons with disability, to standardize syllabi and to maintain a Central Rehabilitation Register of all qualified professionals and personnel working in the field of Rehabilitation and Special Education. The council lays down policy parameters regarding various aspects of training and education in the field of Rehabilitation and all institutions have to seek recognition from RCI as per provision of RCI Act, 1992. The RCI is the competent authority to recognize the Institutions desirous of conducting such courses, wherein Degree/ Diploma/Certificate are awarded.

PWD Act 1995

Chapter V of PWD act 1995 discusses the provisions for the education the persons with disabilities according to the act. Appropriate Governments and local authorities to provide children with disabilities free education, etc. The appropriate Governments and the local authorities shall.

1. Ensure that every child with a disability has access to free education in an appropriate environment till he attains the age of eighteen years;
2. Endeavor to promote the integration of students with disabilities in the normal schools;
3. Promote setting up of special schools in Government and private sector for those in need of special education, in such a manner that children with disabilities living in any part of the country have access to such schools;
4. Endeavor to equip the special schools for children with disabilities with vocational training facilities.

Appropriate Governments and local authorities to make schemes and programmes for non-formal education, etc. - The appropriate Governments and the local authorities shall by notification make schemes for-

1. Conducting part-time classes in respect of children with disabilities who having completed education up to class fifth and could not continue their studies on a whole-time basis;
2. Conducting special part-time classes for providing functional literacy for children in the age group of sixteen and above;
3. Imparting non-formal education by utilizing the available manpower in rural areas after giving them appropriate orientation;
4. Imparting education through open schools or open universities;
5. Conducting class and discussions through interactive electronic or other media;
6. Providing every child with disability free of cost special books and equipments needed for his education.

Research for designing and developing new assistive devices, teaching aids, etc. The appropriate Governments shall initiate or cause to be initiated research by official and non-governmental agencies for the purpose of designing and developing new assistive devices, teaching aids, special teaching materials or such other items as are necessary to give a child with disability equal opportunities in education.

Appropriate Governments to set up teachers' training institutions to develop trained manpower for schools for children with disabilities. The appropriate Governments shall set up adequate number of teachers' training institutions and assist the national institutes and other voluntary organizations to develop teachers' training programmes specializing disabilities so that requisite trained manpower is available for special schools and integrated schools for children with disabilities.

Appropriate Governments to prepare a comprehensive education scheme providing for transport facilities, supply of books, etc. Without prejudice to the foregoing provisions, the appropriate governments shall by notification prepare a comprehensive education scheme which shall make provision for

1. Transport facilities to the children with disabilities or in the alternative financial incentives to parents or guardians to enable their children with disabilities to attend schools;
2. The removal of architectural barriers from schools, colleges or other institutions, imparting vocational and professional training;
3. The supply of books, uniforms and other materials to children with disabilities attending school;
4. The grant of scholarship to students with disabilities;
5. Setting up of appropriate fora for the redressal of grievances of parents regarding the placement of their children with disabilities;
6. Suitable modification in the examination system to eliminate purely mathematical questions for the benefit of blind students and students with low vision;
7. Restructuring of curriculum for the benefit of children with disabilities;
8. Restructuring the curriculum for benefit of students with hearing impairment to facilitate them to take only one language as part of their curriculum.

All educational institutions shall provide or cause to be provided amenities to blind students and students with or low vision. Some of the amendments made added the following provisions to the act.

The appropriate government and the local authorities shall endeavour that all education institutions funded by them provide inclusive education to the children with disabilities and towards that end shall.

1. Admit them without discrimination and provide education and opportunities for sports and recreation activities equally with others.
2. Make building, campus and various facilities accessible;
3. Provide reasonable accommodation according to the individual's requirements.
4. Provide necessary support individualized or otherwise in

- environments that maximize academic and social development consistent with the goal of full inclusion.
5. Ensure that the education to persons who are blind or deaf or both is imparted in the most appropriate languages and modes and means of communication.
 6. Detect specific learning disabilities in children at the earliest and take suitable pedagogical and other measures to overcome them.
 7. Monitor participation, progress in terms of attainment levels and completion of education in respect of every student with disability.

Provide transportation facilities to the children with disabilities and also the attendant of the children with disabilities having high support needs.

National Trust Act - 1999

The National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999 is an Act to provide for the constitution of a body at the national level for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities and for matters connected therewith or incidental thereto.

The Board shall consist of

1. A Chairperson, to be appointed by the Central Government from amongst the persons having expertise and experience in the field of autism, cerebral palsy, mental retardation and multiple disability;
2. Nine Persons to be appointed in accordance with such procedure as may be prescribed from amongst the registered organizations out of which three members each shall be from voluntary organizations, association of parents of persons with autism, cerebral palsy, mental retardation and multiple disability and from association of persons with disability members;
3. Eight persons not below the rank of Joint Secretary to the Government of India nominated by the Government to represent the Ministries or Departments of Social Justice

and Empowerment of Women and Child Development, Health and Family Welfare Finance Labour Education Urban Affairs and Employment and Rural Employment and Poverty Alleviation, Members.

4. Three Persons to be nominated by the Board representing the associations of trade, commerce and industry engaged in philanthropic activities, members;
5. The Chief Executive Officer, who shall be of the rank of Joint Secretary to the Government of India or Member Secretary.

The Board may associate with itself, in such manner and for such purpose as may be determined by regulations, any person whose assistance or advice it may desire for carrying out the objectives of the trust, provided that such person shall have a right to take part in the discussions relevant to that purposes but shall not have a right to vote at a meeting of the board and shall not be a member for any other purposes: Provided further that the maximum number of persons so associated shall not exceed eight and so far as possible persons so associated shall belong to the registered organizations or from the professionals.

The objectives of the trust are as follows.

1. 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.
2. To strengthen facilities to provide support to persons with disability to live within their own families.
3. To extend support to registered organizations to provide need based services during period of crisis in the family of persons with disability.
4. To deal with problems of persons with disability who do not have family support.
5. To promote measures for the care and protection of persons with disability in the event of death of their parents or guardians;
6. To evolve procedures for the appointment of guardians and trustees for persons with disability requiring such protection.

7. To facilitate the realization of equal opportunities, protection of rights and full participation of persons with disability.
8. To do any other act this is incidental to the aforesaid objects.

RTE Act 2009

The Right of Children to Free and Compulsory Education Act or Right to Education Act also known as RTE is an Act of the Parliament of India enacted on 4th August 2009, which describes the modalities of the importance of free and compulsory education for children between 6 and 14 in India under Article 21A of the Indian Constitution. India became one of 135 countries to make education a fundamental right of every child when the act came into force on 1st April 2010.

The act has its long journey right from the days of drafting the constitution but in the year the 86th amendment of the constitution that added article 21A to the constitution making education of a fundamental right. A rough draft was prepared in the year 2005 making it mandatory to provide 25% reservation for disadvantaged children in private schools. However on 7th May 2014, The supreme court of India ruled that right to Education Act is not applicable to Minority institutions.

The RTE Act provides for the:

1. Right of children to free and compulsory education till completion of elementary education in a neighborhood school.
2. It clarifies that 'compulsory education' means obligation of the government to provide free elementary education and ensure compulsory admission, attendance and completion of elementary education to every child in the six to fourteen age groups.
3. 'Free' means that no child shall be liable to pay any kind of fee or charges or expenses which may prevent him or her from pursuing and completing elementary education.
4. It makes provisions for a non-admitted child to be admitted to an age appropriate class.
5. It specifies the duties and responsibilities of the governments, local authority and parents in providing free

- and compulsory education, and sharing of financial and other responsibilities between the Central and State Governments.
6. It lays down the norms and standards relating to Pupil Teacher Ratios (PTRs), building and infrastructure, school-working days, teacher, working hours.
 7. It provides for rational deployment of teachers by ensuring that the specified pupil teacher ratio is maintained for each school, rather than just as an average for the State or District or Block. It thus ensures that there is no urban, rural imbalance in teacher postings.
 8. It also provides for prohibition of deployment of teachers for non-educational work, other than decennial census, sections to local authority, state legislature and parliament, and disaster relief.
 9. It provides for appointment of appropriately trained teachers, i.e. teachers with the requisite entry and academic qualifications.
 10. It prohibits (a) physical punishment and mental harassment; (b) screening procedures for admission of children; (c) capitation fee; (d) private tuition by teachers and (e) running of schools without recognition.
- 3. What are the Government schemes and provisions of SSA and RMSA with special reference to the provisions and activities aimed at meeting the needs of children with special learning needs?**

(Or)

What are the aims and objectives of SSA and briefly explain the role of Rashtriya Madhyamik Shiksha Abhiyan (RMSA) in inclusive education.

Ans. SSA has been operational since 2000-2001 to provide for a variety of interventions for universal access and retention, bridging of gender and social gaps in elementary education and improving the quality of learning. SSA interventions include opening of new schools and alternate schooling facilities, construction of schools and additional classrooms, toilets and

drinking water, provisioning for teachers, regular teacher in service training and academic resource support, free textbooks and uniforms and support for improving learning outcomes. With the passage of the RTE Act 2009, changes have been incorporated into the SSA approach, strategies and norms.

Aims

1. To provide useful and elementary education for all children in the 6-14 age group.
2. To bridge social, regional and gender gaps with the active participation of community in the management of schools.
3. To allow children to learn about and master their natural environment in order to develop their potential both spiritually and materially.
4. To inculcate value-based learning this allows children an opportunity to work for each other's well being rather than to permit mere selfish pursuits.
5. To realize the importance of Early Childhood Care and education and looks at the 0-14 age as a continuum.

Objectives

1. All children in school, Education Guarantee Centre alternate School, 'Back-to-School' camp by 2003.
2. All children complete five years of primary schooling by 2007.
3. All children complete of elementary schooling by 2010.
4. Focus o elementary education of satisfactory quality with emphasis on education for life.
5. Bridge all gender and social category gaps at primary stage by 2007 and at elementary education level by 2010.
6. Universal retention by 2010.

The changes encompass the vision and approach to elementary education, guided by the following principles :

1. Holistic view of education, as interpreted in the National Curriculum Framework 2005, with implications for a systemic revamp of the entire content and process of

- education with significant implications for curriculum, teacher education educational planning and management.
2. Equity, to mean not only equal opportunity, but also creation of conditions in which the disadvantaged sections of the society - children of SC, ST, Muslim minority, landless agricultural workers and children with special needs etc., can avail of the opportunity.
 3. Access, not to be confined to ensuring that a school becomes accessible to all children within specified distance but implies an understanding of the educational needs of the traditionally excluded categories - the SC, ST and others sections of the most disadvantaged groups, the Muslim minority, girls in general, and children with special needs.
 4. Moral compulsion is imposed through the RTE Act on parents, teachers, educational administrators and other stakeholders, rather than shifting emphasis on punitive processes.

CSWN and SSA children with special needs :

1. The SSA provides the platform to discuss family, social education rehabilitation issues and various psychological barriers related to disabilities.
2. Parent councils are to be formed and regular meetings held on creating awareness on various disabilities.
3. The members of parent council are trained on dealing with specific issues pertaining to children with various disabilities.

Generating Awareness

1. To mobilize the parents and teachers, posters (awareness material) for loco-motor disability, Visual Impairment (VI), Mental Retardation (MR) & Hearing Impairment (HI) are prepared and distributed in the schools.
2. The SSA develops posters carrying messages on developing a positive attitude towards disabled children by parents, family members' etc.
3. This awareness material is used during parent council, MTA, PTA, Meetings.

Training Strategy for IEDC

1. In cascade mode, training is imparted to project staff at district, block, and cluster and village levels.
2. Class teachers dealing with disabled child is given specific training of the concerned disability at BRC level by qualified and experienced resource teachers.
3. Class teachers of disabled children are oriented on classroom management, attitudinal aspects of teachers, classmates and schoolmates, curricular and co-curricular activities, supplementary literature, use of specific aids and appliances to address the problems of concerned disability of children.
4. All other teachers of a school with a disabled child are trained on classroom management; attitudinal aspects of teachers, classmate and school mates and co-curricular and curricular activities.

Training Modules

1. Master Trainers' Training module was developed and distributed to BRC and CRC levels. Teacher's training modules are developed and distributed in all the schools.
2. The module guides the teachers in classroom transaction and in changing their attitude towards the disabled children.
3. In addition, the content of the module enables the teachers to design co-curricular activities, content based teaching methods to suit the needs of children with various disabilities, use of literature in TLM (both standard and subject wise) and use of special aids.

Rashtriya Madhyamik Shiksha Abhiyan (RMSA)

This scheme was launched in March, 2009 with the objective to enhance access to secondary education and to improve its quality. The implementation of the scheme started from 2009-10. It is envisaged to achieve an enrolment rate of 75% from 52.26% in 2005-06 at secondary stage of implementation of the scheme by providing a secondary school within a reasonable distance of any habitation. The other objectives include improving quality of education imparted at

secondary level through making all secondary schools conform to prescribed norms, removing gender, socio-economic and disability barriers, providing universal access to secondary level education by 2017, i.e., by the end of 12th Five Year Plan and achieving universal retention by 2020.

Important physical facilities provided under the scheme are:

(i) Additional class rooms, (ii) Laboratories, (iii) Libraries, (iv) Art and crafts room, (v) Toilet blocks, (vi) Drinking water provisions and (vii) Residential Hostels for Teachers in remote areas.

Important quality interventions provided under the scheme are: (i) appointment of additional teachers to reduce PTR to 30:1, (ii) focus on Science, Math and English education, (iii) In-service training of teachers, (iv) Science laboratories, (v) ICT enabled education, (vi) curriculum reforms; and (vii) teaching learning reforms.

Important equity intervention provided in the scheme are: (i) special focus in micro planning (ii) preference to Ashram schools for upgradation (iii) preference to areas with concentration of SC/ST/Minority for opening schools (iv) special enrolment drive for the weaker section (v) more female teachers in schools; and (vi) separate toilet blocks for girls.

Children with special (CWSN)

State / UTs have been advised to initiate a special survey to identify the existing children of this category and the facilities received from the above scheme.

State / UTs are also suggested to list out the facilities not received under the IEDS, and actually needed under RMSA to enhance the performance and learning level.

State / UTs are directed to give the details of the facility needed and any other, innovative activity separately required for this particular group as the group may be separately focused rather than including with the general students. State / UTs are advised to include a separate plan under the district plan.

Approaches, options and strategies for education of children with special needs :

The thrust of RMSA will be on providing integrated and inclusive education to all children with special needs in general schools. This includes education through open learning system and open schools, non formal and alternative schooling, itinerant teacher model, remedial teaching, part-time classes, community based rehabilitations (CBR) and vocational education and cooperative programmes.

Activities**1. Early detection and identification**

- a. A concerted drive to detect children with special needs should be undertaken through PHCs, ICDS and other school readiness programmes.
- b. Identification of children with special needs should become an integral part of the micro-planning and household surveys.
- c. Functional and formal assessment of each identified child should be carried out. A team should be constituted at every district to carry out this assessment and recommended most appropriate placement for every child with special needs.

2. Educational placement: as far as possible, every child with special needs should be placed in regular schools, with needed support services.

3. Aids and appliances: All children requiring assistive devices should be provided with aids and appliances, obtained as far as possible through convergence with the ministry of social justice and empowerment, state welfare departments, national institution or NGOs.

4. Support services: Support services like physical access, resource rooms at school/district level, special equipment, reading material, special educational techniques, remedial teaching, curricular adaptation or adapted teaching strategies could be provided.

5. Teacher training: Intensive teacher training should be undertaken to sensitize regular teachers on effective class-

room management of children with special needs. This training should be recurrent at district and mandal levels and integrated with the on-going in-service teacher training schedules in RMSA. All training modules at SCERT, DIET and district level should include a suitable component on education of children with special needs.

6. **Resource Support:** Resource support could be given by teachers working in special schools. Where necessary specially trained resources teachers should be appointed, particularly for teaching special skills to children with special needs.
7. **Individualized Educational Plan (IEP):** An IEP should be prepared by the teacher for every child with special needs in consultation with parents and experts. Its implementation should be monitored from time to time. The programme should test the effectiveness of various strategies and models by measuring the learning achievement of children with special needs periodically, after developing indicators.
8. **Parental Training and Community Mobilization:** Parents of children with disabilities should receive counseling and training on how to bring them up and teach them basic survival skills. Strong advocacy and awareness programme should form a part of strategy to educate every child with special needs. A component on disability should be included in all the modules for parents, SMDCs and community.
9. **Planning and Management:** Resource groups should be constituted at state, district levels to undertake effective planning and management of the programmes in collaboration with PRIs and NGOs. An apex level resources group at the national level to provide guidance, technical and academic.

UNIT - 5

EDUCATING CHILDREN IN INCLUSIVE CLASSROOMS

1. **What is the need and how do you create physical, psychological, sociological barriers free environment within and outside the class room for children in inclusive class room.**

Ans. Education should be productive and useful for the children to lead a happy life when they grew up. The school should support special education need children in bringing out their different capabilities.

Barriers free access: There may be some physical and teaching learning processes, barriers for children with special needs these barriers should be removed to make them as potential citizens of the country. There are so many acts passed to remove these barriers.

Access to physical environment:

1. The toilet inside the school should be accessible to children with special needs. This toilet should be fitted with commode and grab-rails.
2. The path from the gate to the school buildings and play ground must clear and leveld.
3. The drinking water outlet should be accessible to CWSN also.
4. Sharp turns in the walkways, must be avoided.
5. A handrail should be provided at any dangerous point in the walkway.
6. Guard rails and kerbs are a must in situations where there is a sudden change in the level of height including stairs and verandah.
7. The ends of the handrails should be bent downwards to avoid injury.
8. Steps should be of equal and even heights.

Access to psychological and Sociological Environment

1. Adaptation and accommodations needs to be made in procedures for assessment, use of teaching strategies including signs and gestures and use of teaching learning material as per the needs of varied needs of CWSN.
 2. Availability and accessibility to teaching learning material within the class rooms to be ensured. Participation of CWSN in all curricular and co-curricular activities is to be ensured.
 3. Use of peer support effectively to ensure increased participation of CWSN in schools.
 4. Use of enabling technologies to meet the needs of CWSN.
 5. Tactile and pictorial learning aids are to be made available and accessible.
 6. Level of difficulty of both language and content need to be adapted as per the comprehension level of the child.
2. **What are assistive devices and technologies required for education of children with special needs in inclusive class room.**

(Or)

What are different assistive devices and technologies required for education of children with special needs in inclusive class room?

Ans. In order to make the children with special needs to be competitive citizens some assistive devices and technologies should be used with adoptive and rehabilitative devices the children with special needs may be brought up on par with the regular schooling children.

Technology for Mobile Impairments

1. **Wheel chairs:** Wheelchairs are devices that can be manually propelled or electrically propelled and that include a seating system and are designed to be a substitute for the normal mobility that most people enjoy. Wheelchairs and other mobility devices allow people to perform mobility related activities of daily living.

2. Transfer Devices: Transfer devices generally allow individuals with impaired mobility to be moved by caregivers between beds, wheelchairs commodes, toilets, chairs, stretchers etc.

Visual Impairment

1. Screen readers: Screen readers allow the visually impaired to easily access electronic information. These software programs connect to a computer to read the text displayed out loud. There is a variety of platforms and applications available.

2. Braille: Braille is a system of raised dots formed into units called Braille cells. A full Braille cell is made up of six dots, with two parallel rows of three dots, but other combinations and quantities of dots represent other letters, numbers, punctuation marks, or words. People can then use their fingers to read the code of raised dots.

3. Desktop video magnifiers: Desktop video magnifiers are electronic devices that use a camera and a display screen to perform digital magnification of printed materials. They enlarge printed pages for those with low vision. A camera connects to a monitor that displays real time images, and the user can control settings much as magnification, focus, contrast, underlining, highlighting, and other screen preferences.

Hearing Impaired

The deaf or hard of hearing community has a difficult time to communicate and perceive information as compared to normal hearing individuals. Thus, these individuals often rely on visual and tactile mediums for receiving and communicating information. The use of assistive technology and devices provides this community with various solutions to their problems by providing higher sound for those who are hard of hearing.

1. Hearing Aids: A hearing aid or deaf aid is an electro-acoustic device which is designed to amplify sound for the wearer, usually with the aim of making speech more intelligible, and to correct impaired hearing as measured by Audiometry. This type of assistive technology helps people with hearing loss participate more fully in their communities by allowing them to hear more

clearly. They amplify any and all sound waves through use of a microphone, amplifier, and speaker. There is a wide variety of hearing aids available, including digital, in-the-ear, in-the-canal, behind-the ear, and on-the-body aids.

2. Amplified telephone equipment: This type of assistive technology allows users to amplify the volume and clarify of their phone calls so that they can easily partake in this medium of communication. There are also options to adjust the frequency and tone of a call to suit their individual hearing needs. Additionally, there is a wide variety of amplified telephones to choose from, with different degrees of amplification.

3. Augmentative and alternative communication (AAC) is an umbrella term that encompasses methods of communication for those with impairments or restrictions on the production or comprehension of spoken or written language. AAC systems are extremely diverse and depend on the capabilities of the user. They may be as basic as pictures on a board that are used to request food, drink, or other care.

Cognitive Impairment Assistive technology for cognition (ATC) is the use of technology (usually high tech) to augment and assistive cognitive processes such as attention, memory, self-regulation, navigation, emotion, recognition and management, planning, and sequencing activity.

1. Memory aids: Memory aids are any type of assistive technology that helps a user learn and remember certain information. Many memory aids are used for cognitive impairments such as reading, writing, or organizational difficulties.

2. Educational Software: Educational software is software that assists people with reading, learning, comprehension and organizational difficulties. Any accommodation software such as text readers, note takers, text enlargers, organization tools, word predictions and talking word processors falls under the category of educational software.

Assistive technology in education

Assistive technology in this area is broken down into low, mid and high tech categories. Low tech encompasses equipment that is often low cost and does not include batteries or requires charging.

Role of Assistive technology

1. Overall, assistive technology aims to allow people with disabilities to participate more fully in all aspects of life.
2. It increases opportunities for education, social interactions and potential for meaningful employment.
3. It creates greater independence and control for disabled individuals.
4. It paved way for universalization of education.
3. What is the need for parent and community involvement to promote positive behaviours and social competence in children with special learning needs.

Ans. The parents should extend their support for the teachers in making the children with special learning needs in order to achieve good results because the parents are the first teachers to the children.

Need for parents Involvement

1. They can encourage the child to participate in activities where the child can meet children of same age with different abilities.
2. They can also search the internet for activities or organizations that a child may want to join.
3. Children should be encouraged by them to develop friendship with classmates or other neighborhood children.
4. Parents can discuss their goals, expectations and preferences for a child with their teachers, therapists etc, before going to school and deciding upon the education plan for them.
5. At the school level parents can try to bring modifications in the child's curriculum and identify material useful for the children.
6. Parents can act as effective role models in setting minimum behavioural standards.

Positive Behaviours : The value system of the family and their life experiences will determine the positive behaviours of the children.

Role of parents in the Promotion of Positive Behaviours

1. Children's development of the cognitive and social skills

- needed for later success in school may be best supported by a parenting style known as responsive parenting.
2. Responsive parenting means supportive parenting. Supportive parenting plays an important role in providing a strong foundation for children to develop optimally and learn positive behaviours.
 3. Parenting that provides positive affection and high levels of warmth and is responsive in ways that are contingently linked to a young child's signals.
 4. Acceptance of the child's interests facilitates the child's development of mechanisms for coping with stress and novelty in the environment.
 5. With repeated positive experiences, a trust and bond develop between the child and parent that in turn allow the child to ultimately internalize this trust and then generalize their learning to new experiences.

What type of behaviours can Parent Model ?

1. Children learn how to show respect to others. They learn from parents how to talk to family members and other including teachers.
2. Parents have to teach children positive outlook. Begins at home. It's often simple (and not so drastic) mistakes that become the best opportunities to model good behaviour.
3. Teaching the value of health is an important aspect of good parenting. It means teaching how to sit down and share healthy meals and snacks with them, reducing TV time and plan outdoor activities etc.
4. Parents who follow a regular schedule, watch TV judiciously, exhibit appropriate manners in public and private teach those things to the children with minimum effort.
5. Parents who restrain from domestic quarrels and unruly behaviours become good role models to the children.

Community Involvement in the promotion of Positive behaviours Community support is vital to promote and sustain of positive behaviours. Community can support the development of positive behaviours like cooperation, religious tolerance, political tolerance, honesty, hard work, respect for other sex, open mindedness, protection natural resources, respect for

law and order, tolerance freeing oneself from caste and other prejudices etc.

4 What is the Need for Multi-disciplinary approach to address the educational Needs of children with Special Learning Needs.

(Or)

How can multi-disciplinary approach address the educational needs of children with Special Learning Needs.

Ans : A multi-disciplinary approach will help the children with Special Learning needs will create an understanding of complex situations and educational planning.

The members of each multidisciplinary team, may include

- ✦ Teachers ✦ Special Education Instructors ✦ Therapists
- ✦ Parent(s) ✦ Psychologist / Psychiatrist ✦ Other Health Professionals ✦ Social Workers ✦ Community volunteers
- ✦ Administrators

Each team considers a variety of information that is compiled from a variety of sources over time about each student.

It includes

- ✦ Developmental History ✦ School History ✦ Educational Progress ✦ Incident/Intervention Reports
- ✦ Parent/Guardian Interviews ✦ Treatment Follow-Up Reports ✦ Medical reports ✦ Assessment reports ✦ Test reports ✦ Anecdotes

Special conferences are conducted depending on each student's particular circumstances to review relevant issues with all those involved.

The Goals of Multidisciplinary Approach

1. Providing an environment that stimulates independent research and innovation and fosters creativity.
2. Providing for continuous student progress by identifying and utilizing individualized learning opportunities.
3. Providing educational opportunities for the practice of citizenship and encourage civic and social responsibilities
4. Providing educational opportunities for developing a knowledge and appreciation of the social, economic, cultural and political aspects of American heritage.

5. Providing educational opportunities for developing knowledge and appreciation of and the skills for, sound physical health and development.
6. Provide educational opportunities for increasing understanding, development and appreciation of personally satisfying and socially responsible use of leisure time.
7. Providing opportunities for life skills education.
8. Encouraging lifelong education.

Advantages of multidisciplinary approach

1. It facilitates to realize diverse learning objectives.
2. It helps children to overcome specific learning difficulties.
3. These approaches can motivate the CSWN children psychologically.
4. These approaches draw maximum learner involvement.
5. They individualize instruction.

5. What are the challenges and prospects in providing education in Inclusive classrooms.

Ans : Education should be provided to all the children irrespective of their Physical, Social, Intellectual, emotional conditions, for this purpose the education system should overcome all the challenges that are faced in the case of children with special Learning Needs.

Challenges of Inclusive Education

1. This changing paradigm assumes a different set of beliefs and assumptions that demand different practices in schools.
2. Inclusive education is about listening to the voices in a school community and empowering all members to develop an approach to schooling that is committed to identify and rectify the sources of exclusion.
3. An inclusive learning society should foster collaboration, problem solving, self-directed learning and critical discourse.
4. Stereotypic differences create divisions and status systems that detract from the democratic nature of society and the dignity of the individual and so they are to be avoided.
5. The inclusive schools demand reconstructed educational thinking and practice in regular schools for the benefit of all students.
6. This involves reconstructing and realigning the whole system

and the entire component parts so that "assessment, curriculum, instruction, professional development, program evaluation and accountability.

7. Social inclusion happens if all the sections of the society accept persons with disabilities (PWD) with minimum expectations from them. However the affluent class still needs to change their attitude towards the individuals with disabilities.
8. The educational institutions try out cognitive inclusive by allowing the children with special educational needs to study in general classrooms with nondisabled children.
9. Cognitive inclusion is possible only if the subject matter is broken down into smaller learning units and teacher makes sure that all the children to the expected level of mastery learn each of the micro units of a lesson.
10. Each child is given equal opportunity to learn, understand, retain and reproduce the information at an appropriate time and in appropriate manner.

Challenges to the teacher in the Inclusive Classroom

He should have the ability

1. To problem solve has is to be able to informally assess the skills a students needs.
2. To take advantage of children's individual interests and use their internal motivation for developing needed skills.
3. To set high but alternative expectations that are suitable for the students. This means developing alternative assessments.
4. To make appropriate expectations for each student.
5. To learn how to value all kinds of skills that students bring to a class, not just the academic skills.
6. Recognize and respond to the diversity of students in their classrooms.
7. To use appropriate forms of assessment.
8. To adopt instruction to the prior knowledge and beliefs of students.

The Flagship Approach The Flagship on Education for all and the rights of persons with disabilities towards inclusion has been established to act as a catalyst to ensure that the right to education, and the goals of the Dakar Framework, are realized

for individuals with disabilities. This Flagship has been formed by an alliance of diverse organizations, including global disability organizations, international development agencies, intergovernmental agencies, and experts in the fields of special and inclusive education from developed and developing nations. The Flagship welcomes as members all those who share its goals.

Identify and disseminate effective practices and stimulate research and studies related to the Flagship Goal to include such areas as:

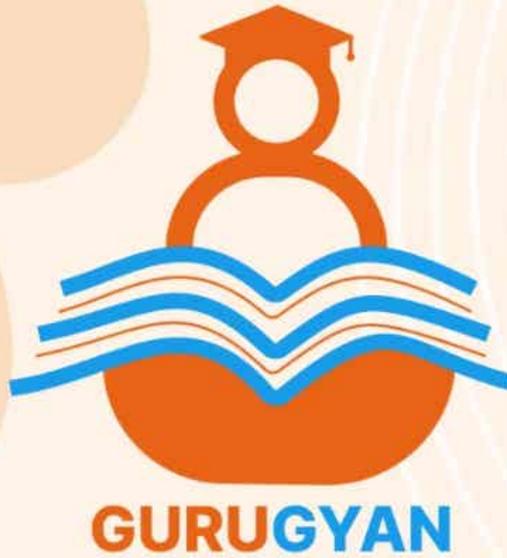
a) Quality teacher education. b) School organization including adequate and accessible facilities. c) Curriculum and pedagogy. d) Assistive devices and appropriate materials.

Promote the right of every child and youth with a disability to express his/her view pertaining to his/her education and life skills as defined by Article 23.1 of the convention on the Rights of the Child.

Prospects of Inclusive Education : Inclusive education is a developmental approach seeking to address the learning needs of all children, youth and adults with a specific focus on those who are vulnerable to marginalization and exclusion. An increasing number of publications policy papers, workshops etc. have supported the ideology of inclusion.

Many countries have developed programs, which promote equality of opportunity by allocating specific funds to areas of social and economic need. If inclusion is to be successful, the following parameters need to be taken care of

1. The community must provide encouragement for including children with disabilities in local schools.
2. The general education system is to be ready to accept responsibility for education of children with disabilities.
3. Parents must be ready to send the children with disabilities to local schools.
4. General classroom teachers must be equipped to manage the education of children with disabilities.
5. Governmental and non-governmental organizations must ensure enrolment and retention of children with learning problems in schools.



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