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**Inclusive Education**  
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## UNIT ONE: The concept of Inclusive Education

### The Relationship between Diversity, Equality and Inclusion

#### 1. Diversity

- ❖ It is the existence of difference in terms of various aspects between individual and community /Group/ society/

OR

- ❖ It is the existence of **Mix**.
  - Some of the basic aspects of diversities are

This can be personal OR Group

- |                        |              |
|------------------------|--------------|
| ➤ Skill                | @ Language   |
| ➤ Age                  | @ Disability |
| ➤ Perspective          | @ Religion   |
| ➤ Physical abilities   | @ Gender     |
| ➤ Academic achievement | @ Culture    |

#### 2. Equality

- ❖ It is equal access to opportunities
- ❖ It is the fact of being equal in various aspects like **Education OR Health**

#### 3. Inclusion

- ❖ It is a fact of make the environment appropriate for the success of all individual or community.
- ❖ It enables the mix work together.
- ❖ It emphasizes to develop a feeling of respect and value for who you are.
- ❖ It refers to value for diversity at individual or community level.
- ❖ It enables to create inclusive society.

#### Note

- As a teacher you are expected to promote social change in order to create inclusive society through understanding the existence of individual and community variation.

#### The principle of Inclusive Education

- ❖ There are **Two** basic principles that encourage the idea of inclusive education.
  1. Every child has the right to education according to the limits of their capacity.
  2. Every child has the right to live free from discrimination.

Therefore Inclusive education is one of basic human right.

## Definition of Inclusive Education

- ❖ It refers to being in an ordinary school with other students following the same curriculum at the same time in the same class room with full acceptance of all. In a way which makes the students feel no difference from other

This definition focuses on two key aspects,

1. Physically being in the same place and doing the same as other students and
2. Social acceptance and belonging.

OR

- ❖ It is an educational approach and philosophy that provides all students greater opportunities for academic and social achievement.
- ❖ It is a practice of assuring that all students with disabilities participate actively with other students in all aspects of the school.

📖 So generally inclusive education is an educational philosophy that

- ❖ Acknowledge that all children can learn
- ❖ Acknowledge and respect difference in children.
- ❖ It promote zero rejection
- ❖ It promotes the rights of all students to attend school with their peers.
- ❖ Enable education structure to meet the need of all children
- ❖ It enable to create inclusive society OR community

## Benefits of Inclusive Education

All students are benefits from inclusive education because it allow

- ❖ To develop individual strength with high and appropriate expectation.
- ❖ To develop friendship with a wide variety of individual students.
- ❖ To overcome discrimination
- ❖ To provide opportunities to learn with other
- ❖ To accept individual difference.
- ❖ To create inclusive society.

## Purpose of Inclusive Education

- ❖ To ensure that all students gain and access to knowledge, skill and information that will prepare them to contribute to communities and work places.

## What Makes school Inclusive?

Some of the basic components required to create inclusive school environment are.

- An understanding and commitment to, inclusion

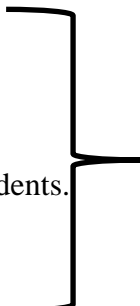
- A Welcoming and safe school environment
- A strong administration team
- A focus on teaching all children
- Effective instructional and assessment strategies to meet student needs.
- Appropriate accommodations and support systems in place.
- A commitment to continuous improvement and growth.

### Important Factors determinate inclusive education

The important factors OR actors that determine the success of inclusive education are

- ❖ Teachers and school administration understanding and commitment.
- ❖ Family and school partnership.
- ❖ Collaboration between general and special educators.
- ❖ Well constructed plan that identified students need .
- ❖ Ongoing training and staff development.

### The Role of Teachers in Inclusive School

- ❖ Identify children with disabilities OR other difference in the classroom
  - ❖ Accepting the children with disabilities other difference in the classroom.
  - ❖ Develop positive attitude between children.
  - ❖ Making suitable adaptation in the curriculum.
  - ❖ Involving children with disabilities in all aspects of the classroom.
  - ❖ Encourage OR create cooperative school environment among all students.
  - ❖ Providing guidance and counseling
  - ❖ Nurturing the talent among children.
- 

### Inclusion and Human Right

As human right issues inclusive education acknowledge that

- ❖ All children have the right to learn together
  - ❖ There is no legitimate reason to separate children from their education.
  - ❖ Children should not discriminated against because of their disability
- **So inclusive education is an activity of keeping equal right and creating equal opportunities to all children to learn together.**

## Legal and Policy Issues

- ❖ Children and youth with disability have moral, civil, parental, ethical and legal right to learn with non disabled children.
- ❖ There are different international and national policies or declaration that ensure the right of person with disabilities.

### International Policy Documents

- ❖ All documents suggest several issues on the right of people with disabilities.
- ❖ The main aims of all policy documents are **maintaining equal right among people OR protect the right of person with disabilities.**
- ❖ Since Ethiopia has signed most of international policy documents so these documents are a part of Ethiopian constitution.

#### **Some of basic international policy documents are**

1. The universal declaration of human right 1948
    - It States that everyone has the right of equal access to public services in general and education in particular.
  2. The declaration on the right of disabilities 1975
    - The declaration states that all persons with disabilities have an inherent right to respect for their human dignity.
    - It calls for international and national actions to ensure the rights of the disabled to all services, enable them to develop their capabilities and skills to the maximum possible
  3. The convention on the rights of the child 1989
    - The convention states that all children have the same right irrespective of their impairment or environment.
  4. The world declaration on education for all 1990

The declaration states that “Everyone has right to education.”

It also emphasize on equal access to education for all and importance of basic education.
  5. The standard rule on equalization of opportunities for person with disabilities 1993
    - It recognizes the principle of equal primary, secondary and tertiary educational opportunities for children, young people and adults with special needs in an integrated setting.
    - The education of persons with special needs as an integral part of the education system.
  6. The Salamanca framework for action 1994
- ❖ This reinforces all the principles expressed in the World Declaration on Education for All, and in Standard Rules on the Equalization of Opportunities for Persons with Disabilities in to action.

- ❖ It emphasizes the right of all children to participate in a quality education that is meaningful to all, at inclusive school with a pedagogically learner-centered approach, to provide the enrichment and benefits that could be derived through implementation of inclusive education.

#### 7. The world education forum 2000

- ❖ It is the extension of the education for all movement
- ❖ The forum aimed at turning the vision of education for all into a reality and meet basic learning needs for all, including those children and young people with special needs.

#### 8. Dakar framework for action 2000

- ❖ There was a meeting in Dakar, Senegal
- ❖ The main goal of the meeting was re-affirming previous declarations and conventions
- ❖ It focuses on the achievement of Education for All (EFA) through access to education for every citizen.

### National policy Documents

There are **Three** basic national policy documents that ensure the right of person with disabilities.

#### 1. The Ethiopian Constitution

- ❖ The constitution of Ethiopia under article 41 sub article No.3 clearly specifies the rights of citizens to equal access to in public services such as education hospital.

#### 2. The Ethiopian Education and Training Policy

- ❖ The policies (1994) under its specific objectives sub-item **2.2.3** States that persons with disabilities and the gifted should learn in accordance to their potential and needs.
- ❖ The policy allowed to receive special support in education to those children with disabilities.

#### 3. Inclusive Education Strategy and Implementation Guide line

- ❖ The strategy focuses on the promotion of inclusive education to meet the Millennium Development and Education for All goals.
- ❖ The central objective of the strategy is to promote access of education and quality to all children at all levels of education and training.

## UNIT / TWO /

### The Concepts and Development of Special Needs Education

#### Definitions Special Needs Education

- ❖ It is a specially designed instruction to meet the unique needs of children with disability, including education of gifted, creative or talented students who need additional educational service to exploit their rich potentials.

#### Who needs special needs education?

##### Students with special needs

- ❖ Are individuals who require special education and related special services in order to achieve their fullest potential.
  - ✓ Students with special needs can be categorized into different groups; **Some of these groups of students are**
    - ❖ students with visual impairments
    - ❖ students with hearing impairments
    - ❖ students with behavioral disorders
    - ❖ students with mental retardation
    - ❖ students with physical and health impairments
    - ❖ students with speech or language impairment
    - ❖ Gifted and talented students

#### Basic Terms on Idea of Special Need Education

#### Impairment, disability and handicap

- **Impairment**

- ✓ It refers to any loss or abnormality of physiological, psychological or anatomical structure or function. **OR**
- ✓ It is the absence **OR** abnormality of particular body part or organ.
- ✓ It is a physical construct **OR** constraint

- **Disability**

- ✓ It is any restriction or lack of ability to perform an activity in a manner or within the range considered normal for human being. **OR**
- ✓ It is limitation of a person's ability to perform certain tasks such as seeing, hearing, walking in the same manner like non-disabled people do.
- ✓ It usually results from impairment.

- ✓ It is a functional construct OR **constraint**

## • **Handicap**

- ✓ It is a disadvantage for a given individual, resulting from an impairment or disability that limits/ prevents the fulfillment of a role that is considered as normal depending on age, sex, and social and cultural factors.
- ✓ It is a limitation of opportunities to take part in life of the community.
- ✓ Handicap may or may not be the result of impairment or disability. It is basically the result of social.
- ✓ It is a social construct OR **constraint**.

## Views about Disability

### 1• **Traditional view of disability**

- Traditional view disability is a construction of OR derived from OR originated from religious and cultural understanding of society.
- In this view disability is considered as a punishment as a consequence of wrong doing of their family member OR community.
- This view leads people to develop negative attitude and belief towards individual with disability and their families.

### 2• **Medical View of Disability**

- Medical view of disability is originated from OR derived from **medical understanding of impairment**.
- To this view disability is the result of impairment in human body.
- To this view there are various causes of impairment
  - ❖ Genetic damage                      Accident
  - ❖ Childhood illnesses                      Infection

### 3. **Social View of Disability                      Social attitude**

- ❖ Social view of disability derived from environmental perspective.
- ❖ To social model of disability, disability is the consequence of environmental, social and attitudinal barriers.
- ❖ To this view disability is basically limitation of opportunities to take part in their own life.
- ❖ To this model the removal of attitudinal, physical and institutional barriers will improve the lives of people with disabilities.



## **The main terms and their meanings**

### **The concept of Segregation, integration, mainstreaming and inclusion**

#### **• Segregation**

- ✓ It is educational placement of children with disabilities in a separate environment and provides them special education
- ✓ The service is provided by specially designed curriculum and specially trained teacher.
- ✓ Today this method of teaching discourage for its social and academic discrimination.
- ✓ This method of teaching leads the individual to develop psychological isolation. Because it is social and academic discrimination.

#### **• Integration**

- ✓ It is the process of bringing children with disabilities in to regular classroom without providing appropriate support.
- ✓ The focus is integrating individual child, not the system.
- ✓ It is basically emphasize on physical integration.

#### **• Mainstreaming**

- ✓ It is education of children with special needs education in special classroom with in regular school to provide more intensive instructional service.
- ✓ It is a combined model of regular education classes with special education classes.
- ✓ Students spend at least part of the day in the regular classroom.

#### **• Inclusion**

- ✓ It is a practice of assuring that all students with disabilities participate with other students in all aspects of school.
- ✓ It requires identifying barriers that hinder learning and reducing or removing these barriers.
- ✓ It focuses on accommodation on the system to ensure achievement of all students and to meet the needs of all learners.

### **The concept of Intervention and rehabilitation**

#### **• Intervention**

- ✓ It is a broad term that includes preventive measures taken before the occurrence of the problem or to change the situation after the occurrence of the problem.
- ✓ It is an attempt /effort/ to prevent, improve, or eliminate impairments, disabilities or handicaps.
- ✓ It is a strategies used to reduce or eliminate a condition that cause impairment.
- ✓ Early intervention plays a significant role in diverting the situation of the child and promoting his/her educational and psychosocial development.

- **Rehabilitation**

- ✓ It is a goal oriented activity aimed at enabling persons with disabilities to reach maximum mental, physical, social, and level of functioning.
- ✓ It includes educational, psychological, medical and vocational services.
- ✓ It is a service given after the onset OR occurrence of the problem.

#### Levels of placement services in special needs Education

According to *Heward and orlansky (1988)* there are **seven /7/** level or ways of giving educational service for children with special needs education.

##### **Level – 1: Regular classrooms**

- ✓ Children received prescribed or arranged programs under the direction of the regular classroom teacher
- ✓ There is no special service provided / There is no appropriate support. /

##### **Level – 2: Regular classroom with consultation to the teacher**

- ✓ Children receive prescribed or arranged programs under the direction of the regular classroom teacher who is supported by ongoing consultation from specialists.

##### **Level – 3: Regular classroom with supplementary instruction and services**

- ✓ Children receive prescribed or arranged programs under the direction of the regular classroom teacher; in addition children receive supplementary instruction or services from school based specialist.

##### **Level 4: Regular classrooms and resource room**

- ✓ Children receive prescribed or arranged programs under the direction of the regular classroom teacher; in addition, they spend part-time in a specially staffed and equipped resource room.

##### **Level – 5: Special class /unit within the regular school**

- ✓ Children receive prescribed or arranged programs under the direction of a special class teacher with children with various disabilities.
- ✓ They may still have the opportunity to interact with their non-disabled peers at certain times, such as during break and on the bus school.

**Level – 6: Special day school**

- ✓ Children receive prescribed or arranged programs under the direction of specially trained staff in a specially designed facility within the special school.

**Level – 7: Special residential /Boarding school/**

- ✓ Children provide more protective or intensive educational setting than can be provided within the special school..
- ✓ In addition to education, pupil gets food, accommodation, medical and other services
- ✓ In Ethiopia, levels **1, 5, 6 and 7** are common and used, levels **2,3 and 4** are not applied so far

## UNIT THREE: Teaching Children and Youth with Hearing Impairment

### 2.1. Definition

#### ➤ Hearing Disability

- It is partially or totally inability to hear.

#### ➤ Hearing impairment

- It occurs when there is a problem with or damage to one or more parts of the ear.

### Classification of children with Hearing Impairment

#### I. Based on the position of the ear that leads to hearing impairment

Hearing impairment can be classified in to Three

##### 1. Conductive hearing loss

- ✓ It results from a problem or damage with the **outer** or **middle** part of the ear.
- ✓ In many cases, conductive hearing loss can be corrected /improved/ with medications

##### 2. Sensori neural hearing loss

- ✓ It results from damage to the inner part of the ear.
- ✓ This type of hearing loss is permanent.

##### 3. Mixed hearing loss

- ✓ It occur because of both conductive and sensori neural hearing loss.

#### II. From legal point of view

Hearing impairment can be classified in to Two

##### 1. Hard-of-hearing

- ✓ Individual has difficulty of hearing but it is corrected by hearing aid

##### 2. Deaf

- ✓ It describe persons whose sense of hearing is non-functional with or without a hearing aid.
- ✓ Unable to hear any sound /noise/.

#### III. Based on the degree of hearing loss

- #### ➤ They are categorized based on the minimum sound that the individual can hear

##### 1. Mild Hearing Impairment

- ✓ Minimum sound hear 20 – 40 dB **decibel**
- ✓ They has slight difficulties and psychological confusion
- ✓ They cannot hear soft noises

✓ .

## 2. Moderate Hearing Impairment

- ✓ Minimum sound hear 41 – 70dB
- ✓ They has difficulties with normal speech
- ✓ They cannot hear soft and moderate sound or noises
- ✓ They have trouble of hearing unless they use hearing aid.

## 3. Severe Hearing Impairment

- ✓ Minimum sound hear 71 – 90 dB
- ✓ They have limited vocabulary
- ✓ They are unable to hear most noises even with the use of hearing aid.
- ✓ They are mostly depending on lip reading and sign language.

## 4. Profound Hearing Impairment

- ✓ Minimum sound hear is greater than 90 /90+dB/
- ✓ Hearing aid are not effective
- ✓ They are depend on lip reading and sign language **writing and reading**

### Causes of hearing impairment

1. **Otitis media:** - which is the medical term for an ear infection that affects the middle ear.
2. **Medications.** Certain medications, such as some antibiotics
3. **Loud noise.** A sudden loud noise or exposure to high noise levels (such as loud music) over time
4. **RH factor** (chromosomal incompatibility).
5. **Age** refers to hearing loss due to aging.

### Developmental Profiles of Children with Hearing Impairment

#### 1. Communication Characteristics

- ❖ Hearing impairment cause inability to communicate with other person and also results delay of language development.
- ❖ The speech of hearing impaired person has abnormalities that includes
  - High chest pressure
  - Articulation problem
  - Excessive nasality speech

- ❖ There is also delay of vocabulary and syntax development **syntax means problem of using grammar.**

## **2. Academic Characteristics**

- ❖ Hearing impairment has no significant impact on student's academic performance or success. Hearing impairment affect academic performance when there is
  - Absence of sign language
  - Lack of hearing aid
  - Lack of sufficient or appropriate support

## **3. Psychosocial Characteristics**

- ✓ Hearing impairment affects individual interaction with other person.
- ✓ Person with hearing impairment tends to isolate them from society and social activities and they also prefer to be with other who are hearing impaired.

# **Identification, Assessment and Intervention of Children with Hearing Impairment**

## **Identification of Children with Hearing Impairment**

- There are several behavioral indicators that are used to recognize children with hearing impairment.
- Some behavioral indications and warning signs of a possible hearing impairment are:-
  - Note
- Once a child is suspected and determined that he/ she has a hearing impairment, parents or teachers must refer the child for further audio-logical or medical evaluation to determine the type or degree of hearing loss.
  1. Difficulties following oral presentations and directions
  2. Speak loudly or slowly than is usual.
  3. Inattention, restlessness, distraction of others, more responsiveness in quiet conditions.
  4. They requires frequent repetition
  5. Watches lips of teachers or other speakers very closely.
  6. Turns head and leans toward speaker
  7. Uses limited vocabulary
  8. Uses speech sounds poorly
  9. Shows delayed language development

10. Does not often respond when called from behind
11. Generally inattentive during oral presentation
12. Constantly turns volume up on radio or television
13. They think that other people are mumbling /**speechless**/

### Assessment of Children with Hearing Impairment

The most practical method used to screen a child with hearing problems are

1. Careful observation of main symptoms of hearing loss mentioned above.
2. Studying the causes of loss and its consequences in collaboration with parents
3. Distraction tests, introducing a sound source behind and to either side of the child.

### Intervention of Children with Hearing Impairment

The intervention technique for children with hearing impairment is based on individual level of the problem

#### 1. For hard of hearing Mild /Moderate/ **Hearing Impairment**

- Reduce distance between student and teacher as much as possible.
- Place the student in front of the classroom
- Speak slowly and clearly.
- Reduce background noise as much as possible
- Providing language instruction /**training**/
- Encourage cooperative classroom environment /**competitive**/
- Encourage students to hear and watch other students.

#### 2. For deaf profound/Severe/**Hearing Impairment**

The main means of communication and interacting with other is depend on

- Sign language
- Lip reading
- Writing and Reading
- Teacher should give a copy of written material for students
- Teacher should write the summary of main points on the black board
- Teacher should avoid speaking while writing on the board
- Arrange interpreter in the classroom

## UNIT FOUR: Teaching Children and Youth with Visual Impairment

### Definition Visual impairment

- It is a problem or damage to one or more parts of the eye.

### Visual disability

- It is limitation of action or function of vision system.
- It is partially or totally inability to see.
- It is a consequence of functional loss of vision.
- It is a condition in which children vision is deficient to such a degree that significantly affects their activities. (scott)

### Classification of visual impairment

#### Based on Educational context

- They are classified in terms of individual **visual acuity**.
- Visual acuity is the **clarity** or **clearness** of one's vision.
- They classify in to **four** /4/

#### 1. Normal Vision

- Visual acuity measure is **20/20**     **20ft** which is standard distance
- A person has no problem of vision.
- A person can read or discriminates from a standard distance of 20 ft as normal vision person can read or discriminates at 20ft.

#### 2. Low Vision

- Visual acuity measure between 20/200 to 20/70
- 20/20 mean a person discriminates or read from 20ft that normal vision person discriminate or read from 200ft.

#### 3. Legally Blind

- Visual acuity less than 20/200

#### 4. Totally Blind

- It is total loss of vision.

### Causes of Visual Impairment

#### The common cause of visual impairment or blindness

#### 1. Protective



- **Trachoma:** - affects the eyelid and cornea.
  - It is due to overcrowded living condition and limited access to water and sanitation.

## 2. Refractive

- **Myopia** (nearsightedness) It is the result of the eye ball being too long.
- **Cataract:** - is the result of cloudiness of the crystalline lens.
- **Glaucoma:** - it is damage of vision due to increased pressure from accommodation of aqueous fluid.

## 3. Directive

- **Strabismus** it is failure of both eyes to direct their gaze simultaneously at the same object because of faulty muscle coordination.

## Identification, Assessment and Identification of Visual Impairments

### Identification of visual impairment

- There are **two** techniques to identify children with visual impairment. That teachers and parents should consider carefully.

#### a. Physical indicators: Identification

- ⇒ Red eyes,
- ⇒ Watery eyes or discharge,
- ⇒ Crossed eye,
- ⇒ Eyes that do not appear straight,
- ⇒ Crusts on lids among the eye lashes

#### b. Behavioral indicators Identification

- Unable to locate and pick up a small object.
- Unusual facial behaviors
- Difficulty with reading: An unusual difficulty with reading
- Difficulty with distance vision
- Light sensitivity or difficulty
- The child rubs eyes frequently or while doing close visual work.
- The child covers their eye when they have difficulty of vision.

### Assessment of visual impairment

- Visual impairment is basically measured in terms of **visual acuity**.
- Visual acuity refers to the **clarity** or **clearness** of one's vision.

- Vision-screening procedures are based on the use of the **Snellen chart** plus careful observation of symptoms. Using **Snellen chart** the individual is tested to read or discriminate letter or object at a distance of 20 ft. feet
- Visual acuity is measured based on Snellen chart in which the individual is tested to read or discriminate letter or object at a distance of 20 ft. feet

## **Educational and Social Support Provision**

### **I) Low Vision Students**

- Use large writing on the chalkboard or visual aids.
- Place the students in front side of the classroom.
- The child should be seated as close as possible to the teachers (no more than three metres away).
- Read loudly what is written on the blackboard.
- Prepare teaching aids that children can read more easily such as large print materials.
- Encourage the children to use a pointer or their finger when reading
- Try to minimize classroom noises.
- Encourage cooperative classroom environment.
- Pair the students with a seeing classmate who can assist her to organize their work.
- Use verbal praise or touch to give the child encouragement.
- Use the name of the students during class discussions so that the child knows who is talking.
- Make an abacus available to the child in math's lessons.
- Lessons can be taped using a cassette recorder for later playback at home or as revision.
- Children may have difficulty seeing the lines on writing paper. They can be given paper with thicker lines drawn on it.
- Encourage the students to use eyeglass. Because Some children will benefit from using magnifying aids.

### **II) Blind Children**

#### **a. Braille training**

- Blind children should learn Braille.
- This gives them a means of reading and writing.

#### **b. Orientation and Mobility training**

- **O & M** program or training should focus on the following aspects
- **Sensory awareness:** trained a children to use other senses OR gaining information about the world through hearing, smell, touch.
- **Spatial concepts:** realizing that objects exist even if not heard or felt, and understanding the relationships which exist between objects in the environment.
- **Provide life skill training:** self esteem(self value), self concept(self image),self awareness(self knowledge) and self efficacy(self belief)),
- **Searching skills:** locating items or places efficiently
- **Independent movement:** This includes crawling, rolling, walking, etc.
- **Sighted guide:** using another person to aid in travel.

**c. Protective techniques:**

Are Specific skills which provide added protection in unfamiliar areas

- ❖ **Cane skills:** use of various cane techniques to **clear one's path** or **to locate objects** along the way.

## UNIT FIVE :Teaching Children and Youth with Mental Retardation

### Definition of Mental Retardation

- It is a disability characterized through significant limitation both in **intellectual** functioning and **adaptive** behavior. /AAMR/
- So mental retardation has substantial limitation in present functioning.
- Some basic aspects of adaptive behavior are
  - Communication skill
  - Self care skill
  - Home living skill
  - Health and safety skill

### Classification of Children and Youth with Mental Retardation

#### I) Traditional

1. **Cretin**: children with significant intellectual or developmental disabilities. were "still human" with basic human dignity.
2. **Idiot** indicated the greatest degree of intellectual disability.

The term was gradually replaced by the term profound mental retardation.

3. **Imbecile** indicated an intellectual disability less extreme than idiot and not necessarily inherited.

It is now usually subdivided into two categories, known as severe mental retardation and moderate mental retardation.

4. **Moron** has Feeble-minded . means weak mind

#### II). The American Association of Mental Retardation (AAMR)

- They classified mental retardation based on their IQ means Intelligence Quotient.
- They are classified the mentally retardation into four categories:-
  1. Mild mental retardation
    - **IQ between 50 -69**
  2. Moderate mental retardation
    - **IQ between 35- 49**
  3. Severe mental retardation
    - **IQ between 20 – 34**
  4. Profound mental retardation
    - **IQ below 20 They need adult assistance for their existence.**
    -

### III) Special Needs Educators

❖ They are classified children with mental retardation in to **Three**

a) **The Educable Mentally Retarded**

- Can learn academic subjects
- Have some social adjustment in the community
- Are not recognized at infancy or early child hood
- Are mildly retarded
- Unable to profit from regular classes

b) **The Trainable mental retarded**

- Are not educable academic subjects
- Can be trained basic Self help skills (feeding, dressing, bathing, washing clothes)
- Attain social adjustment at family and neighborhood level.
- Are moderately retarded

c) **Custodial**

- Are severely and profoundly mentally retarded
- Are unable to trained or educate in to total self care
- Need daily supervision for their daily needs. like feeding, clothing, and toileting
- Cannot live without adult help

### Causes of Mental Retardation

- In most cases the causes of mental retardation are not known.
- Scholars identify two broad categories of causes of mental retardation: **organic/physiological causes** and **Cultural-Familial causes**.

#### A. Organic/Physiological/ Causes

##### 1. Hereditary Factors

- Any defect in genetic materials could result in mental retardation.

##### 2. Hormonal and Metabolic Conditions

- There are many hormonal and metabolic disorders that may result in mental retardation.
- The most frequent and best-known ones include:

**I. Down syndrome-** is a disorder which involves an abnormal pattern of chromosomes

**II. Hydrocephaly-** is an accumulation fluid in the cranium causing enlargement of the head

### 3. Prenatal Influence

- **Teratogenesis** refers to changes that occur in uterine environment during critical developmental periods.

### 4. Postnatal conditions

- **Postnatal physiological or organic problems** that can result in retardation include infections such as **meningitis**, **lesions (injures)** and **hemorrhage (bleeding)**.

### B. Cultural-Familial Causes

- Cultural-familial retardation refers to etiological factors in 75% of retarded children for whom there is no organic causes and whose retardation is estimated to be a combination of hereditary and environmental factors. Children in this category are usually mildly retarded and incidence of retardation is higher in their families.

#### Developmental Characteristics of Children and Youth with Mental Retardation

- ❖ Children with mental retardation show delay in various aspects of development because of their limitation on intelligence and adaptive behavior.
- ❖ Some aspects of developmental delays are

#### Cognitive Characteristics

- Students with mental retardation perform poorly in most academic area
- The low academic achievement is usually attributed to
  - Failure of attention
  - Failure of imitation
  - Limited general knowledge
  - Limited problem solving ability
  - Inability to use good learning strategies

#### Social/ Emotional Characteristics

- Individual with mental retardation exhibit socially inappropriate and emotionally immature behavior.

Some basic emotional characteristics are

- Anti social behavior
- Difficulty with independent living skill
- Difficulty of self motivation
- Have poor self image self concept self confidence

### Identification of Children and Youth with Mental Retardation

- Children with severe and profound mental retardation are usually identified before they reach school age but other moderate and mild mental retarded children are not identified in early developmental period.
- Identification of children with mental retardation should consider their developmental period
- Scholars classified into **three** developmental periods to identify individual with mental retardation

#### Difficulties of infancy and early childhood

- Development of sensor motor skills
- Communication skills ( including speech and language
- Self-helps skills

#### Difficulties of childhood and early adolescence

- ❖ Application of basic academic skills in daily life activities
- ❖ Application of appropriate reasoning and judgment. in mastery of the environment
- ❖ Application of social skills. to participate in group activities and interpersonal relationships.

#### Difficulties of Late adolescence and adult life

- Is unable to think abstractly or to handle symbolic material
- Is unable to understand complex game rules
- Breaks rules of conduct or of games and is often unaware of it
- Is unable to work independently
- Is easily confused
- Has a short interest and attention span
- Is unable to voluntarily concentrate
- Is behind normal grade achievement in school.
- Is unable to understand and carry through teacher's directions for assignments

### Assessment of Children and Youth with Mental Retardation

- ❖ The assessment process of individual with mental retardation should focus on intellectual functioning and adaptive behavior.

- ❖ One of standard measure used to assess individual intellectual functioning and adaptive behavior is **Stanford-Binet test**
- ❖ The assessment process of individual with mental retardation also categorized in to **three** developmental period

#### **I. Infancy and late childhood period**

The assessment process should focuses on

- Development of sensor motor skills
- Communication skills ( including speech and language
- Self-helps skills

#### **II. late childhood and early adolescence**

The assessment process should focuses on

- ✓ Social skills
- ✓ Application of basic academic skills and
- ✓ Reasoning and judgment ability

#### **III. late adolescence and adulthood**

The assessment process should focuses on

- ❖ Vocational performance
- ❖ Social responsibility
- ❖ Level of abstract thinking
- ❖ potential for independence, employment and conformity

### **Intervention of Children and Youth with Mental Retardation**

The main aspects of helping children and youth with mental retardation are

Education and

Self help skill based on individual level of the problem.

#### **Educational intervention**

The most appropriate kind of educational setting and program depends on severity of the retardation; it ranges from regular classes for the mildly and moderately retarded to institutions for the severely and profoundly retarded.

- ❖ Show the child what you want rather than simply telling.
- ❖ Break the instructional tasks into simplest learning tasks. Or learning objectives
- ❖ Use real object that the child can feel and handle than paper and pencil work.
- ❖ Give time for the students for extra practice
- ❖ Use music and games to help learn concepts
- ❖ Use short sentences and simple vocabulary



- ❖ Include them in social activities as much as possible
- ❖ Use positive reinforcement - give praise
- ❖ Use pictures and visual methods to aid understanding
- ❖ Give praise and encourage students when they are successful.
- ❖ Reduce classroom distraction.
- ❖ State expectations and rules clearly
- ❖ Use simple word during instruction.
- ❖ Use lots of repetition

### **Family support**

Home is the most natural environment to support a child and youth with developmental disabilities.

Therefore the family need to

- ❖ Give opportunities to express them selves
- ❖ Support the child to cope from their difficulties
- ❖ Support the child to develop self confidence
- ❖ Support the child to develop adaptive skill.

## UNIT SIX: Teaching Children and Youth with Physical/ Motor and Health Disorders

### Definition of Physical/Motor and Health Disorders

- ❖ Physical/motor and health disability refers to those disabilities which results from a condition that interferes with individual ability to use their body for movement and mobility.

### Causes of Physical/Motor Disorders

Most handicapping conditions are the result of congenital and physical malformations that are present at/after birth. Some of the common causes are:

- Chromosomal abnormality
- Infectious diseases that affect the mother
- Alcohol intake by the mother
- Antibiotics
- Postnatal handicapping conditions
- Nutritional effects
- Child abuse and others
- Teratogens /exposure of the fetus to environmental agents eg. radiation), specially during the critical periods of structural development

### Types of Physical/Motor Disabilities

Yesseldyke & Algozzine, (1995) classify motor disabilities into two sub-categories.

#### 1. The physical/ orthopedic impairments

- ❖ Is a structure, muscular or skeletal system problem that limits individual motor functioning which is movement or mobility.
- ❖ These are problems that result from conditions affecting the central nervous system or spinal cord or loss of limbs or other body parts and their related functions.
- ❖ They adversely affect the child's psychosocial, educational, and other developmental achievements.

##### A. Cerebral palsy

- ❖ It is a group of **neuromuscular disorder** that results from *damage to the central nervous system* (the brain and spinal cord) occurs before, during or after birth.
- ❖ It is characterized by paralysis, weakness and poor coordination.
- ❖ Cerebral palsy can be treated but not cured.

- ❖ There are different types of cerebral palsy.
- ❖ They are usually classified according to the nature of the tone of abnormality and distribution of the tone.

### **B. Poliomyelitis (Polio)**

- ❖ Polio is an acute disease that inflames nerve cells of the spinal cord or brain stem and leaves a residual paralysis or muscular atrophy.
- ❖ It is an acute communicable disease caused by the poliovirus.

### **C. Spina bifida**

- ❖ Spina bifida is a congenital defect in the development of spinal cord.
- ❖ It is an opening in spinal column caused by the failure of vertebrae to combine.

### **D. Epilepsy**

- ❖ Epilepsy is a spastic disorder caused by excess firing of electrical discharges in the brain cells. **Spastic illness which make difficult for individual to control their body.**
- ❖ It is manifested in seizures, that is, loss of control over specific muscles in the body.

**1. Grand mal seizure** is the most evident and **serious type** of epileptic seizure. It is characterized by:

- ❖ loss of consciousness and postural control with muscle rigidity that progresses to jerking reactions and suspended breathing
- ❖ loss of control of bowel and bladder and frothing of saliva
- ❖ lasting from **1 to 10 minutes**
- ❖ it may occur as often as several times a day or as seldom as once a year
- ❖ it is not painful to the affected person and is not communicable
- ❖ it is usually preceded by an aura, a warning sign that seizure is coming, it happens in the forms of unusual taste, smell, sound, color, dizziness, weakness, sensation of fear or headache

### **2. Petit mal**

- ✓ **It** is far less severe than grand mal but may occur much more frequently as often as 100 times per day in some children. It may appear to be daydreaming. There could be a short loss of consciousness, lasting from a few seconds to half a minute.
- ✓ The repeated occurrence of two or more of the following signs can be used to detect children with petit mal seizures.

- Head dropping
- Daydreaming, lack of attentiveness
- Slight jerky movements of arms and shoulders
- Eyes rolling upward or twitching
- Chewing and swallowing movements
- Rhythmic movement of head, and
- Purposeless body movements or sounds

### 3. Psychomotor seizure

- It may appear as a brief period of inappropriate or purposeless activity. The child may appear to be conscious but is not actually aware of his/her unusual behavior. It usually lasts for a few minutes but in some cases it goes as long as several hours.
- Hall day (1989) characterizes psychomotor epilepsyIt appears as a brief period of inappropriate or purpose less activity
  - Temper tantrum behavior, including the use of foul language
  - Lips making
  - Repetition of movements
  - Mumbling
  - The child experiences a ringing in the ears.

### E. Leprosy

- ❖ Leprosy is a chronic disease which ***damages nerve cells*** around the different parts of the body, affecting both fine and gross motors.
- ❖ Leprosy is a communicable disease that could be transmitted from the infected person to the healthy one.

### F. Limb Deficiencies

- ❖ Limb deficiencies refer to loss of one or more limbs (hands & legs) of an individual.
- ❖ They may be present at birth (congenital) or occur later in life (acquired).

## 2. The health impairments

- ❖ Health impairments refer to all chronic health problems which in one way or another affect the child's motor performance. ***/limits the individual body's physical well-being/***
- ❖ Health impairments are health related problems that affects individual motor performance/ movement and mobility/

- ❖ Individual with health impairment is generally characterized by low vitality, motivation and low energy level.

### **A. Heart conditions**

- ❖ It is characterized by improper circulation of blood by the heart.

### **B. Asthma**

- ❖ Asthma is a condition which affects breathing.
- ❖ It may be an inherited condition, and people with close relatives who are asthmatic are likely to be asthmatic themselves.
- ❖ When this happens the air flow is restricted and the person has difficulty in breathing.

### **C. Diabetes**

- ❖ **Diabetes** is a metabolic disorder in which the body is unable to properly utilize carbohydrates in the diet.
- ❖ It is an individual's inability to control the level of sugar in his/her blood.
- ❖ This happens because the pancreas fails to secrete an adequate supply of insulin, or the secreted insulin fails to function properly in the digestive process resulting in an abnormal concentration of sugar in the blood and urine.
- ❖ Symptoms are *excessive thirst, excessive urination, weight loss, slow healing of cuts, pain in joints and drowsiness*.

### **D. Hemophilia**

- ❖ Hemophilia is health impairment where the blood does not clot as quickly as it should do.
- ❖ The most serious consequences of hemophilia are usually internal rather than external bleeding.

## **Developmental Effects of Motor and Health Disorders**

### **Cognitive Characteristics**

- ✓ Students with motor difficulties often have no cognitive impairments. However, the limitation of movement can adversely affect the cognitive development of the child.

## **Physical Characteristics**

- ✓ Motor dysfunctions are the primary difficulties faced by children with physical disabilities or with health impairments. Their disorders may mean chronic illness, weakness or pain. These symptoms may be present only during acute phases.

## **Social / Emotional Characteristics**

- ✓ The reactions of parents and other care-givers as well as teachers and students do influence the social and emotional behavior the children exhibit in school, at home, and in the community.

## **Identification, Assessment and Intervention Motor and Health Disorders**

### **Identification Motor and Health Disorders**

#### **1. Identification for Physical / motor / impairment**

Heward and Orlansky (1988) teachers or parents can use the following hints to identify children and youth with motor impairments. The children and youth:

- have poor motor control or coordination
- walk with a limp with awkwardness አንካላ
- show signs of pain during exercise
- have jerky or shaky motions
- have defects which interfere with normal function of the bones, muscles or joints

#### **2. Identification for health impairment**

Symptoms to identify children and youth with health problems include:

- ❖ easily fatigued
- ❖ usually breathless after exercise
- ❖ extremely inattentive
- ❖ excessively hungry and thirsty
- ❖ faints easily
- ❖ excessively restless and overactive

## **Assessment Motor and Health Disorders**

The assessment method of Children with Motor and Health Disorders depend on the child age and difficulty level. Therefore the assessment techniques should consider both physical and health identifications.

### Educational support

- ✓ Educational programs of children with physical and health impairments are generally similar to that of the nondisabled.
  - ❖ Changing desk and table tops to appropriate heights for students
  - ❖ Provide individual treatment to increase their self confidence
  - ❖ Adding adaptive devices like writing instruments to make them easier. to grip

### Special devices and appliances

- ✓ Children with physical disabilities use special orthopedic devices to increase their mobility and help their bone, joints and muscles develop.
  - ❖ Some of the important special devices include:
    - A. Prostheses** are artificial replacements of missing body part (arm or leg)
    - B. Orthoses** are devices that enhance partial functioning of a body part such as a long brace.
    - C. Wheelchair locomotion** is prescribed by a physician for individuals who are unable to ambulate or for those whose ambulation is unsteady or unsafe.
    - D. Adaptive devices** are special eating utensils such as forks and spoons with custom designed handle, or straps.

## UNIT SEVEN: Teaching Children and Youth with Communication Disorders

### Definition of Communication Disorders

- 📖 Communication is a process of expressing ones idea or receiving other idea or experience.
- 📖 Communication disorders include problems of expressing ones idea which is speech disorder or receiving other idea or experience which is language disorder.
- 📖 Communication disorders is a **Problem related with producing speech sound (articulation), controlling sounds that are produced (voice), and controlling the rate and rhythm of speech (fluency) said to speech disorder. Problems with using proper forms of language (phonology, morphology, syntax) using the content of language (semantics) and using the function of language (pragmatics)**

❖ Therefore Communication disorders can be classified in to **Two**

**5. Speech disorder**

**6. Language disorder**

#### NOTE

- ❖ The term language is much broader than the term speech.
- ❖ Language encompasses numerous ways of receiving messages and expressing ourselves
- ❖ Language is the total system of symbols used in expression and comprehension of ideas (Ysseldyke&Algozzine, 1995).

### Classification of communication Disorder

- 📖 Based on the American Speech-Language-Hearing Association classified in to TWO  
Ysseldyke & Algozzine, (1995).

#### 1. **Speech Disorder**

- ❖ **It is a** Communication disorder which is related to expressing ones idea, feeling or experience.

- ❖ **This problem is classified in to Three**

**I. Articulation disorder** is the abnormal production of speech sounds.

Substitution, distortion and omission

**II. Voice disorder** it is absence or abnormal production of vocal **quality**, pitch, loudness, duration etc.

- ❖ Individuals with this problem may speak very loudly or in a very high or low pitch.



### **III. Fluency disorder it is abnormal flow of verbal expression.**

- ❖ Fluency disorder is stuttering, disruptions in the normal flow of speech.

## **2. language disorders**

- ❖ it is a problem related to receiving others idea, feeling and experience.

### **❖ This problem is classified in to Three**

#### **I. Language form: - it is a problem related to **unable to understand** structure of the language.**

**It can be associated to phonology, morphology, and syntax.**

- ❖ **Phonology** deals with the smallest units of language (phonemes or speech sounds).
- ❖ **Morphology** deals with the smallest units of meaningful language (morphemes, or words and parts of words).
- ❖ **Syntax** deals with combining language units into meaningful phrases, clauses or sentences (grammatically correct language).

#### **II. Language content: - it is a problem related to **unable to understand** the meanings of words and sentences including abstract concepts (**semantics**).**

- ❖ *Semantics* is concerned with word and message meanings (vocabulary, comprehension).
- ❖ Evident problems include when students fail to identify appropriate pictures when word names are provided (eg. Find out grapes); answer simple questions (eg. Where are you from?); follow direction (eg. Draw a line on the third box) or understand abstract concepts (eg. What is love?).

#### **III. Language function: - it is a problem related to **unable to understand** the context in which language is used and the purpose of communication (**pragmatics**).**

- ❖ *Pragmatics* is concerned with the use and function of language under different settings (following social conversational rules).
- ❖ Problems are evident when students are unable to use language in social situations to express feelings, create or understand images, give request information or/and control actions of listeners.

## Causes of Speech and Language Disorders

The causes of the majority of speech impairments are unknown. Some of the known causes of speech impairments are:

- ✓ brain damage.
- ✓ Malfunction of the respiratory or speech mechanisms.
- ✓ Some disabilities have organic/physical causes.
- ✓ Similarly, cleft lip or palate can cause articulation problem and can lead to
- ✓ Speech difficulty. Voice problems can also be caused the way the voice is used; undue abuse of the voice by shouting and straining may cause damage to vocal folds and thereby result in voice disorder (Ibid).

## Identification, Assessment and Intervention of communication Disorder

### Identification of communication Disorder

Smith and Lucksson (1995) argue that the following signs can be used to identify children and youth with speech and language impairments.

#### Speech

- Makes consistent and age inappropriate articulation errors
- Exhibits dysfluencies (repetitions, prolongations, interruptions) in the flow of speech
- Has poor voice quality such as distracting pitch
- Is excessively loud or soft.

#### Language

- Is unable to follow oral direction
- Is unable to match letters with sounds
- Has inadequate vocabulary
- Demonstrate poor concept formation
- Has difficulty conveying messages or conversing with others
- Has difficulty expressing personal needs

### Assessment of communication Disorder

Comprehensive evaluation should be used to detect the presence of a communication disorder. These would likely include the following general components.

- **Articulation test**  
**Record speech error that the child make**
- **Hearing test**

- **Auditory discrimination test**

It is given to determine whether the child is hearing sounds correctly.

- **Language development test**

This is administered to help determine the amount of vocabulary the child has acquired

## **Intervention of communication Disorder**

Smith and Lucksson (1995) suggest the following tips of intervention for teachers.

1. Be alert to the presence of speech and language impairments
2. Refer suspected children to speech and language professional (SLP).
3. Work with SLP to integrate appropriate language development activities in all academic instruction
4. Incorporate activities that allow children to practice mastered in therapy in class
5. Consider the developmental stage of the child suspected of having language impairment before making a referral
6. Create a supportive environment where children are encouraged to communicate with others
7. Provide opportunities where children feel free exchange ideas and discuss what they are learning in different subjects.
8. Arrange for activities where children use oral language for different purposes with different audiences
9. Build self-confidence in children with speech and language difficulties

## UNIT EIGHT: Education of the gifted and talented children in the inclusive schooling

The reasons for going through the process of identifying gifted children are complex. Identification is the first step to a differentiated program. And, well-planned program could help the following things that gifted children might face:

- Restricted learning opportunities
- Poor parent-child relationships
- Lack of interpersonal relationships
- Other negative factors

### Activity

- Who are the gifted and talented children? How can we identify them? From ‘where’ do they come from? Discuss on these points thoroughly with your partner in pair.

Above all, tightly intelligent and talented children are potentially the most valuable resources of our society, their talents and potentialities must be identified, cultivated and developed to the full.

Like all exceptional children gifted and talented children need special help so that they can realize their ‘blessings’. So, they have to be identified as early as possible. And that is not an easy task. In Ethiopia, in every generation, many gifted children pass through schools unidentified, and their talents uncultivated.

- Many may come from low economic backgrounds;
- Others may come from some cultures that place little stress on verbal ability;
- Others could dropped out of school for economic reasons;
- Some may face emotional problems that disguise their intellectual ability.

Two major procedures are mainly used in the identification of the gifted children: Observation methods and psychological tests.

**A. Observation** - Gifted children could be identified and information is secured through the participation of teachers, peer groups, and school record officers. Nevertheless, the

limitation of their involvement created the inherent weaknesses of observation, certain procedures should be realized.

***Classroom teachers:*** Classroom teachers are good sources of information on the identification of the behaviors and characteristics of gifted children. Therefore, classroom teachers should be involved in any program that is designed to identify the problems of the gifted and in other intervention strategies; and, in basic trainings of exceptional children, in general, and gifted and talented children, in particular. In identification and assessment procedures teachers mostly employ the child's social, academic, motivational and leadership characteristics.

***School record officers:*** The academic achievement results and other recordings obtained through both internal and external testing services are carefully recorded and stored in the schools record offices. Therefore, sufficient records and other information could be secured from the record center. Teachers and other school personnel's can easily refer to such available records in order to identify the problems and other characteristics of gifted students.

***Peer groups:*** Sometimes and informally information could be secured through peer groups. The information could serve as additional way of obtaining more facts about the gifted in the psycho-socio-metric analysis of the data obtained. Peer groups could simply supply information both positively and negatively on their gifted and talented friends.

**B. Psychological Tests:** There had been different psychological tests developed by different personalities for the purpose of good decisions on selection and classification of students for academic, vocational, and other benefits. In order to identify the gifted and talented, intelligence tests is one of the different psychological tests most professionals have been used.

Before you see the nature of intelligence tests, you have to be clear about the meaning of 'intelligence.' What is intelligence? The psychometric (or testing) approach defines intelligence as a trait (or set of traits) that allows some people to think and solve problems more effectively than others. Intelligence is technically defined as the capacity to think abstractly to learn and to integrate new experiences, to adapt new situations and solve problems.

Both heredity and environment contributes heavily to intellectual performance. The evidences from twin studies and studies of adopted children indicate that about half the variation among

individuals in IQ is attributable to hereditary factors. But regardless of one's genetic predispositions, barren intellectual environments clearly inhibit cognitive growth whereas environmental enrichments can clearly promote it.

Most educators would agree on three general educational objectives for programs of gifted and talented students:

- ◆ Gifted children should master important conceptual systems that are at the level of their abilities in various content/fields.
- ◆ Gifted children should develop skills and strategies that enable them to become more independent, creative and self-sufficient.
- ◆ Gifted children should develop a pleasure in and excitement about learning that will carry them through the hard work and routine that is an inevitable part of the process.

In the broadest terms, the goals of education for the gifted are not different from the goal of education for all other children. The general important objectives of education of all children (including the gifted) focus on:

- Feelings of self worth, self-confidence
- Feelings of self-sufficiency
- Civic responsibility
- Career competence
- Intellectual abilities

Yet, there are some specific educational outcomes that are desirable for the gifted and talented in schools. So, they have to be helped to acquire or master these skills. Although professionals do not agree on the best educational approach for gifted and/or creative students, currently gaining popularity is the concept of a differential curriculum. It is the flexible application of curriculum targets that ensure content mastery, in depth and independent learning, and exploration of issues and themes and allows for acceleration when needed. Let's see the two main approaches: the acceleration and enrichment of differential curriculum.

***Enrichment Approach*** experiences are those that add topics or skills to the traditional curriculum or presenting a particular topic in more depth. Such experiences would let gifted children investigate topics of interest in greater detail than those required in ordinary school curriculum. There are different mechanisms of promoting enrichment:

- A group of students might spend a small portion of time each week working with instructional materials that enhance creativity or critical thinking skills.
- Gifted children could be allowed to pursue and study a particular academic subject, or a topic in depth on an individual basis.
- Gifted students could be paired with adults who guide them in applying knowledge to real-life situations
- Students all exposed to planned activities that seek to develop thinking skills, problem solving, and creativity can enhance their learning.

Although the enrichment approach is mostly used in the regular classroom settings, some topics of investigation may stem from ongoing activities outside the classrooms or schools. For example, during summer vacation, gifted children could be sent to special programs where they could benefit from the proposed experiences.

***Acceleration Approach*** means moving students through a curriculum or years of schooling in shorter periods of time than usual. It is speeding up the movement at which the gifted child encounters a given content, class, or grade levels.

Acceleration comes in many different forms:

1. *Early school admission* – the child once shown to be intellectually and socially mature is allowed to enter kindergarten at a younger-than-normal age.
2. *Skipping grades* – the child is accelerated by completely eliminating one semester or one grade in school. Skipping grade is, of course, unpopular strategy because of its potential for creating temporary adjustment problems for the gifted students.
3. *Telescoping grades* – the child covers the standard material, but in less time. For example, a three-year junior high program would be taught over two years.
4. *Advanced placement* – the student takes courses for college credit while still in high school, shortening of the college program. This can be done easily for those students placed or grouped according to their ability.
5. *Early college admission* – an extraordinarily advanced student may enter college at 13, 14, or 15 years of age.

## **UNIT NINE: Educational program, identification and assessment of learners with emotional and behaviour disorders**

### **Identification and assessment of learners with emotional and behaviour disorders**

Often, the first signs of serious emotional disturbance are seen as difficulties with basic biological functions or social responses (e.g. eating, sleeping, eliminating, responding to parents' attempts to comfort, or 'muddying' the parent's body when being held). At the toddler stage, slowness in learning to walk or talk is a sign of potential emotional difficulty. In short, failure to pass ordinary developmental milestones within a normal age range is a danger signal in the case of emotional development, just as in cognitive development. In fact, cognitive and emotional development tends to be closely linked, and neither aspect of a young child's life can be considered in isolation from the other.

#### **Activity**

- Discuss on types of behaviour and emotional disturbances that you assume are significant in your schools. Mention its behavioural expression to carry out appropriate intervention strategy.

Teachers can identify and help children with emotional disorders by the following behaviors as stated by Kough et al, 1955:

#### **a. Aggressive maladjustment**

- Doesn't go along gracefully with the decisions of the teachers or the group;
- Is quarrelsome; fights often; gets mad easily;
- Is bullying; picks on others;
- Occasionally is disruptive of property.

#### **b. Withdrawn maladjustment**

- Is noticed by other children,
- Is neither actively liked nor disliked just left out;
- Is one or more of the following; shy, timid, fearful, anxious, excessively quiet, tense;
- Is easily upset; feelings are readily hurt; is easily discouraged.

#### **c. General maladjustment**

- Needs an unusual amount of prodding to get work completed;
- Is inattentive and indifferent, or apparently lazy;



- Exhibit nervous mannerisms such as nail biting, sucking thumb or fingers, suffering, extreme restlessness, muscle twitching, hair twisting, picking and scratching, deep and frequent signing;
- Is actively excluded by most of the children whenever they get a chance;
- Show failure in school for no apparent reason;
- Is absent from school frequently or dislikes school intensely;
- Seems to be more unhappy than most of the children;
- Achieves much less in school than his ability indicated he should; and
- Is jealous or over competitive.

### **Assessment of emotional or behavioural problems**

Like assessment of problems in various academic areas that should help us identify these students who need special help, planning or having programs to address their problems, and monitor progress toward reaching their goal is fundamental. An adequate assessment does not focus exclusively on student's behavior. Rather, it includes consideration of the student's social and physical environments and the student's and feelings about their circumstances. Assessment should not merely be descriptive of what is but also should be a process that leads to suggested interventions.

Suffice to say that behavioral assessment may employ rating scales and interviews but relies most heavily on direct observation for measurement of the particular behaviors that are problematic. Behavior rating scales may be used to obtain adults' (teachers' and parents') reports of the frequency with which students exhibit specific characteristics. The result of these ratings can then be compared to national or local norms to see the extent to which the students' exhibit specific characteristics. The result of these ratings can then be compared to national or local norms to see the extent to which the students' behavior differs from that of other students. Interviews with parents, teachers and students themselves may be used to assess the perceptions individuals have of the student's behavior and its context. Their explanations for the students conduct and motivational factors may be important in designing an intervention programs. Direct observation of behavior is most useful in assessing exactly what the student and others do and do not do in specific settings or circumstances. The information obtained from direct observation provides another basis for planning and monitoring intervention.

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