Understanding and Responding to Children’s Needs in Inclusive Classrooms

A Guide for Teachers

United Nations Educational, Scientific and Cultural Organization
Understanding and Responding to Children’s Needs in Inclusive Classrooms

A Guide for Teachers
Acknowledgements

The work presented here has been carried out by Roy McConkey with assistance of:

Ana Maria Benard da Costa, Janet Holdsworth, Ture Jönsson, Bonaventure Sylvester Kanyanta, Elina Lehtomäki, Ana Luisa Lopez, Susie Miles, Nithi Muthukrishna, Brian O’Toole, Lena Saleh, Rana Shaban, Molly Thorburn and Sai Väyrynen

The views expressed in this document are those of the authors and do not necessarily reflect those of UNESCO.

We have used ideas from a number of publications:


Inclusive Education: Strategies for Including Children with Disabilities in the Regular Classroom. Spastics Society of Tamilnadu, Chennai, India (undated)


Disabled Village Children by David Werner. Available from: Hesperian Foundation P.O. Box 1692, Palo Alta, California, CA94302, USA

Welcoming Schools – Students with Disabilities in Regular Schools (1999), UNESCO.
Table of Contents

Overview of the Guide

Children Differ 7
“Full Participation and Equality” 10
Help for Teachers 11
Aims of the Guide 11
Contents 13
Format of the Guide 13
Key Messages 14
Study Groups 15
Further Information 15
Key Terms 16

UNIT 1 Every Child is an Individual 19

Unit 1: Overview 19
Barriers to Learning 19
Impairments 21
Social View of Disability 22
Medical View of Disability 23
Reducing Disabilities 23
Deprivation 25
Why should we try to reduce the deprivations or Why bother? 29
Right to Participation 29
Right to Education 30
Implications for Teachers 31
Teachers’ Reactions 33
Review of the Unit 36
### UNIT 2 Assessing Needs

**Unit 2: Overview**

1. **Identification of Needs**
   - Hearing Impairments
   - Warning Signs
   - Causes of Hearing Impairments
   - Actions Teachers can take
   - Visual Impairments
   - Warning Signs
   - Causes of Visual Impairments
   - Actions Teachers can take
   - Intellectual Disability
   - Warning Signs
   - Causes of Intellectual Disability
   - Actions Teachers can take
   - Cerebral Palsy
   - Causes of Cerebral Palsy
   - Actions Teachers can take
   - Review of the Unit

2. **Adapting the Curriculum**

3. **Common Illnesses and Impairments**

**Review of the Unit**

### UNIT 3 Responding to Diversity

**Unit 3: Overview**

**Part 1. Nine Golden Rules**

1. Including Everyone
2. Communication
3. Managing Classrooms
4. Lesson Planning
5. Individual Plans
6. Individual Help
7. Assistive Aids
8. Managing Behaviour
9. Working Together

**Review of your teaching**
### UNIT 4 Working Together

- **Unit 4: Overview**  
- **Part 1: Schools Together**  
- **Part 2: School Cultures**  
- **Part 3: Community Groups**  
- Working with families  
- Health Personnel  
- Community Workers  
- Disabled Persons’ Organisations  
- Community Supporters  
- Review of the Unit  
- Getting Connected
Overview of the Guide

This Guide can be used in addition to the UNESCO Teacher Education Resource Pack: Special Needs in the Classroom (see Box on p. 8). It repeats some of the messages contained in the Resource Pack. But it also guides teachers on practical ways of coping with children who have particular difficulties in learning.

The Guide can be used as a study book on its own or as a guide for groups of teachers studying together. It should help:

- Teachers who already have children with ‘special needs’ in their classes.
- Teachers who have limited experience of such children but who want to learn more.

Children Differ

“No two children are the same”. How often have you said that? Take any class of children in your school. They may be the same age but are they all alike? No! How do they differ from one another?

Some are tall; others are small. Some are shy; others are forward. Some learn quickly; others are slow.

Can you think of any other ways children differ from one another?
Understanding and Responding to Children’s Needs in Inclusive Classrooms

You might have written: some like sports; others don’t; some are good singers; others are not; some read well others don’t; some are naughty, others are not. The list can go on and on. As we said at the beginning:

No two children are alike

But there are other differences that you may not have mentioned.

UNESCO Teacher Education Resource Pack:
Special Needs in the Classroom was developed to assist countries and practitioners to adopt more inclusive strategies for responding to children’s special learning needs in regular schools and to support regular teacher education.
The main elements of the Resource Pack, consist of the following: study materials (an extensive range of readings, stimulus sheets and classroom activities); a course leader’s guide with detailed guidance on how to organize course and facilitate sessions based on the study materials; and two demonstration videos.
The Pack introduces new thinking in special needs education and looks at disabilities and learning difficulties from the point of view of interaction between the learner and the environment, discarding the medical concept of disabilities and learning difficulties. It promotes participatory approaches to learning and teaching, encouraging learners and teachers to work collaboratively, and invites schools to open their doors to community participation. The materials are used flexibly and can be modified to suit local training contexts at the pre-service and in-service level, as well as in school-based training.
The UNESCO Teacher Education Resource Pack Special Needs in the Classroom has been used in about 80 countries and been translated into more than 20 languages.

Impairments
Some children are born with impairments such as eyes that do not see well; arms and legs that are deformed, or a brain that is not developing in a typical way. Some children can be left with impairments after childhood illnesses like measles and cerebral malaria or from accidents such as burns and bad falls. Often these children are called ‘disabled’ or ‘handicapped’.

Deprivation
Some children’s growth and development is impaired because their environment causes them harm or does not support their well being. They may not have enough food or a good diet; they may live in poor housing and are prone to illnesses; they may be beaten; their parents may have separated; they are refugees or survivors of war. Sometimes they live on the streets. They may abuse drugs.
Overview of the Guide

In many countries, these children do not come to school. Various reasons are given for this.

- Families do not know of their child’s right to education or they chose to spend their scarce money on their other children.
- The school cannot cope with children who have additional needs and they are not allowed to enrol.
- The children come to school but soon dropout
- They attend special schools instead.

Around the world, more children from deprived backgrounds or with disabilities are attending their local pre-schools, primary or secondary schools. Indeed, most countries have laws which state that ALL children have to be educated.

- All children can learn but if they do not go to school their chances to learn are much reduced.
- All children have the right to learn with their peers in local schools.
- Many children encounter problems at some time in their lives. Some problems quickly pass but others require ongoing help.
- More special schools are not the solution. They are often at a distance from the family home and separate the children from their peers.

Have you children like these in your class or school?

No we don’t have these children in our school

Are there other reasons you can think of?

Yes we do have these children in our school
The main reason for promoting the attendance in ordinary schools of children with disabilities or from deprived backgrounds is to increase their opportunities to learn through interaction with others and to promote their participation in the life of the community. Often these children are excluded from society. They might be hidden away at home if they look different because of fear and superstition. Or poverty forces families to live in city slums with few amenities. Often their needs are not recognised and they are thought to have little to contribute to their community. But this exclusion reduces children’s opportunities to learn, grow and develop. They are disadvantaged twice over! Attending local school is the main way of ensuring that all children are included in society.

Children’s learning does not just take place in schools. They learn from their families, through contact with peers and friends, and through participation in all the diverse activities that occur in communities. But attending school helps to promote these other forms of learning as well.

Teachers have a particular responsibility for ensuring that all children participate fully in society and that they have equality of opportunity in education.

*Through Education for All, it should be possible to enable all human beings – including the disabled – to develop their full potential, to contribute to society and, above all, to be enriched by their difference and not devalued. In our world constituted of differences of all kinds, it is not the disabled but society at large that needs special education in order to become a genuine society for all.*

_Federico Mayor_, Former Director-General of UNESCO
Help for Teachers

A teacher’s job is not easy. You may have big classes of 40 and more pupils – all of them individuals! Having children with disabilities or from disadvantaged backgrounds in your class often means more work but it need not be so. You can manage differences among the children if:

- You can recognise children’s strengths and weaknesses and plan your lessons accordingly;
- You know how children’s learning can be affected by disabilities and deprivation and you use teaching strategies for overcoming these difficulties;
- You have confidence in your own abilities as a teacher to plan lessons for individuals and adapt the curriculum to suit the needs of all children;
- You get help and support from colleagues, parents and other professionals, such as community and health workers.
- You believe that all children have the right to education and that all can learn.

This Guide is designed to help you do all these.

Aims of the Guide

The Guide has four main aims:

1. To provide teachers with key facts about various impairments and deprivations and how to overcome the most common learning difficulties that result from them.
2. To inform teachers what they can reasonably do to adapt the classroom and school environment to overcome the barriers to learning faced by children with impairments.
3. To describe strategies teachers can use to respond to the diversity of children in their classrooms and show some ideas how the curriculum can be adapted to individual needs.
4. To encourage teachers to work with families and with other personnel in health and social services and in the community.

Overview of the Guide
Here some the views of teachers from ordinary schools with experience of teaching children with extra needs.

I took inclusion as a challenge for improving my own ways of teaching.

**Hungary**

We want our children to know that it is OK to be different. After all we are preparing them for life and society.

**South Africa**

Integration is socially beneficial to the whole school including the staff. It fosters an atmosphere of teamwork amongst the students and ideally between staff.

**Norway**

When students observe that their teachers are accepting and supportive of those who could be termed ‘different’, they too become more accepting.

**Jordan**

Teachers in rural areas increased their status within local communities because in many cases, they were providing the only services available to children with disabilities.

**India**

A lot of children are having their needs met who before would have just been pushed along or ignored. Teachers are addressing the whole situation differently by working together.

**Canada**

Although the focus is on children with extra needs; you will discover that most of the suggestions are about good teaching and they are effective with ALL children.
The Guide is arranged into four Units. These are:

Unit 1: Every Child is an Individual
This Unit covers: Barriers to learning arising from bodily impairments and disabilities; childhood illnesses; social disadvantage; children's rights; teacher's attitudes to disability; examples from different countries.

Unit 2: Assessing Needs
In this Unit we deal with physical, visual, hearing and intellectual impairments. We describe the warning signs that children may have an impairment; outline possible causes and describe the actions teachers can take to overcome learning difficulties. A framework for adapting the curriculum is outlined.

Unit 3: Responding to Diversity
Unit 3 outlines nine golden rules to assist teachers to deal with a class of children who have diverse needs. Practical tips and suggestions are given for drawing up individual education plans, preparing lessons, providing one-to-one help for pupils and managing behaviour. The issue of examinations and the use of special classes are discussed.

Unit 4: Working Together
The final Unit reviews who is available to help. It describes how teachers can work with parents, health professionals, community workers and disabled persons' organisations to the benefit of their pupils. Examples are given of this happening from around the world.

The guide draws on the experiences of teachers mainly in preschool and primary education but the guide should prove helpful to secondary teachers, as well.

The Units are presented as self-study, 'open learning' materials. However, the materials are also intended to be used with
groups of teachers, for example within workshops or as part of a training course. Hence suggestions for group learning activities are also included. You have already seen examples of these on page 7 and 9.

- Topics are suggested for individual reflection, discussion, problem-solving so as to encourage active learning from the readers.
- Each Unit begins with a listing of learning outcomes which teachers should be able to demonstrate after studying the Unit.
- Each Unit contains examples of case studies and further details of particular topics.

**Key Messages**

*The main messages of the Guide are simply stated:*

- The extra needs of children with disabilities or various disadvantages can usually be met in ordinary classrooms with means that are available to teachers in every country of the world.

- All pupils gain when teachers adapt the curricula and their teaching styles to suit the range of diversity that is found among children in any class. Usually these adaptations require little extra equipment but lots of creativity.

- It is important for teachers to forge partnerships with other professional workers where they are available so that they can be supported in their efforts.

- Likewise, close links need to be forged among schools in a district and with other groups in the community so that children’s needs are addressed out of school as well as within it.
The Guide has been designed for self-study. In each Unit we ask you to reflect on key questions or to undertake some activities. *Please do not skip these.* They are designed to assist your learning. However teachers will benefit more if:

- A group of teachers study the guide together so that they can share ideas and concerns with one another. This could be a group of teachers within the one school or drawn from neighbouring schools who have children with special needs in their classes. Or it could be a group of students taking initial or in-service teacher training courses.

*Can you recruit some other teachers and agree to meet regularly to study together?*

- They have a more experienced colleague to guide and advise them. This could be a resource teacher within your school; a teacher from a special school or a lecturer in a teacher training college.

*Do you know of someone whom you could ask? Your head teacher might be able to advise.*

### Further Information

The Guide does not have all the answers. However there is a growing range of booklets, books, training resources, and video programmes that support developing more inclusive schools. These are listed in the final section.

UNESCO has also produced a series of *Guides for Special Education* (see box). We will refer to them throughout the guide. Single copies are available free-of-charge from:

**UNESCO, 7, place de Fontenoy, 75352 Paris 07-SP, France.**

Some of them can be downloaded through the Internet

[http://www.unesco.org/education/educprog/sne](http://www.unesco.org/education/educprog/sne)

### UNESCO Guides for Special Education

- Education of Deaf Children and Young People
- Teaching Visually Impaired Pupils in the Ordinary Classroom
- Children with Severe Cerebral Palsy: An Educational Guide
- Guide to Community Based Rehabilitation Services
- Children and Young People with Specific Learning Disabilities
- Education of Children and Young People with Autism
### Key Terms

You will come across new terms as you read the Guide. The common ones are explained below. You can refer back to this section as you read the Units.

<table>
<thead>
<tr>
<th><strong>Assistive aids and devices</strong></th>
<th>These aim to reduce the disabilities, which come from impairments. Hearing aids and magnifiers are obvious examples but it can also include special chairs to help children sit at tables; trolleys to help them move around or special frames to children stand. There are also aids to communication such as picture boards and symbol charts.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Based Rehabilitation</strong></td>
<td>This term covers services provided to disabled persons and their families in their own community or home rather than in centres, hospitals and institutions. Specially trained workers or volunteers may visit the family home or meet the children and families in local centres to give advice and support.</td>
</tr>
<tr>
<td><strong>Curriculum</strong></td>
<td>We take this to mean all the organised experiences that schools provide to help children learn and develop. It includes the subjects taught as well as the teaching they receive; the school environment and other activities that take place outside of the classroom.</td>
</tr>
<tr>
<td><strong>Diversity</strong></td>
<td>This term means the variations and differences found among any group of children or adults.</td>
</tr>
<tr>
<td><strong>Inclusion</strong></td>
<td>Children who are perceived ‘different’ because of their impairment, ethnic background, language, poverty, etc. are often excluded from or marginalised in society and local communities. Their inclusion means changing the attitudes and practices of individuals, organisations and associations so that they can fully and equally participate in and contribute to the life of their community and culture. An inclusive society is one in which difference is respected and valued, and where discrimination and prejudice is actively combated in policies and practices.</td>
</tr>
<tr>
<td><strong>Inclusive education</strong></td>
<td>This refers to schools, centres of learning and educational systems that are open to ALL children. For this to happen, teachers, schools and systems may need to change so that they can better accommodate the diversity of needs that pupils have and that they are included in all aspects of school-life. It also means a process of indentifying any barriers within and around the school that hinder learning, and reducing or removing these barriers.</td>
</tr>
<tr>
<td><strong>Integration</strong></td>
<td>Used mainly when children with disabilities attend ordinary schools that have made few if any changes to accommodate the pupil. Rather the pupil is expected to adapt to the present arrangements.</td>
</tr>
<tr>
<td>-----------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Open learning</strong></td>
<td>Materials that are available to everyone interested in the topic. There are no conditions laid down for who can and cannot study the materials.</td>
</tr>
<tr>
<td><strong>Ordinary schools</strong></td>
<td>These include pre-school, primary and secondary schools. As a group they are also referred to as mainstream or regular schools to distinguish them from special schools (see below).</td>
</tr>
<tr>
<td><strong>Referral</strong></td>
<td>When a person such as a teacher sends a pupil to a specialist worker such as a doctor, this is known as a referral. Referrals are usually done by letter with brief details of the pupil and the concerns you have about the pupil.</td>
</tr>
<tr>
<td><strong>Resource teacher</strong></td>
<td>A member of staff with experience or training who is available to advise and assist other teachers.</td>
</tr>
<tr>
<td><strong>School culture</strong></td>
<td>The traditions, beliefs and working practices of a school are covered by this term. Other terms include school ethos or the values of the school.</td>
</tr>
<tr>
<td><strong>Self-study</strong></td>
<td>The training materials are produced for readers to study on their own. It is not just a matter of reading. The reader is also expected to complete activities. This could be thinking about an issue or carrying out an activity with children in class.</td>
</tr>
<tr>
<td><strong>Special needs</strong></td>
<td>This is a general and rather controversial term for children who need some form of extra help and assistance. It is not possible to give a precise definition as their needs can vary so much. Some examples of special needs are given on p. 9 and in Unit 1.</td>
</tr>
<tr>
<td><strong>Special schools</strong></td>
<td>These schools are usually for children who have a particular impairment or disability. For example, in many countries there are schools solely for deaf children; those with visual impairments or those with intellectual disability.</td>
</tr>
<tr>
<td><strong>Special units/special classes</strong></td>
<td>An ordinary school may set aside a number of classrooms especially for children with special needs. These pupils may receive some or all of their teaching in the Unit.</td>
</tr>
</tbody>
</table>
Special teachers

We use this term to refer to teachers who work in special schools or in ordinary schools with particular responsibilities for children with ‘special needs’. These teachers usually have obtained some extra training.

Specialist

We are using this term to mean people who have a particular expertise in dealing with childhood illnesses and disabilities. This includes doctors but also therapists, psychologists and social workers.

Teaching strategies

Actions that teachers can take when presenting lessons or interacting with children to assist their learning.

We hope you find the Guide useful and informative.

Happy reading!
After working through this Unit, you will know:

1. Barriers to children's learning that come from impairments and deprivation.
2. Ways of reducing learning difficulties that children may experience if they have disabilities.
3. Common deprivations that children experience and how they can be overcome through nutritious food, healthy environments, love and attention.
4. The rights to social inclusion and to education as expressed in various international declarations.
5. The implications for teachers in their everyday practice in developing more inclusive schooling.

Barriers to Learning

In school, children have to learn many different things. Some children seem to learn quickly; others are slower. In certain subjects, a child may do better than others. For example, some pupils can be good at reading but poorer at maths. Often we do not know why this happens. Various explanations are given. For example:
There may be some truth in these three explanations. But there are others you need to consider.

Simply this: they suggest actions which might to be taken to overcome the child’s difficulties. For instance, encouraging the parents to help children who are slow at learning with their homework. Or if you suspect a child may have problems with hearing, then make sure she sits at the front of the class.

This way of looking at problems is more helpful for children, families and teachers. Why? It tells us what needs to be done to help the children to overcome the barriers to learning.

We can group children’s difficulties into two broad types. Those which arise from bodily impairments and those which come from deprivation. Remember, some children may be disadvantaged because of combination of disadvantages.

In addition, any child can experience barriers to learning during a period of time. These temporary difficulties may occur because, for example, the child is worried about problems at home; she has not slept properly because her sister or brother is ill and crying all the night; she has been working a lot in the fields and is too tired to concentrate on learning, etc. Although these difficulties will probably be overcome as time goes by, it is important that the teacher is sensitive and supportive, and helps the child to catch up whatever she has missed during this period.
Children who have physical, sensory or intellectual impairments can experience many difficulties in learning and participating in community life.

For example, a child may have lost a limb as the result of accident; have wasted legs following polio or been born with deformed limbs because of cerebral palsy (see Unit 3). Often they are called ‘disabled’ in that they are unable to walk or to climb stairs. But more importantly this disability often holds the child back in various ways. As the child cannot move around the house or neighbourhood as other children do, then ...

- his opportunities to join in community life are also fewer – he cannot go as easily to market or family gatherings.
- she may be ashamed of her body; have lack of confidence and try to avoid playing with other children.

Can you think of any other consequences for children with physical disabilities?

(Here’s a clue: imagine how your life would be different if you could no longer walk!)

- 

- 

- 

As you read back over the list of consequences; you will see that it is not the impairment that should concern teachers or how it was caused, but rather it is reducing the consequences that the impairment brings to the child’s life and the barriers that it presents to children’s learning.

Some people think that the solution to all these problems is to remove the impairment so that the child can walk again. Medical cures are often sought.
“Perhaps the doctors could operate on their legs” or “special exercises could be prescribed to make their legs work normally”. These can certainly help with some people but what if they don’t work or if these options are not available to children and families where you live. Do we just give up? Not at all.

There are plenty of things that can be done to reduce the negative consequences even though we cannot cure the impairment. Here are some ideas – perhaps you will be able to add others.

- We can teach the person to walk using crutches or sticks.
- We can get the person a wheelchair.
- We can make sure that there are no steps up to buildings.
- We adapt the toilet so that the person can move from a wheelchair on to it.
- We make sure that his brothers and sisters play with the child.

This way of thinking places a responsibility on educators and the community. If we fail to do any of the things listed then the children will be more disabled. Hence it is not the impairment that holds back the person but the way in which society treats the person!

That is why some people prefer to be called ‘disabled persons’ because they feel that society, and the environment in which they live, has disabled them. Throughout the world this social view of disability is becoming more accepted.

All children learn through their interactions with other people – parents, siblings and peers – and through the experiences gained in the various environments in their lives – home, neighbourhood and school.

This is just as true for children with impairments. But this is often forgotten as these children were seen as ‘different’. Indeed their lack of learning or slow development was put down to their impairment rather than to the restrictions they experienced in interacting with others and to participating in different environments.
Many of the disabling effects of impairments can be reduced if children have the opportunity:

- to interact with peers and adults in their community
- to experience a range of environments which minimise the impact of their impairment, such as buildings that have no steps
- to be taught by parents and teachers who help them to learn new skills.

**Hence the importance of making education available to all children.**

**Medical View of Disability**

Sometimes the social view of disability is presented as an alternative to the ‘medical view’ of disability. This seeks to identify the cause of the disability through tests and then tries to fix the impairment through the use of surgery, drugs or therapy. Both viewpoints are valid and both are needed. But too often only the medical view is considered and when it fails or is not available, people give up.

The biggest danger with the medical view is that the ‘problem’ is seen solely as being with the child. That’s why children with impairments were excluded from ordinary schools and sent to special schools for children with the same disability – if they were available. The belief was that they required special ‘treatments’ because of their impairments.

But as we have explained, disabilities result not from impairments but from a lack of opportunities, participation and education. There is a great deal that parents and teachers can do to reduce the disabilities that come from impairments.

**Reducing Disabilities**

Children can have different impairments – problems in seeing and hearing; physical impairments or conditions such as epilepsy (fits) and intellectual impairments which affect their thinking.

Medical science has found the causes of many of the impairments. Some result from genetic damage when the baby is con-
ceived; some come from infections while the baby is in the womb; and a few may happen as the child is being born. Childhood illnesses and accidents can also result in bodily impairments. We will explain this in more detail in Unit 3.

However we want you to think about the *disabilities* which can result from impairments such as hearing loss, vision problems, epilepsy, intellectual disability and so on. You should do this in the same way as was done above for the physical impairment.

1. Select an impairment that you are familiar with. Perhaps someone in your family or among friends and neighbours has it, or you may have taught a child with the impairment.

2. Note down the disabilities you have noticed that come from having that impairment; that is the things that the person may be unable to do because of the impairment.

3. Then list some ideas that parents, teachers and others in the community could do to lessen the disabling effects of that impairment.

4. Do this for two different impairments.

5. Then answer the two questions at the bottom of the page.

**Record your answers here**

<table>
<thead>
<tr>
<th>Impairment:</th>
<th>Impairment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disabilities:</td>
<td>Disabilities:</td>
</tr>
<tr>
<td>■</td>
<td>■</td>
</tr>
<tr>
<td>■</td>
<td>■</td>
</tr>
<tr>
<td>■</td>
<td>■</td>
</tr>
</tbody>
</table>

The disabilities can be reduced by:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>■</td>
<td>■</td>
</tr>
<tr>
<td>■</td>
<td>■</td>
</tr>
<tr>
<td>■</td>
<td>■</td>
</tr>
</tbody>
</table>

Are the list of disabilities the same?

Are the steps to reducing the disabilities the same?

**Parents and teachers are not doctors – they cannot cure impairments. But they can reduce disabilities!**
All children have basic needs – for love and affection, security, nutritious food, healthy environment and shelter. If any of these are missing or in short supply, then the child’s growth and development may be held back. Put simply, their ability to learn is reduced. Hence teachers and schools must try to ensure that their pupils are not held back because their basic needs are not being met.

The basic needs of many children with disabilities are not met. They may not be given enough food because they do not demand it; their poor health is not attended to as it is presumed to be associated with their impairment or they are not shown the same love and affection because they are different.

How do we remove deprivations in the child’s environment? The answers are obvious – good food, secure shelter, safe water, good health care and loving carers. Schools alone cannot solve these problems but neither can they leave them to other people to solve. In this section we describe what can teachers do to ensure good health in their pupils.

- Malnutrition and infection hold back the physical and mental development of millions of children.
- Some parents are unable to feed their children properly because of drought, famine, war and poverty. Only political and economic action, often involving land reform and investment in food production by and for the poor, can solve this problem.
- But the great majority of parents in developing countries either grow enough or earn enough to provide an adequate diet for their young children if they know about the needs of their young child and if they are supported by their communities and governments in putting that knowledge into practice.

**Facts for Life, UNICEF**
Germs that get into the child’s mouth with food and water cause more than half of all illnesses and deaths among young children. In communities without latrines, without safe drinking water and without safe refuse disposal, it is very difficult for families to prevent the spread of germs. It is therefore vital for the government to support communities by providing – as a minimum – the materials and technical advice needed to construct latrines and improve drinking water supplies. Information campaigns are needed and schools can play a key role in this.

Children need to be immunised against diseases that cause disabilities, such as measles, polio and whooping cough. Protective actions need to be taken wherever malaria is common. The dangers to health from drugs, sexually transmitted diseases and HIV/AIDS need to be communicated to families and young people. Schools should cooperate with health education campaigns running in their locality.

In addition to physical needs, the child also has two other needs that are vital to his or her mental and emotional development;

1. the need to feel safe and secure and
2. the need for interaction and stimulation.

What could schools do to support families in providing nutritious foods for their child?

Who could schools work with on this?

- Inform families about nutritious food.
- Find out if there are programmes that provide lunches for schools. Can you add others?

What could schools do to protect children’s health?

Who could schools work with on this?

- Schools can provide latrines with hand washing facilities. Can you add others?

Schools can provide latrines with hand washing facilities. Can you add others?

Inform families about nutritious food.

Find out if there are programmes that provide lunches for schools. Can you add others?

In addition to physical needs, the child also has two other needs that are vital to his or her mental and emotional development;

1. the need to feel safe and secure and
2. the need for interaction and stimulation.
In affluent countries children’s emotional needs may not be responded to even though their physical needs are well met. If the children’s emotional needs are not met, their capacity to learn will be impaired.

1. **The need to feel safe and secure**

All children need a close, sensitive and loving relationship with the adult or adults who care for them. It is the basis for the development of the child’s sense of security, confidence and the ability to cope well with other people and the world at large.

Children gain a feeling of security when carers are consistent in their actions and words. They also learn what is expected in human relationships, and they develop a clear sense of what is right and wrong.

Appropriate rules and limitations should be clearly communicated and explained to the child. Carers need to be consistent in their expectations of how the child should behave.

Anger and violence in the child’s family can be damaging to the child’s inner development. However, it is also important that the child learns to express anger and frustration in an appropriate manner.

2. **The need for interaction and stimulation**

The mind of a child, as well as the body, needs help to grow. The three most important ‘foods’ for the growth of the mind are language, play and love.

From his earliest months, a child needs to be bathed in words, cuddled, smiled at, listened to, and encouraged to respond by noise and movement. All children need to interact with other people. They need people to touch, talk to, laugh with, smile at, respond to and get responses from.

Lack of attention makes a child unhappy. A neglected child loses interest in life, can have less appetite, and may fail to grow normally in mind or body.

Children learn by doing. So as the child grows, he or she needs freedom to explore and to play. Play is not pointless. It is one of the most essential parts of growing up. It helps to develop mental, social and physical skills – including talking and walking. It helps children grow in curiosity, competence and confidence. It digs the foundations for schoolwork and for learning the skills necessary in later life.

Play does not always mean solving problems or achieving aims set by adults. The child’s own play alone or with other children is just as important.

Parents and carers need to encourage play by providing materials and ideas. Play materials do not have to be expensive. Empty
boxes or household objects are as good as expensive toys. Imaginative play, for example when children pretend to be adults, is very important to a child’s development.

Children need help to develop creativity. They need to be challenged to find solutions to problems and decide which solutions are best. The child needs to put his or her ideas and decisions into practice and see what happens – in safety.

Singing songs and learning rhymes, drawing pictures and reading stories aloud help the child’s mind grow and prepares the way for learning to read and write.

All children learn by participating in daily routines of the family and household work. Children with special needs are able to contribute, too, if the family creatively finds ways to facilitate it and communicate the social meanings of the daily life.

For healthy growth, all children need praise and recognition for their efforts.

**What could schools do to ensure children’s needs to feel safe and secure and for interaction and stimulation are met?**

**Who could schools work with on this?**

- Teachers should praise children for their efforts. *Can you add others?*

Talking, playing, and showing love are essential for a child’s physical, mental and emotional growth.
Why should we try to reduce the deprivations or Why bother?

Why should we try to reduce the deprivations or disabilities that some children experience? In this section, we will give some answers to this question. Note we use the phrase ‘try to reduce’. We realise that it may not be possible to bring about a reduction in some children’s disabilities or deprivations.

Perhaps the problems are too great – the impairments that the child has are so severe or their poverty is so grim.

Perhaps it is difficult to find the time or resources needed for the job.

Perhaps there are no other people willing to help.

There are many reasons why we may fail. But the possibility of failure cannot be a reason for not trying! If anything, it is all the more reason to try.

Right to Participation

In all countries of the world, people with disabilities have often been treated as ‘less than human’ and of little value to society. Today that attitude is being replaced with a respect for these persons.

The United Nations Declaration on the Rights of Disabled Persons (1975) states:

*Disabled persons have the inherent right to respect for their human dignity. Disabled persons whatever the origin, nature and seriousness of their handicaps and disabilities have the same fundamental rights as their fellow-citizens of the same age, which implies first and foremost the right to enjoy a decent life, as normal and as full as possible.* (Article 3).

Likewise, the Governments of the world have agreed that the same rights apply to all children irrespective of their impairments or environments. Hence the Convention on the Rights of the Child (1989) states that:

*Recognising the special needs of a disabled child, assistance .. shall be provided to ensure that the disabled child has effective access to and receives education .. conducive to the child achieving the fullest possible social integration and individual development (Article 23).*

Both these declarations make clear how important it is for all
citizens to participate fully in their community and for children especially to have the opportunity to grow into their culture, absorb its values and beliefs and contribute to its development. This is essential if children are to develop a sense of identity and a sense of belonging. The family, schools and the community activities are society’s primary means of doing this. But this can only happen if they are socially included as active participants in their family and community.

These same principles apply to other marginalised groups in societies; such as travelling peoples, ethnic minorities and refugees. The well-being of their children is threatened if they are denied opportunities to socially integrate in their communities and wider society.

Right to Education


States should recognise the principle of equal primary, secondary and tertiary educational opportunities for their 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 system.

UNESCO (the United Nations Educational, Scientific and Cultural Organisation) issued the ‘Salamanca Statement and Framework for Action’, adopted at the World Conference on Special Needs Education in 1994. This spelt out the implications of these statements of rights. It states:

- Every child has a fundamental right to education and must be given the opportunity to achieve and maintain an acceptable level of learning.
- Educational systems should be designed and educational programmes implemented to take into account the wide diversity of characteristics and needs. Those with special educational needs must have access to regular school.
- 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 ordinary schools provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system.

The slogan *Education for All* means just that; all children including those who have impairments or come from marginalised groups within society.

In the past, separate schools for ‘different’ children was the favoured solution in many countries. Experience has taught us that this approach can mean that many children in less affluent countries and areas get no education at all! Among the reasons are:

- Special schools are a high cost option which many poorer countries cannot afford.
- They tend to be located in urban centres and serve more affluent families.
- The expertise of specialist teachers is not shared with regular teachers.

Equally the value of special schools is questioned in more affluent countries for these and other reasons.

- Inclusive schools provide children with more educational and social opportunities.
- Parents increasingly opt to send their children to ordinary schools; some parents see special schools as a form of discrimination.
- Disabled activists have been critical of the education they received in special schools.

However, the Salamanca Statement and Framework for Action referred to above does recognise that certain children may be best taught in special classes or schools because of their particular needs in communication; namely those who are deaf or, deaf-blind. However, there are also examples from many countries, where deaf children are also successfully included in ordinary schools.

**Implications for Teachers**

What do these statements of rights mean for teachers and schools? We can summarise the position as follows:

- All children have a right to education.
- This should happen as far as possible in ordinary schools – pre-primary, primary and secondary.
Certain children because of their impairments or through deprivation may require extra assistance.

Teachers and schools need to adapt their ways of working to meet the children's needs.

This will result in an improved and more cost-effective education system as well as benefiting all children and their families.

Are there other implications you can think of for teachers and schools?

This is a new way of thinking. Many countries have invested in special schools for children with disabilities or other special needs. The move towards inclusive education means that their efforts are being re-directed to supporting all children in ordinary schools and to finding new ways of advising and guiding the teachers. In sum,

Inclusive Education

- acknowledges that all children can learn and that all need some form of support in learning;
- aims to uncover and minimise barriers to learning;
- is broader than formal schooling and includes the home, the community and other opportunities for education outside of schools;
- is about changing attitudes, behaviours, teaching methods, curricula and environments to meet the needs of all children;
- is a dynamic process which is constantly evolving according to local cultures and contexts and is part of the wider strategy to promote an inclusive society.

Some questions to ponder on.

Is there a law in your country that defines the child's right to education?

Do all children in your country have equal access to education?

Does your community value education for all children?
Every Child is an Individual

Statements of rights and government policies may set aims but it is individual teachers who can make inclusive education a success or a failure.

They too can hold negative attitudes just as others do in society. Often their fears and prejudices are based on a lack of contact with people who are disabled or who have disadvantaged backgrounds. When they meet and get to know these people their attitudes can change. Read the views of teachers in Lesotho, a country in southern Africa, and in Guyana, in South America.

Over 140 teachers in Lesotho and Guyana with experience of having a child with disabilities in their class were asked to name the benefits, if any there had been.

Around one in five teachers stated no benefit. Two in five, noted that they had personally gained as teachers in that they had acquired techniques for teaching these children; they were better at assessing their abilities and they had become more patient. One in five mentioned the opportunity it gave children with disabilities to interact with their peers; one in ten noted that other pupils had gained a better understanding of what it means to be disabled and one in ten noted improvements and gains for the child with the disability. One teacher commented:

_The disabled have the right to learn like any other children and they have to be taught at ordinary schools. They don’t have to be isolated so that they can socialise with other normal pupils and they can feel that they are human beings and they can accept themselves._

As you have read, four out of five teachers report benefits to having children with disabilities in their school. Similar results have been found in other countries.

But teachers still had their problems! Among the most commonly mentioned problems by these teachers were the following. Tick those which you have encountered and add any others to the list.

- Pupil not coping with reading, writing, number work
- Pupils are slower to learn and understand
- Behaviour disrupts class
- Communicating with the pupil; not following instructions
- Pupils needs more time and attention from the teacher
- Class/school environment not suitable
- Pupil has poor attention/concentration
- Toileting
- Teacher not equipped to deal with the pupil

The teachers might have tried to solve these problems by excluding these children from their class or school. But they did not do so! The teachers knew that it would mean the pupils are denied
their right to education and they accepted the challenge of developing their skills at supporting all children to learn.

Units 2, 3 and 4 in this guide are designed to give teachers some advice and guidance with the common challenges they may encounter when children with 'special needs' attend their school. Some of these things you may be doing already. They are good practice for all children. But there are other suggestions that will be new to you. You can use them to improve your teaching.

The best learning comes from trying to put these ideas into practice. You are the person who know best the children and the lessons you are teaching. We can only offer you general guidelines. It is up to you to adapt them for your class. But ...

► If you are successful – you will have discovered teaching approaches that you will be able to use again.
► If it does not work, do not give up too soon. Try to find the reason so that you can change the approach and see if that makes a difference.

\textbf{When teachers take on the challenge of making their classrooms and schools more inclusive they become more skilful and better practitioners. This means that all pupils benefit, not just those with ‘special needs’.}

\textbf{Examples}

\textit{Gyermek\textsc{a} Haza School} in Hungary takes pupils from six to twelve years of age from the local district including those with disabilities. Vince, eleven years old has a severe hearing impairment but with hearing aids he is able to communicate orally.

His parents did not want him to go to a separate special school because it was out of the neighbourhood and far from his friends. They negotiated Vince’s placement in an ordinary school with the Local Education Authority and the school principal. Vince is very interested in the natural world and enjoys arts and crafts. His best friends are Ani and Mate. They play a lot in their free time. “We tell good jokes and talk about interesting things. When I am an adult I want to be an architect”, says Vince.

The teachers see their school as a welcoming place for all children. They believe each child should fully develop their abilities; be able to learn independently; have access to a broad scale of differ-
Every Child is an Individual

The school has developed a local curriculum and published their own curriculum materials in mathematics and Hungarian. The books present graded tasks which allow students to work at their own level and pace, but with similar content. These materials have helped all students to learn better.

Suzete Simbine is a teacher educator at the Pedagogical University, Mozambique.

Suzete had polio during her first years of schooling in the 1980s. This is her story.

“The teachers told my father I could not go on and study since I could not walk any more. My father insisted they give me a chance. He carried me to the school every day. Did I have special (educational) needs? No, regarding reading, writing, maths and music I did not have any special needs. I was one of the brightest pupils, I wanted to study hard and be even better than the others in order to prove I could do it. And to please my father who had made the great effort.

When we had physical education I was excluded and only watched. Now, as adult and qualified teacher educator I would know better and demand to be included in my own way. After training teachers can find ways for children to participate in physical education activities. Most important, however, is that teachers discuss and experiment with children in order to find how they can best play an active role in all school activities. There is always some alternative ways to participate.”
In nearly all schools there are children who may be experiencing deprivation; others may have a disability.

- This Unit challenges teachers in ordinary schools to rethink what they are doing to help overcome the barriers to learning that any child can experience.

- Governments can say that all children have the right to education but it is teachers who have to make this a reality.

- Teachers may need to change their beliefs about themselves – that they cannot cope with children with disabilities and other challenges in their school. This guide is designed to help them to do this.

- Most of challenges experienced by children can be met in ordinary classrooms and by ordinary teachers.

- Teachers cannot do it alone. They need the support and advice of others. Team work is the answer!
Read over the answers you have given before. Then try to answer this question.

What would help you as a teacher to respond better to the needs of all children?
Assessing Needs

Unit 2: Overview

After working through this Unit, you will know

- The warning signs that indicate a child could have a hearing problem, difficulties in seeing or an intellectual disability.
- The common causes of these impairments.
- The adaptations which teachers should make to their classrooms and teaching strategies to meet these children’s needs. Most of the suggestions help all the children in the class to learn better.
- The professionals to whom referrals could be made if available.
- A framework for adapting the curriculum.
- Thirteen other illnesses or conditions that can affect children’s learning.

The Unit is divided into three parts.

Content

Part 1: Identification of Needs In this section, we look at the four most common impairments – hearing impairments, visual impairments, intellectual disability and cerebral palsy. For each disability, we follow the same pattern.

- We describe the warning signs;
- We briefly note possible causes
- We describe the actions, which teachers can take.

These actions are grouped into
- The adaptations that teachers can make to their classrooms;
The teaching strategies that might help in supporting the child's learning. (We describe these in more detail in Unit 3); The specialists who may be available to provide teachers with advice and help.

We also give examples of pupils who have been successfully included in ordinary classes.

**Part 2: Adapting the Curriculum** The second part focuses on the school curriculum and how teachers can adapt it to better suit to pupils. We provide a framework for teachers to use in deciding the changes they need to make.

**Part 3: Common Illnesses and Impairments** The final section provides a brief description of other conditions that child can have.
With some children, their impairments are obvious. If they are thin and underweight, they could be malnourished. Likewise you will quickly spot any physical deformity or an inability to control their hand and arm movements.

In these instances, the action needed to help the child at school is clear. For example:

You may have noted the need to use classrooms on ground level for these children; installing ramps if there are steps into the classroom (this could be done with assistance from the local community); moving desks around to accommodate the chair and improving access to toilets. Of course all these things make it easier for everyone to move around the school – including teachers who may have difficulties walking! Children with physical disabilities do not usually have any specific learning needs – they just need to have and access to schools and classrooms, although sometimes they may need some assistive devices to help them to write and to read.

However some impairments are not so easily seen. It is presumed the child has no problem and hence teachers and schools may not adapt their ways of working. In this part of the Unit we focus on three common impairments that families and teachers can miss – children with difficulties in hearing; difficulties in seeing and problems in learning. Along with physical disabilities, these are the impairments that teachers in ordinary schools are most likely to come across.

Some children have more than one impairment.

Most of these impairments should be identified when the child first comes to school. Hence teachers in pre-primary and primary schools need to read Part 1 especially carefully. Please consult the family, health and community rehabilitation workers. Maybe they have information that will help you.

It is important for teachers to identify the child’s abilities as well as their disabilities.
Teachers should share information about the children with impairments especially when they move on from their class. Sometimes the impairments worsen as children grow older and other children can experience problems when they are older. Teachers in secondary schools also need to be alert to these conditions.

And most important of all: late identification and poor teaching in the early years will make the child’s difficulties more severe.

**Hearing Impairments**

We use the term ‘hearing impaired’ but other terms are ‘hard of hearing’ or ‘deafness’. Often we presume that children can hear when in fact they might have difficulties hearing. Children cannot tell us they have problems in hearing because they may not know what it is like to hear properly! Mild hearing losses are much more common in school populations than profound hearing loss (deafness). Remember too, that some hearing problems come and go. If a child is prone to head colds or recurrent ear infections, their hearing can also be affected.

Our focus here is mainly on those born deaf or who acquire it in the early years of life rather than those who lose their hearing (become deafened) after they have learnt to talk and to read and write.

We have listed some of the common signs of impaired hearing. However these do not mean that the child has a definite hearing impairment. There may be other reasons for the child’s behaviour that you will need to consider.

You should also discuss your concerns with parents. They can provide further information that may confirm your suspicions or reassure you that the child has no difficulty in hearing.

**Warning Signs**

- Poor attention: If a student does not pay attention in class it is possible that he or she cannot hear what is being said or the sounds the child hears may be distorted. Due to these reasons the child either tunes out what the teacher says or does not make an effort to listen or attend. Very rarely a student may be exceptionally attentive by playing very close attention in an attempt to determine what is being said.

- Poor speech development: Immature, unusual or distorted speech may be due to hearing loss. Or the child talks in a very loud or soft voice.
Difficulty in following instructions: A child who has unusual difficulty in following oral instruction can have a possible hearing impairment.

The child may respond better to tasks assigned when the teacher is relatively close to him and her, or to written tasks rather than ones that require an oral response.

The student may turn or cock head to one side to hear better.

Hearing problems can cause the child to watch what other students are doing before starting his/her work or looking at classmates or teachers for clues.

A child may have difficulty in hearing text read by others or the child may request his peers or teachers to speak louder.

Sometimes the child may give an inappropriate answer to a question asked or fail to answer.

Children with a hearing loss prefer to work in small groups, sit in a relatively quiet area of the classroom or in the front row.

The student may be shy or withdrawn or appear to be stubborn and disobedient as a reaction to his hearing loss.

The student may be reluctant to participate in oral activities, may fail to laugh at jokes or understand humour.

The student may tend to isolate herself/himself from social activities.

The student may interpret facial expressions, body movements and contextual information rather than spoken language and thus sometimes make false conclusions.

The student may complain of frequent earaches, colds, sore throat or recurrent tonsillitis.

The student may have some discharge from the ears.

Are there any children in your class who show any of these signs? Do you need to check?
Some children are born with impaired hearing; others may lose their hearing later on. We have listed the various causes of hearing impairment as this can also alert you to children who may have problems with hearing. The more common causes are:

- Hereditary (hearing impairment occurs in certain families, although the child’s parents may not be hearing impaired. This happens more with boys than girls and is more common in affluent countries.)
- The mother had German measles during early pregnancy
- Lack of iodine in mother’s diet
- Prematurity (baby born early and small)
- Ear infections, especially long-lasting, repeated infections with pus
- Excessive earwax that blocks the ear canal
- Meningitis (an infection of the brain)
- Cerebral malaria and overdoses of medicines used in its treatment

However, in one out of three cases the cause of the hearing impairment is not known.

Classroom Adaptations

- The child should be seated as close as possible to the teachers (no more than three metres away).
- The teachers must make sure to stand or sit facing the pupil. Do not cover your face with a book when reading; or talk when writing on the chalkboard.
- Make sure light does not come from behind you, as your face would be in shadow. Work in good light so that the child can see your face, hands or lips.
- Some pupils benefit from seeing both the teacher and their classmates at the same time. They can learn from seeing other pupils responding to the teacher. So position the child in class accordingly or arrange the desks in such a way that it is possible for children to see each other’s faces.
- Try to minimise classroom noises. Use a room that is in a quieter part of the school.
Teaching Strategies

- If a hearing aid has been prescribed for the child make sure it is worn; that it is switched on and that the batteries are good.
- Speak clearly and loudly but without shouting and exaggerating.
- Use simple words and sentences along with gestures or pictures to help the child understand what you are saying.
- Children with hearing impairments learn more from seeing rather than hearing although teachers should use both. Show them what you expect them to do. Use pictorial material or symbol cards.
- Pair the pupil with a hearing student. The partner can help find the correct page; repeat your instructions and so on.
- Encourage the pupil with hearing impairment to watch and listen to other pupils as they answer your questions. If they cannot see other pupils and hear their responses, you may repeat what they said as you face the pupil with the hearing impairment.
- Check with the pupil that he or she understands what she is expected to do.
- Children with hearing impairments might find group situations more difficult because of all the talking going on at the same time by different people. Teachers can use these times to give face-to-face instruction to a pupil with hearing impairments.
- If the child’s speech is not clear, take time to listen to what the child is trying to tell you. Help him to use the correct words and grammar but praise for their efforts at talking.

Have you tried any of these adaptations or strategies in your teaching? Which ones were successful?
Teaching Strategies for Pupils who are Deaf

With children who are deaf – those with very little hearing – the main means of communication has to be through sign language; lip reading or reading and writing can be used as additional means of communication. All of the above suggestions apply with deaf children but you should also consider the following:

- Teachers need to take classes in learning the sign language that is used by deaf people in their country. Adult deaf persons, who are trained as sign language instructors, are often the best teachers. Contact your national association of the deaf.

- Young children quickly learn to sign even when their teacher or parents are not very good at it. The more you practice signing the better you become.

- Teachers can recap the lesson through signs for their deaf students or alternate spoken and sign language during the lessons.

- It may be possible to arrange for an interpreter/teachers of sign language to come regularly to the school. Deaf adults can be used as volunteers in the class to support the deaf child and facilitate communication between the child, the teacher and the classmates.

- As children’s language skills develop, introduce reading as this offers a most important medium of learning for the child and in communicating with others.

- Try to ensure that the deaf student receives written copies of lessons from you or her peers. Try to offer books and written material as often as possible.

- In many countries, special units have been set up for deaf children in ordinary schools, usually in urban areas. Deaf adults may be employed as teachers and classroom assistants. Here pupils are taught through sign language and they can use it to communicate easily with one another. Equally they have opportunities to socialise with all other pupils and join them for some classes.

Referral

- The child can be referred to a health worker or doctor for an ear examination. She should be able to clear infections and excess wax.

- The child’s hearing can be tested by an audiologist. He will determine precisely the degree and type of hearing loss experi-
Hearing aids may be prescribed. These amplify the sound for the child but they are not suitable for certain types of hearing difficulties. Also they can be expensive to purchase and maintain as they require batteries.

Audiology services are usually provided in hospitals, sometimes in public or private health care clinics and mobile hearing screening clinics. Enquire from your health care professionals.

**Do you know the names of health workers, doctors and audiologists to whom you could refer children?**

**If not, how could you find out?**

Although it is important that the child’s hearing is tested, you can immediately use some of the above advise when you suspect a hearing impairment. You can also find out from the child the difficulties she experiences in hearing, what is said in the classroom and what makes it easier for her to hear.

Deafness. A guide for parents, teachers and community workers provide information about deafness and sign language.

Education of Deaf Children and Young People contains lots of practical advice for teachers. Available from: UNESCO

Services for deaf people in a rural setting: Sign language and Issues and recommendations for teachers

Available from: Initiatives in Deaf Education, Chapel Cottage, 7 King Street, Much Wenlock, Shropshire, England.TF13 6BL
Salma was in a special school for the deaf. She has a severe hearing impairment but uses hearing aids. Her audiologist, who believes in inclusion, told her parents to move her to a mainstream school and recommended the Ahliyyah School For Girls in Amman, Jordan. It is an independent school that includes students with special needs and has an advanced program for students with hearing difficulties. This is the third year for Salma in the school. She is now in grade three. Salma reads and writes very well in Arabic and in English, she also expresses herself in both languages. She loves her school and enjoys the music and ballet classes. Her teachers in grade one and two and her present teachers are all proud of what she has accomplished. Salma has a new friend this year; a newcomer to the school. They visit each other at home and they are enjoying their time together.

Various terms are used to describe differing degrees and types of visual impairment such as low vision, partial sight and blindness. Many children’s problems are easily corrected with glasses once the
Warning Signs

- Physical indicators: There may be red eyes, crusts on lids among the eye lashes, recurring styes or swollen eyelids, watery eyes or discharge, crossed eye, eyes that do not appear straight, pupils of uneven size, eyes that have excessive and drooping eyelids.

- The student rubs eyes often or while doing close visual work.

- The student shuts or covers one eye when he has difficulty seeing with that eye or tilts the head or thrusts the head forward.

- Unusual facial behaviours: A student shows unusual amount of squinting, blinking, frowning, or facial distortion while reading or doing other close work.

- Unable to locate and pick up a small object.

- Light sensitivity or difficulty: A student may show unusual sensitivity to bright light by shutting their eyes or squinting. He may have a difficulty in seeing in dim light or inability to see after dark.

- Difficulty with reading: An unusual difficulty with reading or when working that requires bringing the book or object close to the eyes. But he may do very well in oral or spoken directions and tasks.

- The pupil may have difficulty with written work: like not being able to stay on the line or write within the spaces.

- Difficulty with distance vision may result in the pupil avoiding the playground, or avoiding all gross motor activity. Such a student may prefer reading or other academic activity.

Are there any children in your class who show any of these signs? Do you need to check?
Causes of Visual Impairments

The more common causes are:

- Infectious diseases contracted by the mother during the first few months of pregnancy
- Infectious diseases contracted by the child, e.g. measles or chicken pox
- Maternal or childhood malnutrition. Eating yellow and green fruits and vegetables helps to protect the eyes.
- Eye infections
- Injuries to the eye
- Tumours affecting nerve for sight
- Brain damage
- Xerophtalmia, i.e. nutritional blindness as a result of insufficient Vitamin A in the diet
- River blindness caused by bathing in infected water

Classroom Adaptations

- Find out from the child where is the best place for her to see the chalkboard, for example when seated at the front of the class.
- The light should not reflect on the board and you should ensure that the chalk appears clearly on the board.
- If the child’s eyes are sensitive to the light, move him away from the window. Have him wear a peaked hat to shade his eyes or give him a cardboard screen to use for shade when reading and writing.
- Ensure the child knows her way around the school and the classroom. Teachers and sighted pupils should lead her by walking in front with the visually impaired pupil slightly behind and to one side; holding on to the guide's elbow. Warn them of obstacles such as steps and narrow doorways.

Teaching Strategies

- Use large writing on the chalkboard or visual aids. The use of coloured chalks is recommended. Let the children come close to the board or teaching aids so that they can see more easily.
- Read aloud what is written on the blackboard.
- Prepare teaching aids that children can read more easily such as large print materials. Other children in the class could help prepare these. Or they can be produced by enlarging images
on photocopies or using larger font sizes on computer print-outs. This can also help children who have difficulties in reading.

- Children may have difficulty seeing the lines on writing paper. They can be given paper with thicker lines drawn on it.
- Some children will benefit from using magnifying aids. Two types are available. Ones that enlarge the whole page or line magnifiers, which are a useful aid to reading.
- Encourage the children to use a pointer or their finger when reading. Cover the rest of the page with paper except for the paragraph the child is reading. Use a bookstand to avoid reflection.
- Children with poor vision need to learn through touch as well as through hearing. They should be given a chance to handle objects.
- Pair the pupil with a seeing classmate who can assist her to organise their work. The partner can help find the correct page; repeat your instructions and so on.
- Use verbal praise or touch to give the child encouragement.
- Use the name of the pupils during class discussions so that the child knows who is talking.
- Computers offer particular support to students with vision impairments and blindness. Students can print out a large print copy, read text on the screen using screen enlargement...
software, listen to the text on a voice synthesiser or convert it into Braille.

- Make an abacus available to the child in maths lessons.
- Lessons can be taped using a cassette recorder for later playback at home or as revision. Students who experience difficulties in writing can also provide information on audiotape. Taped versions of books are sometimes available in libraries.

**Teaching Strategies for Blind Children**

Blind children have little or no useful vision; they are only able to make out light and dark. Many of the suggestions above apply to these children too but there are others you also need to consider.

- Blind children should learn Braille. This gives them a means of reading and writing. Perkins Braillers are available across all countries. Braille can be produced directly on a Braille embosser. Also Braille texts can be produced from computer text-file format and printed out using a Braille printer. Details will be available from your national association for the blind. They will help you to find teachers of Braille. Once children can use Braille they can learn alongside sighted children.

Have you tried any of these adaptations or strategies in your teaching? Which ones were successful?
Tactile images can be drawn on Braille paper using a special mat and stylus which produces a relief image that can be felt. Similar images can be produced using locally available materials such as string, sand, sticks and seeds. Teachers can enlist the help of sighted children in producing teaching aids. These aids help other children, too.

Likewise an abacus will help all children in maths lessons.

Blind children need to learn to orientate their bodies and to move confidently. Physical activities and group games will provide good practice. At first children will need to be moved through the activity in order to understand what they are to do. Teachers should insist on proper posture.

Blind children should be encouraged to walk independently around the school using a cane. It should be the same length as the distance from the ground up to halfway between the person’s shoulder and waist. A cane that is too short will force the user to bend over when walking. Ideally they should receive training from specialists. Your national association for the blind should be able to advise. Do not remove obstacles all the time, as children have to be trained to move around them. Expect bumps and falls; do not fuss when they occur.

Daily living skills such as cooking pose particular challenges for blind persons. However children need to acquire these skills in a graded manner, starting with low risk activities before moving on to activities in which there is a risk of burning themselves.

**Referral**

- The child can be referred to a health worker or doctor to clear infections or to have their health checked.

- The child’s vision can be tested by opticians. Glasses may be prescribed and the child should be encouraged to wear them. But teachers may still need to take the actions noted above.

---

**Do you know the names of opticians to whom you could refer children? If not, how could you find out?**
As you have noticed, many of the suggested adjustments and strategies can facilitate learning of all children in the class. By considering how you can reduce the barriers to learning experienced by a blind child, you will improve your teaching for all children.

**Intellectual Disability**

Of all the disabilities this is the most common. Other terms are often used to describe this disability; for example, *developmental disability, mental retardation, mental handicap* or *severe learning difficulties*.

This disability affects all aspects of a child's development. They are slower to develop physically, acquire language, learn to look after themselves and in mastering academic skills.

However they are not mentally ill. That term is used when healthy people develop an illness that affects their moods, emotions and behaviours. With appropriate treatment they can be cured.

With some children their intellectual impairment is obvious at birth, or soon after. But with many others, it will not be identified until the child starts school although the warning signs are often present from a young age.

Some children might have very severe disabilities and may have additional impairments such as epilepsy, vision and hearing problems. They are sometimes referred to as profoundly or multiply disabled children.

However many more children are affected only mildly or moderately – a rough estimate is two in one hundred. With these children there be may no physical reason for their disability.

---

*Education of Visually Impaired Pupils in Ordinary Schools* contains lots of practical advice for teachers. Available from: [UNESCO](https://www.unesco.org)
The signs have been grouped into six areas. Children who show signs in all these areas are more likely to have an intellectual disability. Problems that occur in one area but not in another, may be indicative of a specific learning difficulty related to reading, writing or maths, for example.

Note that the ages are rough guidelines. The best yardstick is the ages which children in that community usually attain these skills. Even so, the guidelines should be used cautiously as there is much variation in children’s development. Some children develop naturally slower than others without having an intellectual disability. Deprivation can cause this kind of slower development. Living in a multi-lingual community can also slow down child’s language development, as she is learning several languages at the same time.

Remember too that children may develop intellectual disability later in life having acquired these milestones. This can be the result of a head injury or severe deprivation.

Talking
- Does not say mama (or equivalent) by 18 months of age
- Cannot name a few familiar objects/people by age 2
- Cannot repeat simple songs/rhythms by age 3
- Is not talking in short sentences by age 4
- Is not understood by people outside family by age 5
- Is talking differently from other children of the same age

Understanding language
- Does not react to his own name by age 1
- Cannot identify parts of face by age 3
- Cannot follow simple stories by age 3
- Cannot answer simple questions by age 4
- Cannot follow instructions in class by age 5
- Seems to have difficulty understanding things you are saying, when compared to other children of the same age

Playing
- Does not enjoy playing simple waving games by age 1
- Does not play with common objects (e.g. spoon and pot) by age 2
- Does not join in games with other children by age 4 (e.g. catch, hide and seek)
- Does not play like other children of the same age

Moving
- Is unable to sit up unsupported by 10 months
- Cannot walk by age 2
Cannot balance on one foot for a short time by age 4
Poor motor co-ordination. Moves very differently from other children of the same age

**Behaviour**
Compared to other children of his/her age:
- the child has short attention span
- the child has poor memory
- the child is hyperactive, aggressive or disruptive
- the child is apathetic and indifferent

**Reading and Writing**
By five years of age or after one year at school, the child
- has difficulty copying shapes such as circles and squares
- has problems doing simple jigsaws and form boards
- mixes up letters such as d and b
- has difficulty sequencing letters and words on flash cards
- cannot recall five numbers or words in the correct order immediately after they are spoken.

Intellectual disabilities have many different causes. They can be grouped into five types:
- **Genetic damage** This is present at conception. Down Syndrome is an example of a genetic fault.
- **Damage in womb** Infections in the mother can damage the developing baby. Rubella or German measles is a common example. The HIV virus can also damage growing brains.
- **Damage at birth or soon after** Oxygen deprivation, low birth weight and premature births, and jaundice can all result in intellectual disabilities.
- **Accidents and illnesses** Damage to the brain from falls or accidents can result in intellectual disabilities as can infections such as cerebral malaria and meningitis, repeated fits and malnutrition.
- **Social causes** Children who are extremely deprived of love
and affection and stimulation (see Unit 1) can also experience in extreme cases intellectual disabilities.

However with sizeable numbers of children – upwards of one-third – no cause can be found for their disability.

Remember that the same cause can produce very different effects in children. For example, a child born with Down Syndrome may grow and develop much like any other child whereas others with the same genetic damage are markedly disabled.

Beware of expecting too little from the child because of the label given to their disability. Children need to be offered materials and experiences that will challenge them.

**Classroom Adaptations**

Teachers who have experience of teaching children with intellectual disability and learning difficulties in their class recommend:

- Reduce distractions – keep the desk clear.

- With children who are inclined to run around, seat them by the wall with bigger children beside them. You can also assign them tasks that allow them to move around so that this moving does not become disruptive, such as handing out papers, notebooks and materials.

- Try to recruit a volunteer who will come to the class on certain days to provide one-to-one help for the child. You can also ask the volunteer to work with the rest of the class so that you can work with the child. Find time to work with the child on a one-to-one basis even if only for short periods; for example, when the other children are occupied with other tasks. During this time, try to reduce the distractions such as noise and remove objects not needed for the lesson.

**Teaching Strategies**

- Show the child what you want him or her to do rather than simply telling.

- Use simple words when giving instructions and check that the child has understood.

- Use real objects that the child can feel and handle rather than doing paper and pencil work. Try to link the lessons to the child’s experiences and everyday life.

- Do one activity at a time and complete it. Make clear when one is finished and a new one is starting.

- Break the task down into small steps or learning objectives. Have the child start with what he or she can do before moving on to a harder step. Go back to an easier step if the child
encounters problems. For example, in learning to draw a circle; the child can colour in the shape; then move to joining up dots to make a shape; then copy shapes from a sample and so on.

- Give plenty of praise and encouragement when the child is successful.

- Give the children extra practice at doing the task – this is sometimes called ‘overlearning’ but it ensures the child has mastered the skill and increases their confidence. However, be reasonable. Many people with intellectual disabilities remember their school days of being full of doing ‘over and over again the same things and never learning new things’.

- The children need to practice the skill with different materials. For instance reading words when they are written on flash cards, on worksheets and reading books. Writing can be practiced on the sand, with finger paint, with crayons and pencil and pen. This is called generalising the child’s learning.

- Enlist the help of a family member who will do ‘home-work’ with the child; revising what has been done in class that day.

- Pair the child with a peer who can help to focus the child’s attention and assist with activities given to the class. Pair the child with more-able pupils. When they have finished their work, they can assist the slower child with the task. Assign tasks that they can all contribute to their own level, and work out jointly the assigned task. Assign tasks for a whole group in which the other learners are depended on the contribution of the child with intellectual disability. Other pupils can also be asked to assist the child at break times; use of toilets and so on. For individual tasks, have a number of activities that the child enjoys and can manage on his own so that he does not distract the other children.

- Ignore undesirable behaviour if the child is doing it to get your attention. Give praise and attention when the child’s behaviour is acceptable.

Have you tried any of these adaptations or strategies in your teaching? Which ones were successful?
Referral
A range of different professionals may be able to assist teachers if they are available. For example:

- Speech and language therapists can advise on activities that will help children to acquire and develop language, to learn alternative ways of communication and to improve their speech.

- Physical therapists (sometimes called physiotherapists) may be able to suggest activities to help motor co-ordination.

- Occupational therapists are trained to help with functional skills such as eating and dressing. They can also design or recommend special aids to assist the child with physical impairments to sit or to feed themselves.

- Psychologists may be able to assist with teaching programmes and ways of managing children's behaviour.

- Social workers may be able to assist with family counselling and support.

- Specialist teachers can advise on devising graded learning programmes in a range of school subjects (see Unit 3).

Ideally these professionals will come to the school and the child's home so that they work directly with child, teachers and parents.

Do you know the names of specialist workers to whom you could refer children? If not, how could you find out?
Eunice is 10 years old and she has Down Syndrome. She is in Grade 3 of a primary school in Kwazulu-Natal, South Africa. John has recently joined her class. He was previously at a special school for the intellectually disabled.

During an English lesson, the pupils were given an expressive writing task based around a sequence of pictures. Eunice wrote the following story:

*The girl was swinging. The swing broke and the ambulance came.*

John did not want to write about the pictures. He wanted to tell about the birthday party he went to over the weekend. The teacher encourages him to write about this instead. He wrote:

*On Saturday we went to Aveshan's party. We had sweeties, juice and cake.*

The children ask the teacher's help with the spelling of certain words. However the teacher does not allow spelling – the mechanics of writing – to hinder the children's motivation to write. Rather her aim is to encourage the children to express freely their thoughts and ideas in writing in a safe and supportive environment.

A third pupil wrote:

*One day Molly went to the park. Molly wanted to swing. She was swinging so fast that the swing could not take her weight and it broke. She had a broken arm. The ambulance came and took her to the hospital.*

The teacher explained that she has met the goal of the lesson with all three learners who had varying abilities.

Cerebral Palsy

Cerebral Palsy (CP) literally means paralysis of the brain. Often the parts of the brain which are most affected control movements of the arms, legs or facial muscles, resulting in limbs being either very floppy or, more usually, very tight and tense. Often people with cerebral palsy find it difficult, or are unable, to talk properly due to difficulties in controlling their head movements or facial muscles.

Cerebral palsy is combination of different disabilities. Sometimes when the damage to the brain is more general intellectual abilities may also be impaired but more often children with cerebral palsy tend to be physically rather than intellectually disabled. Some children may also have difficulties with hearing and/or seeing.
Children may have a mild form of cerebral palsy with minimal loss of function in their limbs or speech defect; to very severe forms when the child is multiply disabled.

There is rarely a single cause for cerebral palsy. It may result from congenital malformations, maternal infections during pregnancy, birth difficulties and childhood infections such as meningitis, excessive jaundice, rubella and head injury.

There is an increased risk of babies having cerebral palsy with adolescent mothers or those with poor health and living in poverty.

**Classroom Adaptations**

For children with mild forms of cerebral palsy, very little adaptations may be needed to classroom. However, more severely disabled children may require:

- Special seating to keep their head and body straight when sitting.
- Special desks to work at whose height can be adjusted.
- The use of communication boards (e.g., made up of pictures or symbols) so that the teacher and peers can understand the child.
- The child may need extra assistance to use the toilet. Sturdy rails around the toilet will help.

**Teaching Strategies**

Many of the suggestions given in earlier sections can be applied to children with cerebral palsy. In particular:

- If the child’s speech is unclear, devise alternative means for communicating, for example through pictures or drawn symbols. These can be placed together on a board and the child points to the picture to convey the message. Computerised versions are also available. When the child touches the picture or symbol, a synthesised voice says the word.

- Encourage the child to join in answering questions but leave extra time for them to respond either through speech or via symbol boards. Encourage the peers to interact with the child as children usually find their ways of communication.

- Writing will be especially difficult for children if they have problems controlling their hands and arms. They may need extra time to do their writing, or they can be provided with a written copy of the information or another pupil may write for them. Computer keyboards can also be adapted to make it easier for children with cerebral palsy to produce written words.
Referrals

Many of the persons listed in the previous sections could assist but two in particular will be of assistance:

- Physical Therapist (Physiotherapist) They will be able to recommend exercises to keep the child’s limbs supple and activities to help the child’s practice movements. They can also advise on special sitting that the child may require or aids to walking such as crutches.

- Speech and Language Therapists: They can advise on feeding problems in younger children as well as helping children to acquire language and speech or to learn alternative means of communications.

Children with Severe Cerebral Palsy: An Educational Guide contains lots of practical advice for teachers on this topic. Available from: UNESCO

Review

Read over the answers you have given to the questions asked in this part and answer the following questions.

Have you tried any of these adaptations or strategies in your teaching of pupils with cerebral palsy? Are there other strategies which you found successful?
Summarise the changes you could make to the classroom or to your teaching strategies to support the children who have difficulties?

■

■

■

■

How can these changes help all pupils and not just those with learning difficulties?

■

■

■

■

Are there any changes or adaptations that you could NOT easily make?
What needs to happen to bring these about?

<table>
<thead>
<tr>
<th>Change</th>
<th>Action needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>■</td>
<td></td>
</tr>
<tr>
<td>■</td>
<td></td>
</tr>
<tr>
<td>■</td>
<td></td>
</tr>
<tr>
<td>■</td>
<td></td>
</tr>
</tbody>
</table>
With the four disabilities considered in Part 1, we have described the actions that teachers can take to adapt their classrooms and teaching to overcome the child's difficulties in learning. These are examples of adapting the curriculum.

But a curriculum is more than this. Other adaptations may be necessary to remove barriers to learning and participation. For example:
- The level of the content in the school syllabus
- The outcomes expected from learners
- Equipment and teaching aids used
- Methods used to assess learning outcomes
- Involvement and engagement with families and community.

Remember too that the goal of education is broader than acquisition of knowledge and specific competencies in school subjects. It includes:
- Being able to identify and solve problems using creative thinking
- Collecting, organising and evaluating information
- Collaborating with others in a group or team.

We also have to make these aspects of the curriculum accessible to all children.

Module 3 in the UNESCO **Teacher Education Resource Pack: Special Needs in the Classroom** gives detailed information on ways in which the school curriculum can be adapted to better meet the needs of pupils.

In this section we examine the issue of adapting the curriculum for other children who come to school with needs that we have not covered in Part 1.

Conditions such as:
- common illnesses like asthma and diabetes which can be controlled medically
- different types of physical impairments such as polio
- conditions which are more puzzling and for which there is no known cause, such as specific language difficulties and emotional problems.
**Action Framework**

The chart (pp. 66-67) lists the action steps which teachers and schools need to work through when adapting their curriculum for children with special needs. We have already done this for four disabilities. You could follow the same six steps when faced with pupils who are experiencing difficulties in learning.

1. **Describe the child’s difficulties in learning or participating fully in the life of the school.** Discuss with child and his/her parents. Are there any specialists you could get advice or help from?

2. **Are there changes you could make to the classroom or school environment?** Some of the ideas supplied earlier may be worth trying.

3. **Are there changes you could make to your teaching methods?** Could you partner the child with another pupil?

4. **How can you encourage greater participation by the child in other school activities?**

5. **What adjustments might you make to each school subject in terms of its content and/or the level of the content to make them more suited to the child’s abilities?**

6. **What changes may be needed to the way you assess the pupil’s learning?** (We will examine this issue in more detail in Unit 3).

However, we know that:

- It is not always possible for teachers to make all the changes they would want to make because other teachers, the head teacher, the Board of Management or the School Inspectors may not agree to them.

- Schools may not have the money to purchase equipment.

- Teachers may feel over-worked and have little energy left to make changes.

- It is difficult for schools to cater for certain children when their needs are so great.

Reading manuals like this one will not solve all your problems. But we can tell you what has worked for other teachers and give you a way of approaching the task. We know it will not work for all teachers all of the time but we do know that it will work for some teachers some of the time.
Once you are tuned into assessing the barriers to children’s learning that may exist in classes or schools, you may find that many of your pupils have particular needs. This is an excellent starting point to making you a more effective teacher. You can then ensure your teaching is directed at helping the children to learn.

Select one pupil from your class who is experiencing difficulties in learning.

- 
- 

Use the chart (p. 67) to plan how you might adapt the curriculum to better meet the child’s needs.

- 
- 

Discuss your answers with other teachers in your school who know the child or may also have similar children in their class.

- 
-
A Framework for Adapting the Curriculum

1. The Pupil

A child in my class has difficulties
How do these affect the pupil’s learning?

What specialists (if any) can you get advice/help?

2. The classroom and school environment

What changes might you make to the classroom or the school environment (buildings etc.) to make it easier for the child to come to school and to learn? What assistive aids may be needed?

3. School subjects

What changes do you need to make to the subjects you teach the child both in terms of level and the expected outcomes? This covers the level you teach the subject to the child as well as the range of subjects taught.

4. Teaching Strategies

What changes do you need to make to your teaching methods to suit the child’s needs?
You may find that some of the suggestions made earlier can apply to other difficulties.

5. Participation in other school activities (sports, clubs, school chores etc.)

What changes might you make to ensure the child’s active participation?

6. Tests and Examinations

What changes do you need to make to assessing the pupil’s learning?
In this part we briefly describe 13 conditions that can inhibit children’s learning. Teachers may hear these terms used by other professionals or they might come across them in books. These conditions affect children differently; some children might have severe difficulties while with others the affect is mild. Some of these conditions directly affect children’s learning. Others are health conditions that teachers need to be aware of.

**Aphasia (Specific Language Disorder)**
Some children may have specific difficulties with acquiring language due to some form of brain damage. The children can have difficulty expressing themselves – they get words mixed up – or in understanding what is said to them. This disorder is often confused with hearing impairments or intellectual disability. Teaching and therapies that are aimed at helping children to acquire the meaning of words and sentence structures. These can help children overcome their difficulties but it will probably not ‘cure’ them. Aphasia is one form of language disorder. There are others.

**Asthma**
The word means ‘panting’ or gasping for breath. During an asthma attack, the air passages in the lungs become narrow and children have difficulty breathing out. The lungs become blown up. The causes are not fully understood but it is thought that it is due to allergy to substances such as certain foods, pollen from plants and house dust. Attacks may also be triggered by emotional events such as too much excitement or stress such as school examinations. When an attack occurs, children can take medicines to relax the muscles in the lungs, usually through an inhaler. However it is important to remain calm and to reassure the child.

**Autism**
This is a controversial term introduced some 40 year ago but some would dispute that a person (usually a child) can be reliably diagnosed as ‘autistic’. The essential feature of the condition is that the child has difficulty in communicating; withdraws from contact with other people and appears to be living in his own world. Sometimes people with autistic disorders display remarkable skills focused on one specific area (e.g. drawing) and some appear to become ‘normal’. However, no universally recognised treatment exists.

**Education of Children and Young People with Autism** contains lots of practical advice for teachers on this topic. Available from: UNESCO
Babies may be born with a deformed mouth and upper lip. They will have difficulty eating and later speaking unless a surgical repair is done to the mouth and lips. They may still have difficulty in speaking clearly but much of the disability results from others’ reactions to their facial deformity.

Diabetes is an inherited condition in which the body is unable to use sugar and starch as energy. When there is too much or not enough sugar in the blood, children will feel ill and may even lose consciousness. Feelings of tiredness, lack of concentration, excessive sweating, difficulty in reading and speaking are all symptoms. The children may have regular insulin injections and they need to careful with what they eat and the amount of exercise they take.

Children who experience particular difficulty with reading and spelling may be labelled as being ‘dyslexic’. (Again some educationalists question the usefulness of the term.) However, children with dyslexia are of average intelligence and perform well in other aspects of life.

Some children may experience emotional difficulties. They may be very depressed or anxious; or they may show odd behaviours such as crying and laughing inappropriately. They may be excessively active with a short attention span or they may be indifferent, apathetic or absent-minded. The emotional upsets may result from a recent traumatic experience, the death of a parent for example, or they could indicate a more deep-seated, mental health problem. Child psychiatrists may be able to help. Treatments include the use of drugs, counselling and therapy. Teachers can reinforce positive behaviour, or support the child to overcome traumatic experiences, for example.

People with this condition experience sudden and uncontrollable ‘electrical disturbance’ in their brain cells. In severe ‘fits’ or ‘seizures’, as they are called, the person may lose consciousness and make uncontrollable body movements. Drugs are commonly used to lessen the severity and occurrence of the seizures and many people with epilepsy can lead perfectly normal lives.

Epilepsy is prevalent among children with intellectual disabilities (one in eight of these people also have epilepsy) but this does not mean that a person who has epilepsy has an intellectual disability.

**Children and Young People with Specific Learning Disabilities** contains lots of practical advice for teachers on this topic. Available from: **UNESCO**
HIV/AIDS

Women who have the HIV virus have about a 50% chance of giving birth to a baby who will have the virus. A person with the HIV virus may look healthy. The virus can only be passed on to others in very limited ways; through blood or during unprotected sexual intercourse. It is not possible to get the HIV virus from being near or touching those who have the virus. Hugging, kissing, coughing and sneezing will NOT spread the disease. Nor can it be spread by toilet seats, glasses, towels and swimming pools. Children who develop AIDS often die young because they cannot fight off other serious illnesses. However the virus can remain hidden for a long time and the children can lead a normal life if given the opportunity to do so.

Muscular dystrophy

This is a genetic disorder that leads to the degeneration of muscles as the child gets older. The child may start having difficulties in running and climbing stairs and by the teenage years may have to use a wheelchair. Breathing problems due to chest infections are also common. There is no known cure.

Spina Bifida

The child is born with an incomplete development of bones of the spinal column. This may result in a 'sac' of spinal fluid and nerves protruding out of the lower back. Surgical intervention is needed to cover the defect as early as possible to prevent infections. The child usually has muscle weakness and the loss of feeling in the lower limbs. A frequent problem is poor bowel and urine control. Hydrocephalus comes from spina bifida. Spinal fluid collects around the child’s brain and gives the child a big head. A valve can be inserted into the child’s neck (called a shunt) to help drain away the fluid. However if this is not done early brain damage can result in intellectual disabilities and visual impairments.

Stammering

(or stuttering as it is sometimes known) is present to some degree in all children as they learn to speak; they stumble over words or repeat the same sounds as they try to pronounce certain words. However it can become a significant problem for some children when they are older. Leave the children time to finish the words or sentences; give praise for their attempts and avoid putting them under pressure to speak.
Teachers may come across children with various different difficulties. *Not all of these are obvious.*

The most common difficulties are intellectual disabilities; hearing problems and visual impairments. *Children can have more than one impairment.*

The warning signs for these conditions were listed. *Teachers should check out if the child has a difficulty rather than presume nothing is wrong! However, confirmation of an impairment needs to be carefully and cautiously made.*

Discuss your observations with the child and family. *Their insights will help to guide the actions you take.*

Ideas for adapting the classroom and teaching strategies are described. *These may benefit all of the children in the class and not just those with a difficulty.*

Suggestions are given for getting advice and guidance from other professionals. *Teachers still need to take action even if confirmation of the cause of the difficulty is not found. Trust your own judgements.*

You can use the framework described here to decide the adaptations you may need to make to the curriculum for children with special needs. *You will become better at doing this the more you practice this skill.*
After working through this Unit, you will know:

Contents

Responding to Diversity

Unit 3: Overview

After working through this Unit, you will know:

Nine ways for dealing with diversity in the classroom. They are: effective communication, classroom management; having individual education plans; the use of assistive aids; the preparation of lessons; individual help for pupils; managing pupil's behaviour and fostering the child's social inclusion in the life of the school.

A method for reviewing your teaching of pupils and finding out your own support needs.

How school tests and examinations can be adapted to provide a fairer way of assessing the learning of children with special needs.

Part 1 describes nine ‘golden’ rules. For each one, ideas are given for putting the rule into practice. Teachers are then invited to note the actions they already use as well as others they could try.

Part 2 explores the issue of adapting school tests and examinations to give pupils with special needs a fairer means of testing their competence.
In this part we summarise the nine ‘golden’ rules to dealing with the diversity found among any class of children but especially if some of the children have special needs. Teachers around the world have found them useful. And the pupils learn more. They are:

1. Include all pupils
2. Communicate
3. Manage the classroom
4. Plan your lessons
5. Plan for individuals
6. Give individual help
7. Use assistive aids
8. Manage behaviour
9. Work together

The value of inclusive education to learners comes from mixing and sharing with other children. Teachers need to encourage this to happen as experience suggests that children with special needs can become isolated within classes and schools.

- Teachers may need to explain to other children the reasons why some children cannot talk, behave differently and so on. Diversity should be recognised and respected. Let the pupils discover for themselves how they work together with their peers. Similar work may need to be done at parent-teacher meetings.

- The biggest obstacle to inclusion is usually negative attitudes. Children may not be accustomed to other children who look and behave differently. Parents may also be worried about
'lowering the standards' if children with disabilities and other special needs are included in ordinary classrooms. Teachers are instrumental in developing positive attitudes among pupils, parents and of course other teachers.

Children who use assistive devices such as hearing aids or depend on special equipment can tell the class about it and demonstrate its use.

Encourage children to 'befriend' pupils with special needs. It is important for social inclusion that children play and work together. They can also assist them at toilets; moving between classroom and at break times.

Within the class, develop opportunities for 'peer tutoring'. More able pupils can assist the less able in class-work. Also make sure that children with special needs can also make their meaningful contribution in school work so that they do not become depended and objects of 'help'.

Devise learning games than pupils can play together in class. Groups of children can play these to help them master reading and number skills.

Set the class activities to complete as a group; so that all the children can contribute to its completion and gain credit for achieving it.

Think of how children with special needs can join in games and sports. For example, a blind child can be partnered with a sighted child in running competitions. Or create a game in which all children move around blindfolded.

Promote the talents of all children by encouraging their participation in school activities, such as singing, dancing and drama.

Involve all children in all school activities; for example in cleaning and cooking chores and as class monitors.

It’s a good sign when you see children playing happily together at break times and if they tell you about visiting each other at home.
Communication is central to teaching. Teachers need to communi-
cate with the children; the children with the teacher and with each
other.

Put simply, communication involves the sending and receiving
of messages. For example, the message could be:

- **An instruction**  *Write your name in the book*
- **A question**  *What month comes after June?*
- **A comment**  *There's a football match on tonight*
- **An opinion**  *You did that very well*

As you know, teachers have to do a lot of talking. Some of the talk-
ing is meant to manage and direct the children's behaviour. Sometimes it is to give them new information or to explain new
things to them. Other times it is to test their learning.

Are there other ways of ensuring that children with spe-
cial needs are socially included in the school? Note the ones that you might use more often in your school.

- 
- 
- 

2. Communication

Communication is central to teaching. Teachers need to communi-
cate with the children; the children with the teacher and with each
other.

Put simply, communication involves the sending and receiving
of messages. For example, the message could be:

- **An instruction**  *Write your name in the book*
- **A question**  *What month comes after June?*
- **A comment**  *There's a football match on tonight*
- **An opinion**  *You did that very well*

As you know, teachers have to do a lot of talking. Some of the talk-
ing is meant to manage and direct the children's behaviour. Sometimes it is to give them new information or to explain new
things to them. Other times it is to test their learning.

What other reasons are there for teachers talking
to children?

- 
- 
-
People usually send their messages by talking. But it is not the only way we have of communicating!

**What other ways can you use to communicate?**
- use of gestures – pointing and miming actions
- facial expression to indicate when you are pleased, cross, puzzled
- eye gaze – to indicate who you want to communicate with; or draw people’s attention to objects
- pictures and symbols
- reading and writing
- sign languages – such as those used by deaf people
- singing, acting, dancing and touching

There are many different ways people use. Indeed rarely do we use only one means. Your answer could mention:

Which of the above are most commonly used in your culture?

Which of these means could be used to manage the class?

Which of these can be used to give new information?
Teachers need to make their communication very clear when teaching. All learners are different, some learn best by seeing, other by hearing or doing. A good communicator always uses various channels or ways to communicate and repeats essential contents by using different learning activities in the classroom and elsewhere.

Teachers should:

- Be clearly seen by all the pupils – stand rather than sit at the desk.
- Talk clearly and project your voice (slightly raised) but not shouting.
  - Keep the words simple and the sentences short.
  - Alert the pupils to important messages: “listen carefully” – and make eye contact with them if it is culturally appropriate.
  - Repeat important messages.
  - Use gestures and facial expressions alongside language to get your meaning across. These are especially useful when organising or managing the class. But they should also be used when explaining and teaching.
- Check with the pupils that they have understood. Ask them to repeat what you have said or to say in their own words what you have told them.
- Encourage the children to indicate if they have not understood by raising their hands and asking you questions. They should also do this when they do not understand what other pupils have said.
- Encourage the children to show you and to gesture if you cannot make out what they are trying to say.
- Often classmates or brothers and sisters of a child with a disability are able to tell you what the child is trying to communicate. Get their help.
- Learn the local sign language and to fingerspell if you have children with hearing impairments. All the class can learn some signs or sign language so that they too can communicate with their peers. Contact your National Association for Deaf Persons for information about the training courses they run.
- Augment your verbal communication with pictures, drawings and writing.

Teacher’s tip: I tape-recorded my teaching. I was shocked how much talking I did! I’m sure the children didn’t understand half of it!
Use the ‘four-point plan’ when teaching new skills: 1. Get the child’s attention: 2. Present the activity 3. Observe the child’s performance 4. Give feedback. Ensure your communications are clear and appropriate for each step.

Are there other changes you have made or could make to the way you communicate with your students?

How do you check that the students understand you?
How do you check that they understand each other?

How do you show your students you understand them?

Note the changes you might try in your communications.
The layout of classrooms can help or hinder children's learning. Perhaps there is not much teachers can do to change their classroom. But here are some ideas.

- Children with special needs need to sit close to the teacher and the chalkboard.
- Try to arrange the room so that children can move freely, especially if some have mobility or visual problems. Likewise, some children might need extra light while some might have light sensitive eyes.
- The children's desks or tables can be arranged in groups so that they can easily work together and help each other.
  - If space permits, try to set aside an area of the classroom so that you can work with certain children on a one-to-one basis or in small groups for short periods. This area could be screened off using a moveable screen to reduce the distractions for the child.
  - Have a variety of activities which children can use if they have completed their work ahead of others. This could include a small library of books, worksheets and games.
  - Display charts and posters at children's eye-level rather than high up on the walls. Use large writing, pictures and symbols so that these are easily seen and understood by all children. You can also add different textures and real objects for touching to help children with visual difficulties.
  - Some learning is better done outside of classrooms. Using money to buy food can be done in a pretend way in the classroom but even better if children have the opportunity to practice in real settings. Likewise lessons about plants and animals could be done in the school grounds or neighbouring farms.
  - Children with visual and hearing impairments may find it more difficult to learn if classes are held out-of-doors. Schools may have to arrange for teachers to have suitable rooms if they have such children in their class particularly when they are just starting school.
It is well known that lesson planning makes your teaching more effective.

When planning a lesson, think of the outcomes you are setting for the class as a whole and then for certain individual pupils. Your Individual Plans will help here. You will then be able to adjust the lesson and the work you want the children to do according to their abilities, interests and motivation. For example, the class may be doing simple addition but one pupil may be given five sums rather than ten to do while another may be working at a simpler level again - counting objects into sets. Hence in the one lesson, the teacher works at different levels according to the child’s abilities. (See also the case study on p. 60).

Think of how you can involve children actively in the lesson. For example, in learning about measurement, the children can find out each other’s height!

- Children will be able to understand better if they can see and feel objects. Are there visual aids you can use in your lessons? These can be real objects; pictures or drawings.

- Decide the key words that you will use in the lesson. List these for the children at the beginning of the lesson and try to ensure that they understand them.

- Prepare worksheets to use during the lesson. These can be designed to meet their particular needs, such as large print if they have visual

Teacher’s tip: cover the work sheets with sticky-backed plastic to make them more durable. That way you can use them over and over!
impairments, or simplified for those with intellectual disabilities. You can keep these for future use. Teachers can swop them with colleagues. However, remember that no two children are alike and you may need to personalise the task.

Group work facilitates participation of all learners and is an excellent way of responding to individual needs. With special needs pupils, you may need to give them a lesson suited to their needs and leave them to do work on this while you teach the rest of the class. However, each lesson should consist of different types of activities: whole class activities, group work, pair work, individual tasks. Use different grouping (mixed / ability / interest groups) and change groups frequently to avoid labelling and ‘streaming’. You can learn more about teaching arrangements in the UNESCO Teacher Education Resource Pack.

You may need to adjust the pace of the lesson and the amount of material you cover in the time available. It is better to be selective rather than trying to cover too much material.

As well as individual lesson plans, you also need a plan for the school day. This will note the alternative activities for children with special needs. It can be helpful to share this plan with pupils at the beginning of lessons.

Can you think of others things that teachers should plan for?

- 
- 
- 

What planning do you feel you should do better or more often?

- 
- 
-
From the start of this module we have stressed that every child is an individual. Hence teachers need to bear in the mind individual children’s needs when planning their lessons. One way of doing this is by having an Individual Plan for each pupil with special needs. This is seen as good practice in many countries and is required by law in some countries. However, it should be reminded that the basis for the lesson planning is the plan for the whole class, and the individual plan can complement the lesson plan to ensure that the learning outcomes are achieved. Individual plans can be made for a full school year, for a term, for individual lessons, etc.

For the primary school child; the plan identifies the specific teaching goals in the main curriculum areas, such as reading and number work. For secondary school pupils, their plan will cover the different subject areas.

The plan should be drawn up in consultation with the child’s parents or carers. In this way, they can identify aspects of the curriculum that they feel is important for their child. It will also help to involve them in assisting the child at home. Parents should be given their own copy of the plan. With older pupils, they can also be involved in the reviewing their plans. They may be able to share with you the difficulties they are finding with their schoolwork.

The plans are best drawn up at the beginning of each school term. This is a time to review the child’s progress in the past term as well as setting new goals. Hence the plans form a record of child’s progress which can be shared with other teachers as the child moves through the school.

The plan identifies the child abilities in the different curricular areas. It then notes the new learning goals to be worked on. This means that children in the same class will cover the curriculum to various extents.

Teachers need to observe or assess the child’s level of competence, their interests and specific needs. Identify what they can do by themselves with little or no help from teachers or peers. You can find this out from the work they do in class or you may wish to ‘test’ their abilities by having them do various graded tasks from easy to hard.

Deciding on new learning objectives is not easy. These should not be too difficult that the child is discouraged, yet you need to challenge the child to learn new skills. Do not worry about
getting it right first time. If the child quickly learns the goals you have selected, you can add others. Likewise if the goals prove too difficult, see if you can break the task down into smaller steps and have the child work on these instead. For example, a child may not be able to recognise different coins. Rather than introducing all the coins at once, start with the two that are most different; then introduce another pair; then have pick one from three coins and then from four coins and so on until the child has mastered the task. Teachers often use this step-by-step approach but perhaps with not with such small steps as described in this example.

The plan should also identify any special arrangements that have proved useful in helping the child at school, such as seating position, use of aids and so on.

Teacher’s tip: We started the Individual Plans with children who have disabilities but now we use them with all pupils who are falling behind in their work. It has made a difference!

**Who are the children in your class who could benefit most from an Individual Plan?**

Draw up an Individual Plan for one child. This should cover at least three curricular areas such as reading, writing and maths.

- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 

84

Understanding and Responding to Children’s Needs in Inclusive Classrooms
6. Individual Help

By definition, children with special needs need support. They will therefore benefit more if the teaching is directed to their particular needs. But how can children get individual support? It is not easy but here are some ideas which teachers have found worked for them.

- When the class are working on an activity, the teacher may spend time with one or two children going over the main points of the lesson with them or helping them to get started on individual work related to the topic of the lesson.

- The children can be grouped by ability levels. The teacher can move from one to another to provide assistance tailored to their needs. This works well with reading and number work. However, this should be used in moderation as often ability grouping tends to create ‘labels’ and children quickly identify themselves as belonging to ‘winners’ or ‘losers’. Likewise in mixed ability groupings, the tasks should be designed in such a way that all children can contribute to the task.

- Children with special needs can be paired with a more able-student who can help them organise their work and assist them when they have completed their own work. This can benefit both pupils. This is known as ‘peer-tutoring’.

**Teacher’s tip:**

I keep the child back for ten minutes at lunchtime to correct his work. The classroom is quiet then and he has my complete attention.
Two teachers can combine classes. One manages the whole group; while the other spends time doing individual or small group work with the children who need support.

Volunteer helpers can be recruited to come into class to assist children. Family members, mothers or grandparents may be able and willing to do this. It may be for a limited period of time to help children settle into classes or to master the basics of certain subjects. Volunteers can support also other children while the class teacher is working with the child with special needs.

Older students in the school can be timetabled to assist students with special needs. This can form part of their social service courses.

Volunteers or staff working in Community Based Rehabilitation schemes are another source of individual support. They can be helpful when the child first starts at school, as they will know the child and the family.

If your school has access to resource teachers or specialist teachers, they can be called on to support the teachers in planning lessons and appropriate teaching approaches. They could at times give individual support in the classroom.

In more affluent countries, teacher’s assistants are employed by the school to work in the classroom. Good communication and pre-planning between teachers and assistants is essential. Equally the presence of the assistant can inhibit the child with special needs from being an active participant in the class unless the lessons are planned in such a way that all children can be part of the group.

Are there other ways in which individual help could be given to children?  
Note the ones, which are most likely to be available to you as a teacher.
Children’s difficulties can sometimes be overcome by using special aids and equipment to overcome their particular impairments. Obvious examples are glasses to help children see better; crutches and wheelchairs to help them move around school more easily and hearing aids. With younger children, teachers should ensure they wear their glasses and hearing aids in school. Also they need to take care of them as they can be easily broken.

There are other forms of aids which teachers will find helpful. We have grouped these into five sections. In more developed countries, these can be bought ready-made from suppliers. However it is possible to make these at low-cost.

Details for making these can be found in the books listed. Older pupils in the school might make these aids as part of their class work. Families can also be asked to help with making them.

Children should have the aids at home as well as in school. Schools could build up a ‘library’ of assistive aids so that teachers can share the aids as they need them.

**Teaching Aids:** Teachers often use such aids in their lessons. These can include flash-cards to help with reading; wall charts and pictures. The time spent in making aids is worth it as they are a big help to children’s learning. Moreover the aids can often be used with other children and shared with other teachers. They need not cost a lot of money as they can be made from scrap materials. Every teacher has the skills to make good teaching aids but they may lack confidence. Practice helps. Pupils can assist in making the aids.

With children who have learning difficulties, you may need to use bigger print or have tactile clues to assist them.
**Playthings:** A range of playthings for younger children can be made from scrap materials. These include rattles, dolls, puppets, puzzles and musical instruments. Also games such as dominoes can be made larger with raised spots to help children with visual impairments or intellectual disability.

**Classroom equipment:** Teachers can make equipment to support children’s learning. For example, placing foam rubber around pencils so that they are easier for children to grasp; making an abacus from bottle tops to help children count or making rulers with raised or larger numbers for use by children who have visual impairments.
**Classroom furniture:** Children with physical impairments can have difficulty sitting. They can benefit from special chairs or standing frames that support them correctly. These can be made at little cost from papermache or scrap wood.

**Mobility Aids:** Various aids can be made at low-cost to help children become mobile. These include trolleys, walking frames and crutches for children with difficulties in walking and the provision of canes for blind children.

**Communication Aids:** Children can be given a board on which pictures, symbols or words are placed. Teachers and children can then communicate with each other using the board.

What aids and equipment do you have in your class/school?

What aids or equipment would benefit the special needs children that you teach?
Some pupils can be disruptive in class. But children need to learn to behave in a socially acceptable way.

- All the teachers (and others) involved with the pupil at school should agree on a common approach to responding to the child’s behaviour, especially in the use of rewards and punishments.

- Can you identify a cause for the children's behaviour? Are they trying to avoid doing work they find difficult? Do they like getting attention from the other children and the teachers? Are they restless because of hunger? Observing and recording when the behaviour occurs may give some clues as to its cause and the action that is most appropriate for you to take.

- Pupils will often show warning signs of disruptive behaviour starting. If you can identify these, try to divert the child: for example move closer and put your hand on his shoulder as you continue with the lesson. Or have the child do an activity you know he is capable of and enjoys doing; for example, giving out books to the class.

- The child may benefit from a shorter school day or having times to herself when she can rest. It is better the pupil behaves appropriately all of the time she is in class than be in class behaving inappropriately. The length of time the child stays in class can be gradually increased. This strategy may be useful when first introducing children with special needs to new classes.

- You might re-position the child in the class. Children who are inclined to run around, could be seated next to the wall or between two other pupils so that they cannot get out so easily. A better strategy is to give active children meaningful tasks to do, such as giving out worksheets and tidying the room so that the tendency of running around can be directed towards an appropriate behaviour.

- Teachers should reward the child when he or she is behaving appropriately and has successfully completed the work set. Do this through praise and class recognition. Any plan for dealing with inappropriate behaviours MUST include the encouragement of positive behaviours. Otherwise the children
learn what they are not to do, but they have not learnt what they should do.

Rewards often work best when the whole class earns a ‘treat’ for good behaviour. This puts ‘peer pressure’ on disruptive pupils to behave appropriately.

Use tone of voice, facial expression and short, simple sentences to convey your displeasure at pupil’s behaviour. Remain calm and in control.

Punishments are only effective if children can understand the link between it and their behaviour and if it is something they do not like. Having children stand outside the classroom may be a reward to the child who wants to avoid schoolwork! Likewise do not use extra schoolwork as a punishment. The child will then associate it with bad behaviour!

Do not threaten the child unless you can carry out the threat and are prepared to do it. Make clear to the child, the consequences of his behaviours. For example, if he hits another pupil, then will he stay in class at lunchtime and not play outside.

Beware of handing over your authority to others. For example, sending a disruptive pupil to the head teacher gives the message that you are not as important as the head. Both you and the head should see the pupil together.

Discuss with the students the effects that behaviours can have on one another. The use of drama and role-play can let pupils experience and release their emotions.

Find out from the family if the child shows the same behaviours at home. If so, plan with the carers a common approach to reacting to these behaviours.

Remember: a method, which works with one pupil’s behaviour, may not work with another. Planned and consistent responses are the keys to success.

With particularly severe behaviours the child may need to be withdrawn from the class to work with another adult. However this strategy must form part of a plan in which the suggestions made above feature. Otherwise the pupil may use the behaviour to opt out of class work. Exclusion from the class should be the last resort.

Secondary schools especially need to work out a policy on suspending and expelling children from schools because of their behaviour. This means that all teachers are following the
same procedures and children are being treated fairly. The policy should describe the unacceptable behaviours; the actions that will be taken by class teachers and the school; the contact with families and the length of time the child can be suspended.

Some children's behaviour is due to emotional problems or reactions to bad experiences. They may benefit for seeing a specialist who might be able to identify and help resolve the causes for the behaviour.

Are there other ways you have found for managing children's behaviour?

Which methods do you feel are worth trying with your pupils?

Do you have a policy in your school for suspending or expelling children from school? What changes may be needed for children with special needs?
Teachers should not be expected to work only on their own. Here are some ways in which teachers have received advice and support.

- Ask other teachers in your school for advice. This may not be common practice nor is it a sign of failure! You can learn a great deal from one another. A group of staff could meet once a week for 30 minutes. Each week, a teacher takes it in turn to briefly summarise a specific problem: this could be about finding an appropriate method to a teaching task; managing behaviour, etc. The other teachers brainstorm possible ways of dealing with this. The teacher should then select the ones, which seem to offer most promise. Head teachers have an important role to play in developing initiatives such as these.

- Take time to observe how other teachers manage their classes and invite colleagues to watch your teaching. Together you can discuss what you felt went well and areas for improvement.

- The school could send teachers on available training courses. Afterwards they could make a presentation to the staff and share any resources they obtained.

- Find out if there are any disability specialists available in the locality, for example staff in a community based rehabilitation project, or in special schools. Try to meet them to obtain their advice. It is good if they can visit you at school to see the child there and your teaching.

- In some countries, the education authorities have provided 'resource' teachers to assist pupils with special needs. They may be based in one school or they cover a cluster of schools. They can work with classroom teachers in curriculum adaptations and teaching methods. They may also work individually with some pupils or groups of pupils. Teachers should try to observe these sessions and work together with the resource teachers in planning how to incorporate these lessons into their classrooms.

- There are a growing number of books and magazines about supporting learners with special needs. Schools might establish a small library for teachers to consult.
The UNESCO Teacher Education Resource Pack contains many practical suggestions.

Are there any other people in schools or the educational system you could seek advice from? Name the people you will use as advisers?

- 
- 
- 

Don’t do too much

As you have seen there are many ways in which teachers can adapt their practice to better meet the needs of children who are experiencing challenges in learning. But we want to end by stressing three things.

- With some children you will need to make only a few adaptations; others may need more. Even children with apparently the same difficulty will probably require different degrees of assistance. Know the child and respond accordingly.

- Beware of doing too much for the child. The child has to put effort into learning as well as the teacher. Gradually do less and expect more from the child.

- Do not ignore the other children in the class as you attend to the child with special needs. Try to ensure that the activities planned include all children. Take time at the end of each week to review what’s happened. You can then make adjustments for the coming week.
Review of your teaching

Read over the answers you have given to the questions asked in this Unit and answers the questions below:

Summarise the changes you will make to your teaching to support the children with special needs.

If you can, put them in an order of priority starting with the change you feel is most important.

Then try to identify the support and guidance that would help you to make these changes.

How can these changes be beneficial to all children?

Try to compare your answers with colleagues in the same school.

The changes I need to make are:

1.

2.

3.

The help and support I need:

These changes are beneficial to the learning of all children:

•

•
In this part we examine how children with special needs can be assisted with examinations.

Examinations are a test of pupil’s learning. But taking examinations means much more for the pupil. They have to be able to prepare themselves; to read the examination paper; to express themselves in writing and to be able to write quickly. Children with disabilities may fail examinations because they cannot do these things rather than because they do not know the subject they are being tested in. Equally, some children may be poorly prepared for the examination because of the family situation and low expectations.

Thus to be fair to pupils, special arrangements may be needed when it comes to examinations. Here are examples that are in use around the world.

- The pupils are given more time to write their papers. For example, an extra 60 minutes if it is a two-hour examination.
- The pupils have the papers read to them and they can dictate their answer to a teacher who writes it down for marking by another teacher. Pupils can also dictate their answers on a cassette. This can assist children with severe visual problems and those with physical impairments that affect their hand movements.
- The students take examinations in fewer subjects.
- The students take only one paper per day. The examinations are more spaced.
- Part of the examination includes a practical test so that pupils can demonstrate their competence without having to use language. This is a better test of pupil’s competence if they have language problems.

Do these arrangements give the pupil with special needs an unfair advantage over other pupils? Discuss your answer with other teachers.
There other ways in which pupil’s competence can be tested other than by writing examination papers or being examined at a specific time and in a special location.

The most common alternative is through continuous assessment. The pupil’s learning is assessed over the school year. This can take various forms. For example:

**Portfolio of work** The pupil keeps a folder of the ‘best’ work completed during the school year, for example worksheets and completed assignments. This is similar to all the assignments we have asked you to do during this module.

**Project Work** Pupils are required to undertake a number of projects to test their learning. This may involve independent reading, undertaking ‘research’ as well as writing a report. This is equivalent to the essays and reports that trainee teachers are required to write.

**Direct observation** Teachers can observe a pupil performing various tasks and grade their work on prepared scales. These ratings can be cross-checked by other teachers. This method is particularly useful for practical subjects. Tutors from teacher training colleges use this method when they visit trainee on teaching practice.

**Functional assessment** This assessment is in the form of a list of competencies that the learner should be able to demonstrate. It is particularly suitable for practical and vocational subjects, such as sewing and carpentry. The pupil has to demonstrate that they can competently undertake the skills outlined in the assessment tool. When you take a driving test, the examiner uses this approach.

**Students’ self-assessment** This is a form of assessment whereby students evaluate their own learning and progress through different means. It gives feedback to both students and teachers. It might require some practice for the students before they can evaluate their performance in an appropriate manner.

All these approaches are better suited to pupils with special needs as they let the students access the extra help and time they may require. Indeed, some would argue that these forms of assessment are fairer to all pupils.

But these changes will not come quickly. A starting point is for teachers to adapt the school tests they set for pupils. Here they can experiment with new approaches and refine them so that the methods are fair to all pupils as well as being a valid test of the pupil’s learning.

Teachers may have little control over the examinations set by the Government. However these issues need to be debated nationally and teachers have a vital role to play in this. Change will not happen unless the need for it is made clear. In South Africa for example, their education system is moving away from a reliance on examinations to including continuous assessments.
But even with existing examination systems, it is worth remembering that many people with disabilities have completed university courses and become successful leaders in industry, education and politics. You could invite them to talk to your students and colleagues. You will have much to learn from them.

Review of the Unit

- As many teachers have discovered, dealing with diversity among pupils simply means becoming a better teacher!
- It means using all the skills you have acquired as a teacher but applying them more consciously and consistently.
- The ideas listed in this Unit can be applied to all pupils, especially to those who may encounter problems in their learning. They are not just for pupils with special needs.
- They do require teachers to change their practice and to spend more time in planning and preparation. But this makes their job in the classroom easier!
- Teachers report more job satisfaction as they see children progress. As one teacher put it: ‘It is our contribution to nation-building’.
- Changes may also be needed in the examination system in order to be fair to children with special needs.
After working through this Unit, you will know:

- How schools can come together to support one another and their teachers in promoting inclusive education.
- The need to change the cultures of schools so that they are working actively with their community.
- The links that need to be made with other groups in your community. This includes parents and carers; health personnel, community workers, disabled persons’ organisations and community supporters who can help pupils find employment when they leave school.
- Practical ways in which teachers and schools can work together with other groups in the community.

Content:

- **Part 1** describes ways in which schools within a district can assist one another.
- **Part 2** examines the change needed in the school cultures.
- **Part 3** outlines ideas for working with five groups in the community who can assist teachers. They are:
  1. Parents and carers
  2. Health personnel
  3. Community workers
  4. Disabled persons’ organisations
  5. Community supporters
The challenge of creating education for ALL cannot be done by one school in isolation. Rather it requires the active co-operation and participation of all the schools within a district – pre-school, primary and secondary. This is essential to ensure continuity in the education of children with special needs. Much good work will be undone if a pupil has to transfer schools and the receiving school is not prepared to adapt to his needs.

Co-operation among schools is even more crucial if special schools are located in the district. When ordinary and special schools work together, the pupils and teachers in both types of schools will gain.

However, the tradition in many countries is that each school is expected to be self-sufficient with little contact and communication occurring between teachers and pupils beyond competitive games.

The educational authorities of course should give a lead in bringing school together. But if this is not forthcoming, then teachers and more especially headteachers can get things moving.

Here are some ideas that are emerging from around the world to foster partnerships between schools in supporting each other’s efforts towards inclusive education.

1. The headteachers of the schools and representatives of the school board of management meet at least once a year to review issues of common concern. This could include reviewing if all the children in the district are enrolled in schools; the admission of children with special needs; access to buildings and equipment; training of staff and support for teachers and children.

2. Likewise, teachers can visit each other’s schools to learn about the initiatives they have taken in their classrooms to include all children.

3. The schools might try to establish in their district a shared resource centre of teaching aids and equipment; books, magazines and video programmes that teachers and families can use. It would ideal if this was linked to a local teacher education institute.

4. Teachers may be seconded to another school for a period of time. For example, a teacher from a special school may go to a neighbouring primary school to assist the staff there. This could happen for a period of time – for two weeks – or one day a week for a term. Likewise, teachers from the ordinary school could be seconded to the special school or Unit.
In some countries, the education authorities have provided resource teachers to assist pupils with special needs. They may cover a number of schools. These resource teachers could convene teachers’ meetings; arrange for teacher exchanges and organise training inputs for groups of staff drawn from all the schools for which they have responsibility.

A group of teachers drawn from all the local schools can be convened to work on topics of mutual interest and need in developing more inclusive schools; such as curriculum adaptations, teaching methods and assessing children's learning. These working groups should have a specific focus and be time-limited. The product can be shared with all schools. This means that work gets done which one school could not do on its own but it also produces shared policies and procedures across the schools.

If teachers from one school attend a training course, on their return they could become a resource for the teachers in other schools in the district; for example by speaking at staff meetings or at parent meetings, or they might organise training inputs for local teachers.

Groups of schools within an area might invite local 'experts' to present training workshops for all their staff. They may be found in teacher training colleges, universities, Ministry of Education or non-governmental organisations (NGOs). By combining with other schools, such events will attract reasonable numbers of participants and once again, networks are built among teachers.

Pupil exchanges can also be encouraged between those in special and ordinary schools. This can take many forms; visiting for social events such as concerts and sharing lessons in particular subjects – such as art, P.E., or music. Schools that are physically close could base a class in each other’s premises to increase the informal contacts pupils have with one another. Also some children in special schools may attend the ordinary school for some or nearly all of their lessons. These sorts of arrangements can be reviewed as the children’s needs change. The child may come to spend more or less time in one or other setting.
In Amman, Jordan, six private schools started a support group for teachers. Five years later, fifteen schools are involved. The objectives of the group are to support each other through discussion of issues, difficulties and successes related to their work. They also invite other professionals in related fields to participate in the meetings and share their expertise. A two-hour meeting is held once every six weeks. The group take it in turns to host the meeting in their school. Minutes are kept of each meeting and sent to all members of the support network.

Among the issues debated have been working with parents on acceptance of the child’s difficulties; grading students in relation to themselves and their peers; how to deal with teenage students when they reach the upper grades; in-service training needs and the formation of a professional association of teachers of children with special needs working in inclusive schools.

Can you think of other ways in which schools can support each other?

Which of these ideas could be used with schools in your district?

The UNESCO Teacher Education Resource Pack: Special Needs in the Classroom gives further information on changing schools.
Teachers can help pupils with special needs in many ways at school. But they cannot do everything on their own. They need to work alongside parents, health personnel, community workers and disabled persons’ organisations.

This may mean changing the cultures of schools. In many countries, schools do not have close links with these groups. But this attitude is changing.

Children’s lives cannot be easily divided into ‘school life’, ‘home life’ and ‘community life’. Problems in one aspect of their life, will affect the others.

School is a phase in a child’s life. Links need to be made between schools and services for children and families in the pre-school years. Likewise schools need to help prepare pupils for life after school.

The skills needed to live successfully in the society cannot be taught only within school buildings. They need to be carried over into the community.

Education is everyone’s responsibility and should not be left to teachers alone.

Can you think of other reasons why schools need to be closely linked into their community?

Making a Start

The culture and traditions of a school are not quickly changed. One person cannot do it alone. The people with influence must back the change. Such people are:

- The headteacher
- The school board of management
- The school inspectors
- The senior teachers in the school
- Politicians at local and central level
But these important people cannot change things on their own. The teachers, parents and even the pupils have to be willing to make it happen!

These groups need to communicate with one another to bring about change. This means:

- Teachers need to meet to discuss their vision for the school and its place in the community.
- The school board of management meets the teachers.
- Meetings are held with parents.
- Discussions take place with educational officials such as inspectors.

The outcome can be an agreed policy on the school’s links with the wider community. This helps people outside the school to understand the changes that are taking place. It also gives individual teachers permission to work with other people outside of the school.

Examples

A special school in a rural part of South Africa is working hard on an outreach project in the community. They have started a disability awareness programme. Staff of the special school have worked with the local ordinary schools to produce a play. This involves children with disabilities from the special school and children for the ordinary schools in the area. They perform the play on Sundays in churches in the area. They have T-shirts printed with the message ‘Disability is Not Inability’ in English and in the local language, Zulu. These are being sold in the community. The play is having a great impact on the community. They no longer have to ask to put it on; they are now being invited to present it in various venues.

Is there a clear policy in your school for links with the community?
If not, what are the first steps you could take to develop one?

■

■
In this part we list ideas for working with five groups in the community. You may already be doing some of them but there are other suggestions you could try.

It is vital for teachers to work with other groups on certain issues. For example:

- Transporting children to and from school. Children with physical and visual impairments as well as those with intellectual disabilities may not be able to walk to school alone. Arrangements need to be made to ensure they get to school safely. Equally some children may have to walk long distances and arrive at school tired.

- Children’s health and physical well-being must also involve other people.

- What happens when children leave school? Teachers are no longer responsible for them but they need to ‘handover’ to other people who can take on this responsibility.

In addition, other people can assist children with their school work and help teachers in their job. Hence there are very good reasons why teachers need to work in partnership with others. Here are ideas for doing this.

**Working with families**

Children do best at school when families take a close interest in their education. Some parents or carers may be reluctant to contact the teachers in case they are thought to be interfering. Or perhaps they have had bad experiences at school.

Equally parents and grandparents are likely to be the people who know the child best. They are a good source of advice for teachers and the child’s main supporters.

Schools need to welcome parents. Here are ideas that schools around the world are using. Some parents are more willing than others to become involved. Start with the willing parents and use them to encourage others to join in.

- Parents are invited to meet the child’s teacher at least once a year to discuss progress.

- Parents are involved in drawing up the individual education plan for the child with special needs.
Reports on the children's progress are sent to the parents every term.

Teachers are willing to visit the family at home. This lets them see how the child gets on there.

Parents are invited to visit their child's class. They can see the teaching methods used in the class.

Parents can enrich the cultural and ethnic diversity within schools by consulting with them on school practices and involving them in special events and festivals that celebrate their culture.

Parents are encouraged to assist children with their homework. They could be asked to sign the child's work.

A notebook goes between home and school with the child each day or at least every week. Teachers and parents can exchange information about the child's school work and learning.

Parents are asked to help with activities outside school hours, such as sports, choir and school outings.

Short training courses can be organised for parents. These should focus on practical activities that parents could use at home to help the child learn new skills. Teachers can arrange for visiting speakers to come to these courses.

Parents can be invited to join some of the training courses that are organised for teachers.

Parents can be put in touch with the national associations for parents of disabled children. Often they have booklets they can send parents. They may have local branches that parents can join.

Parents who have children with disabilities are assisted to form a local association. Parents can learn from one another. Visiting speakers can talk to the group and answer their questions. The group can press politicians for further help.

Representatives from the parent groups can be invited to join the board of management for the school.
At a primary school in Durban, South Africa, teachers use grandmothers as a resource to develop the reading abilities of the children. Grandmothers have been trained to listen to children read and to encourage them to interact with texts. Twice a week, grandmothers come to the school and work with groups of children in the playground or under a tree. This also frees up the teachers to work with children who may be experiencing difficulties in learning and who may need individual attention from the teacher.

What other ways can schools help parents to become involved in their child’s education?

- 
- 

Are there ideas you could try with the parents of children with special needs in your school?

- 
- 

In Unit 1, we noted that children could have health conditions that hold them back at school. Schools need to foster close links with health personnel. Every country has a network of community health workers. In your community there may also be doctors and nurses you can contact or a mobile health clinic. There could also be specialists such as therapists.

Perhaps a community based rehabilitation project is working in your district. This involves trained personnel – either volunteers or paid workers – visiting families at home who have a child or adult with disabilities. They provide suitable aids, give advice on activities to promote self-reliance and income generation, and find ways of mobilising the family and the local community to assist the person.
Schools should keep a list of health personnel and where they can be contacted. This list should be given to all teachers.

Schools should invite these persons to visit so that they can meet the headteacher and teachers.

Schools can offer their premises to these workers for ‘clinics’; for example, to carry out health checks on children in the pre-school years. In this way, parents and pre-school children become familiar with the school.

If teachers suspect children of having health problems, they should refer them to these clinics.

Health personnel can be invited to speak at parent meetings or on training courses for parents or teachers. Likewise, teachers may get invited to training courses organised for health personnel.

Health personnel already involved with the child and family, such as CBR workers, can be invited to the school. They can contribute to Individual Education Plans for the child.

Often appropriate personnel are not available. The school board of management should write to the health authorities and local politicians to point this out.

Retired health workers may be willing to offer their services to the school on a voluntary basis. They could assist with developmental checks and screening for disabilities.

Example

In Guyana, South America, the National Community Based Rehabilitation Programme organised an art competition for all schools in the interior region of the country. The theme was Health for All. Volunteers from the local CBR programme visited schools presenting short plays about the dangers of malaria, the need for clean water and the importance of vaccinations. An exhibition of entries was held in the local town and certificates awarded at a special ceremony attended by district officials, teachers and families.
Community workers include a variety of persons; employed and volunteers. The government and NGOs employ various community workers with different roles. They may work with and assist families in many ways. They may organise income-generating groups for women or unemployed youth. Or they may lead self-help initiatives such as building projects.

Voluntary organisations depend on volunteers. They may be involved in similar activities to employed community workers. In addition they may be leaders in youth organisations or in sports clubs.

Schools need to link with employed and volunteer community workers. Many of the suggestions made for health workers apply to these groups as well. For example, they could be offered the use of the school buildings and places on suitable training courses.

Here are some additional ideas.

- Some families can be helped with their basic daily needs and possibly supported to start income-generating activities.

- Community groups could make the school buildings and toilets more accessible for people with physical disabilities. They can build ramps and widen doors so that wheelchairs can be used more easily.
Volunteers could make play equipment and teaching aids.

Youth organisations and sports clubs can be encouraged to enrol children with disabilities for after-school activities.

Volunteers can be recruited to assist in the classrooms.

Invite reporters from the local paper to any events that the school organises with community workers. This can encourage more people to volunteer.

Example

The **Bangladesh Rural Advancement Committee** (BRAC) is one of the largest NGOs in the country. Its efforts are focussed on poverty alleviation. It started a non-formal primary education programme in 1985 with 22 pilot schools which now it encompasses over 40,000 schools. It provides schools for students who have dropped out of government primary schools. After completing BRAC courses children are able to continue their education by enrolling in formal primary schools at the appropriate level.

Most BRAC schools are situated in the centre of villages. Most teachers are recruited locally. They are required to have completed nine years of schooling and are given a 15-day training course supplemented by in-service training. Parents and teachers determine the timing of lessons. The community is involved in choosing a site for the school and in providing labour and materials to build classrooms.

What other ways can schools link with community workers?

- 

- 

Are there ideas listed, which you could try with the community workers in your locality?

- 

-
There are two kinds of disabled persons' organisations. There are those run mainly by able-bodied persons for disabled people. Often they raise funds, make donations to individuals and provide services for children and adults.

The second type of organisation is made up of disabled people. It is people with disabilities who run the association. They aim to promote the rights of disabled people rather than fund-raise or provide services. However, many offer training and support for their members.

Parents of children with different disabilities have also come together in associations. These associations also provide information and advice to their members through meetings and publications. They may also organise services such as pre-schools or vocational training.

All these different associations are usually based in capital cities. Some have local branches throughout the country.

Often each association concentrates on a specific disability. In some countries a federation of disability organisations has been formed with the aim to press for equal rights, better services and to educate communities about disability.

The advantages for greater contact between schools and disabled people's organisations or Parent Associations are these:

- The associations can give teachers advice and guidance on how to deal with specific disabilities.
- They can supply information leaflets for parents.
- They may be able to provide special equipment and devices to assist the pupil in school or at home.
- Members of the association could be available for training teachers and parents. For example, deaf people can teach sign language.
- The members can be valuable rolemodels for young people with disabilities.
- School-leavers can be encouraged to join the associations and to go on training courses they organise.
- They may be willing and able to do fund-raising for schools either locally or internationally.

Keep a list of disabled persons' organisations and parent associations both locally and nationally.
Invite adult persons with disabilities to visit the school to meet with pupils and teachers.

Encourage the formation of a self-help group of people with disabilities in the locality. Community workers could help with this.

The formation of parents associations can also be encouraged to provide mutual support and assist the schools in planning to meet the children's needs.

**Example**

Nenio, a deaf student attended his local high school in Swaziland. In his fourth form, he had difficulties understanding some subjects and his teachers were struggling to help him. He and his parents went to see the special education co-ordinator at the Ministry of Education. With help from the national deaf association, the co-ordinator arranged for a workshop to be held for Nenio, his teachers and fellow students. This gave the participants a greater understanding of deaf issues and the difficulties faced by a student such as Nenio in an ordinary school. The workshop also covered the basics of sign language and tips for the teachers. The teachers felt empowered and Nenio had gone on to successfully complete his secondary schooling. He now wants to further his studies at university. Meantime he has a black belt in karate and a part-time job as a male model.

**What other ways can schools link with disabled people's organisations and parent associations?**

- 

- 

**Are there ideas you could try in your locality?**

- 

-
Young people with special needs can find it difficult to find their place in society. This can be especially true when school years are over.

The common concerns for school-leavers are:
- No employment
- Few friends and difficulty finding a partner
- No accommodation of their own

Can schools do anything to help teenagers with special needs to overcome these concerns? Around the world the answer is Yes. But teachers need to look outside the school and work in partnerships with others who can support the young people.

If school-leavers can get employment, there is a greater chance of them making friends and getting their own accommodation.

Here are some ways teachers are doing this.

**Vocational Classes** Many secondary schools have developed a more practical curriculum for their students with special needs. This concentrates on life-skills rather than academics. Students learn to look after their personal needs, such as washing clothes and cooking. They also learn some job skills – sewing, woodwork are common examples. The job skills should be relevant for the needs of the community. Training is also given in managing money and interpersonal skills. Volunteers from the community are recruited to assist with these programmes.

**Work experience** Teachers find employers who will take the young person into their business so that they can experience the work that is done there. They are not paid but the employer is expected to train them in some jobs that they could learn to do. This gives the young person a chance to prove themselves as well as learning to deal with new situations.

**Vocational training** School-leavers can be enrolled in courses that train them for work. If these centres have not taken people with disabilities before, they may need some help and support. The school-leavers might attend on a part-time basis to get familiar with the people and the trainers with them.

**Family businesses** Parents can be encouraged to help the young person set up their own business or to assist in the family business. This can start from in the teenage years and could link with the life-skills curriculum mentioned earlier.

**Further Education** A person’s chances of getting a job are
increased if they have further education. Young people with special needs should be encouraged to apply for college or university courses.

**Employment** Young people with special needs can apply for jobs in just the same way as other young people. However they all need to learn about the skills needed for jobs and their competence to do a job. They may need training in completing application forms and personal presentation at interviews.

**Note** Young people need to be socially competent if they are avail of these opportunities. This includes looking after their personal care needs, being able to communicate, using public transport and handling money. Hence the school curriculum must include these and other functional skills for their teenage students with special needs.

**Example**

In **Lusaka, Zambia**, young people with disabilities are enrolled in regular vocational training programmes. These are one year residential courses in which the young people sample a range of work activities such as weaving, metal work, sewing and animal husbandry. They are also go on work experience placements with local farmers and businesses. Those from rural areas will also have the support of staff to help them set up their own income-generating projects.

**What is your school doing to prepare young people with special needs to get employment?**

- 

- 

**Who could assist you to do this better?**

- 

-
Working in partnerships places extra demands on teachers. But the rewards are also many as you create more opportunities for your pupils. Teachers who work in this way find their jobs more satisfying. For example, Tanzanian teachers felt that schools that collaborated with local communities and authorities had better status, equipment and security.

- Teachers may feel they have not been trained to work in this way. That is true. But many have taught themselves! Teachers with experience can guide and support others.

- The ideas listed in this Unit will benefit all pupils in the school. They are not just for pupils with special needs.

- These approaches redefine the role of schools and teachers. They place different expectations on schools. The test of their success is simple. Do they result in happier, more fulfilled lives for the pupils both at school and when they leave school?

### Review of the Unit

### Getting Connected

The final activity asks you to reflect on the connections which you as a teacher and your school has with other groups in the community. This is best done in conjunction with some or all of the teachers in your school. Responding to children with special needs demands teamwork from us all!

Read over the answers you have given to the questions asked in this Unit.

What links has your school with the groups mentioned in this Unit?

- 

- 

- 

-
What new links do you feel would benefit you and your pupils? If you can, put them in an order of priority starting with people you feel is most important. You might go on to note ideas for how you could do this. Try to compare your answers with colleagues in the same school.

*I need to link with*  

*How I could do it*

1. 

2. 

3. 

4. 

5.