

KITWE COLLEGE OF EDUCATION

PRIMARY TEACHERS' DIPLOMA

Education and Professional Studies

Module 2B

EDUCATION AND PROFESSIONAL STUDIES SECTION

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Module overview

Welcome to module 2B of Education and Professional Studies. In this module we will look at the aspects of Special Education. When a child has a particular disability that impairs his/her functioning, we recognize that there needs to be particular efforts on the part of the school to accommodate these differences. The child will benefit from an education system that takes into account his/her abilities, be they intellectual, emotional or physical.

In this module we will look at ways in which classroom instruction can provide for children with special education needs. We will work together with you to prepare you for challenges you might face due to the presence, in your classroom, of children with various special educational needs.

The module is divided into three units.

Unit 5: Introduction to Special Education

Unit 6: Types of disabilities

Unit 7: Inclusive schooling in Zambia

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Unit 5

Introduction to Special Education

Introduction

In this unit you will be introduced to what special education is and the different terminologies that are used in special education. You will also learn why special education needs children require extra care

Outcomes

Upon completion of this unit, you will be able to:

- State the definition of special education
- Demonstrate understanding of the origin of special education from both the global and Zambian perspectives
- Analyse the differences between special education needs and special needs education
- Appreciate the need to offer special education to needy children

Terminologies

- Special Education- Education designed to meet the special needs of pupils with marked disabilities of body and mind.
- Special Educational Needs- Education tailored or designed for children and adults who may require Special attention.

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- Special Needs Education- The provision of special means of access to the curriculum through special equipment, facilities or resources
 - Impairment- An identifiable defect in the basic functions of an organ or bodily system
 - Disability- Loss or reduction of functional ability as a result of impairment
 - Handicap- problems a person with a disability or impairment encounters in interacting with the environment

What is special Education?

How familiar are you with various terms that are used *Special Education* issues. Let us begin by considering some of them.

- i) **Special education** is the provision of education appropriate to the needs of an individual, in addition to, or different form that provided for children of the same age group. Simply put, this is an individually planned, systematically implemented and carefully evaluated instruction to help learners who need extra support in learning.

-
- ii) **Impairment** is the absence or malformation of a part of or an organ of the body. For example, a person may be missing a limb
 - iii) **Disability** refers to the restriction or inability of the part of the body or organ to perform its intended function. A disability can be the result of impairment. For example, a person without eyes has the disability of being unable to see.
 - iv) **Handicap** is the disadvantage caused by a disability that prevents or limits an individual from fulfilling a role that is expected of persons of similar age, sex, social or cultural background e.g. due to lack of sight, one can not drive a car. A disability may pose a handicap in one environment but not in another. A handicap can result because of societal attitudes e.g. most schools in Zambia are built in such a way that one needs to climb stairs from time to time. This handicaps pupils with physical disabilities. Also if all jobs required reading print, all persons with visual impairments would be handicapped (Kalabula, 1991).

(V) Normalization

This is an approach or philosophy that maintains that people with impairment, disabilities or handicaps must be seen as a natural part of society.

Their needs and quality of life must be guaranteed through the same laws, legislation and services.

The environment, including modes of communication and facilities must be adjusted and the curriculum must be flexible so that all children can be included in the same school.

(Vi) Inclusive Education

Inclusive education is based on the idea of normalization, expecting the environment, curriculum, and means of communication, teaching methods, education materials and other environmental factors to be adjusted to the needs of learners with SEN.

Some children are born different from normal children. They become different during their development, or are affected by an infection or an accident. They are said to have a disability because they are not able to do the same things as other children. A disabled child is one who suffers from long term disability which interferes with growth and development or the normal function of the body, or the ability to learn.

A disability may be quite mild or very severe. Whether the disability is slight or great, the baby or child is still a human being and needs love and care like all other children. Disability people used to be locked away in institutions.

Nowadays, parents are encouraged to after their babies, children or relatives at home.

Activity 1:

Look up the meaning of the terms disability, handicap and impairment. Do these two terms mean the same thing? If not how are they different? Discuss with your answers with your colleague.

Comment

Did you find your discussion interesting? Compare your findings with ours here. A handicap is not the same as a disability or impairment. It is rather part of a relationship of cause and effect. An injury causes an impairment, which in turn results in a disability, which further produces one or more handicaps. See diagram below:

Activity 1

Look up the meaning of the terms handicap and impairment. Do these two terms mean the same thing? If not how are they different? Discuss with your answers with your colleague.

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Special Educational Needs – (SEN)

Special Education Needs (SEN) is defined as Education by special methods appropriate to the requirements of pupils or students whose physical, intellectual, emotional or social development cannot in the opinion of the education authority be adequately provided for by ordinary methods in education. Special education is tailored or designed for children and adults who may require special attention.

Originators of Special Education

The father of special education is Jean Marc Gaspard Itard (1775- 1835). He was a physician of the deaf students. He did this by providing systematic structured procedures by educating a boy called Victor. He found Victor wandering in the forest of Aveyron in France. He adopted him and started training him. He discovered that the boy's hearing span was

alright. Through systematic procedures, Victor became educable. He later wrote a book titled *“Victor the wild boy of Everyon* in 1801.

The other pioneer of special education is Eduord Sequin (1812- 1880). He was a teacher of children with Mental Retardations. He started the first school in France but later migrated to the United States of America.

Special Education In Zambia

The first attempt to teach disabled children was made in 1905 by Miss Issie Hifmeyer at Magwero in the Eastern Province. In this venture, 5 blind children were enrolled. One of the children was Mr. Lazarus Banda. After the death of the founder, another missionary by the name of Ella Botes started a class at Madzimoyo. In 1923, it expanded into a school Nyanje and later at Magwelo i9n 1929. The school expanded later to Congo D.R, Mozambique and Malawi. The instructions consisted reading the Bible and handicrafts. Enrolment age ranged from 7- 35 years.

In the late 1950's provisions of facilities for disabled children remained in the hands of missionaries. Later the Zambia council for the handicapped under the auspices of the Ministry of Labour and Social Services became responsible for the handicapped children.

In 1971, the Ministry of Education became responsible for education of disabled children following a Presidential decree of 1970 that mandated the Ministry of Education to

take up the portfolio. With this effect, a college for teachers of the handicapped- Lusaka College for teachers of the handicapped was opened. This college is today called Zambia Institute of special Education. In 1996, a degree programme was introduced at UNZA.

The National Policy on Education (MoE, 1996) clearly states that the Ministry upholds the principle that every individual has the right to educational opportunities. This means that every individual regardless of personal circumstances has a right of access to and participation in the education system. Ensuring full equity of access, participation and benefits for all pupils necessitates intervention at all levels to support children at risk.

Special Needs Education (SNE)

The idea behind this concept is that some children have educational needs which are not met by the ordinary provision in class. These needs may be the consequence of under stimulation, social economical factors, neglect or abuse, traumatic experience, an impairment or can cater for either condition that makes it difficult for a person to follow the regular curriculum or ways of teaching .In order for these children to be able to develop their full potential, modification may need to be made to the curriculum, teaching methods, teaching and learning materials, medium of communication or to the environment e.g. a child who cannot hear needs to use visual means of communication; a child who cannot see needs tactile instead of visual learning

material; a child with general learning difficulties needs a modified curriculum. A ramp should be provided instead of steps for a child who uses a wheel chair.

SNE does not only look at the partially sighted pupils nor pupils that are physically handicapped, it looks at the less and more gifted children. In a mathematics lesson for example, the more gifted children may finish the task given earlier than the rest. In order to occupy these children the teacher should give them more problems to solve or give them challenging problems which will keep them learning at their own pace.

Why children with special educational needs must be given extra care

There are several answers to this question. Some of the answers may be:-

They need this extra care because they have an increased liability for things to go wrong. They have a greater or higher possibility of receiving faulty educational information. Think of a partially sighted child who attends ordinary school where his or her learning needs are not identified and recognized, the child may become retarded because he/ she may not be able to see the writing on the chalkboard or the chart, when this happens the child will try to make up his own conclusions which may be erroneous and therefore, get experience and education which may be termed as faulty.

It is important as teachers to be on the lookout so that we may identify pupils who may have learning difficulties and may require special attention. How can this be done? This may sound to be difficult especially that we have very little knowledge in medicine if any. This needs each one of us to be very observant. The simplest thing to do is to note the mistakes or the awkward things a pupil does. An example here could be a pupil that squints his eyes in order to try and see what is written on the chalk board, this could be indicator that the pupil has some problem with sight.

Specific Learning Difficulties (SLD)

Learning difficulties (disabilities) is a generic term that refers to disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning or mathematical abilities. Included are perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The definition does not include learning problems that are primarily the result of visual, hearing or motor disabilities, mental retardation or cultural disadvantage.

According to Nielsen (2000), the following characteristics are exhibited by children with learning disabilities:

- In appropriate behavior
- Excessive variation in mood
- Poor organizational skills
- Failure to see consequential facts

-
- Awkward use of pencil and scissors
 - Distractibility
 - Hyperactivity
 - Perceptual co- ordination problems
 - Impulsiveness
 - Low tolerance to frustrations and problems
 - Difficulty in reasoning
 - Low self esteem
 - Difficulty beginning a task or completing a task
 - Uneven and unpredictable test performance
 - Visual- sequential, aural memory deficits
 - Auditory processing difficulties
 - Visual- motor co- ordination problems

Etiological Factors for Specific Learning Difficulties

These should be understood to be particular (special) to each individual child and based on lack of function in the central nervous system.

Causative factors have been identified under the following categories:

1. Neurological causes- According to Lovitt (1989), causes result from the central nervous system having gaps in how information is acquired, retained and processed. These children don't seem to process information as others do of the same chronological age.

-
2. Genetic causes- A group of researchers studied a sample of 101 children with LDs and concluded that LDs run in families. A gene has been found to contribute to e.g. dyslexia.
 3. Development lag- each child's mental processes matures at different rates. Therefore, children whose neurological development is slower than their peers will be unprepared for academic tasks they face in school and may develop learning problems when asked to perform tasks for which they are not developmentally ready (Mercer, 1992).
 4. Poor educational experience- This category cannot be determined medically or clinically because it is due to bad education. However, it is a social construct, a convenient way for educators to blame students who have trouble learning and to avoid admitting that the education system has failed these students. Therefore, poor instruction especially in lower grades account for the problem in 90% of all cases identified with LDs (Engelmann, 1977).

Identification and Assessment of Special Education Needs (SEN)

Students should develop knowledge and skills of using classroom indicator of specific learning difficulties.

INDICATORS

- Physical indicators

-
- Behaviour indicators
 - Emotional indicators

ASSESSMENT

Common areas of assessment for possible learning disorders are: mathematics, language, reading, writing and spelling.

Assessment Procedure and Analysis

This is a diagnostic assessment which tries to find out the actual learning problem so that a pupil could be helped in line with appropriate methods.

In assessment, the teacher finds the child's weakness and strengths, learning style and likes and dislikes, because it is from here that the teacher can design a learning programme for the child (Individualized Education Programme)

Individualised Education Plan (IEP)

An Individualised Education Plan (I.E.P) is a written plan of instruction that identifies the learning needs of children and their required activities to correct the needs. It outlines a continued plan of actions to meet the needs of a child. It sets to meet the education goals; resources required and indicate how evaluation of a client ought to be done.

A TYPICAL EXAMPLE OF AN I.E.P

- Name of child: Shatewa
- Subject area: Reading
- Name of teacher: Mr. Ngenda
- Level of performance: - Shatewa can identify six of

of the twenty phonic sounds.

- Can read grade two story book without assistance.
- Can read a grade 3 story book with assistance.

- Long term goals: 1. Given grade 3 story book,

Shatewa will be expected to read without assistance.

2. Shatewa will identify and use 15 phonic sounds without Assistance.

DATE INITIATED	OBJECTIVES	MATERIALS	EVALUATION	DATE COMPLETED	REMARKS
07/01/13	Read grade 2 story book at 100 words/minute with 100% comprehension	ictures ord cards tory books	Shatewa reads grade 2 story book correctly	11/01/2013	Shatewa Is able to read grade 2 story book
14/01/13				18/01/13	
25/01/13				29/01/13	
05/02/13				09/02/13	

Comment

You might have come across a lot of teachers who have a child with special Education needs. Such teachers need to understand how to facilitate learning for children with different disabilities. We shall discuss some of these later on in the module.

(a) Why are some children disabled?

Disabilities can happen in any family, to any kind of a person and at any time- it is usually nobody's fault. Therefore, disabilities should not be thought of in terms of blame or fault. They just happen, often due to circumstances beyond our control.

SOME CAUSES OF DISABILITIES

i. Congenital disabilities

These are disabilities present at birth e.g. cerebral palsy.

ii. Inherited diseases

Some disabilities are due to inherited diseases, for example sickle-cell anaemia which affects the red-blood cells.

iii. Poor antenatal care

Another cause has been identified as poor antenatal care or if a woman contracts certain diseases during her pregnancy, for example Rubella (German measles), Syphilis, Gonorrhoea and Chicken pox. Poor antenatal care can include poor diet, smoking, taking alcohol, unprescribed drugs and having X-rays during pregnancy. This is why it is very important that a pregnant woman takes good care of herself.

iv. Down syndrome

Caused by faulty chromosomes leading to mental handicaps, have poor physical development or be born prematurely (before due date). The above can mostly happen if the woman is having her first baby when she is above 35 years old. The child will have Down's syndrome as a result of having an excess number of chromosomes. Instead of having a normal 46 chromosomes, one has an extra chromosome resulting in 47, hence, down syndrome.

v. Close parity

Having babies in close parity e.g. having one child after the other instead of a gap of at least two years could also result in a disabled child being born.

vi. Stress during pregnancy

Stress during pregnancy, resulting from divorce or death in the family could affect the unborn child. Lack of support and love, financial, social and emotional stress

are other external factor which may cause the baby to be damaged in some way. Stress may also cause spontaneous abortions or pre- mature births.



In this unit we have discussed what special education is, origins of special education, specific learning disabilities and some causes of disabilities. Now that you have finished unit one, can you proceed to the activity.



Activity 1.1

Discuss what special education is. What are specific learning disabilities? State the etiological factors to SLD's.

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Now that you have done the activity, can you check for the answers in the module and mark yourself.

Unit 6

Types of Disabilities

Introduction

When a family has a disabled child, the challenges in raising the child become more complicated. Professionals like teachers, counsellors, health workers and others should be reassuring and realistic in their efforts to help the child. The first step in preparing for this task is to be educated on different types of disabilities.

Learning Outcomes

By the end of this unit you should

- Identify different physical disabilities
- Describe causes of physical disabilities
- Plan lessons that cater for children with various disabilities

Upon completion of this unit you will be able to:

State the different disabilities



- *Define* terms related to special education.
- *List down* common indicators for different disabilities.
- *Demonstrate* how teachers can assist learners with different disabilities.
- *Identify* different causes of disabilities.
- *Explain* causes of disabilities.
- *Plan* lessons that cater for children with various disabilities

Terminologies



Hearing impairment-	is the malfunction of the ear or the inability to hear
Pre- lingual deaf-	one who is born with little or no hearing
Post lingual	one who becomes deaf due to environmental forces
Deaf	- a person who cannot hear due to problems in the hearing system (congenital)
Hard of hearing	people who have residual hearing
Deafened	- people who were born hearing and have become deaf due to the environment or disease

Hearing Impairment

Hearing impairment is the malfunction of the ear or the inability to hear. Two types of the hearing impairment are

partial deafness and complete deafness or a total inability to hear. Do you know what causes these hearing impairments?

Some of the causes are:

- Aging
- Exposure to loud noise
- Cleaning the ear with sharp instruments
- poisoning
- Head injuries
- Neurological
- Use of un-prescribed drugs during pregnancy
- Brain damage during peri- natal stage
- Inheritance
- Illness

You might be wondering how you could identify children with hearing impairment in your class. Signs of hearing impairment fall into two main types, namely **physical** and **behavioural**. As shown in the table below, such children exhibit behaviour which will suggest the presence of a hearing impairment.

Physical Indicators	Behavioural Indicators
i) Absence of or abnormally small pinna, or outer ear	i) Asking for repetition
ii) Otitis media (a thick white liquid seeping from the ear)	ii) Close looking at speaker's face
iii) Presence of a foreign	iii) Reading difficulties (pronunciation)
	iv) Poor results in spellings and dictations

body in the ear. iv) Titling of head towards the source of sound	v) Poor language structure vi) Lacking attention vii) Lack of concentration viii) Omission of common vowels and the consonant s. viii) Needs to sit at the front of the class
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AUDIOLOGY

Audiology is a term that means *the study of the science of hearing*. It consists of the study of the ear and how sound is perceived by the ear.

In everyday speech, we talk about soft and loud sounds. In audiology we must be more specific. We must talk of sound using measures. Sound levels are measured in decibels (dB), which is a relative unit. Zero dB does not mean 'no sound at all', but is the level that a normal ear can just perceive.

Screening Tests.

In order to confirm a hearing impairment screening tests are done. These involve testing those children with indication of a hearing impairment using standard or non-standard tests. When using the standard test, machines like "audiometer" are used. When using the non-standard tests, children's behaviour is observed.

Types of Screening Tests.

There are four types of screening tests:

- i) *Distraction Test*: Tests whether the child at six to eighteen months of age can locate sound sources of about 30 – 40 dB. dB stands for the decibels which is the measure of intensity level of sound. Materials used include bright coloured toys, bell, rattle, chair, traditional mat, a quiet room and tuning fork.
- ii) *Co-operation Test*: This type of testing is carried out on children aged nineteen to thirty six months of age. It tests the comprehension of speech. The child has to respond to instruction delivered at 35 – 40 dB. The test is conducted with either the human voice using instructional sentences or with toys in a quiet room.
- iii) *Performance Test*: This test is done at three to four years. It tests low and high speech sounds. It requires performance rather than speech from the child. The test uses sound signals (human voice) in a quiet room.
- iv) *Pure Tone audiometric test*: this test is used on children of five years or older. Sound at 25dB level is used. The test uses an audiometer and a child size chair in a quiet room.

Results are interpreted by the response of the child to sound as per distance from where sound is produced and the intensity of sound produced. They allow experts to

differentiate between partial and profound hearing impairment.

How can you as a teacher help children with hearing impairments? You need to do the following:

- Sit the child in front near the chalk board or teacher
- Face the child when talking to the class or non-on-one
- Use gestures when teaching
- Use visual aids and concrete objects when teaching

Activity 3

What are the services and sources of help are available to pupils with hearing impairment who may be in your class?

Such sources with vary depending on the locality where you are. As a teacher you may need to help your pupils and even parents who need advice on where to find these sources of help.

Visual Impairment

Visual impairment is the inability of the eye to function properly. There are two types of visual impairment and these are partial visual impairment (restricted sight such as that experienced by albinos) and total visual impairment (complete absence of sight)

Causes of visual impairment

Do you know some of the cause of visual impairment? Some of them are poisoning, excessive use of drugs, aging, diseases

such as STI like syphilis and gonorrhoea. Heredity is another cause.

How Can You Identify Children With Visual Impairment?

The presence in your class of children with visual impairment will require you to plan your methods in such a way that they also benefit from your teaching. How can you, therefore, know whether you have such children in your class?

The indicators that can help you to identify visual impairments are of two types; **physical** and **behavioural**.

PHYSICAL INDICATORS	BEHAVIOURAL INDICATORS
• Lack of eye ball • Weak eye lids • Abnormal large or small eye ball • Cataract • Glaucoma • Inflammation of the eye (conjunctivitis) • Ulceration of the cornea • Crossed eyes • Red – rimmed, encrusted or swollen eyes • Inflamed or watery eyes • Recurring sties or infections on the eyelids	• Avoids sunlight (shading) • Eyes water • Abnormal opening and closing of eyes • Rubs eyes often • Shuts or covers one eye • Tilts head or pushes head forward • Has difficulty with reading or other close – up work. • Holds objects close to eye • Blinks more than usual or feels pain when doing close – up work • Is unable to see

	distant or near things clearly • Squints eyelids together or frowns.
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Screening Tools

In order to confirm a visual impairment screening tests are done. These include:

a. The E-Chart

This is a chart containing a variety of letters from very large to very small. It is normally hung on the wall. The tester should stand in front of the client, six meters away, for those above five years. Both eyes are tested independently. "Yes" or "No" responses are recorded.

b. The Tracking Test

These are big and bright material objects mostly used to test children from 0-5 years. The tester holds an object in front of the child and moves it in different directions to see if s/he can respond to the movements of the object.

Children with partial sight require help and support from you their teacher. How can you best do this? You need to do the following:

-
- Sit the child near the board
 - Sit the child near a window
 - Write in big letters and no cursive handwriting
 - Do not put obstacles in their path
 - Have another child read work from the board or books.

Physical Impairment And Disabilities

A physical disability is any physiological disorder or condition or anatomic or loss affecting one of the following:

- Neurological
- Muscular skeletal system

CATEGORIES OF PHYSICAL DISABILITIES

1. Orthopedic disabilities involve the skeletal system, bones, joints, limbs and muscles. It also includes amputations or absence of an organ, rickets, scoliosis.
2. Neurological disabilities involve the central nervous system i.e. the brain and spinal cord e.g. spina bifida.
3. Muscular disabilities involve conditions affecting the health and functions of muscles e.g. muscular dystrophy

There are many types of physical impairments. Some of them involve the loss of limbs due to malformation or injury. The physical disabilities, however, are not easily visible. In this module we shall discuss various types of physical impairments and their possible causes.

Causes of Physical Disabilities

As we discuss causes of physical disabilities we need to realise that physical disabilities are either congenital or adventitious.

a. Congenital disabilities are disabilities that a child is born with. They occur during the developmental process, especially in the first 12 weeks of pregnancy. The causes may be genetic or inherited; that is, they are transmitted through the genes from a parent to the child. They may also be due to environmental causes. Examples of these environmental causes include:

- i) **Hypoxia** – lack of oxygen reaching the embryo
- ii) **Infections** – such as German Measles and polio causes malformation in the first 24 weeks of pregnancy
- iii) **Radiation** – exposure to radioactive substances (used in industries) and diagnostic radiology (X-ray) during pregnancy
- iv) Drugs (traditional or conventional), especially during the first 12 weeks of pregnancy
- v) Accidents
- vi) Damage to the central nervous system (neurological causes)

Common Types of Congenital Disabilities

The following are some of the common types of congenital disabilities.

- Club foot
- Cleft lip and cleft palate
- Incomplete limbs, extra or joined fingers, short limbs

-
- Spina bifida – condition where some of the vertebrae bones fail to close over the spinal cord
 - Arthrogryposis – (multiple contractures from birth) the child is born with stiff joints and weak muscles
 - Spinal curve and back born deformities such as
Scoliosis – S shaped curve
Kyphosis – rounded back
Lordosis – sway back

Treatment

Some conditions can be treated surgically, such as club foot, cleft lip, cleft palate and extra digits

Prevention

- Ensure good health and good diet during pregnancy to avoid hypoxia and infections. Hypoxia refers to deficiency in oxygen or shortage of oxygen in the body.
- Avoid exposure to X-rays in the first thirty weeks of pregnancy
- Avoid use of strong drugs in the first three months of pregnancy

b. Disabilities due to disease

Poliomyelitis is an infectious disease caused by the polio virus with inflammation of the spinal cord, cranial nerves and certain small parts of the brain. The virus is transmitted through the mouth. The site of infection is in the motor cells called 'central nervous system.' The attack of this nervous system by this

virus causes the paralysis of the muscles. The end result is physical disablement through the paralysis of either upper or lower limbs, or both. However, there is no brain damage in polio victims.

Safeguard against infection

It is of great importance to safeguard children against infection of the polio virus. How can you do this? Children should be inoculated against polio. It is important to observe cleanliness of both the body and food since a polio virus gets transmitted through the mouth. You should encourage children to wash their hands after using toilets and before eating any food. Encourage them to eat hygienically kept food and drink clean water. It is equally important to encourage them to use toilets/pit latrines.

Educational implications of poliomyelitis

A child with poliomyelitis may need special residential school due to:

- limited mobility to cover long distances
- due to surgical operations and other medical treatments, a child misses lessons. This has caused the opening of hospital teaching units like at Mansa, Monze, Kitwe, Kabwe, Ronald Rose (Mufurila), U.T.H. Arthur Davison (Ndola) and others to enable the admitted children to continue learning.

2. Thalidomide

The availability of the drug '**thalidomide**' as an anti-nausea drug for pregnant women in 1958 led to the birth of children with malformations of the limbs as well as hearing defects. It is believed that intelligence was not affected by the drug. The management of these children varies according to the nature and extent of the malformation due to the arrested development of different parts of the embryo according to the stage at which the drug was administered.

3. Cerebral Palsy

Cerebral palsy is the paralysis of the brain. The causes include:

- (i) Before birth: a failure of the brain to develop normally with the production of many kinds of deformity such as small convolutions (microgyria), hydrocephalic, areas of softening or hardening in the brain.
- (ii) During Birth: difficulty, prolonged or precipitated labour, producing anoxia (shortage of oxygen) to the brain, or haemorrhages in and around the brain.
- (iii) After Birth: infection of the brain (encephalitis or meningitis); haemorrhages in the brain, injuries of the brain. Haemorrhage means bleeding or failure of the blood to clot.

Cerebral palsy cause spastic paralysis in children, where their muscles convulse in irregular, uncontrollable movements. About three-quarters of such children have some degree of mental retardation.

The muscles affected by spastic paralysis could be in one limb or more; and according to the parts involved the following are given:

- Diplegia – major involvement of legs than arms.
- Monoplegia – one limb only affected.
- Hemiplegia – arm and leg on one side of the body affected.
- Double plegia- major involvement of arms than legs
- Triplegia – three limbs affected.
- Paraplegia- involves only lower limbs (legs)
- Quadriplegia – all limbs affected.

Symptoms are apparent at birth or very shortly afterwards when the spasticity has been caused by conditions occurring before or during birth. When due to infection, haemorrhage of injury after birth, it is evidenced at the time or shortly afterwards.

A baby affected before or during birth may be blue, unable to breath properly and have fits. Many die. Those that survive develop slowly. They are restless, have difficulty in sucking/feeding and swallowing and show stiffness of the affected limbs. Most of them have intellectual impairments.

Activity 4

What are some of the challenges facing a teacher with such physically handicapped children in the class? In what ways might the presence of such a child be of value to the development of a sense for family or community among the members of the class?

Intellectual disabilities

Learning Outcomes

By the end of this unit you should;

- Identify causes of intellectual disabilities
- Identify learning difficulties associated with intellectual disabilities
- Plan lessons that cater for children with intellectual disabilities

An intellectual disability is defined as a mental subnormality, a state of incomplete development of the mind requiring special care or training. Today, mental handicaps are considered in terms of what the person can do rather than what she/he cannot do. The American Association of mental Retardation (1992) defines intellectual disability as substantial limitation in present functioning characterized by significant sub- average intellectual functioning existing concurrently with related limitations in two or more of the following:

- Self care
- Home living
- Social skills

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- Community use
 - Self direction
 - Health and safety
 - Functional academics
 - Leisure
 - Work

What are the factors that could cause ID's?

Activity 5

Discuss with your colleague possible factors that could cause mental handicap. Make a list of the causes that you agree upon. What are the services and sources of help that are available to pupils with hearing impairment who may be in your class?

Comment.

You probably found this activity very interesting. Did you easily agree on these factors?

Compare your list with ours. Our list includes the following.

- (i) Neurological factors- some persons have a congenital malformation of the brain others during the post natal development. Acquired causes include near drowning, traumatic brain injury and central nervous system malignancy
- (ii) Prenatal illnesses – these include congenital infections such as herpes, syphilis, rubella, HIV/ AIDS as well as prolonged maternal fever in the first trimester.

-
- (iii) Maternal high blood pressure- when the mother has high blood pressure, the flow of oxygen to the foetus may be reduced causing brain damage and intellectual disabilities.
 - (iv) Alcohol- excessive intake of alcohol in the first trimester of pregnancy may cause intellectual disability. Some studies have shown that even moderate alcohol consumption may cause learning disabilities in children.
 - (v) Perinatal stage- intellectual disability may be caused by prolonged labour, causing anoxic episodes and other complications during delivery.
 - (vi) Birth defects- birth defects may cause physical deformities of the head, central nervous system leading to intellectual disabilities. Neural tube defect (e.g. spina bifida) is a birth defect in which the neural tube that forms the spinal cord does not fuse completely. This defect may cause a child to develop an accumulation of the cerebral spinal fluid on the brain (hydrocephalus) which causes brain damage by exerting pressure on the brain.
 - (vii) Genetic factors- an inherited abnormality

Types Of Intellectual Disabilities ID's

You may hear the following conditions mentioned in connection with mentally sub normal people:

- (i) **Down's Syndrome** – this is caused by a congenital abnormality in the child's chromosomes. Called

“mongolism” in the past, the most notable features at the first glance are the slanting eyes, dry- open lips, round head and large protruding tongue, short neck, blondy hair. They are generally cheerful, friendly people.

- (ii) **Phenylketonuria (PKU)** – this is the result of inherited abnormality in the child’s metabolism. The condition can be discovered soon after birth by testing the baby’s urine. European children with this condition are always fair haired and have blue eyes.
- (iii) **Cretinism:** this is caused by inherited deficiency in the secretion of the thyroid gland. As a result, growth of all kinds is inhibited and is stunted, including mental retardation.
- (IV) **Microcephaly** – in this condition the child is born with abnormally tiny head. The face is the normal size but his forehead slopes back almost horizontally and his scalp often lies in wrinkles and folds over his skull.

Remember: some people may appear not to be as intelligent as they are because of the difficulties they have in expressing themselves. You cannot judge a person’s intellectual abilities by looking at them!

Gifted And Talented Learners

Learners in your class will have individual differences. Some of them will be more gifted than others. What do you think

are possible characteristics of gifted learners? They include the following:

- They finish work before everyone else
- They get into trouble mostly for talking and disturbing others
- They are often a step ahead of the rest of the class
- They exhibit special abilities
- They do not seem to fit in with the others in the class, feel different from classmates
- They may express new and unique ideas
- Sometimes they tend to dislike school
- They may offer innovative solutions to different types of questions in many subjects.

How Can You Assist Gifted Learners?

Some of the things you may do include the following:

- Place the most able in fast stream or move them up a year; say, from grade four to five or grade five to six.
- Raise the standards to cope with their demands
- Devise special lessons or special coaching
- Introduce regular assessment and testing.

Comment

Did you easily reach a consensus? Compare your list with ours.

Speech and language disorders

What are Speech and language disorders? These are disorders in the development of language, speech, reading and associated communication skills needed for social interaction.

Types and causes of speech disorders

There are four major areas . these are articulation, fluency, voice and symbolisation (language).

(i) Substitution of one standard phoneme for another which is non standard e.g. 'r' in which 'church' is replaced with 't' to read 'chutch' or 'b' in 'Bwalya' is replaced with 'W' to read 'Walya' or the word 'soup' for thoup.

(ii) distortion of standard sounds e.g. / l / for / s / or where there is / r / for / l /.

(iv) Ommisiion of sounds that should be present e.g. 'soup' and pronounced as 'oup'.

(v) Misarticulation. Van Ripper and Emerick (1984) put causes of mis- articulation into categories i.e. structural, organic deviations of the tongue leading to production of effective phonemes. A child with short frenum may have difficulties in learning.

Communication problems

1. Voice problems e.g hoarseness
2. Delayed receptive or expressive language
 - Reading disorder such as dyslexia
 - Language disorders such as aphasia

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- Perceptual impairments.
 - Mathematics disorders such as dyscalculia
 - Writing disorders such as dysgraphia

The Disabled Children in Ordinary Schools

Teachers might expect to find two types of school-going children to handle, able and disabled children. In fact the individual needs at such schools are far greater than this simple dichotomy. As a teacher, you should have a positive approach towards these children when handling them in learning situations. You should adopt the concept of ‘Special Educational Needs,’ by providing them (children) with mild remedial attention.

Knowledge On Special Educational Needs (SEN)

When you are teaching a class of 40 or 50 pupils in a Zambian school you may have as many as 6 or more pupils with special education needs. Such children may be referred to as educationally subnormal (ESN). They have emotional and behavioural difficulties. Since these children have learning difficulties there is a need for you as a teacher to offer them relatively mild remedial assistance.

These learners should be accommodated in ordinary schools. Specialized schools, which are very few in our country, should continue with the provision of special education to children with severe or complex physical, sensory or intellectual impairments, those with behavioural or

emotional disorder that are so extreme to disrupt ordinary school classes. This includes those with less severe difficulties even with special help do not perform well in ordinary schools. It is the ordinary schoolteachers' responsibility to recognise early signs of learning difficulties in the affected children so that help is given to them accordingly. Some people may ask whether this is possible. The answer is yes, provided there is commitment by a teacher.

Expected Reaction by a Teacher in an Ordinary School

Let us have a look at the expected general attitudes and reactions teachers may have children with special education needs in an ordinary class. What do you think some of their reactions are? They include the following.

- They would say they had relatively little or no knowledge when the various integration programmes started in their particular schools.
- They would say they had relatively little or no idea about the way the disabled children are handled, as a result such children are referred to special education schools.
- Their responsibilities for pupils with SEN are limited.

Teaching in an Integrated Ordinary School

What is being offered to children with SEN in ordinary schools? There are considerable differences between the

classes. The common aims mostly to be considered in these classes are:

- Provision of sufficient resources to cater for both categories
- Stimulating learning environment
- Provision of individual attention.

These aims are considered in such a school for it accommodates both able and disabled children. A teacher therefore handling children with SEN is expected to draw up by-term aims to achieve the school's common ones (aims) for each individual child in each of the following areas:

- Self management (a child should be able to assist him/herself in Activities for Daily Living or ADL)
- Pre – number work
- Pre – reading
- Speech and language
- Constructive and creative activities.

For example reading begins with the children's own names, progressing to matching words using flashcards. Children may produce their own books. This may be done by children copying down written sentences by the teacher from the chalkboard. In addition they draw pictures against or under those sentences. Number work begins with the counting of concrete objects, recognizing numerals, using songs and finger plays e.g. One man and a dog walking to Mbala – up

to ten. Children also learn to sort, count and recognizing numbers. Language learning is particularly emphasized on individual friendly discussions. Children are encouraged to name objects by pointing at them and saying the appropriate words.

Summary



Summary

In this unit we have discussed causes of intellectual disabilities. More importantly, we have looked at various ways of planning your lessons in such a way that it benefits all children in your class including intellectually challenged ones. We have seen that in order to do this you need to understand learning difficulties associated with intellectual disabilities.

Assessment



Activity :

- What are the signs of intellectual disabilities?

Are gifted learners problematic in the class? List the challenges a teacher might face when teaching gifted learners.

- List the etiological factors to intellectual disabilities.

Unit 7

Inclusive schooling in Zambia

Introduction

You have now come to unit 7 which is talking about inclusive schooling in Zambia. What are the requirements for developing inclusive schooling for all school going children in Zambia? These requirements for inclusive schooling are not limited to legislation and policy; but on provision of Special Education Needs (SEN), public awareness to combat prejudice and negative attitudes, human resources development, provision of early identification, assessment and intervention services, adaptation of school curriculum infrastructure and school organization. These should be considered for recommendations by the policy makers in Zambia.

Outcomes

Upon completion of this unit you will be able to:



Upon completion of this unit, you will be able to:

- Develop an understanding of problems involved with the implementation of inclusive schooling in Zambia
- List some successes and failures in the provision of special education
- Identify various stakeholders involved in special education provision



Terminologies

- Inclusive schooling- all children can learn and belong to the mainstream of the school and community.

Origin of inclusive schooling

What do you think is the best way to teach children with learning disabilities? Should they be separated from the rest of the children? I know, like everybody else you may have a lot of excellent ideas on this subject. Education theory suggests such children should be mixed with others to minimise stigmatization. This is called 'inclusive schooling'.

Before going deeper in our discussion, let us find out what “inclusive schooling” means. Major (1994) defines inclusive schooling as schooling for all that responds to the diverse needs of learners, accommodating different styles and rates of learning. Waddel (1994) sees inclusive schooling as one that is flexible enough to be responsive to individual differences of all learners. Schools that cater for such diverse schooling needs ensure quality education for all learners through the provision of differentiated curriculum, appropriate use of teaching strategies and provision of support services to match the needs of learners with special education needs (SEN).

The Origin of Inclusive Schooling

The 1994 Salamanca World Conference on SEN, representing 92 countries including Zambia and 25 organizations, reaffirmed the right to education of every individual, as enshrined in the 1948 Universal Declaration of Human Rights. It also renewed the pledge made by the 1990 World Conference of Education for All (EFA) to ensure the right to education for all learners regardless of their individual differences. The Salamanca Conference recognized the need to work towards “school for all/” the objective of the conference was to seek ways of improving access to education for the majority of the school age learners with SEN who are not in schools.

Why Inclusive Schooling

Why do you think inclusive schooling should be encouraged? Inclusive education is seen as the most effective means of combating discriminatory attitudes developing and inclusive society and achieving education for all. It improves access to education for the maximum number of learners with SEN. For instance, Zambia's segregated education provision started at the turn of the century but access to education for learners with SEN was 0.01% in 1990 and 2% in 1995 (EFA 1995). The noted increase resulted from the increase in the number of units for SEN that were established in regular schools in the name of social integration. Effective learning for all learners is provided in inclusive schools because learning experiences are based on identified strengths and weaknesses of individual learners. This makes inclusive schools to be seen more cost effective than segregated schools which educate a negligible number of learners with SEN at a very high cost. Emphasis on inclusive schooling means emphasis on achieving high quality learning for all.

Legislation and policy

Mayor (1994) states that "Special Needs Education cannot advance in isolation; it must be part of an overall education strategy." The statement reflects the Zambian situation and most developing countries. Special Education Needs in Zambia is rather static despite being established at the turn

of century. It is not underpinned by the 1966 Education Act, which would have established a rationale for different aspects of service provision. Zambia has no statutory basis for identifying, assessing and educating children with SEN within the boundaries of its resources. Special needs education was deemed to be included in the general education legislation in 1971 when education for special needs became a direct responsibility of the Ministry of Education through a Presidential decree. Hegarty (1992) sees a danger in the General Education act, which does not include provision for SEN, of being insensitive to needs of learners with SEN. He argues that the distinct requirements and rights of the learner with SEN are not targeted and safeguarded. As a result, differentiated required services cannot be provided. This has deprived special needs learners of education, which is a basic human right. The 2011 education Act is now responsive to the education of children with special education needs. The statutory obligation now backs the 1996 policy on SEN by articulating and reinforcing its different elements.

Public Awareness

Before developing inclusive education, stakeholders at school, district, provincial and national levels need to examine their own attitudes towards people with disabilities. Key stakeholders at these levels have duty to promote positive attitudes among teachers, children and the public at large towards learners with SEN. They should all be

committed to inclusion of learners with SEN in regular schools before conducting public awareness campaigns on the same. Public awareness on the schools for all would be achieved through active involvement of opinion leaders such as chiefs, village head men/women, church leaders and politicians.

Mass media would play a role in promoting positive attitudes towards the development of schools for all. It can be used to inform the public on strategies in regular schools provisions for learners with SEN and popularizing good practice and successful experiences of inclusive schools. Drama by school children on the need for inclusive schooling would go a long way in promoting the change of negative attitudes towards children with SEN.

Activity 7

What are your own responses to people with special needs? How can you help to change attitudes, including perhaps your own, to a more inclusive, accepting model? What kinds of activities could be undertaken by a class that would demonstrate such a model of acceptance of diversity?

suit individual learners with or without SEN or and not vice-versa; hence it promotes the use of the child-centred approach. The “one size fits all” type of curriculum would be inappropriate for learners with different abilities, interests, learning styles and learning rates.

High quality learning is achieved by providing learners with varied learning experiences related to learners' practical concern. Individual learner's progress is monitored through formative evaluation. It can be achieved by assessing competencies to overcome their difficulties through task analysis.

A continuous support for learners with SEN included in the main stream classroom ranges from minimal help from within the classroom to additional learning support programmes offered in the resource room. Special education teachers and other relevant professionals would provide this type of support. Technological support to aid access to the regular curriculum, communication, mobility, reading and writing may be provided within the school or from central pool, such as zone centres, district zone centres, special schools and teacher education colleges. This is where the expertise would be found to dispense and maintain required devices for special needs.

Activity 8

Are such supports available for special needs learners in your community? What are the supports available?

Infrastructure

Schools for all learners should be physically friendly to every learner. The existing schools were built for the learners perceived to be "normal." Most of these schools, including

Activity 9

Are there barriers for physical challenged learners in your school? What are the barriers present in the larger

Ministry of Education Officers are physically inaccessible to learners with mobility problems.

School Organisation and Management

Head teachers should be responsible for ensuring the promotion of positive attitudes towards learners with SEN in their schools. Head teachers should promote effective co-operation among teachers in the mainstream and resource rooms as well as support staff. Each stakeholder in an inclusive school should be assigned a specific role to perform. The responsibility of organizing and managing an inclusive school should rest on the shoulders of all members of staff who should work as a team.

Conclusion

In conclusion, the special vulnerability of disabled children demand that their increased access to regular schools in their communities be given first priority of concern and capacities of Zambian people. They cannot wait for the Zambian economy to pick up before being included in the regular schools as they are growing into dependent disabled adults. The salient problem and “sing-song” of insufficient resources should not be an excuse for Zambia’s inability to develop inclusive schools. The “new ethics” for children demand that children be the first to benefit from mankind’s success and

the last to suffer from its failures (UNICEF,91). This should be seen to include Zambian children with impairment.

Societal Attitudes towards Children with Special Educational Needs (SEN)

Children with Special Educational Needs (SEN) encounter a greater number of problems. One of them is the attitude of society towards their education. Frankly, we should ask whether society thinks that this is worthwhile. In 1977, Educational Reforms noted that although there was concern in Zambia about the disabled, the concern was not matched by positive attitudes to help them surmount their disability through education or training. The document noted that some communities would be happier if visually impaired children were merely looked after, as involving such children in any occupation would be unkind to them (MOE 1977:23)

Worse still is the attitude of some parents who think they will be shamed or blamed if it is known that they have a child with physical or mental disabilities. Such children have long been viewed as outcasts and their parents stigmatized. Even within a family, a husband may unjustly accuse the wife of infidelity or other marital crimes as an explanation for the disability, which he perceives as a personal insult.

In another development, a careful examination of the 1990 census shows the strength of the tendency not to speak

openly about children and adults who have special needs. The census gathered data on disabled persons, defined for census purposes as those who were totally visually impaired, totally hearing impaired, physically impaired or mentally retarded. The analytic report (CS 1995:149) notes that "In some communities, disability may be regarded as a curse and hence a shame in the family which should not be discussed." Census enumerators may not see such persons and the respondent may not provide accurate information.

It is clear that in fact the enumerators were not provided with complete information, for according to the census report, the total number of persons in Zambia with disabilities was a mere 0.9% of the total population. Among children of school going age, the census found only 10,111 in the 7 – 13 age range; 54% of them boys and 46% girls. These figures are altogether too low. On the basis of the national campaign to reach disabled children mounted in the period 1980-85, it was estimated that there were at least 40 000 Zambian children with disabilities (GRZ/UNICEF 1996:45).

Even this figure may be a gross underestimate, in the light of WHO yardstick already referred to. What all this points to is the deep reluctant parents and communities have to reveal information about their disabled members, largely because they seem to think that somehow, they themselves are at fault.

Parents have to be brought to realize that their children's problems do not cast any unfortunate light on them, and that schools can help prepare these children to live worth while independent lives.

Communities also need to be educated so that they no longer handicaps and disabilities as the result of witchcraft, as marks of God's displeasure, as signs of inherent family weakness or as proof of marital infidelity. As with parents, they must come to see that schools can help affected children to look after them and to live fuller, happier and more productive lives.

How Impairments Are Seen By The Society

- Something that cannot be corrected in anyway
- Punishment from God for wrong doing
- Caused by witchcraft.
- Children with impairments are looked upon as:
 - Outcasts
 - Unfortunate
 - A curse/taboo
 - A shame
 - A burden to the family and society
 - Possessed with evil spirit
- Children without hope/future
- Marrying close relatives results in these impairments
- Children who cannot do anything for the society
- Parental misdeeds
- Wonders of the world

We all know a number of terms, in English and in all local languages, by which one can refer to the disabled. The vast majority of these terms are negative and discriminatory. It is important that we as educators do our part in changing the negative attitudes toward people with disabilities. A first and important step is refusing to use discriminatory terms which suggest that the person is less than human because of his/her disability.

Activity 10

How do derogatory and discriminatory terms influence the way disabled people are viewed by others? How could these terms affect a disabled person's self image? How can we change the negative attitudes? List some ways in which you could address this issue in your classroom and school.

Unit summary



In this unit you learned about the origins of inclusive schooling, legislation on special education needs as well as curriculum of special education.

Assessment



Activity 3.1

Analyse the 1977, 1992, as well as the 1996 Education policies on the provision of special education in Zambia.

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