3

Education of Children with Special Needs in India: Inching towards Inclusive Education

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Introduction

The one group that is widely excluded from quality education is that of children with disabilities. It is increasingly being recognized that 'disability' is one of the most potent albeit least visible factors resulting in educational marginalisation. Despite extensive government policies, programs and legislative initiatives with an unequivocal commitment for inclusive education of children with disabilities in India, both the rates of educational participation and outcomes of education remain very poor for children and young adults with disabilities. Dropout and illiteracy rates for this group remain much higher than the general population and school attendance continues to lag behind that of non-disabled peers. Only 1/8th of students with disabilities enrolled at primary level remain until the higher secondary level of education. In its 2015 survey on the status of students with disability in higher education in India, the National Centre for Promotion of Employment of Disabled People[1] (NCPEDP) found that the percentage of students with disabilities fell from 0.63 in 2014 to 0.56 in 2015. Such a performance is abysmal given that the Disability Act of 1995[2] has been implemented for over two decades with the aim of filling seats reserved under the 3% mandated quota for students with disabilities in all educational

institutions.

In the above backdrop, this paper traces the evolution of government educational policies and legislations relating to inclusion of students with disabilities over the last four and a half decades. It focuses on the shift in policy emphasis from ensuring physical access alone in order to integrate such students, to second generation concerns focusing on reforms in curriculum and pedagogy along with a change in attitudes and beliefs as reflected in the culture of the educational institution which enables and empowers these students in the real sense.

Disability estimates in India: an overview

There is no exact definition of 'disability'. It is a multi-dimensional and complex construct, with no single universally accepted, un-contentious definition. Several characteristics are considered 'disabilities', such as deafness, blindness, diabetes, autism, epilepsy, paraplegia and even depression. It covers diverse conditions such as 'the congenital absence or adventitious loss of a limb or a sensory function, progressive neurological conditions like multiple sclerosis, chronic diseases like arteriosclerosis, the inability or limited ability to perform cognitive functions such as remembering faces or calculating sums, and psychiatric disorders like schizophrenia and bipolar disorder' (Stanford Encyclopedia of Philosophy)[3]. There exists a lot of variation in the experiential and functional states of these 'disabled' people to justify a common definition.

The definitions differ across countries and also change within a country over a period of time with evolving legal, political and social discourses. In India, there is wide variation in estimates of prevalence of disability. The two main large data-sets are the Census of India and National Sample Survey. The 2001 Census recorded a prevalence rate of 2.13% (21.9 million people), while the 2002 National Sample Survey 58th Round (NSSO, 2003) reported that 1.8 percent of the population (18.5 million) had a disability. The World Bank[4] study, whichadopted a more inclusive definition, particularly for mental illness and mental retardation, arrived at a figure of 80-90 million as the 'real' rate of prevalence of disability in India in 2007.

The question on disability was canvassed in all the Censuses in India

from 1872 to 1931. It was not canvassed in the Censuses from 1941 to 1971. In Census 1981, information on three types of disability was collected. The question was again dropped in Census 1991. In Census 2001, the question was again included and information on five types of disability was collected. In Census 2011, information on eight types of disability was collected with the idea of covering most of the disabilities listed in the 'Persons with Disabilities Act, 1995'[5] and 'The National Trust Act, 1999'. The country's disabled population grew by 22.4% between 2001 and 2011, and the proportion of disabled population rose from 1.87% in 2001 to 2.01% in 2011, with nearly 12 million disable persons in 2011, with the largest percentage belonging to the 90+ age group (see tables 1, 2 and figure 1).

Table1.Disabled Population in India 2001, 2011 Census

| Census Data	Persons	Males	Females
Proportion in total Population-2001	2.13	2.37	1.87
Proportion in total Population-2011	2.21	2.41	2.01
Persons in 2011	26,810,557	14,986,202	11,824,355

Source: C-Series, Table C-20, Census of India 2001 and 2011 (http:// censusindia.gov.in/Census_And_You/disabled_ population. aspx)

Table 2. Proportion of Disabled Population in the Respective Age Groups 2011

Age Group	0-4	5-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90+	Age Not Stated
(%)	2.21	1.14	1.54	1.82	1.97	2.09	2.31	2.83	4.15	6.22	8.41	8.4

Source: C-Series, Table C-20, Census of India 2011 (http://census india.gov.in/ Census_And_You/disabled_ population.aspx)

Figure 1.Disabled Population by Type of Disability (2011)
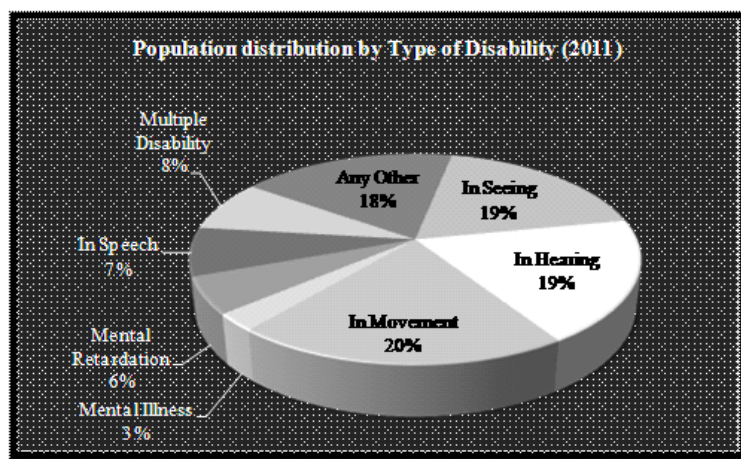
Source: C-Series, Table C-20, Census of India 2011 (http://census india.gov.in/
    Census_And_You/disabled_ population.aspx)

Models of Disability and Education

Two common features stand out in most official definitions of disability: that it is a physical or mental characteristic perceived as'impairment', and/orit is some personal or social limitation that is associated with the impairment. The first feature forms the basis of the Medical Model of Disability, which understands a disability in terms of the limitations faced by individuals that result from their impairments. Since the focus is on individual impairment(s), the way out suggested focuses on 'fixing' or 'curing' the individual. Under such an approach, the disabled person is seen as the problem and the rest of the world perpetuates this situation by ignoring their role.

The second feature of the definition of disability forms the basis of the Social Model of Disability, which was developed by the disabled people. Under this approach, disability is understood in the context of the relationship between an individual and the social environment around him/her. It takes the view that society creates barriers which 'disable' people from participating fully and on an equal basis with others.It is by creating barriers in buildings and structures or by not providing information in different formats such as Braille or Easy Read, that people with impairments/

certain health conditions are 'disabled'. It focuses on the society's attitude which is seen as the main problem (see figure 2).

Inbetween these two definitions are those which assert that individual impairment and the social environment are jointly sufficient causes of such limitations. The best interactive definition is provided by the WHO's International Classification of Functioning, Disability and Health (ICF, 2001) that identifies disability as an outcome of the 'dynamic interaction between health conditions and environmental and personal factors.' However, it must be noted here that such distinctions and semantic discussions on considering what one means by the medical or the social model and which definition is most appropriate, tends to obscure the real issues in disability which have more to do with oppression, discrimination, inequality and poverty.

Figure 2. The Medical and Social Models of Disability
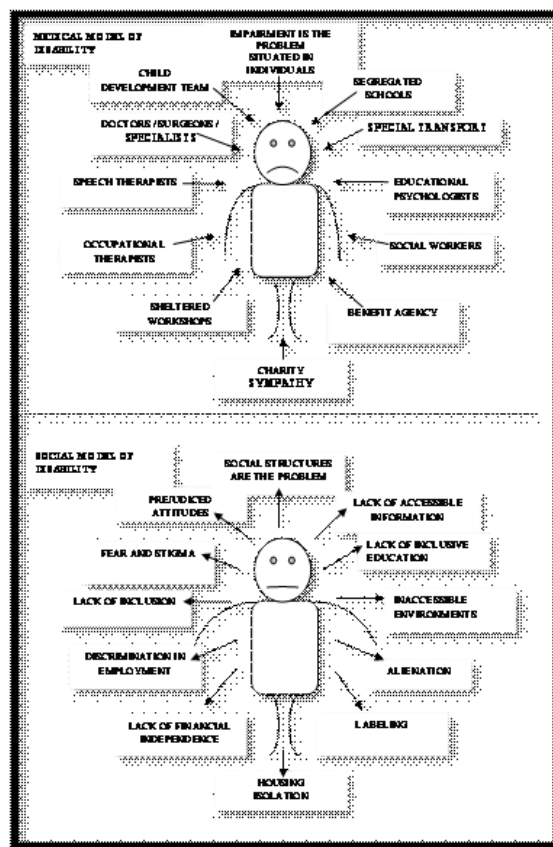
Source: Authors

The underlying ideologies towards disability guide the approach towards educating children with special needs. There are three basic types of Special Education, although many different models of classroom organization and teaching are available within each type.The ideologies of the medical model are integral to the segregated and integrated models of education, which view the person and their disability as the problem, and seek to 'fix' the disability by bringing the person as close to 'normal' as possible. The inclusive education model is built around the goals and ideologies of the social model of disability which takes a more holistic view of the causes and remedies to overcome the limitations imposed by disabilities. The defining characteristics of different models of disability and education are as follows:

(i) **Segregated education**: This is provided through special schools or colleges that are separate from the other schools and colleges. It is often provided through separate units within the existing schools and colleges or through separate segregated courses designed specifically for the students with disabilities introduced within mainstream education settings.Such a concept labels the child as the problem in the system, who does not fit in and requires a completely different curriculum and different methods oftesting.This separation in schooloften creates separation within other spheres of life as well.

(ii) **Integrated education**: Thisprovides education to students with disabilities in a mainstream classroom with someadaptations and provision of additional resources.This model has no ideological commitment to equity. These students are expected to 'fit in' with pre-existing structures, attitudes and an unaltered environment.There is no paradigm shift within the school including the curriculum or pedagogy while trying to attain the objective of integrating such students with the existing system of education.

(iii) **Inclusive education**: It focuses on 'Education for All'. It is a process of strengthening the capacity of the education system toreach out to all learners.It requires that all children, regardless of their ability level, are included in the most appropriate and least restrictive environment, be it the mainstream classroom or a special school. Thus it doesn't necessarily require all children with disabilities to be enrolled in mainstream schools. It requires that education be imparted in an environment most suited to a child's needs. The most suitable environment for many may be the

mainstream school/college, and for a few it may be a specialised school/college/institute and for some it may be home based education. For those who can study in mainstream schools/colleges, it involves restructuring the culture, policies and practices in schools and colleges so that they can respond to the diversity of students. Most importantly, it requires the attitudes of administrators, teachers, and otherstudents to be positive towards students with disabilities.

Inclusive practices include attitudes, approaches and strategies to ensure that no learners are excluded or isolated from the education on offer.The idea is to develop a culture where all learners are assisted to develop their talent and achieve their goals in life. Equal access to education empowers all, including children with disabilities, to be independent, helpful and contributive members of an inclusive, barrier free society.

Special Education in India: The Transition from Segregated to Integrated and Integrated to Inclusive Education

> 'All concerned must now rise to the challenge and work to ensure that Education for All effectively means FOR ALL, particularly those who are most vulnerable and most in need' -- (UNESCO)[6].

Government policies, programs and legislative initiatives show unequivocal commitment of the government for inclusive education of children with disabilities in India. These have mirrored the developments of international mandates and policy frameworks which provided a significant impetus to efforts undertaken at the national level.At the international level, the UN General Assembly's declaration of 1981 as the 'International Year of Disabled Persons', the proclamation of 1983-1992 as the 'Decade of the Disabled' by UN,'Decade of the Disabled Persons' from 1993-2002 declared by the UNESCAP, and subsequently the 'Special Needs Education' World conference held in Salamanca in June 1994,played an important role in not just bringing the spotlight on to people with disabilities, but also highlight the role of education as a vehicle for integration and empowerment of disabled population. These mandates played an important role in shaping new national legislations and policies. The policy shift that took place in India in 1974, away from segregated setting to a more integrated setting, was strengthened by a number of initiatives of the Government of India towards an inclusive setting. Such initiatives have found international

support in the form of financial assistance from the World Bank, UNESCO and the UNICEF. In this section, we run through the policies and legislative initiatives of the government in moving towards a more inclusive education.

From Segregated to Integrated Education Policies (1970 to 2000)

Until the 1970s, specialized and segregated schools were the primary method of service delivery for children with disabilities. Most of them were for children who were blind or visually impaired and majority of them were funded by missionaries, non-governmental organization or private sources[7].

The origin of Government's effort to promote integrated education in India can be traced back to 1974 when for the first time,the scheme of Integrated Education of Disabled Children (IEDC) was implemented by the Ministry of Welfarein the country. This ground breakingscheme[8] stressed the need for educating children with mild to moderate disabilities in regular school settings. The program provided children with disabilities 'financial support for books, school uniforms, transportation, special equipment and aids' with the intention of using these aids to encouragechildren in to mainstream classrooms.

Although it was encouraged and partly funded by UNICEF, fifty percent of the funding was supposed to go via the state governments. Despite the fact that this scheme was supposed to be nation-wide, it was implemented in only 10 out of 29 of the states in India. Three major problems with the IEDC were identified as (i) a lack of teachers' training and experience, (ii) a lack of orientation among regular school staff about the problems of disabled children and their educational needs, and (iii) the lack of availability of equipment and educational materials. By 1979-80, only 1,881 children from 81 schools all over the country had benefited from this program.[9]

IEDC 1974 had no provision for children with moderate to severe disabilities, who were still expected to be taught in segregated schools. This dual approach of stressing the need for expansion of special and integrated facilities continued for the next 20 years. This created tensions between mainstream and segregated special education schools.

Later, the National Policy on Education (NPE) of 1986[10] reaffirmed the

dual approach by stating in section IV titled 'Education for Equality' that 'where feasible children with motor handicaps and other mild handicaps will be educated with others, while severely handicapped children will be provided for in special residential schools'.Thus, it did not differ very much in spirit from the 1974 IEDC scheme.

While the NPE was made in 1986, it was only implemented with the adoption of the Plan of Action (POA) in 1992, which paved a solid ground for initiatives under the NPE. The 1992 POA broadened the 1986 definition of who should be included in mainstream schooling. It stated that'a child with a disability who can be educated in the general school should not be in the special school'[11]. It called for schools to share their resources with other institutions. However, most schools only opened 'resource centers for the underprivileged' which provided learning resources also to the children with disabilities, which was not in an inclusive setting. This was normally done after typical school hours.

All of these efforts got a boost by a shot in the arm when the Government of India passed the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act in 1995[12]. It defines a 'Person with disability' as anyone suffering from not less than 40% of the following disability as certified by a medical authority: blindness, low vision, leprosy-cured, hearing impairment, loco motor disability, mental retardation and mental illness. The Act provides that all Government educational institutions and other educational institutions receiving aid from the Government shall reserve not less than 3% seats for persons with disabilities as mandated quota. This law requires that all states and Union Territories must ensure that persons with disabilities have access to the same educational opportunities and basic human rights as their peers without disabilities. The Act further emphasized that, whenever possible, students with disabilities should be educated in regular school settings.

Specifically, it notes that, 'it [the Act] endeavours to promote the integration of students with disabilities in the normal schools'and also promotes the 'establishment and availability of special schools across the nation' in both Government and private sectors. This was landmark legislation since it acted as a catalyst for a number of other significant initiatives in the new millennium around inclusive education and disability

in India. However, there have been serious criticisms regarding the definition of disability and the requirement of deciding the quantum of disability as 40 per cent, which is not practically possible in case of mental illness.

Policies in the New Millennium (Post 2000): Moving from Integrated towards Inclusive Education

The 1990s witnessed rapid change with India becoming a signatory to the Salamanca Statement (UNESCO[13]). There was mass incorporation of the term 'inclusive education' in various official documents, reports published by institutions such as the NCERT and the media. However, the provisions at best aimed at providing integrated and not inclusive education. The real shift in policies from integrated towards inclusive education began only in the new millennium.

The Government of India, in conjunction with the World Bank, launched the SarvaShikshaAbhiyan (SSA) in 2001, an initiative which translates to 'Education for All'.Although SSA is not a disability-specific program, it can be seen more as a disability-inclusive program, with specific aspects that benefit people with disabilities.

SSA[14] aims at ensuring that every child with special needs, irrespective of the kind, category and degree of disability, is provided education in an appropriate environment. SSA seeks to adopt the 'zero rejection' policy such that no child is left out of the education system.The program seeks to open new schools in those habitations which did not haveschooling facilities and strengthen existing school infrastructure through provision ofadditional class rooms, special toilets, drinking water, maintenance grant and school infrastructure improvement grants.The SSA lists 8 priority areas of intervention for successful transition to an inclusive education setup, which include:

1) Survey for identification of Children with Special Needs (CSWN)

2) Assessment of CWSN

3) Providing assistive devices

4) Networking with NGOs/Government schemes

5) Barrier free access

6) Training of teachers on Inclusive Education

7) Appointment of resource teachers, and

8) Curricula adaptation/textbooks/appropriate teaching-learning materials.

While the first five priorities listed focus on issues of access, the last three are associated with quality of educational experience determined by classroom based 'processes'. SSA categorically brought the concerns of children with disabilities under the framework of 'inclusive education'. It extended the dual approach historically adopted towards the education of children with disabilities, by propagating a "multi-optional delivery system" ranging from special and mainstreamschools to Education Guarantee Scheme/Alternative and Innovative Education (EGS/AIE) as well as Home Based Education (HBE).

In 2005, the Right to Education Bill was drafted by the Ministry of Human Resource Development. Again, this bill is not disability-specific, but is inclusive of children with disabilities, with specific sections that address the educational rights of students with disabilities. There are important clauses in the act to ensure that students with and without disabilities are guaranteed an education. More specifically,

(1) The act prohibits schools from charging any type of fee whose non-payment would prevent children from completing their elementary education.

(2) If a child turns six and is not in school, the child will be admitted into an age-appropriate classroom, and not into a classroom based on their perceived level of education. An exception to this rule makes such a provision anti-inclusive, which states that if children have an intellectual disability they may be placed according to their perceived level of education.

(3) If there is an area where children live that does not have a school, the government will be responsible for creating a school within that area within three years of the enactment of the Right to Education Act, or alternatively, to provide transportation or residential facilities to an adequate school out of the area.

(4)   Lastly, both the state and central governments hold joint responsibility for carrying out the responsibilities outlined in the Right to Education Act.The Right to Education Act was passed in 2009 and put into full effect in 2010.

The most recent development concerning rights of disabled people and education facilities for them is the Rights of Persons with Disabilities Bill (RPWD), 2014. It repeals the PWD Act of 1995 by defining disability to include 19 conditions instead of the 7 conditions under PWD Act (2005). Children with disability have the right to free education up to 18 years of age. Also, it provides for access to inclusive education, with 5% seats reserved in all Government institutions of higher education for persons with benchmark disabilities. This bill was drafted in 2012 and modified in 2013-14. Till date, it remains with the Standing Committee of the Government and has not been passed.

Thus, an extensive and exhaustive policy and legislative network exists, addressing almost all the requirements for moving towards an inclusive education system. Most policies suggest and highlight the need for learning in an 'appropriate' environment. However, there is lack of critical reflection on what this appropriate environment might look like, and more significantly, who makes the decision about where a child is appropriately placed. The current view of students with disabilities still seems to largely be overly medicalisedin the sense that the emphasis is largely on efforts directed at fixing child related factors through the provision of aids and appliances. This takes the focus away from the learning needs of the child.

Current educational status of children with disabilities

Even though various efforts have been made in the recent past, both the rates of educational participation and outcomes of education, remain very poor for children and young adults with disabilities. Illiteracy rates for this group remain much higher than the general population and school attendance continues to lag behind that of non-disabled peers. A 2007 study by the World Bank[15], for example, noted that children with disability are five times more likely to be out of school than children belonging to scheduled castes or scheduled tribes. Moreover, when children with disability

do attend school, they rarely progress beyond the primary level, leading ultimately to lower employment chances and long-term income poverty.

According to the NSS 58th round[16], 25 percent of the literate population of people with disabilities had received education up to the primary level (five years of schooling), 11 percent up to the middle level (eight years), while a mere 9 percent had nine or more years of education in India in the year 2002. A study by the National Centre for the Promotion of Employment of Disabled Persons[17] shows that only 0.1% (=1635 students) of total enrolled students in higher education institutions in the year 2005 are students with disabilities. Apart from this, there is hardly any information on availability and adoption of inclusive pedagogy and policy in higher education.

Based on the most recent statistics from the District Information System for Education (DISE) and Unified District Information System for Education (U-DISE) reports of NEUPA[18], the following figure depicts enrolment of students with disabilities at the primary, upper primary, secondary, higher secondary stage. Data suggests a significant drop in enrolment postupper-primary level of education.
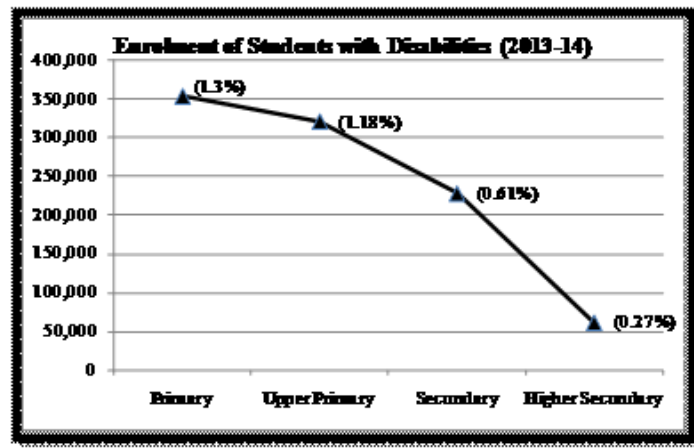

Figure 3. Enrolment of Students with Disabilities (2013-14)

Note: Number in brackets is the percentage enrolment of students with disabilities to total enrolment

Source: Based on data from NEUPA, DISE (2013-14) and U-DISE (2013-14)[18]

Data from the Seventh All India School Education Survey (7th AISES) reveals a sharp decline in the number of schools for physically challenged children from upper primary stage to secondary stage of education. Realizing this dismal scenario, the Department of Education of Groups with Special Needs (DEGSN), NCERT, undertook a study to evaluate the implementation of the Inclusive Education of the Disabled at the Secondary Stage (IEDSS) scheme introduced in 2008 in India, to assess the current impact of the scheme on enrolment, access, retention of students with disabilities at the secondary and higher secondary stage and to find out whether the students covered under this scheme are getting the required resource support in terms of trained (general and special) teachers, assistive devices, appropriate teaching materials and learning environment etc.

Major findings of the study revealed that out of 35 states/UTs, only 16 states/UTs had started implementation of IEDSS in 2009-10, 7 of them started it in 2010-11 and another 4 of them started it in 2011-12. Out of these 27 states/UTs, 17 of them had established the administrative cell for implementing this scheme, while 10 of them were yet to even establish a proper cell for implementation. In most states that had implemented the scheme, activities to create an enabling physical environment remained restricted to the mere removal of architectural barriers such as construction of ramps, railings and in few places toilets. Only 12 states had appointed special teachers under IEDSS andthey had provided training on special needs education to general teachers, with only 3 states providing training for more than 5 days to general teachers.

Based on the extensive impact assessment study, the high dropout rates among students with disabilities can be attributed to the following:

-   short Sage of special teachers in the States,

-   lack of funds to provide assistive devices and resource rooms to students with disabilities,

-   absence of secondary schools in the neighbourhood especially for girls,

-   absence of basic infrastructural and other facilities in school;

-   lack of modified/adapted curriculum,

- poverty and social stigmas attached to disability,

- lack of awareness and sensitization,

- Absence of linkage between different inclusive schemes/interventions, between different departments, and between school and vocational education.

Thus, one finds a wide gap between policy provisions and actual utilization of these provisions which needs to be addressed through appropriatepolicy interventions.

Need to move beyond Integrated to Inclusive Education

Almost all policies and legislative provisions aimed at the education of students with disabilities in India have been based on the distributive paradigm of social justice with main focus on equality in terms of access and provision of resources such as assistive appliances and devices. The main limitation of such a conception of social justice is that it is too individualistic in its perspective and locates the problem 'within' the individual (the medical model of disability). As a result, it takes attention away from questioning how social structures and institutions may uphold patterns of injustice.

While this focus on redistribution of resources and access may be desirable and important since students with disabilities tend to belong to the lower economic strata, it is too narrow and inadequate to deliver the whole of justice. It must be recognized that access does not automatically deliver equality. Second generation concerns focusing on curriculum and pedagogy, need to be become an integral part of the efforts towards the education of students with disabilities. The current approaches are largely directed towards integration via transformation of special schools into resource centres, or even shifting children to mainstream settings. These efforts will remain inadequate till the time the desired teaching-learning practices are in place. Changes in the classroom require simultaneous development of reforms in curriculum, alongside a change in attitudes and beliefs as reflected in the culture of the educational institution. It is essential that teachers are made aware of and assisted in developing innovative teaching strategies focusing upon (and changing) values, beliefs and attitudes.

The focus needs to shift from the outside to the 'inside': be more concerned about what children are being offered in these educational settings, in what format, and its relevance to the lives they would like to lead, rather than the kind of lives that is deemed appropriate for them by the society. Only then cana successful transition be made from integrated to inclusive education in India.

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