

An experience of children with disabilities in mainstream schools, their acceptance and socialisation towards discrimination

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Abstract

Albania ratified the UN CRC in '92 and also signed the UN Convention on the Rights of Persons with Disability. During the last three years, the Albanian Government has been undergoing an entire legislative framework revision, as a step towards ratification of this convention, which was actually ratified in November 2012. Both conventions constitute the right of children with disabilities (CWD) to receive education in mainstream education settings with their peers without disability. Schools and their communities have carried resistance and very often segregate beliefs and attitudes towards this specific right. Expressions like “these children cannot be educated”, “there are special schools for these children so they can go there”, “their presence in the class is not safe for other children” etc. not only exhibit the general mentality in education system, but also try to justify that the segregation is not wrong.

International research shows that institutionalization of persons with disability (in the case of children, segregation in special schools) produces serious damages in their social functions; they lose the sense of identity, deteriorate their social skills and diminish most of their social roles. The institutionalization discourages and disables them to manage their own life. To avoid this phenomenon the presence of persons with disability in mainstream social and educational life, the same as the others, becomes a must.

This paper brings an experience of inclusion in education of children with disabilities and effects it has produced in socialisation of CWD with their peers and vice versa. The paper presents the results of a longitudinal study, conducted to understand and draw conclusions on effects of the socialization between the two groups of children, those without disability and CWD.

Key terms: children with disabilities, mainstream education settings, special schools, socialization, diversity, inclusion, institutionalization.

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Introduction

The same as for all persons with disabilities, children with disabilities there have been considered as a category of people who are unable to care for themselves, for such a reason they need to be “cared of” in a special way but also separately from others. Motivated from this kind of “care”, special institutions were established during the last century and an army of professionals were “specialised” to provide services for persons with disability, inside institutions “designed” for them, far from the attention and eyes of the rest of the society, where people with disability were passive service’ recipients, isolated from contacts with the rest of the society. The same logic applied with the education of children with disability. During the XX-th century, special schools have been the sole education opportunity for children with special needs. In western countries, teachers and caregivers have been strongly emphasising the need to sustain the special education system. As a consequence, the entire expertise to work with children with disabilities remained in special schools (Poni 2010).

Earlier than years ’60 of the last century, different researchers and professionals conducted a variety of researches, aiming to understand if segregation was serving to its initial purpose. One of the pioneers, Erving Goffman, focused his studies on the effects that segregation produces at institutionalised patients in psychiatric hospitals. His publications and essays encouraged quite a good number of other researchers to follow with other similar researches. Goffman’s findings on institutionalisation’s effects were shocking. According to Goffman, hospitalisation (institutionalisation) of patients is a process of self-mortification. While anyone living in a normal social context holds a sense of personal identity and exercises different social roles, these aspects of life to the hospitalised/institutionalised ones are systematically weakened, consequently their sense of self is mortified, pathologised and deactivated, by leading these persons towards what Goffman named as “de-culturalization”. Instead of curing or decreasing the state of being ill, this process leads the institutionalised ones towards self demoralisation, deteriorating their live skills and disabling their social roles; it makes them unable to manage their life if going back to live in the society. To add here, keeping these persons in the institutions does nothing but makes them unable to face the unpredicted life situations and therefore be dependant from the life in institutions. (Goffman, 1961)

A number of Goffman followers, persisted with researches and supported his ideas, by also extending their research targets beyond those with mental health disorders, but also to a variety of adults and children who were often institutionalised for life. Despite that institutions were established as services where to provide ‘care’, we are witness of the abuse and maltreatments documented in such institutions, especially in eastern countries.

Starting from ’60-’70, findings of these researches, leded the development of new changes and policies which promoted deinstitutionalisation of different forms, in hospitals, in orphanages, in special schools etc. This era of change affected also the eastern part of Europe even though not earlier then the ’90-es. Such a change cannot happen overnight, therefore required its own time to come to the acceptance and protection of children with special needs and acknowledging that they are just as other children, so they have to be educated in the same education settings like other peers, and if they get the right support to progress in accordance with their pace of development, then there will not be a need for a binary education system, but there will be a unified one that welcomes all children. This is the inclusive education system, which welcomes not only a wide variety

of children, but also differentiates the type of support provided to each child. (Poni 2010)

Despite that in Albania children's institutionalisation has not been as a widespread phenomenon as compared with the one in the countries of the same region such as Rumania or Bulgaria, it has not been an easy process to make professionals and decision makers accept that children with disabilities have to be educated in the same schools with their peers. The pressure of international bodies was a strong pushing factor, but also the local civil society reached the necessary level of maturity to pressure to the Albanian Government to ratify UNCRC² and later the UNCRPWD³. These important steps legitimised the right of every child to be equally accepted in the mainstream education settings. This paper will bring an experience of the education of children with disability in the mainstream education settings. This intervention was implemented as an integrated approach where not only children with disabilities were enrolled in mainstream schools and supported to progress, but also support was provided to teachers and parents, alongside with advocacy efforts to ensure positive changes to local education legislation and policies towards inclusive education.

Methodology

The paper is based on a longitudinal study conducted in April 2010 and re-conducted in November 2011, in 12 kindergartens and 12 basic education schools of Vlora, Korca and Gjirokastra, where a project of inclusive education for children with disability is being implemented. The aim of the study was to measure the social progress and level of inclusion of children with disabilities in mainstream education setting, and drawing conclusions relevant to improve the conditions of their inclusion in education. The sample represents 55 children at the age 5 to 11 years old, with a variety of disabilities, where a good proportion of sample represents children with light and moderate intellectual disabilities and learning disabilities. Only a small proportion of the sample represents children with motor disabilities. The observed children make 10% of children with disabilities enrolled in schools and kindergartens where the project is being implemented. To collect the data the researcher used similar tools previously used by international researchers to measure the social inclusion indicators in education. Data were collected mainly through observing the behaviour of children with disabilities in mainstream education settings and the attitudes of their peers towards CWD. Interviews with the respective teachers were used to validate data collected through observations. In order to obtain a as much clear view as possible on the level of inclusion of CWD in education, the methodology of this study interconnected two types of methods to collect and interpret the data: the qualitative and quantitative method. A detailed description was prepared for every child observed, describing the type of disability and the specificities he represents in socialising with peers.

1. A briefing of the educational intervention and strategy used by the project to ensure the inclusive education for children with disabilities

As a result of a pilot project started in 2009 in Korca, Vlora and Gjirokastra, children with disabilities are being educated in the same education settings with their peers without disabilities. Special attention and consideration has been given to early intervention in order to ensure early identification and support in preschool age, to provide as such a successful

2. *United Nations Convention on the Rights of the Child*

3. *United Nations Convention on the Rights of the People with Disabilities (15, November 2012, Ratified by the Albanian Parliament)*

head start in basic education. The project has been applying an integrated approach where several elements were given focus concurrently.

- *Direct support provided to education of CWD*; identification, enrolment in mainstream kindergartens and schools, assessment of their education special needs and provision of day to day support through development and implementation of the Individual Education Plans (IEP); monitoring the school achievements of CWD and the socialisation with peers in accordance with the objectives set in their IEPs;
- *Mobilising the human resources in school/ kindergarten to provide a professional support to inclusive education of CWD, as a multidisciplinary team effort*; (development and implementation of IEP as well as monitoring the achievements of CWD is conducted from a team of professionals composed by the head of the school, the main teacher or the subject teachers; the school psychologist, the parents and the assistant teacher);
- *Mobilising and coordinating the expertise at local level to provide with a cross-sectorial support to the education of CWD*; a cross-sectorial team assesses the education needs of CWD in cooperation with parents and guides afterwards the school/kindergarten to adjust the infrastructural needs and accommodate the education needs of children by developing IEP. This team is composed with education specialists from Local Education Authorities (LEA), psychologist and experienced teachers, the social worker from the Social Sector in Municipality, the representative of the Child Protection Unit in Municipality, and specialised health workers from local Health Department;
- *Capacity building of teachers, parents and education specialists in LEA with regard to inclusive education and teaching methodologies relevant for CWD*;
- *Awareness raising in schools, kindergartens and in the wider community regarding the right of CWD for an inclusive education*. Awareness rising activities have included campaigns in and out of school environment, production of different publications (leaflets, posters, books, booklets, postcards and calendars), TV debates, regular discussion meetings with parents of CWD and parents of children without disabilities, to convey the message of the right to inclusive education for CWD and to contribute in reducing the discrimination within education settings;
- *Empowering the disability local civil society organisations* in order to enable them to be a strong advocator on behalf of their CWD, which promote the right to inclusion in society and in education;
- *Advocacy to improve the education legislation and policies so they comply with principles of the inclusive education* through cooperation with a wide range of civil society organisations;

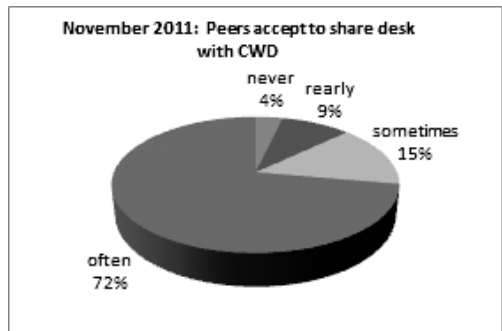
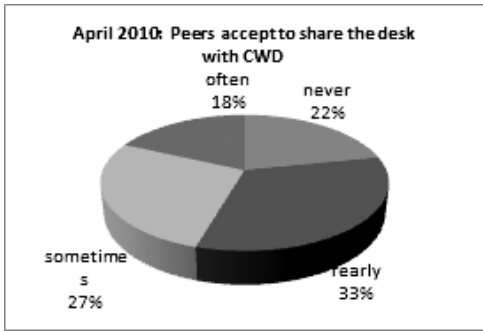
Results of CWD socialisation in kindergartens/schools, based on the research findings

This multidimensional intervention may not produce immediate results, especially when the research is conducted in a time limit of less than two years. This is due to the fact that socialisation and cooperation among children with and without disabilities requires changes in attitudes, mentality and behaviours to children themselves and to adults also, being those teachers or parents. These changes take a considerable time to be transformed from discrimination and segregation into acceptance and socialization. Based on this argument, the research findings show that although positive changes are documented, these changes happen very slowly, and this is justifiable for a society which is rigid and inflexible to change, while school and its community are integral part of this society and therefore

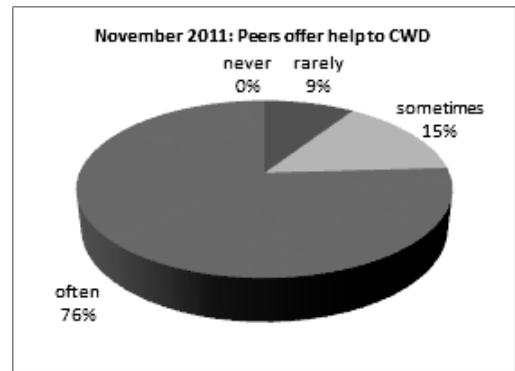
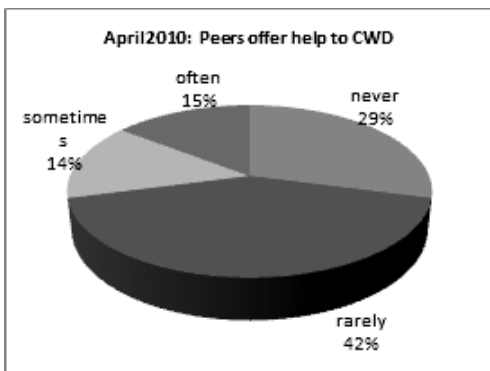
change at the same rhythm. Nevertheless, instead of making a scientific interpretation of the research findings, I would bring the project field experience and explain about the “why”-s based on this experience.

Children without disabilities in relation with CWD in the education settings:

Accept to share the desk with CWD:



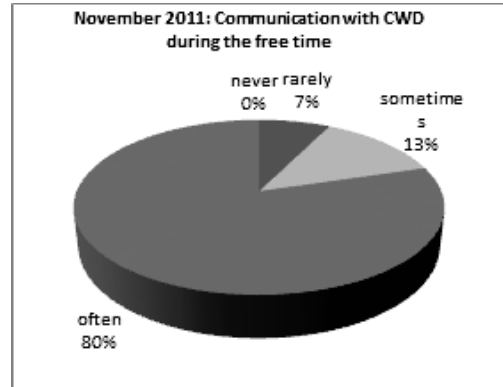
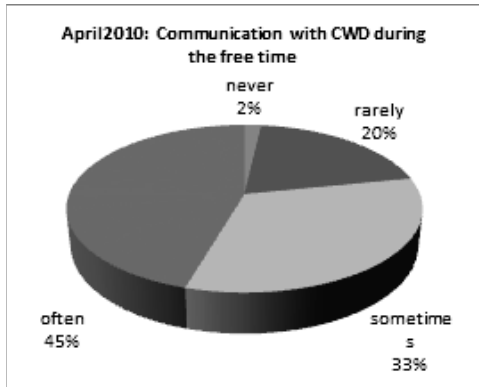
a. *Offer help to CWD:*



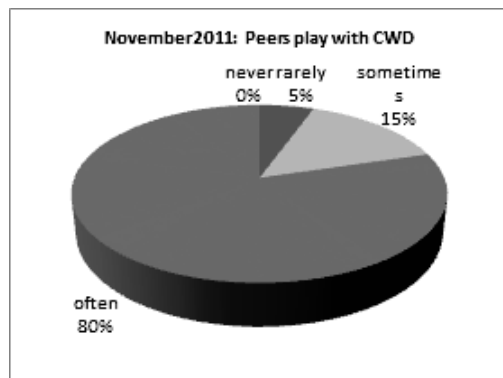
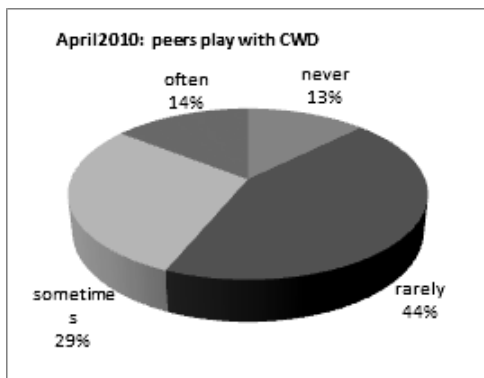
Despite that choosing the bank peer, is not always a free choice of children, still it is obvious that the number of children who are willing to share desk with CWD is increasing from the first to the second measurement. For as long as it is the teacher who usually takes care to arrange the pairs sitting in one desk, it is very obvious that his/her influence has increased massively the acceptance of children towards CWD, but this is not limited to teacher’s influence only. The acceptance is increased as a result of two main factors; it is teacher training as well as the awareness raised at parents of children without disability. Without these two main factors supporting the process, the result would be uncertain. The project experience shows that the teacher alone cannot decrease the level of discrimination and segregation. There have been cases when the pressure of parent of children without disabilities has negatively influenced the main teacher or the entire teaching staff in taking decisions. Despite that parents have not been interviewed in this research, the experience demonstrates that teachers but also their children are very much affected from parents’ attitudes and demonstrate the same attitude towards their peers with disability. Therefore

it is crucial to invest to change the mentality of parents to turn them into allies in inclusion process; otherwise they may become a strong obstruction factor.

b. *Communication with CWD during the free time:*

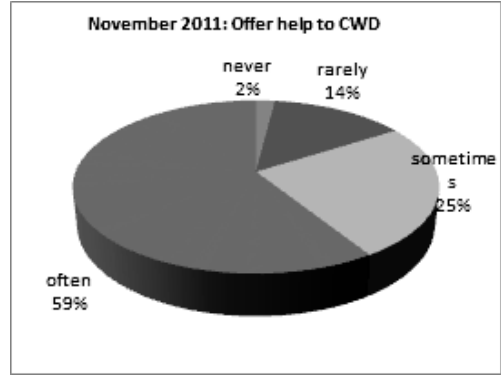
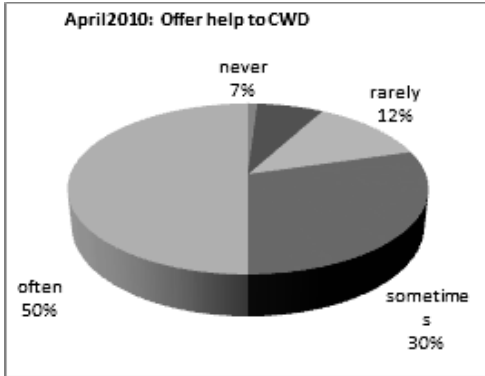


c. *Accepting to play with CWD:*



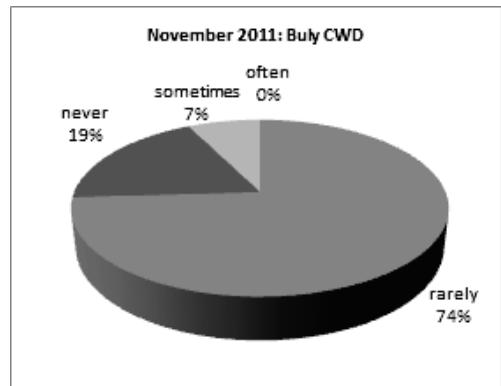
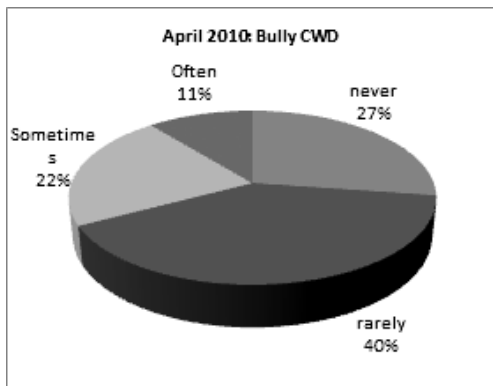
The increase in positive result is obvious from year to year since in their free time children accept to a higher degree to stay and play with CWD. To this a considerable impact has the fact that children are freed by the pressure class competition on “who will complete the task faster” or “who will complete the task better”. They feel free to choose with whom to spend the free time and with whom to play. Moreover the results in these graphs contribute to the argument that children by nature are not discriminators, their segregation’ attitudes are very much influenced by those of the adults surrounding them, being those parents or teachers.

d. Offer help to CWD:



Helping their peers in class has been considered as another aspect of socialisation. Graphs show a lower increase in the positive results, compared to the results of other previous graphs. There are a variety of factors affecting these results. During class activities children do not have a choice if they want or do not want to cooperate with their peers with disability. In the majority of cases the class works are supposed to encourage individual working and the competition promotes “the fastest” and “the best one”. Very often teachers are not able enough to promote the cooperation for as long as they are trained to consider the class as a homogeneous group. To add here, the same as children, they are under multiple pressures: to achieve the lessons objectives, to convey the information and knowledge to children; and to make children achieve high results based on the overloaded curriculum. All these do not count the different rhythm of CWD, do not count that they need to be supported by the teacher, and the teacher cannot provide this support without the help of other children in the class, who on their part feel under the pressure of time and overload. Thus, once the requirements in the class become strict and intervenes the curricula with its own heavy and strict overload, CWD remain in disadvantaged circumstances.

e. Bully CWD:

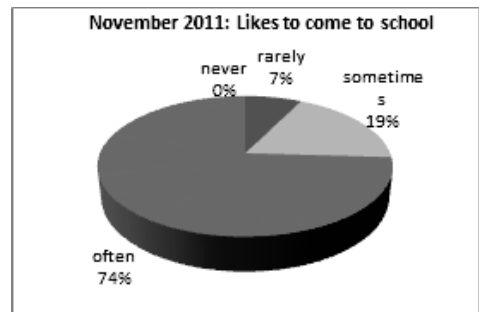
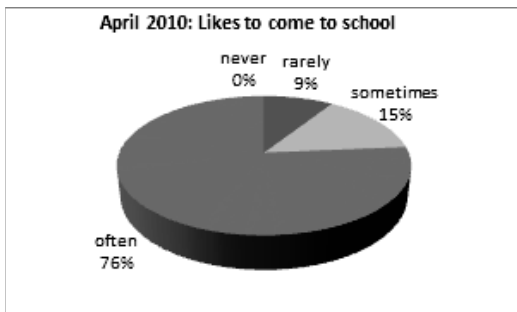


The experience shows that CWD are more accepted and less bullied by their peers in the class if compared with level of bullying by adolescents in higher grades. Children in higher grades are reaching the adolescence and their behavioural problems increase. Teachers very often rely on authoritarian style to approach the behaviour problems of adolescents, meanwhile the support of school psychologist is insufficient due to the high rate of psychologist per nr of children. School management is still a very complicated activity to run and the role of school management structures (such as the School Board) in school activity is still weak or sometimes inexistent. If the school managements would improve and the role of school psychologists would be stronger, the behaviour problems of adolescents would be better managed and their discrimination and bullying towards CWD would decrease.

Graphs below show CWD's behaviours and stands while being in the same situation as their peers without disability.

1.1 CWD in class and in school

a. Like to come to school:

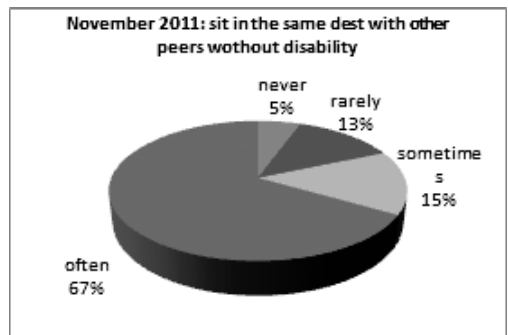
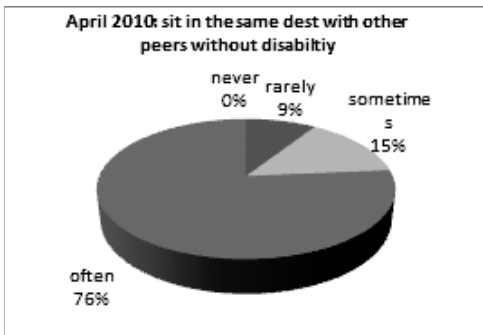


There are two important aspects to emphasise related to these graphs:

- a. None of the CWD involved in this study is against schools attendance;
- b. Adding here, most of them “enjoy coming to school”

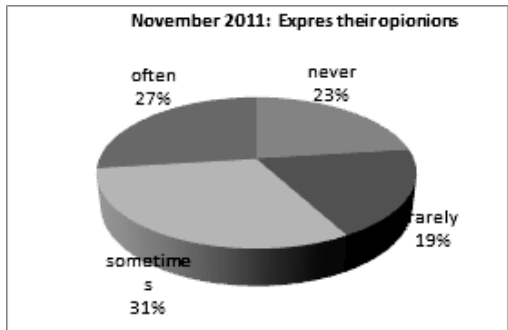
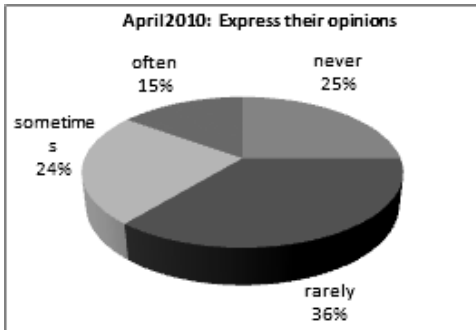
Both these findings establish an important rationale to open the schools for CWD, to fulfil their will and right to be educated in the same settings with other peers.

c. Sit in the same desk with peers without disability:



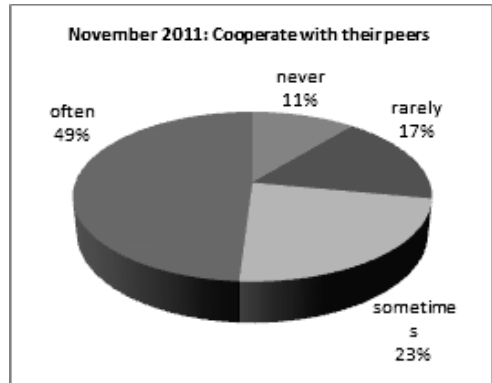
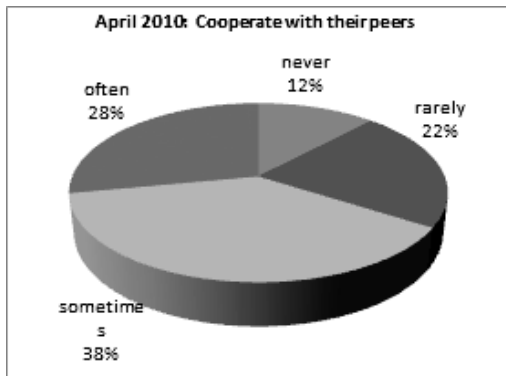
The wish for socialisation is very obvious and remains in high levels.

d. *Express freely opinions in class:*



The wish to be actively involved in class discussions increases when CWD feel they belong to a supportive and accepting learning environment.

e. *Cooperate with their peers:*



While children without disabilities offer their support in a conditional way and to a reduced level for reasons connected with the teaching style and curricula, CWD are more willing to cooperate with the group. The experience shows that in most of the cases, CWD become enthusiastically an active part of the group and they intuitively estimate and appreciate the opportunities given for cooperation and use them positively.

Discussions

Despite all challenges that brings the process of inclusive education of CWD in mainstream education settings, still special schools in Albania do not offer the best opportunity for their education. None can also claim that special schools offer the best alternative to reduce discrimination in society. Although some may say that CWD in special schools can feel “equal” among each-others, still this is a speculation which cannot justify the fact that these children will remain labelled and therefore discriminated once they leave out the special schools. The special schools are not any different from the institutions

described at the beginning of this paper. Visits and observations in special schools around the country has evidencing that most of children attending these schools are not there for reasons connected with “children’s inability to be educated in mainstream settings”. The real reasons vary from the fear of special school teachers to lose their jobs, to the poverty of families to provide with the necessary nutrition in the family, to the lack of transportation for those in need of such facility etc.

If:

- The mainstream school would provide with healthy meals in its facilities (preferably free of charge for children coming from poor families),
- Local government institutions would ensure free of charge transportation means for school children with disability,
- Teachers of special schools would offer specialised support to their colleagues in mainstream schools to teach CWD,
- Teacher-children ratio in mainstream education settings would decrease,
- Teachers in mainstream settings would be better trained,
- School curricula would be adjustable to the variety of abilities that children hold in a class,
- if.....

.....afterwards, there is not any strong reason for keeping CWD away from the same educational settings of their peers without disability. The entire process requires resource allocation, redistribution of the existing resources and improvement of resource management in order to make the mainstream education system beneficial not only for CWD but for each individual in the education system. More or less this is also how the inclusive education can be described and defined; a process of constant changes in practices, policies and cultures in school and its community.

“Inclusive education ensures that the education system adapts to the child so that they can achieve their full potential, rather than expecting the child to adapt to the system. It involves changing and modifying teaching methods, school management and education planning. It also requires education authorities to improve legislations, policies and practices towards better service provision in education system.” (Save the Children 2006). Albeit inclusive education seems beneficial for CWD only, in a deeper view the inclusive education is beneficial for every child in the system.

Experience in project implementation has shown that much is achievable if:

- parents turn to be allies and active collaborators in school life;
- teachers have the necessary knowledge and tools to support every child;
- when specialists from different sectors sit round the same table and have the will to cooperate;
- when civil society and experts collaborate to support the local or central government to improve the educational policies and legislation;
- when.....

The list may become long, but this is not the aim of this argument. The prime and sole aim is to attract the attention of practitioners and decision makers and convince them that the education of CWD in mainstream schools should be a must and locking them up in special schools should become an unacceptable practice. This is not anymore a desire

but it one right of CWD for which the system owes the fulfilment.

Conclusions:

Around the world experts and researchers are pulling together arguments against segregation in special schools and are collecting evidences on the damages it produces. The segregation brings damages to the individual and the society. It raises barriers to the inclusive education and to social inclusion. There is recently an increase of the number of researches conducted, testimonies and experiences of individuals, who support the importance of respecting the human right to end segregation in education, and to fulfil the children's right to an inclusive education, which is based on the principles of non-discrimination, equal opportunities to participate in education system as defined in UNCRC, and based also in the social model of disability. All this movement produced a long list of conclusions in favour of inclusive education:

- Segregated schooling has never been proved to be superior to mainstream.
- There is no compelling body of evidence that segregated 'special' education programs have significant benefits for students.
- Research shows that segregated 'special' schooling has been associated with:
 - ✓ impoverished social experiences, abilities and outcomes
 - ✓ reduced academic experiences in terms of curriculum provision, outcomes,
 - ✓ examination opportunities and accreditation
 - ✓ lower student aspirations and teacher expectations
 - ✓ high absence rates
 - ✓ difficulty reintegrating into the mainstream
 - ✓ poverty in adulthood
 - ✓ Poor preparation for adult life.
- Negative consequences for segregated pupils identified in the research also include:
 - depression, abuse, lack of autonomy and choice, dependency, lack of self-esteem and status, alienation, isolation, fewer friends, more restrictive interpersonal relationships, bullying and limited life styles.
 - The discrimination inherent in segregated schooling offends the human dignity of the child and is capable of undermining or even destroying the capacity of the child to benefit from educational opportunities.
 - The existence of segregated 'special' schools stifles creativity of mainstream schools about how to respond to diversity and weakens their responsibilities to include all learners. It undermines efforts to develop inclusive education by draining resources from mainstream, which in turn sets back the development of inclusive communities.
 - The existence of 'special' schools contributes to insecurity and fear of rejection by those in the mainstream.
 - Segregated schooling appeases the human tendency to negatively label and isolate those perceived as different. It gives legal reinforcement and consolidation to a deeply embedded, self-fulfilling, social process of devaluing and distancing others on the basis of appearance and ability in order to consolidate a sense of

- normality and status.
- Segregated schooling perpetuates discrimination, devaluation, stigmatization, stereotyping, prejudice, and isolation – the very conditions which disabled adults identify as among the biggest barriers to respect, participation and a full life.
- Segregated schooling does not lead to inclusion.

To conclude, the special education does neither lead to inclusive education, nor to the social inclusion. All children belong to the same group, with advantages and benefits any individual bring to the group. They do not need to be protected from each other; therefore they do not need to be segregated from each other. Education in the same educational settings it is not only possible and useful, but it's also a better use of resources in the education system.

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