1

<u>Semester 1</u>

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Assignment no: 2

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MODULE CODE: ETH306W

Table of content

Sub topic	Page numbers
1.1 physical impairments	3-4
1.2.1 auditory impairments	4
1.2.2 visual impairments	5
1.2.3 physical impairments	5-6
1.2.4 epilepsy	6-7
3.1.1 home environment	7-8
3.1.2 school	8
3.1.3 social problems	9
3.1.4 cultural environment	9
3.2.1 elements of security	9
3.2.2 role of parents and teachers	10
bibliography	10

Question 1

Intermediate and senior phase

Introduction

We are all acquainted with people in wheelchairs, people who have lost an arm, leg, people who suffer from cerebral palsy, people who are deformed and people who have limited use of only one side of their body. All these people represent the category of physical disabled.

Assistance that a teacher could give a learner with a physical impairment in their classrooms

- See that the learners are comfortable with their orthopedic aids.
- Make classroom on other areas accessible.
- Learners should be able to move around freely in the classroom, using their aids.
- Build up the child self-esteem
- If the learner is on medication, make sure that it is taken regularly.
- Be prepared to improvise
- If the learner finds it hard to write, allow him or her to type.
- We should allow for long absence.
- If the child writes slow, allow him/her to have an oral exam or test.
- You could disregard the spelling of learner with severe spelling problems.

Support to learners with cerebral palsy

- Arrange the furniture in a way that they are ble to move around freely.
- The washbasin and toilet must easily accessible.
- Store classroom apparatus away and position activities in places where the learners will be able to reach for it themselves.
- Encourage learners to become independent-organize the floor and table games which are easy to manage and which will encourage participation.
- Encourage them v use disable limbs.
- Give them chores and responsibilities- will feel just as important as others
- Encourage them to join in group activities- to feel as participant in group situations.
- Help them to feel physically and emotionally secure may explore with confidence
- Explain to the rest of the class to obtain and maintained understanding and cooperation
- Restrict incidents that might distract attention to focus on the work to complete
- Remember that success and enjoyment encourage exploration.
- Be creative on your teaching improvise when necessary and provide whatever assistance you can in order to assist learners.

Conclusion

It is usually not difficult to identify the more severe cases, because they are obvious and visible to the eye. If you learn on enquiry that such learners are under no medical supervision, you should refer them to medical practioner.Each condition calls for specialized medical intervention, and the treatment will depend on the severity of the condition.

2.1 Auditory impairments

- Use an overhead projector for present materials: it allows the student to view a visual presentation of the material and watch the teacher's lips simultaneously.
- Assign a peer to take notes using carbon paper for the hearing-impaired student and to point to speakers during a group discussion. A peer can also ensure that the student is following in the correct place when the class is working on an assignment.
- Speak clearly in a normal tone of voice and at a moderate pace.
- Use visual signals to gain student's attention.
- > Ask questions to check understanding of orally presented directions and content.
- Rephrase content or questions of make it more understandable to hearing impaired students.
- Supplement information presented orally with visual aids.
- Give test directions, assignment, and lecture outlines in writing.
- Cue the student visually to indicate that someone is talking over the intercom. Make sure that someone explains the intercom message to students with hearing impairments.
- Provide the student with outlines, assignments, vocabulary vists, and the like before introducing new materials. Encourage the student's parents to review these materials with their child.
- Remember present all spelling and vocabulary words in sentence; many words presented in isolation look alike to lip-readers
- Establish a visual signal to alert students to dangerous situations.
- Shine a light on the speaker's face when the room is darkened for films or slides.
 Providing the student with the script of record or filmstrip can help the student follow along.
- Try to limit movement and unnecessary gestures when speaking to student with hearing impairments
- Repeat and summarize main points of orally presented information.
- Provide written models to aid hearing-impaired students when checking the accuracy of their assignments.
- Teach the students to look up difficult-to-pronounce words in the dictionary

4

1.2.2 Visual impairments

- > Learners with myopic a cataracts should sit in front, near the chalkboard.
- > Repeat what is written on the chalkboard to help learners check their own written work.
- > Allow learners to use magnifying glasses if large print books are not available.
- Learners must use a blank A-4 paper with parallel lines drawn using a black pen or marker. They mould not use ordinary classwork exercise books because they have dull lines for them
- Make sure that these learners are using clear printed attractive and meaningful printed materials that show the difference between the print and the paper for them to see clearly. Black print on white paper with fairly large letters and good spacing is the best.
- Give them the darkest and clearest copies.
- Allow learners with albinism to sit in a darker place in the classroom, away from the windows.
- Textbooks can be recorded on tape for learners who find it difficult to read their textbook.
- Learners with hyperopia would prefer to sit at the back of the class. They would enjoy outside play but may not be interested in school work.
- Doors should be kept either opened or closed because open doors can be potential safety hazard to visually impaired learners who could bump into them and hurt themselves.
- Passages between desks should be clear to prevent visually impaired learners from stumbling over stray objects on the floor.

1.2.3 Physical impairments

- See that such learners are comfortable with their orthopaedic aids. Take time to introduce and explain these aids to the rest of the class.
- Try to make the classroom and other areas where learners would like to go, easily accessible. (Ask the woodwork teacher to build ramps, if necessary.)
- Leaners should be able to move around freely in the classroom using their aids.
- It is always advisable to build vo learner's self-esteem. Physically disabled learners feel different from other people. We, as class teachers, can help learners to form realistic images of themselves not only as disabled persons, but also as persons of worth who have potential.
- If learners are on medication, make sure that it is taken regularly. You could even keep a timetable for when medication must be taken during school time, if applicable.
 Remember, of course, that teachers are not allowed to change scripts or dosages, even if consulted by the parents.

- As teachers, we should be prepared to improvise. For instance, what would you do if a wheelchair developed a flat wheel or a child outgrew its prosthesis? (One solution would be to divide the learners in the class into groups and let them take turns to carry their classmate.)
- \triangleright
- If learners have difficulty with their handwriting, you could try to get hold of a typewriter, and spend time with them, teaching them to type. Typing is good exercise for the smaller muscles of the hand (or fine motor control) and the learner's self-esteem might also improve if their work is neater.
- We should allow for long absence (eg for operations) on the part of physically disabled learners and for the fact that we will need to help such learners to catch up with their work. A good option is to ask the academically stronger learners to continue the work in absent learners' book so that they can just revise it when they get back.
- > If learners write extremely slowly, you may allow them to do tests or exams wally.
- You could disregard the spelling of learners with severe spelling problems. In order to eliminate subjectivity, it might be a good idea to ask a committee to decide on such issues.
- If learner's attention is easily distracted (as is the case with leaners who have neurological deficits), try to restrict the incidents that might distract their attention. Instead of stimulating all their senses (multisensory stimulation), ask them to clean their desks before they start with work, give short and clear instructions, touch their shoulder in order to draw their attention to you, or try to address them in person and check their progress frequently.
- Provide washing facilities in your classroom for learners who wheel themselves in their wheelchairs, since their hands will be dirty.

1.2.3 Epilepsy

- They should have sufficient knowledge about the various forms of seizure to enable them to identify and handle efficiency any seizure occurring in their group.
- They should know how to handle the group situation created by the seizure. They should not panic but should react in a matter of-fact and calm way in the interest of both the learners with epilepsy and the other learners in the group.
- They should know enough about epilepsy to realize when they are up against a real crisis which calls for professional, medical or other assistance. They should act accordingly without any sign of panic
- Each seizure or series of seizure which they observe should be fully reported to the principal of the school, the parents of the learners, and the doctor. Therefore they

should know what special observation to make and which details are important to relate.

- They should know what medical treatment the learners are receiving and how they can be of help in this respect. They should also be aware of the possible effect medicine (usually in the form of tablets or capsules) can have on the learners so that they can take this into account and report any harmful effects observed.
- They should know how the learner's development, mental life and behavior may be affected by the seizures, or by their reactions to them, as well as how other people react too. They must take this into account and try to avoid or counteract any possible harmful effects.
- As the learners teachers they should be informed of the additional disabilities which the leaners with epilepsy may suffer from , for example , learning disabilities of the same nature as those experienced by other learners with brain damage (severe or minor)
- The school affords a favorable opportunity for early identification of all kinds of handicaps to which the learner may be subject. Teachers should therefore be able to observe early signs of epileptic tendencies in the learners. This is also true of other problems which, though not epileptic in nature, may be related to epilepsy.
- They can do a great deal to help learners with epilepsy to attain a healthy, normal adjustment to life. They can help prevent the learners from being stigmatized because of seizures and from feeling rejected or insecure because of them.

Question 3

Intermediate and senior phase and FET phases

3.1 discuss the ecological factors that may cause learning difficulties to learners at school. Your discussions must focus on the following sub-headings:

3.11 <u>home environment</u>.in the early stages of their lives learner's language development and the building up of their basic skills and general knowledge are critically influenced by their parents.as role models, the parents affect the learner's progress at school. If parents have a negative attitude towards school their learners may display the same attitude and a lack of interest in school.

Communication within the family is very important for the learners' healthy development. Inadequate communication restricts the development of language and other basic skills, such as perception, which enable learners to learn adequately at school. Lack of basic necessities, such as food and clothing, causes physical discomfort and problems within the family. This leads to psychic discomfort which hampers the leaners ability to pay attention in class and learn adequately. If parents lack the basic necessities they will have too little energy to pay sufficient attention to the learner's cognitive and intellectual development. The learners are then left to themselves for the greater part of the day and consequently they have little opportunity to come into contact with good language and learning opportunities.

3.1.2 <u>School.</u> The quality of **interpersonal work relations** between learners, teachers and fellow learners is decisive for the learner's total development because they spend a large part of the day in school.

A child who is rejected and neglected by the teacher and ignored by fellow learners for having behavior or learning difficulties becomes a "nobody" (Gouldner in Richek et al 1983:31) in class. Social unpopularity causes a sense of **rejection** which leads to a low self-image. The learners withdraw from class activities and their progress at school is unsatisfactory.

Inadequate teaching can lead to learning difficulties. If the teacher's subject matter and teaching methods are not suited to the learner's abilities and needs, the learners will experience frustration and then reject the teaching events.

Other forms of **poor teaching** can also cause learning difficulties. Learners will not perform adequately at school if the teacher is lacking in commitment to the teaching task, or is insufficiently trained or lacks the teaching skills to convey information logically to the learners. Teachers who are too strict or too indulgent (easygoing) will not have the necessary success with their learners because leaners may reject or fear over strict teachers, or they may ignore or ridicule (make fun of) overindulgent teachers.

Many learners receive instruction in a **language medium** (mostly English) which they do not know or do not know well enough to understand the subject matter properly and benefit from the teaching methods. A school system that teaches in learner's second or even third language contributes to their learning difficulties. The learners begin school with language deficiency that is inclined to get worse because they have to use the time in which new subject matter is taught to them to master the new language as well.

Teachers themselves are often not fully proficient in the language medium in which they have to teach learners at school and, according to squelch (1993:183), they do not always have the necessary skills and knowledge to work with learners with language deficiencies and learning difficulties. They are consequently unable to offer these learners the support they need to make satisfactory progress or to cope with their problems at school.

3.1.3 <u>Social problems</u>. Learner's emotional and cognitive development is based on their social interaction with friends and peers. Learners learn the community's social norms and taboos in a random way. Satisfactory interpersonal relationships ensure the development of self-confidence and a positive self-image. Poor interaction with the community leads to emotional problems and inability to learn adequately.

Learners who perform well at school may be ostracized (marginalized or discriminated against as social outcast) and branded or stigmatized by their peers as toadies ("teacher's pets) who seek favour with the teachers. Sometimes such learners attach themselves to groups who scorn and reject the school system. To be accepted by the group these learners may deliberately neglect or refuse to spend time on their school work, with the result that they do as badly as their friends at school.

3.1.4 <u>Cultural environment</u>. Gradual changes in learner's environment continually make new demands on them. Examples of important factors in this regard are poverty and family disintegration, which may cause changes in learner's cultural environment and weaken their ability to learn adequately. Most learners who have to cope with such circumstances can be regarded as learners at risks. They have few opportunities to build up their general knowledge, which they need for cognitive support. They reject the values upheld by the school and would rather identify themselves with a criminal subculture whose members are known for their alternative or abnormal use of language. Affecting this kind of language use typifies them as members of the subculture concerned but does not contribute to the cognitive development they require for adequate learning.

3.2

3.2.1 What are the essential elements in a child's life that can give him or her security?

The child derives feelings of security from stable relationships within the family. Stable and dependable relationships in this regard relate to mother/child, father/child, child/siblings and child close relative relationships; the latter typically include the child's relationship with the grandparents. Other factors that gives a child a sense of security are a familiar place, a known routine where everybody events take place in exactly the same manner and sequence, the availability of a familiar object or cherished possession, such as favorite teddy bear or blanket which provides reassurance, and something that they can take to bed with them or that they will not have to part with in a stressful situation.

3.2.2 <u>What specific roles should parents and teachers play to ensure that a child feels secure at home and at school?</u>

- Parents and teachers can assist learners to understand what is expected of them, by providing a caring environment, as opposed to environments that are characterized by temporary loss of basic affection and concern (Pringle 1985:40). Inconsistent, erratic parental guidance prepares the child for the loss of the warm and stable relationship with the significant other role player, as it sends mixed messages to the child and conveys disapproval and withdrawal of love.
- A caring parent of teacher can teach learners how to care (Pringle 1985:40). The response that the child elicits serves as an indication of whether a person's cares about him or her or not.
- Parents and teachers are the role models with which the child has the closest contact and hence their norms and values will be significant in shaping their child's behavior.
- Raths (1972:46,47) warns that parents and teachers should be careful when dealing with financial matters in front of learners, as this can have a negative emotional impact on the child if dealt with incorrectly.

Bibliography



Special educational needs compiled by F H WEEKS

Eth 306-w/1/2004-2006