

ASSIGNMENT

2010 Assignment 1

Answers: 3, 2, 1, 2, 3, 3, 1, 1, 2, 3

Question 1:

1. A learner who rubs his eyes excessively, shuts or covers his eyes, experiences a hearing problem

2. **Learners suffering from albinism should sit in a darker place in the classroom, away from the windows - correct!**

3. **The type of eye condition & the amount of residual vision would not determine the assistance given to a learner in class**

Question 2:

1. Deafness is definitely not hereditary – it is caused by e.g. learners having forced strange objects in their ears, which damaged the ear drum

2. **Learners suffering from sensory neural hearing loss will be totally unable to hear in noisy surroundings**

3. A learner who cannot understand the teacher if the teacher's head is turned away or the teacher's lips are covered, suffer from a visual impairment as he or she cannot lip read what the teacher says

Question 3:

1. **According to the DSMIV Manual, a learner with an IQ score of 50/55 to about 70, is regarded as mildly intellectually disabled**

2. Learners who experience intellectual barriers are inclined not to be anxious & stressed up, as for most of the time, they live in their own world & they are not conscious of what happens around them

3. It is a useless effort by the teacher to try & stimulate the learner who is intellectually impaired, to overcome problems with short-term memory

Question 4: here its right but in the marking sheet I've got 1 & its marked wrong!!

1. Paraplegia is an ability to move & an absence of sensation in the lower limbs

2. **Cerebral palsy is caused by an underdevelopment of or damage to certain parts of the brain concerned with movement**

3. It is not generally accepted today that not all physically disabled learners necessarily require special schools

Question 5:

1. In order to classify an epileptic seizure, it is not necessary to identify which part of the brain is effected – it is more important to assist the learner

2. Petit mal is the type of seizure where the learner does not lose consciousness – he or she can hear the teacher & peers who are surrounding him, talking

3. **Teachers must prevent learners from falling, if they detect the warning signs of a possible Seizure**

Question 6:

1. If the culture of a teacher & a learner differ, it will not be difficult to understand the learner understand one another

2. Teachers' communication with learners with a language barrier should occur only in the form of instructions e.g. " put away your books"

3. **The teacher must take the limitations of the learner's language barrier into account**

Question 7:

1. The term "learning difficulties" implies the problems which learners experience with regard to their academic subjects
2. Learning difficulties are caused by emotional problems only
3. Visual or hearing barriers do not impact on learners experiencing learning difficulties

Question 8:

1. Pringle maintains that unmet emotional needs like the need to be loved, need for security, for responsibility, new experiences & the need to be praised & recognized, trigger behaviour problems
2. Regression takes place when a learner is trying to copy an adult role model, while identifying with the role model
3. Ignoring is not a very effective strategy & is easy to implement

Question 9:

1. Spoken language barriers manifest when the learner uses long sentences with complicated content
2. If learners speak a type of baby talk, the parent must be involved
3. The frequent use of pictures, models, excursions & activities, will confuse the learner

Question 10:

1. A counsellor should not possess the following inborn qualities" a rational approach, sense of humour as it can act as a hindrance to the professional relationship with a learner
2. The counselling contract is one way of getting learners to do certain things within a certain time span
3. Assessment should focus on the whole learner, not only on his or her intellectual abilities

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Last year's (2009) ASSIGNMENT 01

1 The following are characteristics of Down's syndrome:

- (1) weak short term memory, good at remembering the sequence of a process, finds it difficult to transfer knowledge to a new situation
- (2) understands the literal meaning of words, weak long term memory, finds it difficult to transfer knowledge to a new situation
- (3) good short term memory, limited abstract thinking, understanding of verbal or written instructions is apparently better as the real skill
- (4) limited abstract thinking, finds it difficult to remember the sequence of a process, does not understand the literal meaning of words

2 The ... of the human eye is the reason why humans can see in full colour.

- (1) macula
- (2) retina
- (3) iris
- (4) lens

3 ... is a very infectious eye disease.

- (1) Trachoma
- (2) Cataracts
- (3) Glaucoma

(4) Conjunctivitis

4 The sense of touch is also known as ... sense.

- (1) residual
- (2) kinaesthetic
- (3) physical
- (4) tactile

5 Learners with ... would prefer to sit at the back of the class.

- (1) albinism
- (2) hyperopia
- (3) myopia
- (4) astigmatism

6 ... has a separate grammar which is not based on spoken or written language.

- (1) One-handed alphabet
- (2) Two-handed alphabet
- (3) Signing
- (4) Sign language

7 If a person suffers from ..., he or she tends to lower the voice & to speak very softly.

- (1) conductive hearing loss
- (2) tinnitus
- (3) partially hearing loss
- (4) sensorineural hearing loss

8 Down's syndrome is the result of an oddity in the ... chromosome.

- (1) eighteenth
- (2) twenty first
- (3) thirteenth
- (4) 1, 2, & 3

9 Choose the INCORRECT statement about HIV/AIDS:

- (1) HIV is the human immunodeficiency virus.
- (2) Children can acquire HIV pre-natally.
- (3) AIDS cannot be transmitted through day-to-day social contact.
- (4) AIDS is not the final phase of the HIV infection.

10 Learners with ... problems find it difficult to break words into syllables or to put them together again.

- (1) auditory perception
- (2) spatial perception
- (3) visual perception
- (4) visual-motor perception

11 Muscular stiffness is a characteristic of ...

- (1) athetosis.
- (2) spasticity.
- (3) diplegia.

(4) hemiplegia.

12 Choose the CORRECT statement:

- (1) The physiological classification is based on a person's development.
- (2) Persons suffering from spastic hemiplegia cannot move their lower limbs.
- (3) Cerebral palsy cannot be regarded as a neurological condition.
- (4) Spasticity is caused by damage of the part of the brain which controls movement.

13 Athetosis is caused by damage to the ...

- (1) basal ganglia.
- (2) motor cortex.
- (3) vertebral column.
- (4) cerebellum.

14 Children subject to sudden spells of aggressiveness, vandalism or bad temper, may suffer from ...

- (1) tremor.
- (2) disruptive behaviour.
- (3) disguised epilepsy.
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15 There is no direct relationship between intelligence & ...

- (1) distractibility.
- (2) the degree of cerebral palsy.
- (3) the handling of abstract concepts.
- (4) validity.

16 ... can help to teach physical impaired children everyday skills such as how to handle a knife & a fork & how to dress.

- (1) Physiotherapists
- (2) Neurologists
- (3) Orthopaedic surgeons
- (4) Occupational therapists

17 The following are known as intrinsic barriers to learning:

- (1) cerebral palsy, epilepsy, tuberculosis, poverty
- (2) spina bifida, the role of the community, language issues, autism
- (3) deformed limbs, spina bifida, interpersonal relationships, epilepsy
- (4) interpersonal relationships, amputation, spina bifida, the role of the parents

18 The term "learning problems" do ...

- (1) not refer to problems which are primarily the result of visual, hearing or motor impairments, or intellectual impairments or as a result of emotional, environmental, cultural or economic circumstances.
- (2) not refer to problems related to the psychological processes involved in understanding & using of language – both spoken & written.
- (3) not refer to an imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations.
- (4) not refer to learners who have problems in acquiring the necessary skills which are necessary to make a success at school.

19 The following are signs of possible auditory problems. A learner ...

- (1) speaks too quickly or too slowly; is often inattentive; refuses to participate in ball games; confuses letters of similar shape.
- (2) avoids oral activities; is prone to swiftly changing moods; relies heavily on gestures; speaks too softly or too loudly.
- (3) turns his or her head to listen; moves his or her head when looking at pictures; refuses to participate in ball games; speaks too loudly or too softly.
- (4) speaks monotonously; avoids oral activities; is often inattentive; finds it difficult to associate with friends.

20 A ... is an example is specific functions which could be affected by epilepsy. These functions are controlled by a small part of the brain.

- (1) bodily seizure
- (2) focal motor seizure
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21 ... is a generalised seizure without convulsions.

- (1) Petit mal
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- (3) Partial seizure
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22 Examples of partial seizures are ...

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- (2) Jackson seizures, versive seizures, seizures with vocalisation, focal motor seizures.
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23 The following are misleading phenomena which could be confused with epilepsy:

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- (2) dizziness, fainting, hysteria, depression
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24 Choose the INCORRECT statement about epilepsy:

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25 A child who can distinguish between various sounds, but cannot put the sounds together to form a word, may have a ... problem.

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- (4) perceptual-motor

26 Choose the INCORRECT statement about perceptual-motor skills:

- (1) Cooperation between hand & eye is called visual-motor coordination.
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27 ... is an advanced form of receptive language.

- (1) Written language
- (2) Inner language
- (3) Speech
- (4) Reading**

28 Learners with ... do not perform at school to an extent which is in keeping with their potential.

- (1) physical disabilities
- (2) auditory receptive problems
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- (4) intellectual disabilities

29 Choose the INCORRECT statement about learning difficulties:

- (1) Malnutrition & underfeeding can cause learning difficulties.
- (2) The inadequate scholastic performance of intellectually disabled learners is consistent with their mental abilities.
- (3) Ill health can incapacitate learners to the extent that they find it impossible to learn adequately.
- (4) Learners who find it difficult to learn are usually unaware of their inability to perform adequately.**

30 Learners should be encouraged to read on their own initiative, because this is the most important means of expanding their general knowledge, ... & ...

- (1) to prevent negative attitudes & to improve their handwriting.
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TRUE & FALSE

- F1 Epilepsy is a discharge of normal electric activity in the brain.
- T2 Researchers such as Turnbull believe that the father is more adversely affected by a son who experiences a physical and/or physiological impairment, than he is affected by a daughter experiencing such an impairment.
- F 3 The request to stop discrimination is only relevant to the Constitution & not to the White Paper 6.
- F 4 According to the new Education White Paper 6 that was published in 2001, it is planned to convert approximately 400 out of the 20 000 primary schools in the South African mainstream education to full-service schools.
- F 5 The method of asking questions used whilst identifying barriers experienced by a learner, is in no way different from asking questions when having an ordinary discussion.
- T6 The learner's personal characteristics do impact on his or her motivation.
- T 7 Ignoring is a very effective strategy that can be used for learners with behavioural problems, but it is difficult to use it in the classroom.
- T 8 Pringle maintains that apart from the parent the teachers in whose presence the learner spends many hours of the day are among the most important role players within the life-world of the learner.
- F 9 Factors during birth such as an oxygen deficiency & the use of instruments & the Rh factor cannot cause deafness.
- T 10 A counselor should possess inborn qualities such as integrity, honesty, sincerity & a rapport with learners.
- F 11 The following are known as intrinsic barriers to learning: cerebral palsy, epilepsy, tuberculosis, poverty, the role of the community, language issues, autism.
- F 12 The following statements about epilepsy are correct:

Children with epilepsy should live normal healthy lives; epileptic seizures do not increase if there are affective disturbances; children with epilepsy sometimes manifest deviant tendencies which they can control.
- F 13 Learners with myopia would prefer to sit at the back of the class.
- T14 Sign language has a separate grammar which is not based on spoken or written language.
- T 15 In very noisy surroundings persons suffering from conductive hearing loss characteristically hear even better than normal people.
- F 16 The stigma attached to learners experiencing a physical or physiological impairment is worse in the rural area, as everybody knows everybody.

UNMET EMOTIONAL NEEDS

(Pringle's model and other authors)

- The need for love
- The need for security including economic security
- The need to belong
- The need for new experiences
- The need to be free of intense feelings of guilt
- The need to be free of feelings of anxiety
- The need to be praised and accepted
- The need for a positive self concept
- The need to realise one's potential
- The need to share and the need for self respect

The following case study can be regarded as an example of an exam question - *The Williams family*.

The Williams family consists of a mother, father & three children, Julian & Leonora & an adopted child, Loschni. Loschni turns her head when Mrs. Williams speak to her & the teacher complains that quite often in class, Loschni requests her to repeat a question if she has asked her something. She has also picked up that she needs to be facing Loschni when she is talking to her. She also needs to speak slowly & pronounce her words well. The teacher thinks that Loschni needs professional assistance. She doesn't quite know what is wrong with her.

Julian is 8 years old & he rubs his eyes in class excessively, which causes the eyes to be red & watery. He cannot keep up with the other learners in class when they are copying learning content from the overhead projector. He has hurt himself many time during break when the other learners are running past him to get out to the playground & he stepped too high when he was going downstairs. His school performance is not up to standard & the teacher suspects that he is going to fail at the end of the year. She has called the parents to school to come & see her. She suspects that he has a hearing problem - but: the parents are asking the teacher, what really caused this.... She doesn't quite know how to answer them & referred them to a psychologist, who is on contract at the school & who sees all the learners who need help.

Mr. Williams is very upset. He feels that the they pay the school fees regularly & because of this, he feels the school should render assistance, to assist Julian to actualise his full potential. The teacher explained to Mr. Williams during the interview with the parents, that she is not trained to deal with learners with hearing problems. Mr. Williams insists that according to the White Paper on Education, the teacher must be able all learners He maintains that the teacher is incapable & asks stupid questions which does not relate to the problem. To crown it all, the teacher did not even listen to what he has told her & he had to answer the same questions more than once. She is still young & inexperienced & she does not know what it is like to have a child who experiences a barrier to learning & who is battling at school. She just kept on repeating exactly what he has answered her - she is wasting his time!

Leonora is 14 years old. She is rebellious & wants to do things "her way". At parents' evenings, the teachers complained about the fact that she is cheeky in class, always fighting with the other learners, is a loner & doesn't want to mix with the other learners except for clinging to one boy, is acting aggressive & portraying an attitude of "couldn't care a dam".

Answer the following questions: (1-22) - see next "announcement" to follow. Dr.F.H.Weeks

1. What barrier is Loschni experiencing?

2. What are the characteristics/manifestations of this barrier?

3. What are the causative factors (extrinsic & intrinsic) of this barrier?

4. How will you assist a learner with this kind of barrier?
5. What barrier is Julian experiencing?
6. What are the manifestations of this barrier?
7. What are the causative factors of this barrier?
8. How will you assist a learner with this barrier? - indicate what steps of the assistance process you will follow & exactly how will you go about each step of the assistance process.
9. What interviewing techniques will you be able to implement when talking to the parents?
10. What kind of interview will this be?
11. What problems do you identify regarding the way that the teacher has conducted the interview, by looking at Mr. Williams' responses? 12. How can these problems be rectified?
13. What patterns of parental attitudes can you identify? Where does Mr. Williams fit in?
14. How would you regard Mr. Williams' attitude?
15. How would you respond to his accusation that the teacher is still young & inexperienced & she does not know what it is like to have a child with a barrier?
16. What barrier is Leonora experiencing? How do you know it? (what manifestations?).
17. If you analyze her behaviour, what problem areas can you identify?
18. What unmet emotional needs that Pringle has identified does Leonora experience?
19. How would the teacher deal with Leonora in class?
20. How would the teacher guide the parents on understanding Leonora's behaviour?
21. Which other role players who are part of the networking system in the community, could the teacher have consulted or referred the parent to for further professional assistance?
22. In what way can this professional person specifically assist the parents & the learner? - role, functions etc ...

1. What barrier is Loschni experiencing?

Auditory Barrier – *poc bi dancpf swib hifs hspwss scurfv*

2. What are the characteristics/manifestations of this barrier?

Conductive hearing loss

- Prevents sound waves from being conveyed through the conductive channels
- Occurs when the conductive channels are affected
- Learner can follow a conversation, if it is loud enough

Manifestations: Loschni turns her head towards the teacher when the teacher speaks to her, She requests that the teacher repeats a question - this can imply that she is **unable to hear teacher's speech in the noisy class surroundings or that she struggles to differentiate between the small differences between speech & the surrounding noise**, the teacher needs to face her when she speaks to her. She needs to speak slowly & pronounce her words well, thus not loud but clear, this could indicate that the learner is

trying to lip-read. The learner appears to be inattentive & cannot understand the teacher if the teacher's head is turned away.

3. What are the causative factors (extrinsic & intrinsic) of this barrier?

Intrinsic causes such as:

- inflammation of the middle ear
- blockage/hardening of wax

Causative factors: It is an **intrinsic** causative factor - **sensorineural hearing loss**- that is not as a result of external factors such as injury but **due to deterioration of the parts of the ear that perceive frequencies- the auditory cells of the organ or Corti/ auditory nerve cells.** The sound waves reach the internal ear but not the brain. It usually affects the parts that perceive high frequencies first. Thus the learner can still hear speech, given that it is slow & well pronounced. They do have trouble understanding speech because many words will sound the same to them & thus the need to repeat questions.

4. How will you assist a learner with this kind of barrier?

- Loschni must sit in front of the class
- I will always make sure that I am facing Loschni when speaking to her
- I will speak clearly & pronounce my words correctly
- I will use visual signals to gain Loschni's attention
- I will re-phrase questions to make it more understandable for Loschni
- I will ask questions to check that Loschni have an understanding of orally presented content
- When we watching a film/slides, I will ensure that there is a light shining on my face when speaking to the learners

5. What barrier is Julian experiencing?

Visual barriers to learning = *scrrraantgm*

6. What are the manifestations of this barrier?

- a) Refraction errors such as myopia (short sightedness); hyperopia (farsightedness); & Astigmatism
- b) Cataracts
- c) Squinting
- d) Nystagmus
- e) Albinism
- f) Trachoma
- g) Conjunctivitis
- h) Glaucoma
- i) Macular degeneration
- j) Retinitis Pigmentosa

Manifestations; Rubs eyes excessively, eyes are red & watery, struggles to copy work from the overhead projector into his book, bumps into other learners on the playground, steps too high going downstairs.

7. What are the causative factors of this barrier?

Intrinsic such as physical & physiological.

Causative factors; **refraction errors.** Depending on where the learner sits in the classroom one of two refraction errors could be the cause. Myopia-nearsightedness that causes him to see better close up, thus if the learner sits at the back of the class he won't see the content on the overhead projector in the front of the class. Hyperopia-farsightedness that causes the learner to see better at a distance & if the learner sits close to the overhead projector he will struggle to focus on the content. This can also prove problematic when the learner is expected to copy work into a workbook that forces him to focus on close up work. Nystagmus could also be a hidden cause as the to-and-fro movements of the eyes are more severe during concentration on near vision activities, ie. writing in a workbook. As the learner is not facing the teacher during this activity this visual barrier can go undetected.

8. How will you assist a learner with this barrier? - indicate what steps of the assistance process you will follow & exactly how will you go about each step of the assistance process.

I will take the following steps:

Sharpen other senses (touch, taste hearing, smell) & strengthen any residual vision

Solid base of concrete experience (link object to word) in order to understand language

Physical movement exercises for sound/motor development; release of pent-up emotions; correct posture,

Laterality well established for sound orientation & mobility, localising objects, relating to body parts

Support to aid socio-emotional development-encourage interactive playing, boost self confidence, highlight + points

Sit in front back of class depending, remove dangerous obstacles, attractive large print books, magnifying glass, tape recordings, dark lighting for albinism

repeat what's written on board

- a) Situation analysis where I collect all the information about the learner's situation such as: personality; home circumstances; school records & relationships with friends & teachers
- b) I'll create an outcome of the assistance process, in other words – what do I want the learner to achieve
- c) I'll select the learning content in such a way that it gives the learner the best chance of achieving the expected outcome
- d) I'll decide on the relevant assistance strategy, such as: does the learner function better individually or on his own?
- e) I'll ensure that the teaching aids I use will be relevant & well suited to the learner's level of interest such as: In Julian's case I will use colourful aids
- f) I'll make use of parental involvement so that the parents can understand the problem & assist Julian at home
- g) I'll praise Julian for even the slightest improvement to help build his confidence
- h) I'll observe & continuously assess Julian's progress to establish if the desired outcome has been achieved. If not, I will change the assistance strategy & continue with the assistance process until the desired outcome has been achieved.

9. What interviewing techniques will you be able to implement when talking to the parents?

A professional & friendly attitude

Do not rush the interview/meeting

You must listen to the parents, & make sure you hear correctly what they say

Discuss the learning areas where the learner experiences difficulties

Give parents advice on how they can assist their child at home

Be careful not to blame the parents for their child's problems

Emphasise the partnership which exists between the school & the parents

With a positive attitude, you can win the parents' confidence & their cooperation with helping the learner with additional tasks at home.

Interview techniques are discussed on page 401 of study guide: frames of reference; types of question (structured & unstructured; investigative questions) reflection (paraphrasing).

10. What kind of interview will this be?

A special meeting arranged to discuss learner's learning problems.

From my interpretation of the study guide I think this type of an interview would be an exploratory interview - we share common interest (to help the learner), two-way communication, etc page 309

11. What problems do you identify regarding the way that the teacher has conducted the interview, by looking at Mr. Williams' responses?

The teacher did not listen to the parents & she did not hear correctly what they said. It seems like there is

a slight communication gap between the teacher & the parents.

(You did not mention that the teacher was wrong about Julian's problem. As well as being very unprepared for her meeting with parents. Not sure that I would call it a special meeting?)

12. How can these problems be rectified?

With a positive attitude from both parties, cooperation & confidence the problems can be rectified more effectively & benefit the learner.

The school can send their teachers on training to support them with parent involvement & assistance to learners with barriers to learning.

13. What patterns of parental attitudes can you identify? Where does Mr. Williams fit in?

Mr Williams can be identified with the "quarrelsome" & "angry" behavioural pattern. Mr Williams is set on arguing with the teacher about her inexperience & that she is not doing her job. He criticises the education system by referring to the White Paper on Education.

14. How would you regard Mr. Williams' attitude?

An angry parental attitude

15. How would you respond to his accusation that the teacher is still young & inexperienced & she does not know what it is like to have a child with a barrier?

I think that the accusation is unfair & that parents & teachers should support each other to the best benefit of the learner.

16. What barrier is Leonora experiencing? How do you know it? (what manifestations?).

Behavioural problems = unacceptable problems can be due to emotional problems or child is imitating friends/parents behaviour.

In this case, Leonara could be imitating her father's behaviour, as it is clear from the text that Mr Williams is a bit of an aggressive man. Alternatively, Leonara could be imitating the one friend's behaviour, the one boy that she is clinging to?

I like what you said about the eldest daughter. But I don't think she suffers from behaviour as a barrier to learning. Firstly, we should take her developmental stage into consideration, adolescence, early adolescence suffer from greater mood swings in a bid of autonomy. I think from Pringle's model - her need is need for recognition. I can imagine how she must feel, being the "normal" sibling - the younger ones get more attention because of their barriers. I think she needs parental recognition.

17. If you analyze her behaviour, what problem areas can you identify?

Leonara is:

- aggressive & fighting with other learners
- loner & does not want to mix

- only clinging to one boy
- cheeky

18. What unmet emotional needs that Pringle has identified does Leonora experience?

The need:

- for love & security
- for praise & recognition
- for a positive self concept
- for sharing & self-respect
- to belong
- for self-actualisation

19. How would the teacher deal with Leonora in class?

The teacher can use the following behavioural modification techniques:

- Leonara's positive behaviour can be rewarded by making use of a star chart, as some learners respond better to a visible reinforcer
- Aggressive behaviour can be stopped by making use of the "time-out" / withdrawal method. Take Leonara by the hand & calmly lead her away to an isolation area & briefly explain to her why she has been taken out from the group. Leave her alone (under supervision) without looking or talking to her. When her time is up, simply say that she can join the group again.
- The best technique will be the prevention method. But this method can only be used by teachers whose powers of observation is keen & who are aware what behaviour leads to problem behaviour.

(I think look carefully at how you are answering number 19. This learner is 14 years of age. I don't think a star chart etc are age appropriate for her, etc. I can just imagine what this teenager would do in reaction to those strategies!!!)

She needs recognition as an adult. Find out what her strengths are, see the learner, not the behaviour, how can you make her feel included/belong, what responsibilities can you give her, what recognition can you give her etc...)

20. How would the teacher guide the parents on understanding Leonora's behaviour?

The teacher can keep an "incident log" in which she records the date & times of Leonara's problem behaviour. This way the parents will be able to see how often & to what degree Leonara is playing up.

21. Which other role players who are part of the networking system in the community, could the teacher have consulted or referred the parent to for further professional assistance?

Members of the "district level team" will be able to provide Leonara with professional assistance. This can include role players such as: Educational Psychologist; Social Worker; or/and school nurse.

22. In what way can this professional person specifically assist the parents & the learner? - role, functions etc ...

EXAM GUIDELINES

Section B – For the Intermediate, Senior & FET Phase students only

Section B consists of questions 8, 9, 10 & 11. You have to answer ALL four questions.

Question 8 comprises True/False questions & it counts 30 marks.

Questions 9 & 10 each counts 25 marks & question 11 counts 20 marks.

Some of the questions have subsections. Total of the examination paper = 100 marks.

You need NOT study Down's syndrome (bottom part of section 3) & Autism (section 4)

Prepare yourself in this regard.

.2.2 Intermediate, Senior & FET Phases Study Guide:

- o identification & characteristics of an impairment.
- o description of an impairment
- o explanation of support teacher can give to learner with this impairment in classroom
- o Study Section D (pg 142 & onwards) of the Study Guide.
- o Concentrate on Appendices A, B, C, D, E & I.
- o Appendix I should be study together with Appendix O – Pringle's Emotional Needs Model.
- o Read Appendices F, G, H, J, K, L & M but *no long questions on these sections.*
- o Appendices N, O & P are important. NO LONG QUESTION FROM APPENDIX N Pg319
- o Read Study Unit 1 Section A (p 2 & onwards).
- o Study units 2 & 3 Study Section A;
- o Section B Study unit 6:
- o Section C Study units 8, 9 & 10.