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**CLASSROOM SETTINGS**

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## **DEDICATORY**

To the memory of my beloved parents; to my dear husband Ariel and especially to my children Ariel Omar and María Isabel.

## **ACKNOWLEDGEMENT**

To GOD for the strength He gave me to continue higher educational studies;

To Ariel, my dear husband, for his support and comprehension, who is always there when I need him;

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# **CHAPTER I**

## **INTRODUCTION**

## **STATEMENT OF THE PROBLEM**

The Universal Human Rights pronouncement formulated in 1948 established the rights every person has to receive an education no matter what physical difficulties or handicaps he has. These agreements have been ratified in many countries all over the world through laws, covenants, declarations, and so on.

In Latin America, as well as in the Caribbean, during the last ten years, there have been significant changes and reforms in the educational system in order to enhance efficiency, equity, and quality in education. These renewed efforts to seek adequate educational opportunities, are largely derived from the transformations of the technological, scientific, and modern world characterized by advances in knowledge and the professional fields. On the other hand, the efforts to improve the quality of education and reduce school failures from the overuse of the traditional instructional systems are often reflected in low grades, repetition of levels, and desertion.

In this sense, the greatest challenge, which most Latin American countries at the moment face, is how to effectively implement the rights that children, both boys and girls, have to benefit from a teaching-learning process appropriate to their individual needs. To progress towards the achievement of this goal, schools must play an important role in providing a comprehensible



educational response through common curriculum structures for all those students who have individual learning needs.

These principles have been ratified by the United Nations in several meetings and international pronouncements: "La Conferencia Mundial de Educación para Todos", "La Conferencia Mundial sobre Necesidades Educativas Especiales: Acceso y Calidad", and "La VII Reunión de Ministros de Educación en la Region de America Latina y El Caribe". The ministries of education from these regions strengthened the conditions to promote the development of "integrated schools" , in which there is equality of opportunities as well as personalized education.

To implement inclusive education, many significant changes should have been made and not only in the regular system many years ago. At the moment, agreements have been ratified to work very closely to progress in creating the conditions necessary for these transformations.

"Inclusive education" is based on the principle of human rights, a concept which makes us different from other living creatures. These differences should be taken into account, especially by teachers and the Ministerio de Educación, in order to deal effectively with the reality that all children do not learn in the same way, under similar conditions, and at the same rate. Otherwise, it will be necessary to design new learning plans and instructional techniques

in order to implement the principles of inclusive education, or "education to everyone and for everyone".

The inclusive educational program states that, as human beings, we have first those common educational needs, which must be shared through interaction with our own individual needs, which are derived special needs. In this sense, the Panamanian Political Constitution in its (4<sup>th</sup>) article complies with the international rights.

Special educational needs, as an educational concept, is not a new term or idea. Since the early 70s, it was recognized in many countries around the world; however, it seems unknown to teachers and educational authorities because it was delegated to the Ministry of Education, alone, along with other specialized institutions. This has changed a lot because people with special needs were previously called handicapped persons, but not today because these difficulties are not an obstacle for a child to achieve a normal life style. These children need some adjustment in the curriculum, and the same in methods and techniques.

In the course of effecting improvements and changes in the educational system, many disappointments and disagreements were encountered relative to receiving or accepting children with special educational needs in the regular educational system. Unfortunately, the term "handicapped person" is still used in society today. Since

this term denotes low levels of acceptance in our minds, it contributes to the rejection of such students in regular classrooms.

It would require a kind of orientation for the rest of the students, their teachers, the school's principals, parents, and society in general to understand and accept these students because, most of the time, "special needs" is a synonym for problems. Teachers do not believe it will work because supposedly students with special educational needs promote a lack of discipline for the whole class and teachers will not be able to attend the rest of the students. However, research in evolutive psychology and educational interventions has revealed that the development of students with special educational needs does not differ from normal students. This research refers primarily to the child and adolescent who, in some way, must be attended and educated.

Another point to consider is the teacher's reactions or attitudes toward these inclusive programs. These scientific and technological changes challenge professionals in most fields involving the traditional educational paradigms, such as offering the same curriculum for all the students at the same time instead of individualized instruction for some students. Only in this way, will children with some deficiencies be included with normal students, to receive a plurality of alternatives in integrated classrooms.

The major goal is that students with special educational needs, acquire the skills to live independently, with personal autonomy and participation in social life as well as in labor fields; therefore, teachers must be concerned with receiving as much training as possible to increase their own abilities and tools, which help them to confront those situations with the best possible results.

As this integration is progressing, teachers from the regular educational system will be acquiring the basic knowledge about special educational needs in order to organize the teaching-learning process and the curriculum according to the individual cases. In consequence, it is necessary to include in the educational plans of any level: preschools, elementary, mid and high schools as well as higher education, content related with attention to diversity, special educational needs, and permanent training to help the teacher to accept and successfully confront the challenges of inclusive education.

The high costs, which special educational needs represent for teachers, research in diagnostics and evaluation materials, and equipment are not taken into account in the Ministerio de Educación budget; but rather this program functions under the auspices of civic clubs and the Loteria Nacional de Beneficencia. Nowadays, the Ministerio de Educación and Instituto Panameño de Rehabilitación Especial (IPHE) present "the normative", which is an official document which includes the duties and responsibilities of both

institutions because each one needs the other's professionals. It is a close relationship between psychologists, specialists, and teachers.

## **JUSTIFICATION**

Currently English is one of the most widely spoken language all over the world. One language becomes important when it makes great contributions in areas such as international affairs, international commerce, the conditions under which the great mass of people live, and so forth. In other words, language is important in the way that it makes contributions to the material and spiritual progress of the world. English is related to many international activities and contributions among which are the political, economic, commercial, social welfare, and scientific and technical advances of the XXI century, which affect most people around the world.

The well-known extent and importance of the English language today make it unnecessary to look for answers to the question of why learning English is important. Historically in Panama, the importance of learning English dates from the construction of the Panama Canal because of the influences of the many foreign cultures which contributed to this great project.

Through the years, the importance of the English language has increased in the Isthmus due to the commercial relationships, which

were taking place in Panama. Panama is an international business center in Central America because the monetary system we have is adopted from the United States, and other types of covenants signed with the United States which have resulted in the great growth experienced in the Isthmus.

Another point arising from those relationships is that Panamanians now manage and control the Panama Canal with all of the lands around it, a source of motivation for Panamanian professionals to learn the English language in order to continue to provide a valuable service for many countries. Also, the new technological and scientific discoveries and the use of the resulting knowledge through an almost universal system where most information and research are recorded in English, encourages people to learn this language.

Recently, most advertisements for employment require at least some basic knowledge of English. It is to be expected that everyone, who needs a job, will learn English to have access to better opportunities.

However, not only is the English language essential for regular students and professionals who wish to incorporate this language into their professional lives, but students with disabilities also have the right to language education along with the other courses they may be taking. With the new movement of inclusion, these students are

faced with the task of learning the English language in a classroom where there are students without disabilities.

Other countries have been including students with disabilities in regular classrooms for over two decades now, for example, during the 1988-1989 school year, in the United States, the majority of children and youth with handicaps received special education and related services in settings with non-handicapped students (ERIC Digest #E463, 1991). And, this process of inclusion began to intensify place with the 1990 Individuals With Disabilities Education Act (IDEA) (formerly the Education of the Handicapped Act).

Mentally and physically challenged citizens, like non-physically and mentally challenged citizens should have a free public education available to them, which emphasizes special education and related services designed to meet their needs. Furthermore, not all citizens with disabilities require special education; many are able, and should attend school without any program modification. Also, not all citizens with disabilities have specifically “learning disabilities”, many people have disabilities, however, are perfectly able to learn like any other normal person. Under the category of “learning disable students” we can find individuals with perpetual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. We can not include individuals who have problems that are primarily a result of visual, hearing or motor disabilities, or mental retardation, emotional



disturbance, or of environmental, cultural, or economic disadvantages (Lockerson, 1992).

So, as we can all see, these individuals may have physical or mental disabilities, but it does not mean that they have learning disabilities. Generally, these children and adolescents are underestimated and dealt with as lost causes; when it is only an opportunity they need to be given to demonstrate their potential as useful citizens of their country. With a little help on the part of their teachers, parents, and specialists from institutions in-charge of training individuals to deal with the disabilities these students present, they can achieve just as many goals as normal children can. And, one of these goals is the learning of the English language. If these students can be taught subjects such as Spanish, history, science, and even math; an effort can be made to teach them English as well.

## **RESEARCH QUESTION**

After extensive in-depth studies, into a wide variety of impairments, and what has been done to date by the institutions in charge of the inclusive program, and the perspectives within a couple of years for this project; this study will address the following question: How can the regular educational program be adapted for disadvantaged children? This research will be focused on the



integration of children with serious hearing problems, which are usually accompanied by speech difficulties due to the fact that the term "disabled children" is very general, and includes too many very different types and levels of disability.

## DEFINITIONS OF KEY TERMS

The following definitions of key terms have been provided to facilitate the understanding of the readers as to how they have been used within the context of this research. These definitions have been adapted from Webster's Encyclopedia Unabridged Dictionary of the English Language. (1989).

\* **Blindness:** Inability to see or visual impediment. Blindness is defined in several ways. If a person has a vision of 20/200, it can be fixed with glasses, but a person with a visual field of less than 20 degrees is considered legally blind.

\* **Common Educational Needs:** The educative needs that all students share and that are essential to personal development and socialization, according to the curriculum.

\* **Deaf:** This term describes a degree of hearing loss; usually at least a severe to profound loss; a person hard of hearing is also called deaf even if their hearing loss is not that great. See also deaf culture.

\* **Deaf Culture:** Deaf children born to hearing parents and not raised with deaf culture. Mostly they have opportunities to receive common theme in artwork, literature, art, stories, and so forth.

\* **Deaf-mute:** Inability to hear and speak. A hearing impairment which is usually accompanied by speech difficulties or partial lack of utterances.

\* **Full Inclusion:** Term used by educators to describe a philosophical approach to the education of children with disabilities. This philosophical paradigm maintains that a child with disabilities should be placed in a regular classroom for most or all the school day. The inclusion is the ultimate goal for all children with disabilities.

\* **Inclusive Education:** Renewed educational plans to include students with special educational needs in the regular system without restrictions.

\* **Individual Educational Needs:** All students are not able to achieve the learning principles established in the curriculum, nor do they have the same background, experiences, and previous knowledge or abilities. This diversity must be recognized by teachers through good pedagogical practice.

\* **Handicap (ped):** A physical or mental disability or a disadvantage in the achievement of a goal; for example: blindness, dyslexia, and so forth.

\* **Special Educational Needs:** Those individual educational needs, which can not be satisfied with the common or widely used methodological resources. It is necessary to use extraordinary means not usually employed with most students. This is required for students who have not acquired the necessary knowledge according to their ages.

## **SIGNIFICANCE**

Recent changes in our educational system have resulted in the inclusion of children with special educational needs in the regular system. This is new for teachers and schools, especially in the teaching of English, where most English teachers have been training for the common or regular system. This new inclusion policy will be a challenge in all fields, and more so when it is applied to the teaching of a language. The introduction of new techniques and activities will be needed.

The English language involves four basic skills: listening, reading, writing, and speaking. The question now is how do students learn English if they can not see, hear, or speak? This is the big

concern, and from this point we have to start to think and look for the answers.

It is also important that the results of this study be shared and discussed by the English teachers when they attend educational seminars. Undoubtedly, there are many English teachers facing the same difficulties, and they can contribute with their experiences in order to enrich this research.

The central objective of this work is to ascertain how English teachers can teach a second language to students with special educational needs, but it is also directed to other teachers who have never been involved in this situation.

Another objective is to provide a source for future research into Special Educational Needs, in order to contribute with theoretical and practical knowledge in this area.

## **CHAPTER II**

### **REVIEW OF THE LITERATURE**

Every child has a distinctive collection of talents, abilities, and limitations. In that sense, we are all “exceptional”. But some students are called exceptional because they have learning abilities or problems and require special education or other services to reach their potential. Exceptional students may have mental retardation, learning disabilities, communication disorders, emotional or behavioral disorders, physical disabilities, autism, traumatic brain injury, impaired hearing, impaired vision, or special abilities and talents.

According to Woolfolk (1995), no child is born “mildly retarded”, “gifted”, or “learning disabled” in the same way that no child is born female or with blood type O. The decision that an individual has mental retardation is a judgment based in the way the individual performs certain tasks. For many years, the purpose of labels was to determine eligibility for special services in the school or community. The medical model was the guiding perspective; the assumption of the medical model is that each condition has a particular treatment that is usually effective.

Unfortunately, few specific “treatments” automatically follow from a “diagnosis” of mental retardation. Many different teaching strategies and materials are appropriate for students who have been labeled retarded. Critics of labeling claim the categories have no educational relevance, because a label does not tell the teacher which methods or materials to use with individual students. Further,

the labels can become self-fulfilling prophecies. Everyone –teachers, parents, classmates, and even the students themselves –may see a label as a permanent problem, a stigma that cannot be changed. Finally, labels are mistaken for explanations, as in, “Chris gets into fights because he has a behavior disorder”. “How do you know he has a behavior disorder?” “Because he gets into fights”.

On the other hand, some educators argue that for younger students, at least, being labeled as special helps protect the child. For example, if classmates know a student is retarded, they will be more willing to accept his or her behaviors. And when a child is classified, parents and teachers have some guidelines in seeking information on particular problems. Of course, labels still open doors to some special programs of financial assistance.

Woolfolk (1995) goes on to say that the idea that people vary in what we call intelligence has been with us for a long time. Plato discussed similar variations over 2,000 years ago. Most early theories about the basic nature of intelligence involved one or more of the following three themes: (1) the capacity to learn; (2) the total knowledge a person has acquired; and (3) the ability to adapt successfully to new situations and to the environment in general.

Some theorists believe intelligence is a basic ability that affects performance on all cognitive oriented tasks. An “intelligent” person will do well in computing mathematical problems, analyzing poetry,

taking history essay examinations, and solving riddles. Evidence for this position comes from correlation evaluations of intelligence tests. In study after study, moderate to high positive correlations are found among all the different tests that are designed to measure separate intellectual abilities (Lohman, 1989; McNemar, 1964).

It must be pointed out that we do not create handicaps for people by the way we react to their disabilities. Some students must have special orthopedic devices such as braces, special shoes, crutches, or wheelchairs to participate in a normal school program. Accidents, disease, or birth defect can lead to conditions that require these devices. If the school has the necessary architectural features, such as ramps, elevators, and accessible rest rooms, and if teachers allow for the physical limitations of the students, little needs to be done to alter the usual educational program.

***Seizure Disorders (Epilepsy).*** A seizure is “an abnormal discharge of electrical energy in certain brain cells”. (Hallahan & Kauffman, 1994, p. 339). The effects of the seizure depend on where the discharge of energy starts in the brain and how far it spreads. People with epilepsy have seizures, but not all seizures are the result of epilepsy; temporary conditions such as high fevers or infections can also trigger seizures.



There are two major types of epilepsy you may encounter in the classroom. A ***partial seizure*** involves only a small part of the brain, whereas a ***generalized seizure*** includes much more of the brain.

Most generalized seizures ( once called *grand mal*) are accompanied by uncontrolled jerking movements that ordinarily last two to five minutes, followed by a deep sleep or coma. Upon regaining consciousness the students may be very weary, confused, and in need for extra help. Most seizures are controlled by medication. If it occurs in class, a seizure accompanied by convulsions requires action by the teacher. The major danger to a student having such a seizure is getting hurt by striking a hard surface during the violent jerking. But, do not try to restrain the child's movements –you can't stop the seizure once it starts. Lower the child gently to the floor, away from the furniture or walls. Move any hard objects away. Turn the child's head gently to the side and loosen any tight clothing. Never put anything in the student's mouth. Find out from the student's parents how the seizure is usually dealt with. If one seizure follows another and the student does not regain consciousness in between or if the seizure goes on for more than 10 minutes, get medical help right away (Hallahan & Kauffman, 1994).

Not all seizures are dramatic. Sometimes the student just loses contact briefly. The students may stare, fail to respond to questions, drop objects, and miss what has been happening for 1 to 30 seconds. These were once called *petit mal*, but they are now referred to as

*absence seizure* and can easily go undetected. If a child in your class appears to daydream frequently, does not seem to know what is going on at times, or cannot remember what has just happened when you ask, you should consult the school psychologist or nurse. The major problem for students with absence seizure is that they miss the continuity of the class interaction. If their seizures are frequent, they will find the lessons confusing. As a teacher, you should question these students to be sure they are understanding and following the lesson. Be prepared to repeat yourself periodically.

***Cerebral Palsy.*** Damage to the brain before or during birth or during infancy can cause a child to have difficulty moving and coordinating his or her body. The problem may be very mild, so the child simply appears a bit clumsy, or so severe that voluntary movement is practically impossible. The most common form of **cerebral palsy** is characterized by **spasticity** (overly tight or tense muscles). The damage to the brain may be such that only movement is affected. Children with this form of cerebral palsy may wear a brace or use a wheelchair and need no special educational program. But many children with cerebral palsy have secondary handicaps (Kirk, Gallagher, & Anastasiow, 1993). In the classroom, these secondary handicaps are the greatest concern –and these are generally what the regular teacher can help with most. For example, many children with cerebral palsy also have hearing impairments, speech problems, or mild mental retardation.

***Hearing Impairment.*** Students with severe hearing or vision losses, especially younger students who have not yet learned how to function in regular classrooms, spend most of their school time in special classes. But students with mild impairments and students with more severe problems who have had special training are frequently placed in regular classrooms for most or all of their instruction.

Hearing losses may be caused by genetic factors: maternal infections (such as rubella) during pregnancy, complications during birth, or early childhood diseases, such as mumps or measles. Many children today are protected from hearing loss by vaccinations against such infections.

Signs of hearing problems are turning one ear toward the speaker, favoring one ear in conversation, or misunderstanding conversation when the speaker's face cannot be seen. Other indications include not following directions, seeming distracted or confused at times, frequently asking people to repeat what they have said, mispronouncing new words or names, and being reluctant to participate in class discussions. Take note particularly of students who have frequent earaches, sinus infections, or allergies.

In the past, educators have debated whether oral or manual approaches are better for children with hearing impairments. Oral approaches involve **speech reading** (also lip reading) and training

students to use whatever limited hearing they may have. Manual approaches include sign language and finger spelling. Research indicates that children who learn some manual method of communicating perform better in academic subjects and are more socially mature than students who are exposed only to oral methods. Today, the trend is to combine both approaches (Hallahan & Kauffman, 1994).

***Vision Impairment.*** Mild vision problems can be overcome with corrective lenses. Only about 1 in 1,000 children in the United States have visual impairments so serious that special educational services are needed. Most of this group needing special services is classified as **low vision**. This means that they can read with the aid of a magnifying glass or large-print books. A small group of students, about 1 in every 2,500, are **educationally blind**. These students must use hearing and touch as the predominant learning channels (Kirk, Gallagher, & Anastasiow, 1993).

Special material and equipment that help visually impaired students to function in regular classrooms include large-print typewriters; variable-speed tape recorders (allowing teachers to make time-compressed tape recordings, which speed up the rate of speech without changing the voice pitch); special calculators; the abacus; three-dimensional maps, charts, and models; and special measuring devices. For students with visual problems, the quality of the print is often more important than the size, so watch out for hard-to-read

handouts and ditto sheets. The Instructional Materials Reference Center of the American Printing House for the Blind (1839 Frankfort Avenue, Louisville, KY 40206) has catalogs of instructional material for visually impaired students.

Students who have difficulty seeing often hold books either very close to or very far from their eyes. They may squint, rub their eyes frequently, or complain that their eyes burn or itch. The eyes may actually be swollen, red, or encrusted. Students with vision problems may misread material on the chalkboard, describe their vision as being blurred, be very sensitive to light, or hold their heads at an odd angle (De Mott, 1982). Any of these signs should be reported to a qualified school professional.

According to Easterbrooks (1997), when a child has a hearing loss during the developmental years, all areas of development can be affected significantly. A hearing loss limits ease of acquisition of a communication system, which further influences development of interactions with others, the ability to make sense out of the world, and ease of acquiring academic skills. Early identification of a hearing loss is critical to a child's academic and emotional adjustment. What is a hearing loss, and how is it caused?

There are three major types of hearing losses. The first is called a conductive loss. This occurs when something goes wrong with the outer or middle ear, impeding sound waves from being

conducted or carried to the inner ear. The second type of loss is called a sensorineural loss and occurs when damage to the inner ear or the auditory tract which impedes the sound message from being sent to the brain. The third type is referred to as a central auditory processing disorder because, although there is no specific damage to the ear itself, the neural system involved in understanding what is heard is impaired. Children with central auditory processing disorder may have normal hearing as measured by an audiometer (device used to test hearing levels), but they often have difficulty understanding what they hear. A child may also have a combination of these forms of hearing loss (Easterbrooks & Baker-Hawkins, 1994).

The debate over the best way to teach a child with hearing loss to communicate has raged since the 1500s (Winefield, 1987). Although the debate continues today, there is a growing number of individuals who recognize that no one system of communication is right for all children. The choice of a communication system must be made on an individual basis, taking into consideration the characteristics of the child, the resources available, and the commitment of an individual family to a communication method. As an orientation, the following definitions are useful:

The Auditory-Verbal philosophy is a set of guiding principles for early intervention that are used to support the development of residual (remaining) hearing and speech and that focus on a strong

development of listening skills. The Auditory-Oral philosophy is a set of principles that are used to develop spoken language and listening skills at all ages and that may incorporate visual methods of teaching these. Cued Speech is a sound-based system of hand cues that supplement speechreading. English-Based Sign Systems are those systems that use signs from ASL (American Sign Language) plus invented signs along with prefixes and suffixes to represent the English language in signed form. The Bilingual-Bicultural philosophy stressed the importance of early development of ASL, which has a grammar different from spoken or signed English, as the deaf child's natural language. ASL should be used as a bridge into English as a second language. Total Communication refers to a philosophy of using the system most needed by the child at any given time. Total Communication usually involves simultaneous use of speech and sign and is the most commonly used form of instruction (Schildroth & Hotto, 1993).

Other factors complicate the picture of which system should be used to teach children who are deaf and hard of hearing to communicate. Cochlear (portion of the ear that is responsible for hearing) implants are computerized devices implanted into the cochlea of individual who are deaf, which influence the ability to develop speech and listening skills. Attendance at a residential school is considered a key component in the success of a child whose family has chosen the Bilingual-Bicultural approach to education. The presence of additional learning disorders may also



affect a child's progress in any method or philosophy; therefore, this challenging-to-test population must be assessed adequately.

What kind of technology is available for people who are deaf or hard of hearing? Today the options for support from technology are exciting. A wide variety of hearing aids can be tailored to individual patterns of loss. Students in classroom may use a variety of assistive listening devices that help them hear the teacher while filtering out ambient noise. Telecommunication Devices for the Deaf (TDDs) are available to provide people who are deaf with access to telephones (Compton, 1991). Television sets are not produced with built-in closed captioning capabilities, or for older TVs, viewers may purchase captioners. A variety of alerting devices are available which use visual means to alert individuals to doorbells, telephones, a knock at the door, a baby's crying, oven timers, and smoke detectors, among other sounds of daily life. Vibrating devices may be used in place of an alarm clock. In addition, computer technology such as fax machines, programs for teaching speech, real-time graphic display devices for recording lectures, and a diversity of machines and programs are affecting education and daily life to an ever-increasing degree.

According to Holcomb and Peyton (1992), learning to read and write effectively is a challenging task for many adults, particularly for those who are deaf. In spite of concerted efforts by educators to facilitate the development of literacy skills in deaf individuals, most



deaf high school graduates read English at roughly a third or fourth grade level as determined by standardized reading assessments (Allen, 1986; King & Quigley, 1985). In their writing, they often make vocabulary and structural errors that include omitting or confusing articles, prepositions, and verb tense markers, and they have difficulty with complex structures such as complements and relative clauses (Swisher, 1989).

Having limited literacy skills acts as a barrier for deaf people in the workplace. They often have had limited opportunities at school for vocational training. They also may have difficulties communicating with hearing co-workers and poor performance on work-related reading and writing tasks. Because of these factors, deaf adults in the workplace often find themselves confined to low-level jobs.

For centuries, deafness was considered a pathological condition. Deaf people were considered mentally and educationally deficient due to their inability to hear and in need of special education and social services to minimize and correct those deficiencies. However, following the groundbreaking work of William Stokoe (1960) and others, there has been a growing trend away from a pathological definition of deafness (Wixtrom, 1988; Woodward, 1982). Most educators and researchers in the field of deafness now believe that deaf people share similar language backgrounds and literacy challenges with other linguistic minority groups. Their difficulties with

acquiring literacy in English are considered to have linguistic, cultural, and educational rather than pathological roots (Charrow, 1981; Johnson, Lidell, & Erting, 1989; Padden & Humphries, 1988).

One of the primary causes of difficulty with English literacy is that English is a language that deaf people have not heard or have heard only in a limited way. Thus, for them, American Sign Language (ASL) or another form of manual communication is the most accessible language because of its visual properties. As Charrow (1981) points out:

It is not the inability to hear that causes the most persistent problems of prelingually deaf persons, but the enormous constraints that that inability puts upon the learning and use of the societal language. (p.187)

Because deaf learners do not have access to English in its spoken form, the challenge for them of developing literacy skills is much greater, in some ways, than it is for hearing nonnative English speakers.

A growing body of literature brings a social/cultural perspective to literacy issues concerning deaf people. American Sign Language, the primary language for many deaf people, is now recognized by linguists as a complete, legitimate language with complex grammatical structures and extensive vocabulary. However, ASL is clearly a minority language in a majority cultural that tend not to understand or respect sign language. (Swisher, 1989).

Despite the legitimacy of ASL, many deaf people grow up with ambivalent attitudes toward their own language, often feeling “inferior to hearing persons” (Kannapell, 1976, p. 11). Padden (1987) reports that deaf people’s attitudes toward ASL vary between “intense pride” and “a great deal of confusion and shame” (p. 44; quoted in Swisher, 1989). This ambivalence extends to English as well. Because of the need to communicate with the non-signing public and to function in an English-literate society, most deaf adults believe that English literacy is important. Still, many hold an equally strong belief that they are unable to master it.

Since the early 1500s, when educators began to realize that the “deaf and dumb” were capable of being educated, a variety of approaches have been used to develop deaf people’s literacy. Many educators, today, however argue that these approaches have been woefully inadequate (e.g. Johnson, Liddell, & Erting, 1989). Oral/Aural and phonics-based approaches; for example, have not proven effective, since for deaf learners, printed words are not connected with sounds. Forms of Manually Coded English such as (Signing Exact English), developed by educators to represent English on the hands, are cumbersome to use, do not adequately represent either English or ASL (Kluwin, 1981), and have had limited success. Remedial approaches, which have focused on pattern practice, vocabulary lessons, and teaching explicit rules (Charrow, 1981), break language into parts and do not allow English to be used in natural way that it is acquired by hearing individuals. By adulthood,

many deaf learners have had years of failure and frustration with learning to read and write in English.

At the same time that they experience frustration and failure, most deaf adults understand the need to be literate in English. As well as being crucial to success in the work world, written English is often the only way they have to communicate with a non-signing public. Recent innovative educational approaches show promise for reversing the cycle of failure. Space allows only mentioning these approaches briefly, but the references cited provided ample information about them. Some have been used so far primarily with children, but may be effective with adults as well, with appropriate modifications.

- Bilingual/bicultural approaches, which integrate ASL and English and include using videotaped stories in ASL as a precursor to writing compositions in English (Humphries, Martin, & Coye, 1989; Mozzer-Mather, 1990; Paul, 1987; Quigley & Paul, 1984).
- Whole language and writing process approaches, which focus on problem-solving skills needed in the workplace and avoid over correction of errors and breaking language into parts (Heald-Taylor, 1989).
- Interactive writing, in which deaf learners and teachers converse in written English on teletypewriters (Lieberth, 1988; Nash & Nash,

1982), on local—and wide—area computer networks (Peyton & Bastin, 1986; Ward & Rostron, 1983), and in dialogue journals (Staton, 1990; chapters in Peyton, 1990).

- Interactive videodisc, in which computerized ASL video printed English text are used simultaneously to help deaf learners developed their English skills (Copra, 1990; Hanson & Padden, 1989).
- Closed captioned TV programs, which allow extensive exposure to English through a recreational medium (Bean & Wilson, 1989; Spanos & Smith, 1990).

Mastering written English is a lifelong struggle for many deaf people. Deaf adults develop literacy differently than do their hearing peers. The above instructional approaches, which (a) are student-centered, (b) require meaningful use of both ASL and English, (c) incorporate and build on the language and cultural backgrounds and actual home and workplace issues facing deaf adults, and (d) use creative visual means to teach reading and writing, promise to make the educational process more meaningful, positive, and successful for deaf learners. The use of these approaches for developing the literacy skills of deaf adults needs to be carefully documented and the degree of success determined.

According to the National Plan of Inclusive Education, in general terms, inclusion is based on the respect of human rights, and the high quality of developmental type rights most individuals should have. For years, the Universal Human Rights Movements all over the world have initiated, in the international community, great efforts to promote the rights, which each individual has, to receive education, even those who are not mentally, physically, and socially able.

This right must be respected in all the countries around the world because it has been accepted by many governments through multiple agreements or covenants. In this sense, the Constitución Política de Panamá complies with International Rights norms.

1. internationally: In addition to the Universal Rights Pronouncement on December 20th, 1959, the Children's Rights Covenant in 1989 established the right every girl and boy has to be educated freely and obligatorily, and the respect for children's dignity. It does not exclude children with any type of impairment.

In relation to disabled persons, a World Action Program was formulated, and accepted by the General United Nations Assembly, the major concern of which is that opportunities and rights are equal or the same for everybody without regard to sex age, religion, and ethnic origin.

In 1990, the World Educational Congress celebrated in Jomtien, Thailand, exhorted all the governments to create and establish new

policies, which provide their inhabitants with the minimum of basic needs facilities to improve their life conditions.

In 1994, the Worldwide Conference in Salamanca, Spain, in an attempt to emphasize the "Education for everybody" principle, stated that:

- All children, male or female, must be given the opportunity to achieve and maintain acceptable levels of knowledge.
- Each child has special characteristics, interests, and special educational needs which belong to him.
- Educational systems must be designed and programs should be applied taking into account the diversity of these different characteristics and needs.
- Children with special educational needs must obtain access to regular schools where they will be integrated into a pedagogy-centered or oriented program to children to satisfy their own needs.
- Regular schools oriented to integrate those special cases, are the more efficient means to avoid or ameliorate segregated attitudes toward the incorporation of impaired children in public or official schools.

In 1994, the Uniform norms were published advocating equal opportunities for disadvantaged people of any age, to take an active part as members of their community and to make public their rights and duties as normal citizens.

2. Nationally: The Constitución Política de la República de Panamá 1972, in its 87th article in educational aspects state:

" Everybody has the right to receive education which is a government responsibility and gives the parents the right to participate in the educational process. Education is based on science, uses its methods, promotes its growth and diffusion; and applies its results to ensure the human being's development as well as the strengthening of the Panamanian nation culturally, politically, and democratically".

Article 102 indicates that any differences in the students must be attended by special education based on scientific investigations and educative orientation.

The Instituto Panameño de Rehabilitación Especial (IPHE) initiated the integration movement in 1970, resolution No. 38, which began with twelve special classrooms to integrate students with mental retardation in ten regular elementary schools and also enabled the integration of visually impaired and autistic children.

In 1990, in the Ministerio de Educación, the Dirección Especial was established with the purpose of paying special attention to boys and girls with learning difficulties as well as gifted children.

Article 71: The regular system must attend the following cases:

1. Physically and mentally impaired persons.



2. Persons with social adjustment problems.
3. Gifted persons.

Article 71 - A: The Ministerio de Educación will supervise and coordinate educative actions which special and private institutions perform in inclusive educational systems.

Article 71 - B : The special education imparted to impaired students must be considered as a permanent process, which provides the same opportunities for each one: normal or abnormal. However, it must be flexible in its application due to the admission age and promotion to the next class or group.

On January 28th, 1992, Law No. 1 was enacted to protect acoustically disabled persons, establishing the following educative aspects:

Article 2: In the development of plans and programs of study of the subsystem in its first, second and third educative level, the specialized teacher will use the techniques like the Panamanian sign language as well as universal techniques that the teacher considers feasible and necessary.

Article 3: Acoustically disabled persons will be included in special educative centers if it fulfills actual dispositions of the Ministerio de Educación.

Article 4: The Ministerio de Educación will certify the hard of hearing students once they have completed the plans and programs of the first, second and third educational levels.

Article 6: The Instituto Panameño de Rehabilitación Especial is responsible to coordinate with official and private university programs that allow higher studies for impaired students.

Ley No. 34, July 1995 modified and added some articles to Ley No 47 Orgánica de Educación, which established the right all students have to receive an education in the regular or non-regular system. As a result, it included the following articles:

Article 3: The education is official or private. It is official when it is supported by the state and private when it is not economically supported by the state.

Whether official or private all schools are public; this means they are available for any person no matter ethnic origin, social level, or religion.

Article 34: The regular subsystem involves systematic or formal education which provide educational structures to attend adolescent and adult school populations with parent's participation. Also

impaired students are attended in formal and non-formal system when necessary.

Article 63: The non-regular education contributes to the improvement of the human being's social life, their interests, and opportunities for studying in the university if possible.

The Ministerio de Educación will coordinate, supervise and guide the educative actions in the non-regular subsystem as well as in private and official educative centers with the main objective of interrelating the regular and non-regular subsystem academically and administratively.

Article 65: Initial educational is responsible to attend young children integrally and to recognize early signs or symptoms of children possibly confronting a need for special attention.

It is believed that inclusion must start at preschool level the transition from preschool to school can be difficult for a child with disabilities. The preschool environment characterized by small groups and individual attention is replaced by classrooms with more children, fewer adults per child, and a greater demand for adapting to general classroom procedures and working independently. Parents and teachers from both receiving and sending programs need to be involved in placement as well as scheduling and facilitating. It is important to prepare children and their families by requiring that

specific steps be addressed in each child's individualized education program for preschool children.

From another point of view, family members play a key role in providing information about the child's abilities, strengths and weaknesses, and interests. Parental insights complement information obtained from preschool sources and provide a broader picture of the child's capabilities and needs. Identifying specific ways for parents to be involved in the process is essential to a good transition.

Parents may act as teachers, partners, decision-makers and/ or advocates. They are teachers when they reinforce the skills acquired in preschool, partners when they communicate needs with school personnel, and decision-makers when they participate in the IEP process. Parents can help prepare the child for the transition to public school by maintaining and generalizing skills necessary for the transition. They also serve as a bridge between the two programs, visiting the new program with their child, helping the child to become familiar with the new setting, and discussing concerns and fears connected with the upcoming change. They can also help bridge the gap by arranging visits with former preschool friends and teachers as well as with new classmates. Parents can help their child develop skills in following directions, playing independently, attending to task, and self-care. These skills will help prepare the child for the new setting.

The role that teachers play in this program is fundamental. Teacher attitudes, instructional priorities, and communication with parents and other members of the transition team will determine the quality of the child's transition. Sending and receiving teachers may have different goals and priorities, but they play complementary roles in preparing the child for the move from preschool to the general school setting.

The sending teacher should find out what skills the child will need order to function adequately in the new setting and implement a program for preparing the child to develop those skills. Familiarity with the receiving program is essential in order to design an appropriate transition curriculum. The sending teacher can gain a better understanding of prerequisite skills by visiting the receiving classroom. For children placed in an integrated setting, behavioral requirements for successful functioning have been assessed and are referred to as survival skills. These include being able to function independently during group instruction, following classroom routines, completing tasks within an allotted time period, and working in the absence of teacher direction. Teaching survival skills as part of the preschool curriculum helps prepare the child for the demands of the general school setting. Skill-building activities should be developmentally appropriate for each child.

The success of the transition preparation is ultimately determined by the child's adaptation to the new environment. The receiving teacher's attitude toward and experience with children with disabilities may be factors in the success of the child's placement. Some flexibility will probably be required on the teacher's part in order to adjust expectations and adapt to the child's special needs. The sending and receiving teachers will have the continuing role of acting as liaisons between programs and with parents. Good communication and clearly defined goals will facilitate the preparation for the child's move from preschool to the general school setting.

Preschool teachers have presented a model that provides clear guidelines for the transition process. The first activity initiates long-range planning by establishing a "transition timeline" (limit to initiate the integration). This timeline serves as a guide for accomplishing transition activities and can be set up in chart form to track activities. The transition process addresses specific activities beginning 13 months before the move to a new program. The process includes preparation, implementation, and evaluation activities. The initial steps of the process are designed to prepare the participants for their role in the transition. Steps include notifying and preparing parents and teachers from both the sending and receiving programs. Data on the child's needs are collected or updated. A profile of communication procedures, available services, prerequisite skills, and teacher expectations is developed from existing information.

The final step calls for evaluation of the effectiveness of the process. This may include the following:

- \* Develop the transition timeline.
- \* Notify appropriate administrators of the student's approaching transition.
- \* Inform parent (s) and primary caregiver (s) that the child will be making the transition and collect information on family transition needs.
- \* Determine the communication policy of the potential receiving program (s) and obtain a description of the program (s).
- \* Obtain information from teacher (s) in potential receiving program (s) regarding the program / classroom overview and skills perceived as important for transition into the classroom.
- \* Verify the receipt of transition information and/or follow up request for the transition information or additional information.
- \* Reevaluate: verify the student's assessment and eligibility.
- \* Prepare the parents for the transition planning meeting.
- \* Hold the transition planning meeting.
- \* Obtain permission from the parents to release information.
- \* Provide information to all transition team participants.
- \* Link the parent/ primary caregiver of the transitioning child with a parent/primary caregiver of a child already attending the new program.
- \* Send the receiving program all pertinent records and verify the receipt of the records.

- \* Provide the receiving program with information about the child's current program.
- \* Evaluate the effectiveness of the process after completion.

According to international laws on inclusion, over 50 years of research on children with many types of disabilities receiving a range of specialized services in many different settings has produced evidence that early intervention: (1) ameliorates and in some cases, prevent development problems; (2) results in fewer children being retained in later grades (3) reduces educational costs to school programs; and (4) improves the quality of parent, child, and family relationships.. Much of what we know about early intervention effectiveness is drawn from this diverse historical base of information.

More recently, researchers have begun asking a more rigorous and differentiated question: For whom and under what conditions is early childhood intervention most effective? This more sophisticated question focuses on the effects of various interventions for specific groups of children relative to the type of program they received. Data from well-controlled research studies indicate that young children with disabilities and environmental risk factors make significant gains on both qualitative and quantitative measures of development when provided appropriate services. The involvement of these parents in reinforcing critical skills in natural contexts is an important factor associated with the magnitude of the child's progress.



In addition to encouraging parent involvement, it has been found that the most effective interventions are those that also:

1. occur early in the child's life,
2. operate from a more structured and systematic instructional base,
3. address each child's assessed needs, and
4. include normally developing children as models.

Programs with these characteristics produce the most relevant, significant, and stable results in child and family functioning.

More in inclusion indicate that the "Best Program" depends upon the specific needs of the child. Conceptually, the fields of early childhood and early childhood special education promote the incorporation of instructional goals and curriculum content into normally occurring routines in the home, preschool, daycare center and kindergarten settings. Recognizing that children with special needs require efficient, effective, and functional instruction directed at achieving socially and educationally valid outcomes, it is important that practitioners identify the nature of each child's needs and the extent to which accommodations and supports will be necessary for each child to be successful.

Instructional arrangements, curriculum content, and instructional procedures can and should be varied to coincide with the intensity of each child's learning needs. Such accommodations

increase the likelihood that children with special needs can be included in a vast array of typical classroom activities.

While many state and local agencies are still grappling with the issue of what kind of service delivery models (methodologies to teach these individuals) they will endorse, it is clear that special education and related service needs of young children with identified or at-risk conditions can be appropriately met in settings that include normally developing children. Integrated settings have, in fact, been found to produce higher proportions, rates, and levels of social, cognitive, and linguistic skills in children with disabilities than segregated settings.

Some general principles to help guide the selection of practices have been added in this research.

Five general principles can be used to guide the selection of effective practices: least restrictive environment, family-centered services, trans-disciplinary service delivery, inclusion of both empirical and value driven practices, and inclusion of both developmentally and individually appropriate practices.

#### 1. Least Restrictive And Most Natural Environment

The Disabilities Education Act states that children should be placed in the least restrictive environment or the most natural setting. This is not simply a placement issue; however, the method of

providing services, regardless of setting, should allow for maximum participation in the "mainstream". Despite the limitations that a disability might place on a child's and family's ability to lead ordinary existence, good services should promote the potential for "normal" rather than "disabled" routines by providing a fun environment that stimulates children's initiations, choices, and engagement with the social and material ecology. Programs should focus on preparing children for the next, less restrictive, environment.

## 2. Family - Centered Services

A second principle is that service delivery models should (a) recognize that child is part of a family unit; (b) be responsive to the family's priorities, concerns, and needs, and (c) allow the family to participate in early intervention with their child as much as they desire. Services that have previously been geared almost exclusively toward children must have the flexibility related to the child's development. It is strongly recommend that service providers give families choices in the nature of services; match the level of intensity of services desired by the families; and provide center-based services close to where families live.

## 3. Trans-disciplinary Service Delivery

One model for increasing the opportunity for family members to make meaningful decisions and participate in early intervention is

trans-disciplinary service delivery. This model involves team members sharing roles: each specialist helps other members to acquire skills related to the specialist's area of expertise. This requires both role release (accepting that others can do what the specialist's was specifically trained to do). Trans disciplinary service delivery encourages a whole-child and whole - family approach, allows for the efficient use of the primary interventionist, the child and family do not always need to see many different specialists), and fosters skill development in everyone.

#### 4. Inclusion of Both Empirically and Value-Driven Practices

Empirical research has shown that practices should include such denatures as adult: children ratios that maximize safety, health, and promotion of identified goals; barrier-free environments; and environments that promote high levels of engagement. Practices guided by values include having someone available to speak the family's preferred language; basing communication with family members upon principles of mutual respect, caring, and sensitivities, making environments safe and clean; employing clinic-based services only when they are identified as the least restrictive option; and giving opportunities for the family to have access to medical decision-makers.

#### 5. Inclusion of both Developmentally and Individually Appropriate Practice.

Developmentally appropriate practice refers to educational methods that promote children's self-initiated learning with emphasis on individualization of services in response to children's characteristics, preferences, interests, abilities, and health status, and curricula that are unbiased and nondiscriminatory around issues of disability, sex, race, religion and ethnic/cultural origin.

The reality of today's society is that any child, on a given day, may be a child with special needs. Recognizing this fact, it is important that local preschool and early education programs tailor curriculum and instructional practices to fit the diversity represented in their classrooms. Adapting the "standard" to fit those who may not fall within expected margins is a strategy necessary for effective teaching and learning, and that enhances the likelihood that children will feel and be successful.

For years, handicapped people have been segregated from the rest of society as if they were truly different from non handicapped people. Thanks to federal legislation such as Public Law 94-142 (the Education for All Handicapped Children Act of 1975) and Section 504 of the Vocational Rehabilitation Act Amendments of 1973, individuals who have handicaps are being integrated into the mainstream of education, employment, and community activities.

It is sad that attitudes cannot also be legislated, but fears and anxieties toward those who are different cannot be decreed illegal. It is hoped that the present generation, growing up in situations where people with handicaps are a natural part of school and community life, will put to rest forever the notion that people with handicaps are "different".

Special treatment should be given to children with handicaps that need to be treated, to a certain point, like any other child. It is unfair to the child when he or she is not allowed to compete. The world at large is mainly inhabited by people with the ability to see, to hear, to speak, and to move about freely. Children with handicaps need to practice meeting the standards of the "normal" world while they are growing up so they can gain confidence and independence.

Feeling sorry for children with handicaps can not help to overcome the problem if teachers and fathers perceive the disabled child as someone to be pitied; someone from whom little should be expected or demanded, probably little will come. If on the other hand, you expect the child to succeed and grow, to learn to act independently, then chances are good that the child will become a successful, growing student.

Sometimes these children present temper tantrums or frustrations, which must be handled carefully. Such problems should be handled the same way they would be handled if the child did not

have a handicap. It is easy to assume that disabled people exist in a continuous state of frustration. This is not true. Of course, disabled children may feel frustrated at times. These frustrations should be handled with good sense, remembering that a certain amount of frustration is healthy and promotes growth but that too much frustration can be defeating.

In response to everyday accomplishments it is a joy to see a child with a handicap able to do the same things that other children do, such as read play and so forth. It is important, however, to distinguish between accomplishments that are attained with about the same degree of effort that is required from most children and those accomplishments that were not particularly difficult to attain as if they were extraordinary, children can develop unrealistic views of themselves-elicited from others, or a deflated view, based on the obviously limited expectations others hold for children with handicaps. On the other hand, encouragement and reinforcement should be expressed when youngsters accomplish tasks made difficult by their specific disabilities, for example, dressing for a child with cerebral palsy.

One of the benefits of mainstreaming is that children can help their disabled classmate. But too much help can become a hindrance if it robs the child of opportunities to learn and practice independence. Generally, if a child cannot handle some procedure or material, she or he should be taught how to do it if at all possible.

One disability that people have trouble coping with involves speech and language. Whether the communication impairment results from a physical disability such as cerebral palsy or a speech handicap such as stuttering, the listener tends to anticipate what the disabled person is trying to say and not allow the person the time she or he needs to communicate.

It is easy to mistakenly perceive people who have severe communication disabilities as also having impaired intelligence because of their simple, poorly articulated speech. A natural tendency is to respond to this kind of language pattern with a simplification of your own speech. This should be avoided. Individuals who have problems expressing themselves, unless they are also hearing impaired, generally have no problem understanding normal, complex language.

There are special considerations that can be helpful to children with special disabilities. For example, keep in mind that children who have visual impairment depend upon what they can hear and touch to bring them information about their surroundings. Provide opportunities for visually impaired children to handle things that children with normal vision can simply look at. It is also helpful to describe new people, things and events as they come into the child's environment. Children, who have hearing impairments or who are deaf, must depend on sight for most of their knowledge. Make sure



the hearing impaired child can see the face of whoever is speaking; many cues are picked up through lip reading and facial expression. Arrange for seating near the teacher or leader. Do not assume that a youngster understands you just because you have his or her attention. Ask whether you have been understood.

Children, who have a mental retardation problem, can get along better when directions are short and clearly stated. Break down tasks into a series of steps that can be completed in sequence. Maintain a routine, teach new procedures, and give time for practice.

Youngsters with orthopedic impairments should be asked whether they need help and, if so, what kind. Do not assume the child needs more help than he asks for.

"Full inclusion" is a term used by educators to describe a philosophical approach to the education of children with disabilities. This philosophical paradigm maintains that a child with disabilities - even severe disabilities such as profound mental retardation - should be placed in a regular classroom for most or all of the school day. Drawing from the legacy of the Civil Rights movement, advocates of full inclusion for children with disabilities, state that "Inclusion is the ultimate goal for all children with disabilities regardless of their disabilities or current placement.

If inclusionary classrooms are committed to serving all students, they must choose to include, both physically and philosophically, even the most extremely gifted children as well as children with the most severe disabilities. This means more for both groups than simply being in attendance in the regular classroom. It means respecting and teaching one's students to respect the unique development paths of providing related support services. Although much has been written about inclusion methods for children with disabilities, much has yet to be learned.

Current inclusion programs for students with disabilities vary widely, and proponents admit that. There are no ready answers and no recipe books for teachers, administrators, or family members grappling with the inclusion of students with disabilities in regular classrooms. Attempts have been made to develop guiding principles for inclusion models, which include such factors as: age appropriate for placement in local public schools, integrated delivery of services in the general classroom, social integration, curricular expectations adapted to a level development, team collaboration, and Systematic evaluation of educational and related services.

It is important to remember that these principles were developed by advocates of full inclusion for student with disabilities, after a review of the literature and an examination of current practice. It is also important to remember, as previously noted, that several major advocacy communities for children with disabilities do not

support full inclusion. Generalizing these principles to other special populations in the school may not always be appropriate, although some will be beneficial to all children.

There are some schools which do not have inclusion programs but this is not related to the size, prestige, or number of students. The special cases are sent to schools that provide standard facilities to the students such as short distances to travel to school, and the student's familiarity with the surrounding areas.

Most of these cases are in elementary schools since this program was initiated in Veraguas Province in 1999; therefore, few students are in higher grades.

According to the hearing impaired student's programs, the instruction of deaf children has changed considerably from mimic and gestures to an oral educational method. Furthermore, the language is taught both in verbal form and language comprehension using readings.

The first existing information about education for the hard of hearing comes from the Bible. Under Greek and Roman laws, children born deaf were segregated as well as considered mentally faulty and incompetent, devoid of all rights.(1)

In the XVI century, the Spaniard monk Fray Pedro Ponce de León made an effort to teach hearing impaired person to speak. The result was a deaf-mute who could speak with the hands or manual method.(1)

Also in Germany, the teacher Heimiecke used an oral method the results of which were favorable. Although this method was a little bit improved, it has had acceptance difficulties. In 1879, in the Congreso Internacional de Sordo-mudos in Paris, the method was finally accepted as the most appropriate method for training deaf-mute persons.

(1) Arosemena, Berta Torrijos (de) " EL PROBLEMA DE LA SORDERA Y SU HABILITACION PEDAGOGICA". Tesis de Graduación de la Universidad de Panamá, Panamá 1963 pág. 42.

Later on in France, Australia, and The United States, this program received more attention. A special training program on how sounds can be distinguished by the hard of hearing was developed

This training focused on the stimulation of the residual audition of such children.

In the XVI century the Italian Girolamo Gordano de Padua proposed the following principle:

"Writing is associated with language, language to mind but ideas and written characters could be interconnected without the intervention of sound. Although hard of hearing instruction is difficult, it is not impossible".

Gordano's contribution were of great value. The Asociación del Language Ideológico and the experience of the private individual of the auditive sense is the base of the hearing technique and really the idea that the deaf can be educated. From 1930 until now, deaf education and the importance of auditory training, specially the use of electronic equipment and audio-phones which use reading and writing; has provided more advances in special education.

It is important to mention that most deafness in children originates in the intrauterine-tract with the early signs of life. There, the child can not speak because he hears no one speaking. The learning of spoken language is related to the audition level of the child.

There are three types of deafness: hereditary, congenital and acquired.

Hereditary: a hard of hearing couple in a range of 75% will have deaf children. A deaf person married with a normal - hearing or deaf by accident could have normal or hard of hearing children. Deafness is

inherited in 5% of the cases. It should be diagnosed through family' blood tests.

**Congenital:** This is caused by any interference in the ear during the development of the embryo. Sanguine anomalies in the R.H. factor not discovered on time, can cause deafness associated with the alteration of neurons during delivery.

External mother's diseases during pregnancy, such as influenza, measles, rubella, diphtheria and others may cause deafness in the baby during the first four months of pregnancy.

Infected - contagious diseases can cause acquired deafness. Also the lack of respiration by the child during delivery which reduces oxygen in the blood (circulation) can produce damage to the auditory nerves. It is called cyanotic phase. Many pills and other medicinal products are responsible of acquired deafness.

In the developmental educational process for the hard of hearing, several aspects must be considered. Among these, for instance, is recognition of the high degree of potential deaf children have because they are physically and intellectually normal.

It is also relevant to take into account the encouragement the hearing impaired receive in early education.

In the first stage of education, the development and the personality of the children can be modified. Parents are also important in the achievement of most of the goals of this program.

It is important to educate sensorial faculties and the child's intelligence which lead him to acquire basic characteristics as attention and observation, and development of good habits.

To educate hard of hearing children is the responsibility of parents, educators and the society in general. It is possible through patience, comprehension, goodwill, and love.

Some phonetics must be learned by the teacher in order to teach articulation, correct word comprehension, labio-dental reading, systematic language organization, auditory and rhythmic entertainment through musical instruments like piano and drums. All these constitute special activities to start the process of spoken language and integral education for hearing impaired students.

In Panama, there has been the "Escuela para Sordos" since 1951. It is part of the Instituto Panameño de Rehabilitación Especial. Its mayor policy is to provide attention to deaf persons at all stages from early pregnancy, preschool, and the different academic levels to promote the acquisition of spoken language.

The general objectives of the deaf program are:

1. To enable hearing impaired children to use their potentials to engage in human communication.
2. To increase their moral, cultural and labor level to participate in the society.
3. To educate deaf children to be incorporated into social life as well as in labor fields to acquire an independent life style and earn money by themselves in order that they feel productive and useful.

The National school for the hard of hearing has registered 671 special students since 1999 to the time of this research; they are distributed as follows: The main campus, the Centro de Orientación Infantil y Familiar (C.O.I.F.), elementary schools, and 272 students in high schools; 48 in vocational or labor schools.

The different levels hearing impaired students have to attend are:

- \* Preschool 0-3 years old.
- \* Kinder 5-6 years.
- \* Elementary school 6-14 years.

In this special school teachers have no more than 8 students per class in order to provide individualized attention.



Some of these students can be integrated into normal classrooms, and some can not, they have to stay in the special school for the deaf.

There are hearing impaired students who have graduated from the Universidad de Panamá as mathematics, accounting and statistics teachers; also, there have been graduated in technical careers in which students are prepared to assemble computers, fix industrial machines, paint, sculpt, and practice sports of different types. In addition, there are other type of activities for those who are not gifted intellectually but can help them to increase their incomes and be well accepted by the society.

Moving to another point, special educational students' need have been attended simultaneously by both, the Ministerio de Educación and the Instituto Panameño de Rehabilitación Especial. When the impairment is more severe, the IPHE is principally concerned with it under three major modalities:

1. Special schools and specific programs, according to the incapacity, within all national IPHE installations or structures.
2. Integration 1: Special educational classroom in the regular school attended by a special teacher who must know both class systems normal and special.

### 3. Integration 2: Impaired students included in normal classrooms and receiving outside attention from IPHE specialists.

According to statistical reports from the IPHE specialized services, the population registered in special classrooms in 1998 is about 8,010 (boys, girls, adolescents) represented while developmental alterations or irregularities in their development, physical, mental or sensorial impairments. From that total, 36.2% (2,901) were physically integrated into special classrooms within normal or regular schools, while 24.2% (1,936) have participated in the normal curriculum, programs and syllabus as normal individual but under special supervision of special teachers; 39.0% (3,132) of the students have been receiving attention in schools with educational programs.

Similarly, preventive and early detection programs concerned primarily with the audio-visual impaired, were implemented in normal schools. During 1998, 17,162 children which 911 were clinically diagnosed as special cases, were examined. Home orientation services attended 22,419 appointments to detect high risk, deficiencies and disabilities within the family environment at home.

In this sense, the statistics speak for themselves about the real need for inclusive educational programs. The huge struggle of the IPHE since 1970 to integrate impaired students in normal classroom settings, as well as the serious commitment of normal and special teachers is becoming a reality for those children.

The truth is that this program is not the exception to many difficulties, beginning with just the acceptance of the philosophy of Inclusion by the society in general as well as teachers and school principals.

A primary aspect of this program is that disabled children are attended through the use of a modified curriculum and adjustments according to their specific needs but this seems to be a great limitation to achieve the educational purposes established for all the school population because, in this area, segregation still continues.

A secondary aspect is related to the lack of a law which regulates the admission, acceptance, promotion and certification of impaired students. Even though they have been integrated into regular classrooms, they are not included in the official school enrollment, leaving them out from the Ministerio de Educación statistics and, in this way, out of the annual economic assignment to the Ministerio de Educación through the governmental budget.

On the other hand, this situation does not permit school administration to be responsible for the education of impaired students allowing them to be segregated again in a de facto.

It is important to emphasize the covenant of empirical-interchange between IPHE and Ministerio de Educación which has established

the principles for Inclusive Education. In this sense, the Panamanian integration process as well as that in many other countries has been characterized by experiences in the specific scope which have resulted in a physical integration rather than educational one. There are multiple factors which explain this situation. One of the most important is the sort of curriculum and learning style offered to the students. In this respect, it is important to note that Panamanian education has not been flexible, causing questions about its adequacy for individual differences centered principally in the frontal methods of transmitting knowledge with strong emphasis on the product rather than in the learning process.

The future educational plans seem to be presumptuous in the way our country has initiated a transformational curriculum process, specifically to overcome deficiencies in traditional learning with the consequent benefits to the whole school population:

1. Design and development of a new national curriculum, broader and more flexible, adequate to be adapted to distinct sorts of contexts and the student's needs.
2. A learning style very open and flexible based on methodologies which help to promote student participation and cooperation.
3. A more flexible evaluation system which tends to grade process results as individualized learning.

4. A national plan to train educators involved in the transformation process.
5. A decentralized process or system to make regional administrations more autonomous.

All these measures will contribute to generate more favorable conditions for diversity in schools in order to provide children with the opportunity to learn and benefit from educational qualitatively.

A model designed in the USA should be considered worldwide for training disabled students. There, Programs have been specially designed to meet the unique needs and abilities of disabled or gifted children. Disabled children have conditions that adversely affect their progress in conventional education programs. Gifted children, who demonstrate high capacity in intellectual, creative, or artistic areas, may also perform poorly in regular education programs. Special education services can help both disabled and gifted children make progress in education programs. Most children served by special education programs are between the ages of 6 and 17.

In the United States, federal law requires states to identify and serve all children with disabilities. Public education and health officials in the United States identified approximately 5.4 million

infants, toddlers, children, and youth as disabled in 1994. That same year, the U.S. Department of Education reported that 12.2 percent of all children below the age of 21 received some form of special education. The most frequently reported disabilities are speech or language impairments; mental retardation and other developmental disorders; serious emotional disturbance; and specific learning disorders, such as memory disorders. Other disabilities include hearing, visual, or orthopedic impairments; autism; and traumatic brain injury. An increasing number of children in the United States are identified as having attention-deficit hyperactivity disorder (ADHD) and receive special education services.

Many schools in the United States provide special education services for gifted children, although federal law does not mandate these services. Gifted children demonstrate exceptionally high abilities in intellectual, creative, academic, leadership, or artistic areas. Estimates of the gifted population in the United States range from 3 to 15 percent of all schoolchildren.

During the 18th and 19th centuries in the United States, educators opened a variety of special schools for disabled students. In 1816 American minister and educator Thomas Hopkins Gallaudet established the first public school for deaf students in the United States. The first school for blind students in the United States was founded in 1829 in Boston by the American physician John Dix Fisher. The school is known today as Perkins School for the Blind

and is located in Watertown, Massachusetts. Special education classes within regular school programs began at the beginning of the 20th century. Elizabeth Farrell, a teacher in one of these early classes in New York City, founded the Council for Exceptional Children in 1918. This organization remains the primary professional group for teachers and administrators in the field of special education.

Special education in the United States has been most influenced by parent and professional advocacy groups, federal laws, national trends in conventional education, and the civil rights movement. Despite mandatory school attendance laws for all children, many U.S. schools excluded children with disabilities as recently as the 1960s. Since then, societal attitudes have changed, and federal laws now require schools to give children with disabilities full access to education programs.

In 1975 the Congress of the United States passed the Education of All Handicapped Children Act, a landmark statute in special education that has since undergone numerous amendments. A 1990 amendment renamed the law the Individuals with Disabilities Education Act (IDEA).

IDEA requires public schools to offer a free and appropriate education to all disabled children. The law also requires that all children with disabilities between the ages of 3 and 21 receive support services, such as counseling or physical therapy, regardless

of the type or severity of their disability. According to the provisions of IDEA, schools must identify all children with disabilities. To do this school officials provide each child thought or known to have a disability with a comprehensive evaluation conducted by teachers, the parents, and appropriate specialists, such as a speech clinician or orthopedist.

IDEA also requires schools to give parents the opportunity to assist in the development and revision of their child's education plan. The plan specifies goals for the student's education, methods to achieve those goals, and services to be provided. Each student's education plan is reviewed annually. To the maximum extent appropriate, a child with a disability must be educated with children who do not have disabilities. In addition, IDEA requires that older children with disabilities receive transition services to assist in the change from school to adult activities, such as employment, continuing education, and finding a place to live. IDEA provides federal financial support for schools to develop special education programs.

Other federal laws prohibit discrimination based on disability. Section 504 of the Rehabilitation Act of 1973 bars discrimination against individuals with disabilities in public schools and any other federally supported programs. The Americans with Disabilities Act of 1990 ensures access for individuals with disabilities in all aspects of



life, including education, the workplace, transportation, and telecommunications.

Special education services are delivered in many different settings and facilities depending on the services to be provided, the age of the child, and the need for other related services. School districts must provide a full range of settings to meet individual needs of children with disabilities, but U.S. law requires that a child with a disability must be educated in the "least restrictive" setting. For example, children with mild disabilities may be educated in regular classrooms with or without teachers trained in special education. Some students with more severe disabilities require more restrictive settings, such as separate schools, hospitals, or modified facilities within their own homes.

In conventional classrooms, teachers trained in special education collaborate with other teachers to plan and carry out instruction for students with special needs. Children with severe health or behavioral problems may receive education services in separate facilities or hospitals from many different teachers and specialists. A child with severe behavior problems, for example, may receive a combination of education, mental health, and social services. Infants and toddlers with disabilities often receive assistance in the home or in community settings, such as a school or hospital. Such assistance, known as early intervention services, focuses on treating existing disabilities or preventing their occurrence.

As older children with disabilities prepare for adult life, planning increasingly centers on functional skills within community, work, and living environments.

Special education services make use of an extraordinary array of instructional methods and settings that make it possible for all students to learn. Special educators plan and evaluate instruction in an individualized manner to accommodate each child's unique strengths and weaknesses. In planning instruction, teachers often use methods known as ecological assessments to consider environmental factors that influence learning, such as school, home, and community environments. Many students with disabilities receive instruction in traditional subjects, such as reading, writing, language, and math. To evaluate a student's progress, teachers often rely on a method known as curriculum based assessment, which monitors progress within the student's own curriculum rather than against the educational programs for other students.

Specific fields of special education address the needs of students with specific disabilities. These disabilities include (1) behavior disorders, (2) learning disorders, (3) mental retardation, (4) physical disabilities, (5) vision impairments, and (6) hearing problems. Special education also includes the field of education for gifted students.

For Students with Behavior Disorders, instructors teach social skills to help all students demonstrate the behavior needed to develop and maintain satisfactory relationships with peers and others. When students with disabilities have problems with behavior, special educators often use principles of instruction known as applied behavior analysis, which analyzes and alters the sources or consequences of problem behavior. Behavior analysis consists of defining and analyzing the specific task to be learned, direct and frequent measurement of student performance, and providing systematic feedback to the student. Behavior modification techniques help students to deal with anger and other emotions, to solve problems better, and to manage their own behavior.

For students with learning disorders such as those who have problems learning, remembering, and communicating information, several different instructional techniques are used. Among these techniques is Direct Instruction, a method based on a systematic curriculum design and highly structured, fast-paced lessons in which students participate actively and often. Another method is known as Learning Strategies Instruction, which is designed to teach a student specific learning skills, such as strategies to enhance memorization or problem-solving skills. Teachers may also help students to work around individual learning disorders. For example, teachers may allow a student with memory problems to use a tape recorder to dictate notes and record class lectures.

### **For Students with Mental Retardation**

Mental retardation is a form of developmental disability characterized primarily by an intelligence quotient (IQ) that is significantly below average. Other developmental disabilities include cerebral palsy, dyslexia, and certain learning disorders. An education program for a student with mental retardation varies depending on the student's level of disability. Instruction may center on developing communication, socialization, or daily living skills. Many students with retardation receive services in regular classes in their local schools. Others with more profound levels of retardation may attend classes in specialized schools or hospital facilities designed for students with special needs.

### **For Students with Physical Disabilities**

Students with physical disabilities often benefit from the use of technology designed to increase their capability to participate in classroom activities. Technological devices used by these students may be relatively simple, such as leg braces for students with orthopedic problems, or they may be as complex as a computer that synthesizes speech patterns for children whose disability causes speech disorders. Some of these technological devices are very expensive and strain the budgets of many school districts. Educators and parents work closely to determine the best use of school resources for classroom modifications and acquisitions of technology for all children with special needs.

### **For Students with Vision Impairments**

Many children who have low vision or are blind (see Blindness) learn to read and write by using the Braille system of raised dots that can be read by touch rather than sight. They may also use a special laptop computer that allows them to take notes in Braille and print in Braille or English. Sophisticated electronic devices can also convert print into a form that is readable by blind or visually impaired students. Some computers can scan printed text for a blind student and read it aloud by means of a synthetic voice. Most children with visual impairments have some functional vision and can often read by using large-print materials.

### **For Deaf and Hard of Hearing Students**

Education of students who are hard of hearing or deaf (see Deafness) may involve the use of powerful amplification devices, such as hearing aids, or it may use captions (printed words that appear on a television screen or computer monitor). Many deaf or hard of hearing students learn sign language, an organized system of gestures for communication. Others learn to speech read (lip read), a method of interpreting speech by "reading" the patterns of a person's mouth as he or she speaks. Some deaf students receive cochlear implants, which are receivers surgically implanted behind the ear and connected to electrodes placed in the cochlea of the inner ear, enabling individuals to hear sounds to a varying degree.

## **For Gifted Children**

Gifted children are often moved through the regular school curriculum at a faster pace than their peers. Some children with exceptionally high ability in a particular subject area may be allowed to reduce the time they spend in their other subjects to permit more time to focus on challenging content in their specialty. A high school student who is particularly gifted in math, for example, may attend advanced math classes at a local college rather than music classes at the high school. Some gifted students may also skip grades or they may enter kindergarten, high school, or college at an early age.

The prospects for students with disabilities have never been brighter. Educators and medical experts know much more than ever before about the prevention of many disabilities, particularly those caused by environmental or health hazards. The knowledge available to provide effective special education services also continues to grow. Educators have also improved special education services for gifted students. Children with exceptionally high academic abilities may now participate in increasing numbers of special education programs designed specifically to meet their needs.

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## PROCEDURE

This study is applied research of a descriptive nature using survey techniques. Interest in this research problem arose from a personal need which resulted from being a teacher who does not know how to teach special children. This research was conducted following the steps presented below.

The professional literature related to the topic under study was reviewed, and the most important points are presented in summary in Chapter II of this research.

Several interviews were conducted with the specialists from the Instituto Panameño de Rehabilitación Especial (IPHE) to gather as much as possible of the literature which is only available in this institution. Other interviews were conducted in "Dirección Nacional de Educación Especial ", which provided more information for the study. For more information, the multi-behavior team from the IPHE was also interviewed. Other interviews were conducted with teachers of regular classes and English teachers too. These interviews provided important data on the plans, programs and future perspectives for the project.

The data collected was analyzed and the findings are presented in Chapter IV. Based on the information resulting from the data collection process, and the review of the related professional



literature, conclusions were drawn and can be found in the fourth Chapter. Based upon the conclusions of the study, recommendations have been formulated and are presented in the final chapter of this research.

## **SAMPLE**

A brief description of the institutions, which provided cooperation and assistance for this study, is presented below:

Instituto Panameño de Rehabilitación Especial (IPHE). The IPHE is a governmental institution, specialized in the educational field, decentralized, with its own support, and directed by welfare organizations.

Among their principal objectives are:

- To develop and strengthen actions to coordinate, support, and enable the inclusive education as well as the special training in the labor areas for boys and girls with special educational needs, who are physically or mentally disabled.
- To attend their needs, the IPHE should look for national and international assistance, and cooperation from teachers, technicians, doctors, parents, and administrative staff of both institutions (ME, IPHE), which may join efforts, resources and

funds to provide quality, equity, and integral services to this program.

The Ministerio de Educación is the official governmental institution, which controls and regulates the process of education, and makes people conscious of how education contributes to changing our minds and attitudes in order to govern our lives. The Ministerio de Educación strives to make us, Panamanians, useful individuals and professionals who can serve our country, in order to live under better human conditions. In this sense, The Ministerio de Educación included in the Ley No. 34 passed on July 6<sup>th</sup>, 1995, the third section related to special education in order to include people, who are segregated by our society for being mentally, socially or physically abnormal. To give them the opportunity to be integrated as normal persons in the regular system as well as in the different aspects of life.

## **CHAPTER IV**

### **FINDINGS AND CONCLUSIONS**

## **OBSERVATIONS**

The research began with a visit to both institutions concerned with the situation, Ministerio de Economía and Instituto Panameño de Habitación Especial, in order to have a preview knowledge about the services or programs which they are offering to overcome the existing problem.

For this purpose were designed and applied three different questionnaires. The instrument was administered to the director and supervisors of the Ministerio de Educación.

In this order the director of the Ministerio de Educación contributed and provided the required information. However, some supervisors lost their questionnaires, and even though they were provided with another one, they never returned them.

In the IPHE the situation was the opposite. The questionnaires were applied, but only the principal explained about the activities which she had to attend to, for that reason she would not have time to answer the questions.

The rest of the IPHE employees who participated in this study were very cooperative and showed real concern with the research. They were so interested that they provided more information and a video about how the inclusive process takes place.

The questionnaire designed for teachers was presented in schools where integration has taken place. The information obtained was complete and ready in a short amount of time. They were very cooperative and interested in cooperating with the research.

While the instrument was applied to teachers there was the opportunity to be in contact with an integrative environment which for the moment seems to be as normal as any other classroom setting.

## **FINDINGS**

The following data emerged from the instrument administered to eight (8) IPHE specialists, who are involved in the process of inclusive educational programs.

In response to the first question as to whether they have confronted problems with principals or regular teachers in the integration process, they answered affirmatively for the following reasons:

- Teachers do not consider themselves trained for the task of teaching "special" students.
- Teachers believe impaired students disrupt the group.

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- Lack of knowledge about the sort of impairments (causes-effects-possible solutions).
- Doubts about the evaluation required by this special instruction.
- Some of them do not want to pay attention to the diversity of impaired student's learning processes as well as to the rest of the members of the class.
- They do not want to attend individualized learning conditions.
- It involves a lot of problems.

The answers to the third question, as to whether they provide regular teachers as well as the whole group with special training before integrating students with special educational needs into their classrooms, were divided in half, 50% of which stated that the training was only provided to supervisors and principals but not to teachers. However, some of the teachers have participated in the training voluntarily, because they wanted to learn more about this. They explained the normative law which controls the integration process in some meetings attended by principals and high ranking education personnel.

The other 50% said that the institution in-charge of training their personnel was the Ministerio de Educación. However, they would visit certain schools if their teachers or principals asked them for aid.

In response to question number four about what considerations are taken into account when a special student is integrated into the

normal school classroom, this almost did not vary because there is like a standard student's profile which is verified by the multidisciplinary team taking into account the following considerations:

- Student's mental or psychological age, the degree of involvement of the parents in the program.
- School surroundings and teachers .
- The students' behavior.
- Knowledge in speaking and writing (according to the situation).
- Students must have passed the obligatory three years in the IPHE before integration.

In response to the fifth question as to whether the interviewed thinks that the Ministerio de Educación is providing enough support for inclusive education, one hundred percent have asserted that although the normative law exists, they have not sold the proposal to their teachers, communities, or to the whole citizenry or the society in general. They have not fulfilled their compromises of training teachers for these tasks. Nevertheless, during this last year, the Ministerio de Educación has demonstrated more interest in the inclusive educational program than before because they are organizing outings and trips to train teachers as much as possible or as needed.



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- Look at special children like normal children because this is their right.
- More training for principals, regular educators, parents, and so forth.
- Decrease the amount of regular or normal students in groups where special students are going to be trained under normal conditions.
- Probably some extra grades (points) will "motivate" teachers to work with these specialties.
- Try permanently training sections in this field.

And finally the last question about how English is seen as a foreign language which has to be taught in schools as a second language involving four main skills: listening, speaking, reading and writing, what would the respondent suggest to English teachers when a student can not develop any of these skills specially hearing impaired students, the answer was:

- Use picture cards.
- Work using imitation and gestures.
- Lip-reading is recommended as very functional.
- Allow students to develop tactile sense through real objects associated with English written cards.
- It will depend upon student's mental development and intellectual level.

- To train students in the English language from childhood in the preschool stages.
- Total Communication.
- Reading-writing procedures as in Spanish.
- Visual aid.

The following data emerged from the instrument administered in the Ministerio de Educación in order to collect information about the inclusive program.

In response to the first question as to whether there are special educational programs to deal with impaired students or if teachers have to make some accommodations to the actual program; they asserted that there is only one official curriculum which is flexible because it allows teachers to adopt and adapt procedure plans according to the diversity and students' needs. Moreover, curriculum adaptations are changing following IPHE specialists' recommendations in order to give more special attention to impaired cases.

In response to the second question as to whether the informant thinks that the adjustments to the curriculum can be made by the teachers alone or do they require some helpful recommendations or training; the answer was that it is obvious that attending any kind of training program plays an important role, but teachers must have been trained since their earliest formation in technique and method

management to adapt the curriculum. Teachers should be able to understand that all groups are not homogeneous and try to adapt plans to the heterogeneous learning needs and student's capacities.

In response to the third question which was: as it is understandable that children to be treated and perceived as normal, should receive the same attention as other children, and if they knew that most teachers complain about this task? Do you have any plans or can you provide them with techniques to facilitate the situation? The respondents asserted that a few teachers have presented such an attitude, but almost all the teachers are concerned and have asked for more permanent training. It is also important to get parents involved and really concerned with the situation. However, if most teachers want to work with homogeneous groups, that would be ideal. They also made a future recommendation to be taken into account, which is fewer students per group to facilitate special educational needs.

In response to the fourth question, which was: Have you been following closely the results of inclusive education? Specifically, are you aware of the problems and difficulties teachers are confronting?, It was observed that supervisors are following each of the areas in the inclusion programs. They noted that there really are difficulties, but they are providing teachers and principals with information and suggestions about how to deal with the inclusive educational

programs. When the situation persists in any impairment problem, they request IPHE's specialist intervention.

In response to the fifth question as to what the respondent recommends to help these teachers, they noted the following points to be considered:

- Permanent training for teachers and principals.
- Supervision and evaluation of the pre-existing cases.
- More help from IPHE's specialists.
- Treat these children like other normal students.

In response to the sixth question about what the Ministerio de Educación is going to do to help these teachers this year, and the following one..., they asserted:

- One of the policies of the Ministerio de Educación is to continue with the Inclusive Program. For this, the Ministerio de Educación has been forming regional teams which have prepared three work documents or didactic guides with the Proyecto de Desarrollo Educativo (PRODE), whose main purpose is to train teachers and principals in Centros Pilotos and later in all national public schools:
  - First guide: Sensibilization.
  - Second guide: Curricular adaptations.
  - Third guide: Adequate curricular strategies in the classrooms.

Furthermore, actions such as the following will be taken to help teachers who have to deal with mentally and physically challenged students:

- Organize several groups to provide special and permanent training for their personnel (topics -related to impaired students).
- Acknowledgements for teachers working with this program.
- Extra evaluation for teachers training impaired students (points).
- Better salary for teachers charged with this hard task (stimuli).

The following data was collected by means of a questionnaire designed to elicit information about how teachers deal with special students, especially hearing impaired students, as part of the inclusion program.

In response to questions number one and two, do you teach in primary or secondary schools, and what is your teaching field, the answer is general education because some of them teach in elementary, some in high schools, regular and special teachers. They teach subjects such as Spanish, science and English. See Appendix B, Graph No. 1.

In response to the third question, about whether the respondent is in favor of the inclusion program almost 99% percent were in agreement because every child has the right to receive an education and to have a normal (social) life style.

The negative responses originated from the fact that teachers are not prepared for this task.

In response to the fourth question as to what the respondent perceives as a good alternative to this program, they offered some suggestions such as:

- Provide some objectives within the teacher's plan directed to special attention.
- Carefully select the school, teachers and the whole group where impaired students are going to be integrated.
- A diagnostic procedure to clearly identify the main needs in order to plan adequate strategies for providing help.

In response to the fifth question as to whether the respondent has received special orientation to teach special students, and how does one teaches special students; all of the respondents asserted that they have not been neither consulted nor trained.

- Spanish teachers explained that they give normal attention to impaired students. They have assigned monitors to help their classmates as individualized attention. Also they are constantly in communication with IPHE's specialists for more assistance with the contents or plans.

In special cases such as hearing impaired students, we use gestures, visual aids, lip reading, and written communication.

- Science teachers seem not to have many problems because the subject itself is more theoretical than communicative even though most of the time they also ask for help from the experts of the IPHE. However, they have felt the personal need to be in contact with their impaired students. They look for the strategies or ways to do so.
- English teachers in primary and secondary schools both noted almost the same concerns :

As it is known, English teaching has changed from a memoristic practice to a more communicative orientation, so the oral skill may not be completely developed by hearing impaired students, but we must keep trying to help our deaf students because some of them can make clear utterances of some English words even phrases. That is why we can not avoid oral skill activities. We can use oral activities with hearing impaired students but the evaluation should be written or using pictures, realia, or whatever the students can touch or describe using gestures related to writing and images.

Another technique would be translation of vocabulary pictures from Spanish to English and vice-versa.



They must be taught using sign - commands which consist of pronouncing aloud the commands but indicating them with specific signals or movements.

\* Regular teachers have been taking advantage of other field teachers because students spend more time with them; it allows teachers to know their students preferences, needs and dislikes and use this information in order to help them.

Although teachers have required more training, they can appreciate the work they have carried out for a long term. However, even though the impaired students' proficiency is not the same as the other students, they feel very proud of the students accomplishments.

In response to the sixth question as to whether the respondent considers it necessary that hearing impaired students learn English, they answered "why not?" because English is a universal language and is used in most video games, movies, literature, computer programs. If we do not teach them English, we are limiting their opportunities to acquire more knowledge.

The seventh question noted that most hearing impaired students present speech problems too, so what does one do to develop listening and speaking skills or whether they focus on the development of other skills?. They asserted that it depends on the

case because if the children are partially impaired, we must encourage and give them enough input in order that they can produce some utterances or sounds; but if the child is completely hearing impaired, we have to look for other activities to replace the lack of this skill, which would be communication through signs, symbols, pictures, writing reading and vocabulary.

Regarding the eighth question as to what they suggest to the Ministerio de Educación and Instituto Panameño de Rehabilitación Especial to help teachers to carry out their programs, the informants' answers were as follow:

- Establish a well coordinated commission in order to follow cases rigorously.
- Design a project to be presented to the Executive Power to increase the IPHE and Ministerio de Educación's budget in order to provide special material and the training required.
- Create programs to divulge the importance which this program has to make people conscious of the rights that impaired people also have.

In response to the ninth question as to whether the respondent has had some positive or negative experiences with inclusion that he/she can share with his/her colleagues in order to encourage them if they are facing this problem, the answer was that most experiences are recent and, at the beginning, they seem to be negative, upside-

down and without logical supports, but the minute you change your mind, it starts to improve. They feel that they are not alone working on this task; the IPHE specialists are always ready to provide more orientation. They feel that if they are still negative, they will not succeed at all. They are very conscious that physically and mentally challenged students can not improve as well as normal children, so they have to take this into account in evaluating them, probably in a more flexible way.

To the tenth question about what kind of equipment or materials would facilitate the task of hearing for hearing impaired students and whether they have received these resources, the answer was:

- Most of these resources are used in the IPHE exclusively. Sometimes they lend it to students but they do not have sufficient resources for each hearing impaired students.
- The great amount of parents must buy these aids for their children so that they can attend normal classes.

## **DELIMITATIONS**

The study presented herein is applied research using survey techniques. It was undertaken in response to the requirements of the Masters Program in Teaching English as a Second Language of the Universidad de Panamá. Although it was not possible to control all of the extraneous variables that may have had an impact on the results of this research, efforts were made to control the most important in such a way that these variables would not negatively affect the validity of the study. Moreover, the limitations of time and funds to conduct this research must also be recognized. Due to the nature of the research topic and the environment in which the study was conducted, a purposive sample was employed to obtain the data needed to respond to the research question. This sample included specialists from the Instituto de Rehabilitación Especial (IPHE), teachers who are having to deal instructionally with physically and mentally challenged students, and administrative personnel of the Ministerio de Educación. The results of this research will not be generalized to other populations or environments. The conclusions and recommendations are situation specific. Nevertheless, it is believed that this research is valid and makes a contribution to knowledge in the area of English language instruction for children with disabilities in the public school system throughout the Republic of Panama.

## CONCLUSIONS

The analysis and interpretation of the data gathered for this study, allowed me to present the following conclusions:

The Panamanian government is interested in special education. It is established in the educational laws and in a covenant signed between the Ministerio de Educación and the Instituto Panameño de Educación, "The Normative".

In spite of the fact that this type of special education has been implemented in other countries for many years as integrated to the official education programs, it is a new challenge for the Panamanian education.

The early attention for impaired children can prevent school failures and health problems through the Programa de Estimulación Precoz in the IPHE.

For years this inclusive program was a responsibility for the Instituto Panameño de Rehabilitación Especial with the assistance of International Organizations as UNICEF and UNESCO due to the fact that the governmental budget was not enough, and sometimes did not even include this service at all.

IPHE has created Universidad de Las Americas (UDELAS), a center which provides special high education for teachers or professionals who are interested in studying any special impairment deeply. Today UDELAS has been increasing its enrollment, for the IPHE has perceived the increasing need of training more specialists to cover rural or far away areas in the Republic; and this enrollment constitutes not only people from Santiago de Veraguas, but also for the Central provinces.

On the other hand, the Ministerio de Educación is starting the training for teachers through de Proyecto de Desarrollo Educativo (PRODE). Most seminars are dictated in the summer time, but when necessary, learning activities are disrupted to provide training to teachers.

Most schools where impaired students have been integrated do not have special equipment for specific tasks.

There are teachers who seem to be forced to attend impaired students, without taking into account their approval or any kind of training, although the Ministerio de Educación is working on it.

## RECOMMENDATIONS

It is very important the auspicious of a high level international organization to coordinate or serve as a mediator between governmental and non governmental institutions. Its greatest objective would be the real incorporation of impaired students to an useful and productive life.

The Ministerio de Educación de Panamá must establish special educational objectives, plans and programs for each type of impairment, a process for selecting technical and administrative personnel as well as teachers according to their capacity and training, to be remunerated in the same way to avoid dissatisfactions.

The special education program should be supported by the national government budget or by funds provided by hazard games which generate a great amount of taxes.

It is necessary to promote the special educational program to private organizations, institutions and clubs. They work in favor of projects of social interest.

The teaching - learning act for deaf, mute and mental disabilities must be initiated as soon as it is diagnosed or detected. The first years in any child life are of great importance in the development of their personality.

Some preventive plans should be considered by the government to avoid the increasing amount of impaired children. Actions oriented to fight against malnutrition, environmental pollution, prenatal controls, establishment of drinkable water sources in rural regions and health programs to avoid infectious diseases.

To avoid failure problems in elementary schools a program to detect visual and aural deficiencies is required not only in the IPHE, but also in a coordinated way between the Ministerio de Educación and the Ministerio de Salud where all national schools should be included.

Teachers who attend special cases must be considered with a professional or economical stimuli in order to motivate more educators to get involved in this special activity.

The government should promote the creation of factories or industrial activities to give impaired persons the opportunity to obtain a job when finishing their studies or academic preparation.

It would be of great aid to promote through communication means messages tending to avoid segregation against impaired persons in the society.



There should be established a special day every year to celebrate and promote the " Día del Discapacitado Físico y Mental", not only for impaired children or persons, but also to promote normal persons' participation and contribution with the special-need activities.

Establishment of programs to train teachers, parents and society in general as much as possible in aspects like psychological education, comprehension for children with disabilities and so forth.

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## **APPENDIX A**

### **QUESTIONNAIRES**

## **CUESTIONARIO ESPECIALISTAS DEL IPHE**

1. ¿ Ha confrontado dificultades con directores o profesores al momento de realizar las inclusiones en las escuelas públicas?
2. ¿En su opinión qué causa la actitud negativa de los maestros hacia atender niños discapacitados?
3. ¿Proporcionan ustedes alguna capacitación especial tanto al maestro como al grupo entero antes de la inclusión? Si No.  
Si su respuesta es sí, explique qué clase de capacitación y si nos podría suministrar información (copias) al respecto.
4. ¿Qué consideraciones se toman en cuenta para integrar a un niño a un salón normal de clases?
5. ¿Cree usted que el Ministerio de Educación está cumpliendo con su papel en lo que a Educación Inclusiva se refiere? Si no.
6. ¿ Considera usted recomendable la posibilidad de incluir especialistas del IPHE dentro del Ministerio de Educación para coordinar, evaluar y dar seguimiento más de cerca al programa? Si No.

7. ¿Podría ocurrir esto en un futuro cercano? Si No.

8. ¿Qué recomendaciones da usted al Ministerio de Educación para ayudar a los maestros que atienden a diario a estudiantes con necesidades educativas especiales?

9. El idioma inglés es visto como una lengua extranjera que tiene que ser enseñada como segundo idioma en nuestro país. Para que su enseñanza sea adecuada involucra cuatro áreas fundamentales: escuchar, hablar, leer y escribir. ¿Qué sugeriría usted a profesores de inglés cuando un estudiante no pueda desarrollar una de estas áreas? Específicamente, estudiantes con problemas de audición.

## **CUESTIONARIO**

### **FUNCIONARIOS DEL MINISTERIO DE EDUCACIÓN**

1. ¿Existe un programa especial de educación inclusiva para la asistencia de niños y niñas con necesidades educativas especiales o deben los educadores hacer adaptaciones al programa regular actual?
  
2. ¿Considera usted que los ajustes curriculares requeridos con relación a dicha materia deben ser realizados por el docente propiamente sin proveérseles de recomendaciones o capacitación especial?
  
3. ¿Es entendible que la Educación Inclusiva busca ver al niño con discapacidades, incluido y atendido como individuo normal. ¿Sabe usted cual es la opinión y justificación de muchos educadores que rechazan esta política? ¿Tienen ustedes algún plan o propuesta para resolver esta situación?
  
4. ¿Brindan ustedes seguimiento al Programa de Educación Inclusiva? Específicamente, ¿están enterados si han presentado problemas o dificultades para los educadores que trabajan con estos casos?
  
5. ¿Qué recomendaría usted para ayudar a estos maestros?

6. ¿Qué hará el Ministerio de Educación durante los próximos años para ayudar a los educadores que trabajan con educación inclusiva?

## CUESTIONARIO PRESENTADO A EDUCADORES

1. ¿Enseña usted en el nivel

☐ Primario

☐ Secundario?

2. ¿Es usted educador(a)

☐ Inglés

☐ Grado

☐ Otra disciplina?

3. ¿Está usted de acuerdo con el programa de inclusión? Si No, explique.

4. ¿Qué piensa usted, pudiera ser una buena alternativa a este programa?

5. ¿Ha recibido usted orientación especial para enseñar a niños (as) con discapacidades? Si No.

Si su respuesta es no, ¿Cómo enseña usted (métodos, técnicas) a estos estudiantes?

6. (para profesores de inglés)

¿Considera usted necesario que estudiantes con problemas de audición aprendan inglés? Si, No. Explique.

7. (para profesores de inglés)

La mayoría de los estudiantes que presentan problemas de audición también los presentan en el lenguaje. ¿Qué haría usted para desarrollar en ellos habilidades auditivas y lingüísticas o sólo se enfocaría al desarrollo de otras habilidades?

8. ¿Qué sugerencia da usted al Ministerio de Educación y al IPHE para que ayuden a los docentes que llevan este programa?

9. ¿Ha tenido usted experiencias positivas o negativas sobre el programa de inclusión que quiera compartir con otros colegas para

motivarlos en caso de que ellos también confronten estas dificultades?

10. ¿Qué clase de equipo o materiales podrían facilitar el trabajo de enseñanza a estudiantes con problemas de audición?  
¿Tiene usted o ha recibido estos recursos?



## **QUESTIONNAIRE**

### **IPHE SPECIALISTS**

1. Have you confronted problems with principals or regular teachers in the integration process?
2. In your opinion what causes teacher's negative attitude toward attending impaired students?
3. Do you provide regular teachers, as well as the whole group special training before integrating students with special education needs into their classrooms? Yes, No.  
If yes, explain what kind of special training. Please provide a copy of any material that you use. If no, why not? Explain.
4. What are the considerations taking into account when a special student is integrated into the normal school classroom?
5. Do you think that the Ministerio de Educación is providing enough support for the inclusive education? Yes, No, explain.
6. Do you consider it advisable to include IPHE's specialists into the Ministerio de Educación to work, coordinate, evaluate and follow very close this program? Yes, No, explain.
7. Do you think this will happen in the near future? Yes, No, explain.

8. Do you have any recommendation for the Ministerio de Educación to help teachers who have to deal on a daily case with special students?

9. English is seen as a foreign language which has to be taught in schools as second language. It involves four main skills: Listening, speaking, reading and writing. What would you suggest to English teachers when a student can not develop any of these skills? Specially hearing impaired students?