

# A Study of Child With Special Needs (CWSN) on Outcome Based Special Education

J. Komala Lakshmi

Academic Coordinator, Indira Gandhi College of Special Education, Kanuvai, Coimbatore, India

Corresponding author: jkchinmayav@gmail.com

Received: 10-12-2019

Revised: 14-02-2020

Accepted: 26-03-2020

## ABSTRACT

Educating every child is very essential, as they are the future citizens of a Country. A Child with Special Need (CWSN) may have a special educational need due to difficulty in learning. The outcome of educating the children with disability and learning difficulties with that of normal ones, represents the need for better developmental progress of CWSN. It reflects the need of special educators and paraprofessionals for CWSN. The paper aims at analyzing the CWSN and tabulated the different parameter associated with special education. The author designs a common standard KLMN SWASTIK MODEL to assist the special educators in bringing out their better proficiency for every CWSN and to the teachers of regular school as well. The proposed model gives positive directions in educating the CWSN for life by imparting to them basic life skills and possibilities for better outcome based on special education.

**Keywords:** KLMN swastik, CSWN, Special Education, Intellectual disability, Paraprofessional

Education helps people to see the world as a just and fair place where everyone is given equal opportunities. It is a must for a promising, self sufficient, secure future and a stable life. In India special education as a separate system of education for disabled children outside the mainstream education system evolved way back in 1880s. Consequent on the success of international experiments in placing children with disabilities in regular schools, the Planning Commission in 1971 included in its plan a programme for integrated education. The Government launched the Integrated Education for Disabled Children (IEDC) scheme in December 1974. It was a Centrally Sponsored Scheme aimed to provide educational opportunities to children with special needs (CWSN) in regular schools and to facilitate their achievement and retention. All the schools in the area are expected to enroll-children with disabilities. Training programs were also given to Special educators<sup>[1]</sup>.

**Special Education:** The term "Special Need Education" (SNE) has come into use as a replacement

for the term "Special Education", as the older one was mainly understood to refer the education of all those children and youth whose needs arise from disabilities or learning difficulties. The Statement affirms: "those with special educational needs must have access to regular schools which should accommodate them within child centered pedagogy capable of meeting these needs"<sup>[2]</sup>.

Special education therefore basically refers to "educational programs and practices designed for students- who are handicapped or gifted, with mental, physical or emotional disabilities and hence require special teaching approaches, equipment or care within or outside a regular classroom." Disabilities may be mental, physical, emotional and developmental. So, within its range special needs, includes a number of impairments, some of which are: Speech and Language Impairment, Autism spectrum Disorder, Multiple Disabilities, Traumatic Brain Injury, Visual Impairment (including blindness), Hearing Impairment, Developmental Delay,

Emotional Disturbance, Specific Learning Disability, Orthopedic Impairment, Other Health Impairments, Developmental delay, Intellectual Disability<sup>[3]</sup>.

### Famous Indians With disabilities who inspire us every day

These Indians with disabilities prove that it is just a state of mind. Learn about 16 amazing people who have not let their disability hold them back them in any way. From performing in international arenas to bagging gold medals in sports events, there is nothing these champions cannot do! They have made us so proud.

- ❑ Sudhachandran- This Indian actress and classical dancer needs no introduction
- ❑ Ravindra Jain- visually impaired, Jain started singing at a very young age and took his passion to a new high when he joined the Indian music industry, becoming one of the most notable music directors of the 1970s
- ❑ Girish Sharma- He lost a leg in a train accident when he was a kid. But, this setback in life did not stop him from becoming a badminton champion
- ❑ Shekar Naik
- ❑ Naik is a perfect example of someone who has converted a disability into an opportunity. With his strong will power and dedication, he became a T20 Blind Cricket World Champion and has 32 centuries to his name
- ❑ H Ramakrishnan was affected by polio in both his legs at a young age of two and half years. From being denied admission in a regular school to getting rejected for a job due to his disability, Ramakrishnan has had to struggle at each step in his life. In spite of this, he worked as a journalist for 40 years and is currently CEO of SS Music television channel. He is also a musician and has showcased his talent at various platforms. He runs a charitable trust called Krupa to help the specially-abled<sup>[4]</sup>.

### Outline Map of the Article

The Review of Literature section Discusses about the Joint family institution in context with disabled child and behavioural management of disabled. The existing system section discusses about the

special education and its significance, objectives and outcomes. The Proposed System discusses about the challenges, threats and need for special education and the key stages of desired outcome stages of special education. The conclusion Section discusses about the contribution expected from every other domain to educate the CWSN.

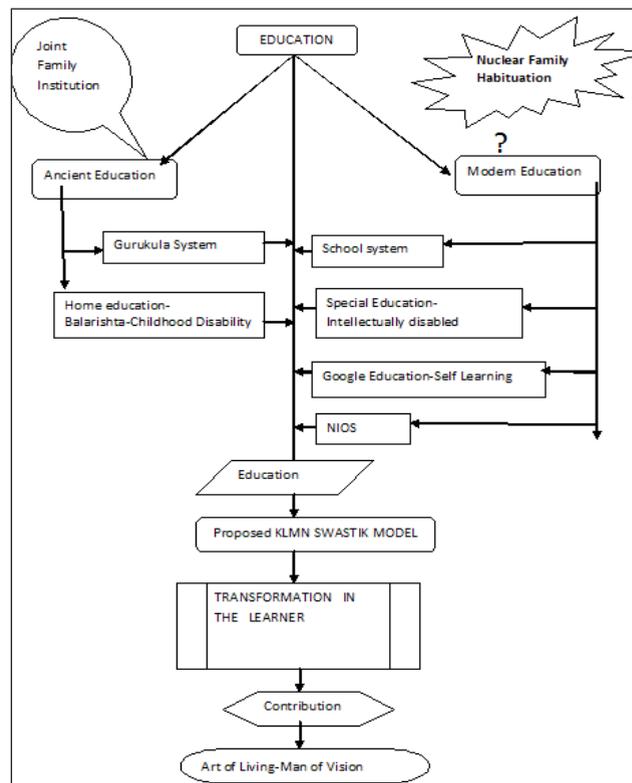


Fig. 1: Outline Map

### REVIEW OF LITERATURE

The first part of this section discusses about working with families of children with disabilities in India. The second part discusses about the Behavioural Management of children with intellectual disabilities (ID) in today's Scenario.

### Working with Families of Children with Disabilities in India

Understanding family structure in India is important in the context of delivering services to children with disabilities.

- ❑ Joint family is a great Institution System- '*vasudhaiva kutumbakam*'

- ⊙ The family, in Indian society, is an institution by itself and a typical symbol of the collectivist culture of India right from the

ancient times. The joint family system or an extended family has been an important feature of Indian culture, till a blend of urbanisation and western influence, began to affect in home and hearth. This is especially true of urban areas, where nuclear families have become the order of the day. There is no denying the fact that socio-economic factors have played their role in the joint family system getting diluted.

- ⊙ A joint family or undivided family is an extended family arrangement prevalent throughout the Indian subcontinent, particularly in India, consisting of many generations living in the same household, all bound by the common relationship<sup>[5]</sup>.
- ⊙ If there is one cohesive, cementing force at the heart of traditional Indian society — a single, powerful strand which for centuries, has woven the tapestry of our rich, social fabric replete with diversity, into a whole— it is our family system<sup>[6]</sup>.

#### ❑ Relationships

- ⊙ Different relationships are addressed via different names. The nature of relationship also varies. Relations can be of equivalence, mutual respect or teasing in nature. In joint families the relation is dictatorial in nature. The Head of the family decides everything about other members of the family. In joint families in northern and central India between a bride or sister-in-law and her younger brother-in-law, a joking or teasing relationship is common, and the relationship towards an older brother-in-law is that of respectfulness<sup>[7]</sup>.

#### ❑ Balarishta – Childhood Disability

- ⊙ Indian Families believed that the (Intellectual disability (today's word)) ill-health during infancy and childhood than of any other kind of adversity that can strike a person at that age may be, by certain specific planetary situations or combinations or associations present at the time of one's birth or at the time of query or at a particular muhurta or happening as are revealed.

#### ❑ Life Span of Disabled Child

- ⊙ The determination of probable life-span be taken up in right earnest<sup>[8]</sup>. The life span is classified as:
  1. death within one year,
  2. death within 12 years,
  3. death within 32 years,
  4. death within 70 years,
  5. death within 100 years and
  6. death after 100 years<sup>[9]</sup>.

#### ❑ Handling special Child At home

- ⊙ The family's eldest and oldest person believed that there was no harm by the special child and all the family members have been groomed with compassion and love towards that special child. At every point of their life time some family member took charge for their entire life. The special child also cooperative and adaptable to their family members.

#### ❑ Education of special Child

- ⊙ The *gurukula* education was not provided to such special child. Home education was done and the special child was able to take care of himself and do some outcome oriented task within his capability. Say for example, washing clothes, cows caring, cleaning the lands, any other jobs that do not need intellect like masculine activities and complementary education had been taught at home. Hence, the disabled child lived their life happily.

#### ❑ Psychological significance of joint family system

- ⊙ The strong bonding it creates among siblings and other members of the family even while providing a sense of security to the children.
- ⊙ Children who grow up in an extended family with grandparents, aunts, uncles and cousins will imbibe the qualities of sharing, caring, empathy and understanding.
- ⊙ Joint families has a positive impact on the emotional quotient of children.
- ⊙ Respect and care for elders.

- ⊙ The fact that grandparents or other members like aunts will take care of children when both the parents are employed, immensely contribute towards making the childhood memorable and happier, a crucial factor to the overall personality development of an individual.
- ⊙ Creates a strong bond of unity at an early age, paves the way for social cohesion and in a broader sense promotes national unity
- ⊙ The qualities of sharing and caring by senior family members automatically lead them to think of a secure future for their children by making savings. This in turn helps in strengthening national economy.
- ⊙ Family values play an important role in shaping the outlook of people.

#### □ Imbibing Values

- ⊙ Children who grow up in an extended family not only imbibe qualities of tolerance, patience, democratic attitude of accepting others' viewpoints, but also develop sportsman's spirit while playing with siblings and cousins.
- ⊙ The family system lays the seeds for social cohesion and democratic thinking.
- ⊙ Adopting our age-old philosophy of *Vasudhaiva Kutumbakam*, which embodies the spirit of humanism, compassion, magnanimity and tolerance, family becomes the basic building block of a harmonious, inclusive society. Family can shape the world view, foster and reinforce the value system of the individuals and therefore, consequently, be the warp and weft of a sustainable, peaceful, inclusive, prosperous world.

The family members' share of conflict situations, quarrels and misunderstandings results modern family system.

#### Modern Education system

Universal and compulsory education for all children in the age group of 6-14 was a cherished dream of the new government of the Republic of India. This is evident from the fact that it is incorporated as a directive policy in article 45 of the constitution.

But this objective remains far away even more than half a century later. However, in the recent past, the government appears to have taken a serious note of this lapse and has made primary education a Fundamental Right of every Indian citizen. The pressures of economic growth and the acute scarcity of skilled and trained manpower must certainly have played a role to make the government take such a step. The expenditure by the Government of India on school education in recent years comes to around 3% of the GDP, which is recognized to be very low.

#### Modern family system

The present-day lifestyle is causing serious damage to the critical role played by a joint or an extended family system in preserving cultural values, traditions and customs, which have been passed on from generation to generation. However, at the same time, we, Indians must consider ourselves to be better placed than others because the concept of '*Vasudhaiva Kutumbakam*' (world is one family) is ingrained in our DNA. It is our duty to pass on the collective age-old wisdom to our succeeding generations.

#### Women's emancipation

Societies evolve with changing times and any process that brings in progressive customs and practices should be welcomed by one and all. For instance, emancipation of women through education is essential to break the shackles of regressive social problems like child marriages, dowry menace, violence against women and superstitious customs. Women should not only be empowered through education, but they should be encouraged to be in the forefront of the battle against blind beliefs and customs, even if there is resistance from male-dominated patriarchal societies. As has been very aptly said educating a woman amounts to educating an entire family and a society, which is the fundamental requirement for the growth and progress of a nation.

#### Psychological transition in GIRL to transform as "MOTHER"

Mothers around the world have been celebrated for their full-time duties to raise generations. Their roles in society have been impeccable regardless of

the setting. The question about how mothers raise their children has been under public scrutiny and many continue to debate the outcome. In the long run there is no school of parenting. Every mother uses what suits them to bring about the best child and be the champion mother<sup>[10]</sup>.

#### *Ancient Mother*

The way mothers raise their children has changed recently with influences from the modern and Western ideology. However, raising a child in the olden days was different and traditional mothers made sure the package had it all. "We came from an era where your mother was your role model. You simply saw yourself through her and that was it. She taught you almost everything you needed to survive the world after and at the same time to be responsible. "As a mother, children are in their best state to shape when they are young and that is the time one really needs to be the right mother.

#### *Modern mother*

A mother, had to make the child understand why it is bad to do wrong and for them to realise the consequences. A mother has to make them understand this concept at a very young age because as they grow, life will not always forgive them. A mother . do not want her children to be corrected by the prisons, hospital and the mortuary."Being a mother is a full time duty and society will always point a finger to the mother if her offspring do not come out right.

#### *Significance of Modern Mother*

1. The modern mother is considered to be influenced by the book.
2. The modern mother is more of a teacher, distant from the child but equally influential.
3. Unlike traditional mothers, modern mothers are not always there for child. However does not take them away from motherly duties as they make ways to manoeuvre between the daily job and their responsibilities as a mother.
4. Regardless of the method mothers use to nurture their children, their role in society remains of paramount importance in determining the strength of generations to

come. In many people's lives, their present living and desire to be whoever traces back to the backbone of their dreams- the mother.

### **Behavioural Management of children with intellectual disabilities (ID) in today's Scenario**

Managing behavioral problems is a major concern in the comprehensive rehabilitation of people with ID. Children with ID that attend schools receive some form of behavioral management, irrespective of the nature of school (special or regular). In rural India, where the majority of children with ID do not attend school, there is no institutional support in place to help children with their behavioral problems.

In addition, the outreach activities performed by rehabilitation institutions in rural communities are poor. Insufficient awareness, misinformation, malpractice and social issues negatively affect the management of behavioral problems in children with ID in rural communities.

In the absence of institutional support, parents apply various methods of handling such behavioral problems. Three approaches are prominent in rural communities: First, parents often ignore the behavior. Second, they may offer the child something to eat or to play with. Finally, the third method involves punishing the child physically or verbally. According to the principles of behavior modification, children's undesired behaviors get stronger and more when behavior management involves inconsistent or inadequate reinforcement.

There is an unmet need for studies that focus on behavioral interventions for children with ID that live in low- and middle-income countries. For example, we do not yet know which ID benefit more from behavioral intervention or if there is any relationship between a child's intelligence quotient (IQ) (a child who has ID) and their behavioral improvement after an intervention.

The behavioral assessment scale for Indian children with mental retardation (BASIC-MR) was used to quantify the study subjects' behavioral problems before and after we applied behavioral management techniques (baseline and post-intervention, respectively). The baseline and post-intervention scores were analyzed using the following statistical techniques: Wilcoxon matched-pairs signed-rank

test for the efficacy of intervention;  $\chi^2$  for group differences<sup>[11]</sup>.

The outcome of this behavioral management study suggests that behavioral intervention can be effectively provided to children with ID in poor areas.

## EXISTING SPECIAL EDUCATION SYSTEM

**Historical Perspective:** In India special education as a separate system of education for disabled children outside the mainstream education system evolved way back in 1880s. The first school for the deaf was set up in Bombay in 1883 and the first school for the blind at Amritsar in 1887. In 1947, the number of schools for blind increased to 32, for the deaf 30 and for mentally retarded 3.

### Mode of Special Education in Schools

Children with disabilities are educated in India through special schools. There exist a few schools exclusively for blind and deaf under government sector. But there is not any special provision in mainstream government schools for education other disabled children like low vision, leprosy cured, hearing impaired, locomotory disabled, mentally retarded, mentally ill, autism affected, cerebral palsy affected and multiple-disabled. These children with disabilities are nurtured to some extent through the special schools of non-government sector.

The term "Special Need Education" (SNE) has come into use as a replacement for the term "Special Education", as older one was mainly understood to refer the education of all those children and youth whose needs arise from disabilities or learning difficulties. The Statement affirms: "those with special educational needs must have access to regular schools which should accommodate them within child centered pedagogy capable of meeting these needs".

### *SURVA SHIKSHA ABYAN* framework

Making schools barrier free to access for CWSN is incorporated in the SSA framework. 4.44 thousand Schools have ramps for CWSN. The play equipment can be designed depending on the child's abilities.

### Special education Teacher

A Special Educator therefore has to have the

following qualities: Organized; Patient; Intuitive; Creative; Detail oriented; Hard-working; Optimistic; Adaptable; Good sense of humour; A love for children; A love for teaching.

### Educational considerations

A child with an intellectual disability can do well in school but is likely to need the individualized help that's available as special education and related services. The level of help and support that's needed will depend upon the degree of intellectual disability involved.

- General education
- Supplementary aids and services.
- Adaptive skills.
- Transition planning.

IDEA requires that, at the latest, transition planning for students with disabilities must begin no later than the first IEP to be in effect when they turn 16. The IEP teams of many students with intellectual disabilities feel that it's important for these students to begin earlier than that. And they do.

### Modification for Students with Intellectual Disabilities

Children with intellectual disabilities need some additional support and modifications in their environment, as well as in the type of activities they do. Here are a few modifications for students with an intellectual disability that will help them to learn better<sup>[12]</sup>.

- Quiet Work Space
- Functional Activities
- Repetition of Concepts Over the Day
- Teacher-Student Ratio
- Hands-on Learning
- Safety Measures
- Schedule

### Signs of intellectual disability<sup>[13]</sup>

- Sit up, crawl, or walk later than other children;
- Learn to talk later, or have trouble speaking,
- Find it hard to remember things,
- Not understand how to pay for things,
- Have trouble understanding social rules,

- Have trouble seeing the consequences of their actions,
- Have trouble solving problems, and/or
- Have trouble thinking logically.

**Safety and security challenges**

- Inside institutions in several countries, Human Rights Watch has documented that children with disabilities often face serious neglect and abuse, including beatings and psychological violence, sexual violence, involuntary and inappropriate medical treatment, use of abusive physical restraints, seclusion and sedation, denial of education and denial of regular contacts with families. These abuses can severely impede their physical, intellectual, emotional, and social development, and these harmful impacts are not limited to contexts in which the worst abuses take place.
- Institutional care for children is also often characterized by physical, psychological, and sexual violence by staff and other children. Violence that children may experience in institutions is often long-term and can lead to severe developmental delays, various disabilities, irreversible psychological harm, and increased rates of suicide and criminal activity. Institutionalization also results in segregation of children with disabilities from their families and communities – sometimes for their entire lives. They are separated from their parents and siblings and not provided with opportunities to form attachments.
- Use of restraints and seclusion.
- Children with disabilities living in institutions are often subjected to solitary confinement and prolonged use of restraints. Human Rights Watch documented that staff in many institutions in India, Indonesia, Greece, Russia, and Serbia frequently use physical and chemical restraints on children and confine children to cribs or caged beds.
- Denial of education.
- Denial of regular contact with families<sup>[14]</sup>.

**PROPOSED SYSTEM**

The Proposed system is designed to meet the limits and challenges that the existing system dealt with.

This model suggests the outcome based on special education.

**Proposed KLMN SWASTIK MODEL**

The KLMN SWASTIK is an acronym where k-knowing; L-Learning; M-mind mapping; N-New idea Contributing to the nation building and people binding from the child’s nurturing. The Special Education Logo is the standard education logo that suits for all type of education namely, Google Education-Self-Learning, CWSN, Regular school Education, Home Education, NIOS-National Institute of Open Schooling, Gurukula learning for Vedic studies, Technology equipped online Education, etc., The KLMN SWASTIK teaching learning model<sup>[15]</sup> for overall development of the child can be used as a teaching strategy for bringing change and transformation in the CWSN.

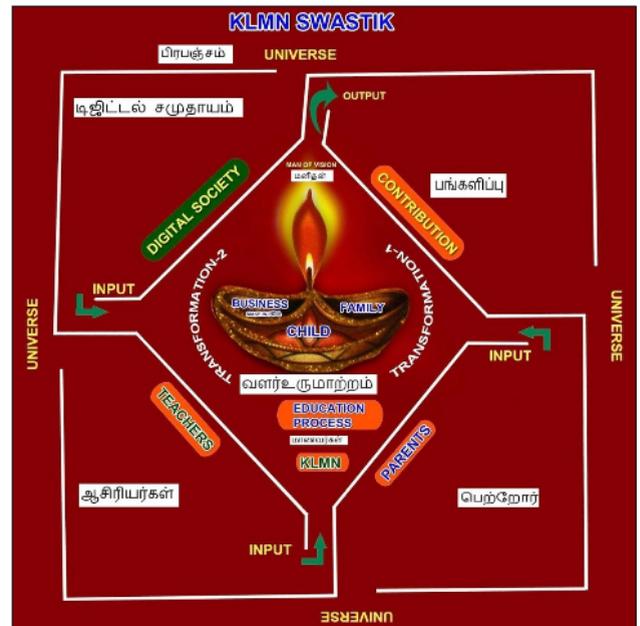


Fig. 2: (Special) Education Logo-KLMN SWASTIK

**Challenges Associated with CWSN to proposed KLMN MODEL**

- Do gender, age, population type, socioeconomic status, category of ID, interventional settings and associated conditions affect the outcome of behavioural intervention in children with ID?
- Does improvement take place across all domains of behavioural problems in children with ID who have received behavioural intervention?
- Many people in the community believe that

children with ID can transfer their disabilities to other children. Some of the children's behavioural problems may have resolved if they were placed in school.

- ❑ Frequent migration of families, sickness of participants, myths, misbeliefs, cultural practices, parental attitudes, parental cooperation and (to some extent) the language barrier between professionals and parents
- ❑ Clinical approach to a behaviour disorder in a child with an intellectual disability
- ❑ Sleep Disorders- Sleep deprivation in humans can have negative side effects including decreased alertness, mood changes (e.g., irritability, fatigue) and cognitive changes (e.g., short-term memory alteration). (e.g., night-waking, night-settling, early waking).
- ❑ Agitation
- ❑ Aggression
- ❑ Self Injury<sup>[16]</sup>.

In this 21<sup>st</sup> century, the desired outcome of education<sup>[17]</sup> is challenging in this digital parenting era.

The following parameters namely, Digital Society, Digital Parenting, Heart transformation, Intellectual Transformations, Social Distancing, Socio Economic are increasing.

The Digital Society includes all virtual friends who we can see speak only through electronic machines. The Digital Parenting Refers to the issues faced by the parents in handling the psychological behaviour in children due to the impact of social media. The heart transformation is done through the social organization called school, but when the school itself is transforming to use machines for education, the direct contact of teacher a human is missing in education. The heart oriented transformation is hard to groom.

The Intellectual Transformation is perfect and the best outcome is good human contributing best medicine, science and technology, socio-economic stability. The Outcome of education is the MAN OF VISION, qualified of contributing something or giving back something with gratitude to the nature, nation, people and humans of course all living beings.

Whereas in DOSE the outcome is also the same, the Man of Vision who could afford himself independently and belong to the heart transformation part of the KLMN SWASTIK. The students can help each other as it is challenging for them to contribute intellectually as compared with normal children.

Moreover, the heart and intellect transformation is expected to develop better outcome in both CWSN and normal child as well. The following Table depict the challenges faced by the special educator teacher in this digital era where the education is transformed to flipped classroom with smart phones.

The CWSN children found hard to use smart phones or gadgets for education. So school for CWSN is inevitable and high prioritised requirements of the parents.

Here in Special Education system, the key stage objectives designed by the proposed model comparatively with the desired outcomes of education for a normal child are as follows.

### **Design of the key stage objectives of the Outcome of Special Education (DOSE)**

1. To increase the confidence of a number of special children to aspire for a valuable education like their normal peers.
2. To propose a set of nonbiased methods of evaluation for determining if a child has a disability. Testing and evaluation must not discriminate based on race, culture, or native language
3. To give rest and fellowship for parents and families through experiential learning through excursion
4. To organise events that encourages school spirit and orientation programme to know the services provided by the government.
5. To provide opportunities for families to talk together about common struggles.
6. To facilitate parents with low income with good medical care for their children especially for students with unique medical complications
7. To provide a gateway to parents to build a good relationship between newer and older parents.

**Table 1: Challenges for DOSE\***

S.No.	Level	At the end of Primary School, Pupils should: class 1-5	At the end of the middle School, Students should: class 6-8	At the end of the high school, students should:	At the end of higher secondary school, students should:
1	Integrated Development P-Physical;	Have strong understanding on the working of senses and their relations to mind and body	Have strong understanding on Physical grooming	Have strong understanding on Physical fitness	Have strong understanding on Health Education
2	Integrated Development M-mental;	Understand the relation between behaviour and environment	Understand the link between emotions and behaviour	Understand the impact of emotions and behaviour	Able to handle Emotions
3	Integrated Development I-intellectual;	Understand the issue by observation	Analyse the issue	Possess Creativity and imaginative potential with good command over communication	Able to have Independent Thinking and intellectual assessment with good interpretation.
4	Integrated Development S-spiritual	Able to realise GOD and the spiritual techniques like chanting mantras, worshipping GOD	Understand the philosophy of developing personal relationship with GOD	Spiritual self-analysis and able to understand Introspection	Spiritual techniques and integrating body, mind and thoughts.
5	Value Education	Understand the values of a child and Himself	Understand the values of the child and others	Understand the values of the child and society, Country	Understand the values of the child and the world and
6	Value Based Education	Understand the Values behind all the cultures through the cultural celebrations activity.	Understand the value behind the Community and the culture.	Understand the Value behind society, community and culture through seva and services	Being a good human, and role model, Able to preserve the ethics in his field and life.
7	Indian Culture	Understand the meaning of culture	Understand the meaning of customs, and have good exposure to culture	Have cultural heritage awareness and appreciation	Have faith and motivation in culture and ability to explain culture
8	Patriotism	Knows about mother country INDIA and world	Started Loving India by realising Great INDAINS and resources namely Human, Brain, 8Natural, Cultural a9nd spiritual	Believe in INDIA and to contribute to INDIA's Development besides knowing its weakness'	Takes the responsibility of being an Indian and Feel proud of an Indian
9	Universal Outlook	Understand himself as a citizen of the World	Understand the harmony in creation	Understand science and technology and its growth in terms of economic wealth	Understand environment and cosmopolitan geographic regions, religions and humanity
10	academic	Able to read and write	Able to think and Analyse	Able to apply and adapt	Have strong skill set Both in life as well as profession.
11	Curricular	Achieve grades in his subjects	Achieve grades and understand his state in assessment category	Understand about education and outside world prepare and participate competitive exams	Able to fix the goal and work hard to achieve the target.
12	Co-curricular	Develop the Skill to Participate to give the best outcome in the co-curricular activities inside classroom	Develop the personality to have the potential strength in attending co-curricular activity inside and outside classroom	Able to think and develop his self interest in the co-curricular activity inside and outside classroom and school	Has leadership qualities like co-operate, co-ordinate and organize the challenging task and move to the next technologically very fast moving world.
13	Extra-curricular	They lead themselves in developing their full potential in extracurricular activities (kids club) apply it in their life.	They lead themselves in developing their full potential in extracurricular activities (science and technology) and apply it in their life.	They lead themselves in developing their full potential in extracurricular activities. (multidisciplinary field) and apply it in their life.	They lead themselves in developing their full potential in extracurricular activities (converge to their own specific field) and apply it in their life.
14	cultural	Understand the soft skills needed to participate in cultural activities	Able to organize committees for various cultural events	Have skill to learn new languages and value others custom and culture	Being a volunteer in participating social cultural activities and nurtured as a good Human.
15.	Digital Society	Have the knowledge of social media, whatsapp for education Listening/speaking/reading.	Have the knowledge of social media, whatsapp for education LSRW	Able to share and use android apps	Able to create blogs and apps
16	Digital Parenting	Have many issues facing in using different apps to discuss with parents	Psychologically having fear about issues and to consult parents.	They started trusting friends for solving issues	Able to know about cyber crime and can approach cyber experts to deal with issues
17	Heart – Transformation	Psychologically trying to prepare for realising the digital influence	Able to analyse problems psychologically	Able to solve problems	Able to give value based solutions to other problems
18	Intellectual Transformation	Started believing what is available in Digital Media	Able to justify intellect with evidence	Able to maintain evidence for their intellect	Able to create or destroy evidence
19	Social Distancing	Lack of thinking and creativity	Unable to understand others need	Reluctant to respond to others need	Hard to change to social connectivity in real.
20	Socio Economic	Know about money	Know about transaction through smart phone	Have interest to start own business	To become an entrepreneur

SL.NO	Parameter	School Education	Special Education
1	Teaching Style	No single specified style is encouraged.	Student Specific
2	Teaching aids	No comm on teaching aid is suggested	Student Specific
3	Assessment	Comm on standard assessment Pattern is prescribed by board, eg CBSE, STATEBOARD, ICSE ETC.,	No Comm on standard assessment Pattern is prescribed by board so far eg. CBSE, STATEBOARD, ICSE ETC.,
4	Time period	Prescribed time period is specified.	No Prescribed time period
5	Goals	Is based on academics ,maths and science	Is not based on Academics but on Daily functioning and vocational
6	classes	Age wise classes are defined	The Mental health has significant impact in fixing the class.
7	Class size	25-30 students per teacher	5 gives better outcome but the size may be 20
8	Opportunity	The opportunities are challenging	The opportunities are threatening
9	Life span	Between 70-80 for healthy	Between 50-60 for healthy life with proper medication
10	Community	They are easily adapt to the community	Community adaptation is challenging
11	Life style	They can live as like as every other standard life of human being	Different and equally standard
12	Paraprofessional	Strictly not required	Required for better outcome
13	Parents approach	Happy and proud	Felt cursed and unhappy
14	Technology influence	Very much	Comparatively low
15	Cost of living	Comparatively less expensive	Highly expensive
16	After schooling	Individual transformation happened and able to take charge his own life	Lies in the hands of the special educator otherwise they become burden to themselves
17	Instruction	Comm on rules can be applied	individualized plans of instruction is applicable
18	objective	To transform the student into self sufficient and Man of Vision	<ul style="list-style-type: none"> <li>To educate, evaluate and to record the effectiveness of psychological and pharmacological treatments for mental health problems and their key symptoms in both children and adults with severe or profound</li> <li>To educate, evaluate and to record the independent daily functioning activities and to record it</li> <li>To educate, evaluate and to record the psychological behaviour and to record it</li> </ul>

Table 2: DOSE

SL.NO	Parameter	School Education	Special Education
19	Psychological interventions	Once in a year the dental, eye camp is organised to record the health status of a student	Eligible psychological interventions were delivered by a trained lay therapist or qualified professional who systematically applied in interventions based on well-established psychological principles and techniques directly to the person with an intellectual disability, either individually or in a group
20	Pharmacological interventions	On school days the, school doctor advises the clinical advised and the student is taken care by the parent	For pharmacological interventions, it was expected that the pharmaceutical agent was given with regular review by a qualified medical practitioner or health professional, and recognised at least in principle as a potential treatment for a mental health problem/symptom.
21	psychiatric diagnosis	Not required	Strictly advised
22	Resources and services	Plenty	Very poor and in rural areas
23	Job readiness skills	Acquired	Acquired
24	Family	Family Assistance is great	Nowadays the special children are neglected
25	employment	Open competition	Different stages of implementation
26	Unemployment allowance	Open	Different stages of implementation
27	special Insurance scheme	Open	Different stages of implementation
28	Creation of Barrier-free environments	open	Different stages of implementation
29	Medical allowance	Not required	Strictly required
30	Physical therapy	Only games period included in time table	Physical therapy is included
31	Curriculum	Cultural, co-curricular, extracurricular, academics	Functional mathematics and reading and writing.
32	Transition	It is gradual and student undergo hormonal unbia sed.	Transition marks a time where an individual gains greater choice and

Table 3: DOSE

DOSE\* -Desired outcome on Special Education

- To give clinical recommendations on Vision, hearing, understanding, moving, communicating and general behaviour.
- The Preventive measures namely, Prevent abuse, Prevent separation, Reunite families, Provide alternative care, Leave no one behind are the main outcome parameter on every stage of DOSE.
- The Transition from one stage to another stage depends on the up-to-date performental measuring scale. For example, The behavioural assessment scale for Indian children with mental retardation (BASIC-

- MR) was used to quantify the study subjects' behavioural problems before and after we applied behavioural management techniques (baseline and post-intervention, respectively).
- To provide conflict resolution guidelines and dispute resolution to the parents whenever required immediately for smooth functioning of the special education.
- To inspire the adolescent CWSN, the successful and famous personalities with disabilities can be invited to give motivational talk to the adult from age 16 upwards.

13. The ad hoc, confused and uncoordinated lack of easily accessible information for parents and young people about what future possibilities in the current transition services can be avoided by using the proposed model.
14. To provide resources for individuals with intellectual disabilities and their carers to access advice about body changes and maturation during the transition to adulthood.
15. To prepare lesson plans, activities, report, assessment, evaluation for student specific CWSN.

The DOSE is translated into a set of developmental outcomes for each key stage of our special education system. The Key Stage Outcomes spell out what the special Education Service aspires to develop in our students through:

1. Early intervention (birth -2 years old).
  2. Early head start (birth to 2).
  3. Head start (3 to 5).
  4. Early childhood intervention(3 to 5 years old).
  5. Kindergarten to secondary education(6 to 16 years old).
  6. Transition planning for adult hoods(14-6 years old).
  7. Transition into secondary education 16 to 21 years of age.
  8. Transition services to the adult life.
  9. Transition with the development of sexual maturity.
- ❑ Each educational level builds upon the previous stages and lays the foundation for subsequent ones.
  - ❑ Analysis of the Key Stage of special education Outcomes. There are thirty-one outcomes at each key stage. Taken together, the Key Stage Outcomes make explicit what we aspire to develop in our young so as to lay the strong foundations for them to thrive and achieve success in life as contributing members of society.
  - ❑ The Special Educator, along with the prescribed outcome by clinical psychologists, can apply the normal children's (as per Physiological age) outcome to assess the outcome of the individual

CWSN to promote from one stage to another stage or to reschedule the process for getting the aimed transformation.

- ❑ The Academics, Vocational or Job skill training, can be included through the transition period for CWSN KIDS (16-23)

Developing a broader education system and with educators who have specialized training is an urgent requirement. Learning should be a fun and an adventurous activity for both children with and without special needs. This proposed KLMN SWASTIK MODEL ensures the involvement and commitment of parents, doctors, peer group and the society, government for the upliftment of special education.

## CONCLUSION

The Indian government has demonstrated its determination by implementing a number of policies, programs, and legislations for inclusion in the last four decades; while on the other it faces a number of unique challenges that limits its successful implementation. Policy makers need to address these challenges appropriately to make inclusive education a reality for millions of children with disabilities in India. Special Education should therefore focus on designing a structure of education that can overpower the disadvantages related to these disabilities, and help children in getting quality education. This Research article aims at helping to meet the unique socio-cultural-educational traditions of India<sup>[18]</sup>.

## ACKNOWLEDGEMENTS

The Author proposes her sincere thanks to Smt. Mini Jackson, Principal Chinmayavidyalaya mat.hr.sec. school, Vadavalli, Coimbatore and to Dr. T. Dorairaj, Director, Indira Gandhi college of Special Education, Kanuvai, Coimbatore. The author records her thanks to the resources that gave motivational strength to write the article. The author wishes to record her wholehearted thanks and acknowledgement for all the information providers that brings change in her thoughts.

## REFERENCES

1. Kumar Sanjeev *at el.* "Inclusive Education In India", *Electronic Journal of Inclusive Education*, volume 2 number 2 (Summer/fall 2007) article 7, <https://>

- corescholar.libraries.wright.edu/cgi/viewcontent.cgi?article=1086&context=ejie.
2. <https://corescholar.libraries.wright.edu/cgi/viewcontent.cgi?article=1086&context=ejie>
3. <https://internationalteacherstraining.com/blog/importance-special-education-children-special-needs/>
4. [https://www.thebetterindia.com/16449/famous-indians-with-disability/?utm\\_source=pofod&utm\\_medium=Medium](https://www.thebetterindia.com/16449/famous-indians-with-disability/?utm_source=pofod&utm_medium=Medium)
5. "The Hindu Joint".
6. <https://www.thehindubusinessline.com/opinion/why-the-indian-family-is-a-great-institution-ep/article23884420.ece>
7. <https://www.incometaxindia.gov.in/Pages/i-am/huf.aspx?k=Introduction#>
8. Govindu Sri Rama Murthi. *Span of Life*. Ranga Printers. p. 5.
9. Prasna Marga Part-2. New Delhi: Motilal Banarsidass Publishers, pp. 283.
10. <https://thepatriot.com.na/index.php/2016/05/06/traditional-vs-modern-motherhood/>
11. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3927244/>
12. Special Ed: Modification for Students with Intellectual Disabilities by brighthubeducation.org)
13. <https://therapytravelers.com/strategies-teaching-students-intellectual-disabilities/>
14. Shantha Rau Barriga *et al.* 2017. "Children with disabilities: Deprivation of liberty in the name of care and treatment", Protecting Children Against Torture in Detention: Global Solutions, March 7, 2017.
15. <https://ijip.in/articles/a-klmn-swastik-model-for-all-round-development-of-students-based-on-educational-psychology/>
16. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3299352/>
17. Dr. J. Komalalakshmi, 2017. "A design and analysis of Chinmaya vision programme on outcome based education", *International Journal of Information Research and Review*, 04(12): 4948-4951.
18. <file:///E:/specialeducation/special%20education%20in%20ndia%20research%20gate.pdf>