RELATED SERVICES AVALABLE FOR PUPILS WITH SPECIAL EDUCATIONAL NEEDS IN THE REGULER CLASSROOM

SOGLO-SEVOR, CLEMENT

M.ED SPECIAL EDUCATION

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JUNE, 2010

DECLARATION

CANDIDATE'S DECLARATION

I, Clement Soglo-Sevor hereby declare that except for references to other people's work which have been duly acknowledged, this project is the result of my own work and that it had neither in whole nor part been presented elsewhere.

………………….. …………………

(SIGNATURE) (DATE)

SUPERVISOR'S DECLARATION

I, hereby declare that the preparation and presentation of this project was supervised in accordance with the guidelines for supervision of projects as laid down by the University of Education, Winneba.

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(NAME) (DATE)

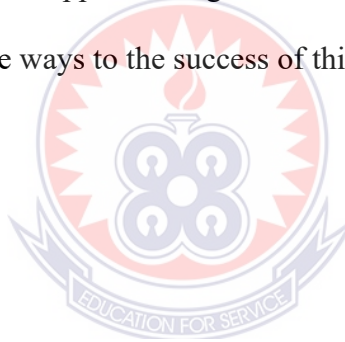……………………………………

(SIGNATURE)

DEDICATION

This project is dedicated to my dear wife, Mrs. Jane Senyo Soglo, my daughters, Selorm

and Seyram, my parents Mr. and Mrs. Soglo- Sevor and my siblings for their love, care

and support which have kept me going for all these years.

AKNOWLEDGEMENTS

ABSTRACT

The purpose of the study was to investigate the availability of related services for pupils with special educational needs in regular schools Akatsi District. The design was a survey and the study used interviews and document as methods of data collection. The sample size was twenty five (25) comprising twenty (20) pupils with special educational needs in the regular schools and five (5) parents of special needs children. The findings were: there were inadequate essential services for pupils with special educational needs in the Akatsi district. As a result, such pupils were handled like "normal" pupils. Lack of funds, traveling long distances to access related services and negative attitude on the part of service providers were other challenges affecting pupils with special educational needs. It was recommended that, teachers in regular classrooms must be equipped with the necessary skills and attitudes to manage pupils with special educational needs. Related services are crucial for the overall development of the special needs child hence the need for its provision in all districts in the country. Finally, parents of children with special needs must be re-oriented and supported for effective provision of related services.

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CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Pupils with special educational needs have unique learning needs which must be considered when planning learning activities in general education classroom. Also, it is imperative to consider devices and services that are needed to enhance these pupils' success in education and general development. If this is ignored, the problems of the pupils will not be managed effectively to enable them achieve their potential and become independent (National Dissemination Centre, 2004).

In the United States of America, Aderson, (2004) states that, students found eligible for special education, participate in a variety of structured services presented through individualized education programme developed by school-based or multi disciplinary education team. Each Individualized Education Programme includes a Service Delivery page detailing the type of services each eligible student should receive either directly or indirectly. This according to Aderson, plays a vital role as it is the basis on which the student's success in the programme depends.

In line with this, Heward (1996) identified a wide range of related services which are critical for the education of pupil with special educational needs. The services include; audiology, counselling, early identification and assessment, medical services, orientation

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and mobility, occupation therapy, physical therapist, psychology, social work services and speech pathology. These services are provided to enhance the participation of pupils with special educational needs participation in general classrooms.

In Ghana, the policy of the Ministry of Education Science and Sports is to include children and young people with disabilities in mainstream schools by 2015(Education Strategic Plan, 2003 - 2015). To achieve this, the Ministry of Education Science and Sports has directed the special Education Division to provide appropriate, relevant equipment, services, experiences and opportunities for children and young people with special educational needs in inclusive classrooms in the country (Tay, 2007).

However, Ankutsey (2007) indicates that related services for persons with disabilities in the Volta Region have declined and reached an appalling stage, Ankutsey explained that, although there are pupils with disabilities in many basic schools in the region and in particular at Akatsi district, these pupils go through the schools without requisite related services to enhance their learning. It can be speculated that this situation has resulted in some pupils with special educational needs dropping out of school and those who managed to go through school, complete with poor grades leading to their inability to continue at the senior high school.

1.2 Statement of the Problem

In many schools at the Akatsi District, provision of related services for learners with special educational needs is non-existent. Even in few schools where the services are available, the distance to these places makes it difficult for some pupils with special educational needs and their parents to access the services. Lack of related services for pupils with special educational needs in the Akatsi district can greatly impact on the ability of pupils to perform in the classroom. It is therefore prudent conduct a study to find out the extent to which related services are provided for pupils with special educational needs in the district.

1.3 Aims of the Study

The aim of the study was to investigate the availability of related services for pupils with special educational needs and the extent to which these services enhanced learners' participation in teaching and learning.

1.4 Objectives

The main objective of the study was to;

- Find out the types of services offered to pupils with special educational needs in the Akatsi District.

- Examine the extent to which related services were accessible to pupils with special educational needs in the District.

- Ascertain the challenges encountered by learners with special educational needs in accessing services.

1.5 Research Questions

1. What services are available for pupils with special educational needs in the regular classroom at Akatsi District?

2. How accessible are related services to special needs pupils in the Akatsi District?

3. What challenges do pupils with special educational needs in the general classroom face in accessing related services in the Akatsi District?

4. What are the views of parents about the provision of related services to their children with special educational needs?
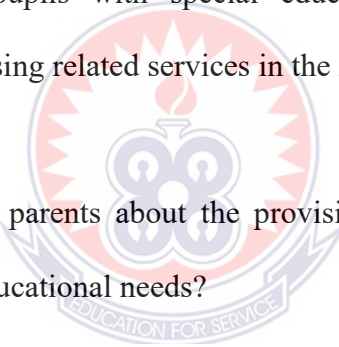
1.6 Significance of the Study

Adequate provision of related services for pupils with special educational needs in the regular schools has the potential of improving the performance of these children. Since the ultimate aim of every teacher is to enhance the learning capabilities of every child, the result of this study will be significant for the following reason;

- The research will provide information about the level or impact of related services delivery for pupils with special needs in the Akatsi District in order to establish whether such pupils were receiving the needed support to enhance their learning.

- Also, the findings would provide insight for policy-makers with respect to services for pupils with special educational needs. This would enable them to make up for the gaps that exist in service delivery.

1.7 Delimitation

Provision of related services in the area of special education is a nationwide phenomenon. However, to enhance effective collection of data to an appreciable level, I focused on only regular schools in the Akatsi District.
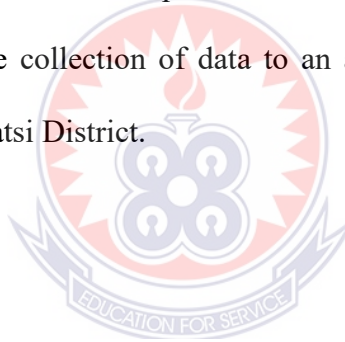
1.8 Structure of the Study

The study consists of five chapters. Chapter one is the introduction of the study which consist of background, statement of the problem, purpose of the study, research questions, delimitations, structure of the study and definitions of terms.

Chapter two deals with review of related literature and chapter three gives an insight into the research procedures and methods employed in the study, especially the research design, the sampling procedure, research instruments and data collection and analysis.

Chapter four is about the analysis of the data while chapter five deals with the summary of the study, conclusions and recommendations made in the light of the findings of the study.

1.9 Definition of Terms

Related Services – Services that pupils with special educational needs are provided with in order to access and benefit from quality education. Such services include speech/language therapy, occupational therapy, physical therapy, audiology, counseling, social services among others.

Special need pupils – pupils who differ from the average in mental characteristics, sensory abilities, communication abilities, social behavior or physical characteristics. These differences however must be to such an extent that the exceptional pupils require a modification of school practices or special educational services to develop to their maximum capacity.

Medical Service – Services provided by a licensed physician to determine a child's medically related disabilities that results in the child's need for special education and related services.

A Disabled Child - it means that individual has a problem with a part of his or her body or mind. Since the person has a problem with a part of the body, the person may not be able to walk, use their arms and hands, hear, see, feel, talk or think, well.

Summary

Pupils with special educational needs have distinctive learning needs which must be considered when planning learning activities in general education classroom. In line with this, there are several related services which are critical for the education of pupil with special educational needs. These services include; audiology, counselling, early identification and assessment, medical services, to mention but a few. These services are provided to enhance pupils with special educational needs participation in general classrooms.

In many schools at the Akatsi District, provision of related services for learners with special educational needs is non-existing. It therefore became necessary to investigate the availability of related services for pupils with special educational needs and the extent to which these services are enhancing these learners participation in teaching and learning.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter discusses related literature on related services for pupils with special educational needs in the regular classroom. The discussion was carried out under the following strands:-

1. Types of services available for pupils with special educational needs in the regular classroom.

2. Challenges associated with service delivery for pupils with special educational needs.

3. Parental involvement in the provision of related services for pupils with special educational needs.
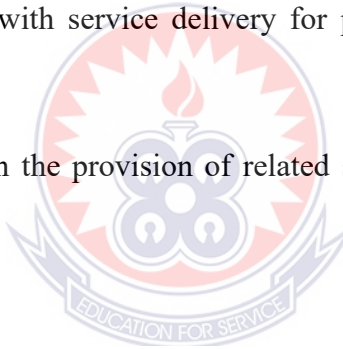
2.2 Types of Services Available for Pupils with Special Educational Needs in the Regular Classroom.

There are numerous services that are required by pupils with special educational needs in the regular classroom to help bring out the potential in them. According to Heward (1996) there are several services that are to be delivered for persons with disabilities. These services include: early identification and assessment of disability in children, audiology, orientation and mobility, medical services, and itinerant services.

2.2.1 Early Identification and Assessment of Disability in Children.

The earlier a disability is identified in a child and concerted efforts made towards its management, the better it is. Early identification and assessment provides a better opportunity for the child to be thoroughly assessed and measures put in place for the child's total development. In the United States of America, the law requires that a child be assessed in all the areas related to the child's suspected disability. This includes appropriate evaluation of the child's health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status and motor ability (Heward, 1996)

On the basis of the above, Heward, (1996) further suggested that a variety of assessment tools and strategies must be used to gather relevant, functional and developmental information about the child. The evaluation must be sufficiently comprehensive so as to identify the child's related services needs. The evaluation must clearly shows that the child, indeed, is disabled and that, because of the disability he or she needs special education and related services.

In the Akatsi district however, the researcher observed that, well equipped hospitals and assessment centres are not available to afford pupils with special educational needs the opportunity to be identified and assessed at the early stages. This therefore does not ensure appropriate evaluation of the child's health, vision, hearing, social and emotional

status, general intelligence, academic performance, communicative status and motor ability at the early stages as practiced in the developed countries.

2.2.2 Audiological Services

Audiology services are essential for children with special educational needs whose main problem is hearing. Heward (1996), indicates that identifying children with hearing loss, determining the range, nature, and providing facilitative activities, such as auditory training, speech reading, hearing evaluation, and speech conservation is very crucial pupils with special educational needs. It also takes into account the process of creating and administering programs for the prevention of hearing loss, guidance and counselling of pupils, parents, and teachers regarding hearing loss. In another development, determining children, needs for group and individual amplification, selecting and fitting an appropriate hearing aid, and evaluating the effectiveness of amplification are all audiological services.
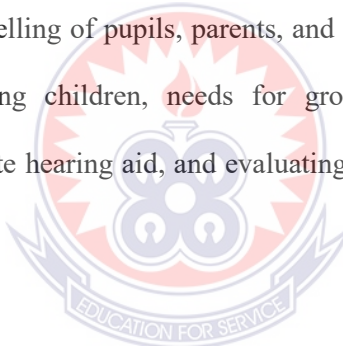
2.2.3 Orientation and Mobility

Orientation and Mobility training is the most important first step in gaining independence. The independence of the blind depends on how well they can move around in their environment. The methods available are sighted guides, the long white cane and dogs. There are also some electronic devices, but they are not readily available in Africa and for that matter Ghana. Unfortunately also, dogs are not commonly used in Africa as such the focus will be on the long white cane and sighted guides (Okyere & Adams, 2003).

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The writers explained that, the cane should be as long as the distance from the armpit to the floor. The user is provided auditory and tactual information by moving the cane along the ground. It alerts the user about uncovered drains, drop off the pavement, and ditches. Intense training is needed to develop the coordination between walking and making wide swings of the cane, and lightly touching it on the ground. Though a certain amount of independence is lost, trained human guides give the blind person the most freedom to move about.

2.2.4 Counselling service

Counselling services focus on the needs, interests, and issues related to various stages of student growth. School counsellors may help students with personal and social concerns such as developing self-knowledge, making effective decisions, learning health choices, and improving responsibility. Counsellors may also help pupils with special educational needs to plan their future towards setting and reaching academic goals, developing a positive attitude towards learning, and recognizing and utilizing academic strengths. Other counselling services may include parent counselling and training and rehabilitation counselling (that is, counselling specific to career development and employment preparation).

In the views of Torres and Corn (1977), parents of children with special educational needs are faced with a lot of psychological, social, economic, and emotional problems because of the conditions of their children. These problems are compounded by the ignorance of the parents themselves and the general public about special need chilren. In

addition, superstition and negative beliefs about disability, high level of illiteracy in the society, care-free attitude of the public to the needs of pupils with special educational needs are also major problems. These problems usually make parents who have children with disabilities to shy away from their expected and legitimate role towards upbringing, affection, love, care and training the child educationally. There is the need for parental counselling to address such issue. It is important to note that, though the Akatsi directorate of education has guidance and counselling co-ordinator, issues and challenges of pupils with special educational needs and their parents are not considered. They are managed like any other pupil in the regular classroom.

2.2.5 Education

In terms of education, sections 16-22 of the persons with Disability Act 715 provide that every parent, guardian or custodian, or anybody taking care of a child with disability who is old enough to go to school, should take the child to school. The school can be a usual or common school where all children go to or a special school if the disability of the child demands that he or she attends such a school. If a parent does not take a child to school, he or she will be acting against the law and can go to prison for that.

The Section 16-22 of the Disability Act 715 further indicated that, if parents or those taking care of persons with disability, intend to send their ward or child to a normal school, the law does not allow a school officer (i.e. a head-teacher, principal, or headmaster / headmistress), etc., to refuse to admit or accept the child simply because of

his disability, unless the child has a disability that makes him only able to go to a special school. A school officer who refuses to admit a child into his/her school because of his disability can be sent to prison for up to 3 months.

The Act again stated that, The Minister of Education shall do his/her best to set up training schools or places where the children with disability will be given education to learn sign language and the use of Braille. Public library shall also have all the facilities or things that will make it easy for persons with disability to use the library for any purposes.

2.2.6 Medical Services

These are services provided by physicians to determine a child's medical needs and required special education and related services. The medical needs of the health impaired and some categories of individuals with intellectual disabilities are very crucial and sometimes life threatening. Reynolds and Birch (1977) indicated that among the services specifically included within the related services definition are speech pathology and audiology, psychological services, medical services (for diagnostic and evaluation purposes only), physical and occupational therapy, recreation, and counseling.

Kniel (2008) indicates that, though some special schools have a nurse assigned to them, such provision have not been extended to regular schools. It is therefore important to ensure that pupils with special educational needs in the regular schools who do not

benefit from such provision are registered with the National Health Insurance Scheme for their medical needs to be catered for.

Under Sections 31, 33 & 34 of the Disability Act 715, it is provided that, a person with serious and severe disabilities has the right to be given free general and specialist medical treatment. They will also not pay for other forms of treatment and equipment. Also, the Ministry of Education shall include education on disability and matters about disability in educational programmes such as primary health care. In addition, the Ministry of Health will work together with the Ministry of Education to observe or watch school children carefully from time to time so that if any of them show any sign of disability he or she will get early treatment if needed.

2.2.7 Itinerant/ Special Education Services

The special educator, coordinator or the itinerant teacher has received specialized training in a particular category and provides services to students with special educational needs including students in hospital programmes. They may also travel between schools within or within districts. Services provided by the itinerant teacher supplements the instruction provided by the students classroom teacher. Although teaching is their major responsibility, they are involved in related activities such as procuring special materials, conferring with parents assessing students or participating in case conferences (Clogh & Lindsey, 1991).

According to Cartwright, Cartwright and Ward (1985), there will always be some students whose educational needs cannot be met in the regular class, because the regular class teacher may not be adequately trained to make the necessary adaptation, secure the special equipment or materials or provide the specialized instruction. Full-time regular class placement for some children may be enhanced by the provision of consulting teachers who collaborate with regular class teachers. The skills required for the teacher consultant include problem solving, communication, public relation and collaboration, in addition to a recognition of and respect for the knowledge and skills the regular classroom teacher already has and brings to the consultation.

Reynolds and Birch (1977) opine that, special educators also provide itinerant services which are resource programmes on wheels. This programme model is most practical in areas that have limited funds for the establishment of special schools or communities that do not have enough eligible children to warrant a resource teacher. Itinerant services also takes into account instruction in the hospital or home to recuperating and chronically ill children by establishing a curriculum and offering teaching services.

These related services are offered to complement special education programmes in special schools and classes. Without these services, majority of students served by special education would not benefit from instructions they received. For example, special-language therapy (service) may improve a student's communication skills, permitting greater communication performance and participation in a wider range of educational opportunities. Related service are closely linked to special education programmes that the

personnel involved in these services delivery also participate in programme planned for students with disabilities (Kirt, Gallagher and Anastasia, 2000)

In another development, Gyimah (2007) indicates that collaboration creates efficiency, avoids fragmentation, improves relationship between the various agencies, creates learning opportunities for members, avoids conflicts between agencies, and brings about a sense of direction. It also provide a sense of purpose, create a supportive culture for members of the team, creates meaningful learning opportunities for the child with special needs and family, collaboration brings parents and the larger family and the student into playing active roles within the team. Collaboration is therefore very important in special educational service delivery and must be pursued at all cost.

Service delivered by special educators brings about flexibility and scheduling, allowing students instructional programme to be designed to meet changing needs. This is because, large numbers of young children with developing problems can be accommodated less expensively, and later severe disorders may be prevented. Through effective service delivery, pupils with special educational needs can receive help in their neighborhood school. Finally, in contrast to self-contained special class programme, children start the day in an integrated programme with their age mates and become special for specific services, which go a long way in helping to avoid the stigma of the special class (Reynolds & Birch, 1977).

In the view of Hallahan (1999) cited in Okyere and Adams (2003), special education is designed to meet the unique needs of the individual student with special educational needs. Instruction therefore should be child centered, thus, what the child need to learn in order to become as independent as possible. To achieve this however, adequate provision of related services must be ensured in the "least restrictive environment" or in the environment which represents, as close as possible, the community of the child.

According to Kolosopoulos and Boodoosingh (1987) cited in Bauer and Shea (1997), Apart from those learners served under primary communication disordered, it is estimated that approximately one-fourth of the learners with other disabilities (for example, mental retardation, learning with other disabilities, behavioral disorders) receive speech and language services as a related service.

Davies (1975) expresses concern that, because of the multifarious nature of the problems facing pupils and families with special educational needs, professionals are needed to effectively serve these pupils and their families with the services they deserve. Some of the professionals required to provide these related services to pupils and families with special educational needs includes psychologist, social worker, occupational therapist, speech and language therapist, paediatrician, physiotherapist, counsellor, ophthalmologist, optometrist, orthopaedic technician, audiologist, psychiatrist, special educators, and behaviour management therapist.

2.3 Challenges regarding related Service Delivery

In general, there are several factors that serve as barriers in the provision of related services for pupils with special needs. One major barrier to the provision of quality education for children with disability in all educational contexts include the lack of early identification and intervention services, negative attitudes, exclusionary policies, inadequate teacher training, particularly training of all regular teachers to teach children with diverse abilities, inflexible curriculum and assessment procedures, inadequate specialist support staff to assist teachers of special and regular classes, lack of appropriate teaching equipment and devices, and failure to make modifications to the school environment to make it fully accessible (Beecham & Knapp, 1999).

Technology is powerful when it is usable. Computers, projectors, calculators and other technological devices have become a generally accepted teaching and learning materials. This is because the use of these technological devices is greatly transforming the academic work worldwide. Unfortunately however, pupils with visual impairment generally find it difficult as the use of these devices depends largely on eye. (Kirk, Gallagher and Anastasia, 2000)

Deiner (2005) suggested that, strategies for achieving quality education include consideration of the supports that are necessary to make including special needs pupils in the regular classrooms successful. At times however, these supports are not available because there are no common visions of what inclusion means and requires. Lack of

teaching materials or training to support pupils with special educational needs is a major problem confronting special education delivery. Large classes and no co-planning time for these individuals can all contribute to lack of support.

The design and desire of a given environment is a major consideration in serving children with physical disabilities. Whether services are delivered at the home, in a child care centre, or in a public school, the facility should be at a minimum to be accessible and optimally be a barrier –free. The accessible standard applies to existing buildings. The intent is to offer access that is ''reasonable'' and not excessively costly. Unfortunately however, these barriers exist in developing countries (Bowe, 2004).

It is obvious that not all categories of pupils with special educational can be provided with related services in the regular classroom. But on the argument that students should be served on the bases of their chronological age rather than academic ability or mental age, many pupils with severe cases of disability are in our regular classrooms today. This is a major barrier to the provision of related services for these pupils as their needs can not be met in the regular schools (Gargiulo, 2000).

Instead of positive behavioural support to become a component of every teacher's repertoire of teaching skills, teachers and some parents and families have been conditioned in the past through their training and exposure to view positive behavioural

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support as an adjunct to their teaching and parenting. This has negatively affected many pupils with special educational needs who are in the regular classroom. This is because pupils with special educational needs are not encouraged by their teacher and parents. To some degree, this has been a bias towards the use behavioural procedures in schools where there are pupils with special educational needs (Richey & Wheeler, 2000)

Adima (1981) indicates that disabilities in Africa and for that matter Ghana are often tied to superstition which have complicated effects rather than help issues. Sometimes, parents do argue and attribute the condition of their children to superstition in that the parents offended the gods of the land. Such believes, Adima (1981) explained, makes it more difficult for parents to accept professional counselling services which is a major related service crucial for both pupils with special educational needs and their parents.
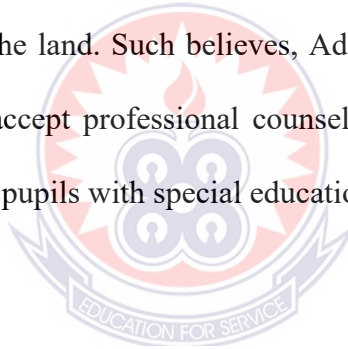
2.4 Parental involvement in the Provision of Related Services

Parental involvement in the provision of related services to individuals with special educational needs in the regular education system is important. The role of parents of children with special educational needs is now shifting from passive receivers of services to respected members of the intervention team. In the United States of America for instance, the passage of the Public LAW 94-142, the Education for All handicapped Children Act 1975, made active participation of parents in the educational process as a right. This according to (Gyimah 2007) is a complete departure from the past as parents

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are now seen by governments all over the world as an important element in the provision of related services for their children with special educational needs in the regular system.

Dela (1996) cited in Gyimah (2007) observed that, professionals needs co-operation of parents to work effectively. Dela explained that, all the care the child needs such as health, medical therapy and education depend on active parental involvement to succeed. Parents have unique and special knowledge and understanding about the child, which can be harnessed to make a significant contribution to the child's health and development.

Deiner (2005) believes that teachers most often have too many children to contend with and therefore parents must complement the effort of teachers in the classroom. Deiner explained that parents are a potential resource for helping their children with special educational needs because gains picked during workshops for parents can be consolidated at home as the home provides the important learning opportunities. This teaching helps complement the effort of teachers and offer some sort of continuity for the child.

Gyimah (2007) indicates that, parents are viewed as experts of their children whiles teachers are viewed as experts on their children education. Consequently, when these two expertises are combined, the child's overall education could be enhanced. This model becomes necessary because sometimes, as a result of the emotional attachment that

parents have for their children, it affects decisions that may be taken concerning their children.

Summary

Early identification and assessment of disability in children, audiology, orientation and mobility, medical, itinerant and educational services are among related services that are required by pupils with special educational needs in the general school setting to enable there unique needs to be catered for.

Barriers in the form of appropriate teaching and learning materials, lack of funds to run additional budget for pupils with special educational needs, negative attitudes towards pupil with disability, lack of access to buildings, traditional believes and inadequate well trained professionals are challenges that pupils with special educational needs must overcome to enable them achieve their potentials.

Parents are regarded as experts of their children whiles teachers are considered as experts on their children education. For that matter, when these two expertises are married, the child's overall education could be enhanced. Parents are again viewed as potential resource for helping their children with special educational needs because gains picked during workshops for parents can be consolidated at home as the home provides important learning opportunities. Parental involvement therefore cannot be overemphasised.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

This chapter discusses the research design, population of the study, sample and sampling technique, description of instrument procedure for data collection, validity and reliability of instruments and data analysis employed in gathering information for the study.

3.2 Research Design

The research design used was a survey to find out related services available for pupil with special educational needs in Akatsi District. According to Cozby (1997) survey is a technique of descriptive research that seeks to determine present practices or opinions of a specified population. It can take the form of a questionnaire, interview or normative survey.

Creswell, (1989) described survey as a self – report measurement technique that answers questions about, attitude, behaviours, personality, and demographics. When employing survey in your research, careful sampling techniques are required to obtain an accurate description of an entire population. Surveys are used simply to collect information such as the percentage of the respondents who hold or do not hold a certain opinion. Surveys can also be used to explore relationships between different variables (Gall & Borg, 1983).

3.3 Population

The population involved in this research included all special educational needs pupils and their parents in Akatsi District. The accessible population was about one-hundred and seventy made up of ninety two (92) parents and seventy eight (78) pupils spread over the entire district.

3.4 Sample and Sampling Techniques

The sample for this study was twenty (25) comprising twenty (20) pupils with special educational needs and five (5) parents of special needs children. The sampling procedure used for the pupils was purposive combined with random sampling technique involving twenty (20) schools, two from each circuit. In all there were ten (10) circuits in the District. Selecting schools from all the circuits enabled the researcher to cover the entire District. Random sampling technique was used to select, twenty (20) pupils and five (5) parents were selected from five circuits to complete the sample.

Purposive sampling was considered suitable because according to Fraenkel and Wallen (2003), on occasion based on previous knowledge of a population and the specific purpose of the research to select a sample. The researcher assumes that the knowledge of the population can be used to group the sample into various identifiable categories to randomly select a particular sample that will be represented.

In this study, all the seventy eight (78) pupils with special educational needs were purposively categorized into their area of need. These include mental retardation, visual

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impairment, hearing impairment and physically handicapped and were given specific numbers. Five respondents were randomly picked from each category of disability. The ninety two (92) parents were also numbered accordingly of which five were randomly picked representing the parents selected.

Of the twenty five (25) respondents selected, five (5) were parents of children with special educational needs and twenty (20) were pupils with special educational needs in the regular classroom. Out of the twenty (20), five (5) were mentally retarded, of the mentally retarded three (3) were health impaired, five (5) were visually impaired, another five (5) were hearing impaired and the final five (5) were physically handicapped. The twenty pupils with special educational needs were again made up of twelve (12) boys and eight (8) girls who were selected from basic one to basic seven. All the selected pupils were between the mild and the moderate category. The above information is represented on table 1 and 2.

Table 1- Age and Gender Distribution of Pupils

Ages	Males	Female	Total
10	1	-	1
11	2	1	3
12	3	1	4
13	1	3	4
14	1	-	1
15	2	2	4
16	2	-	2
17	-	1	1
Total	**12**	**8**	**20**
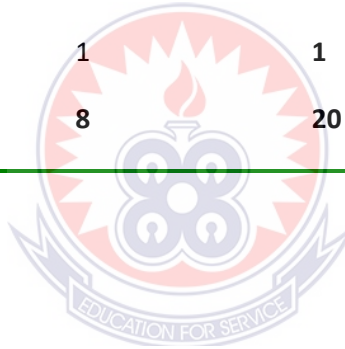
Table 2 - Disability Distribution

Disability	No. of pupils
Mentally retarded with speech problem	2
Mentally retarded with health impaired	3
Visually impaired	5
Hearing impaired	5
Physically handicapped	5
TOTAL	**20**

3.5 Procedure for Data Collection

The researcher used interviews to gather enough information on related services available for children with special educational needs in the Akatsi District. Various responses were given and were as well recorded by the researcher. On accessibility of the services pupils with special educational needs again responded and their views were recorded.

The respondents were again made to respond to other issues which bordered on challenges being faced as far as service provisions were concerned. The interview was carried out on a one on one bases between the researcher and the informants. Each interview lasted for between 35 to 40 minutes. All the respondents' views were recorded during the interview and transcribed on paper which enhanced the analysis. After the interview was carried out, documents of the special needs pupils in the area of service delivery was gathered to enhance the data.

3.6 Instruments

3.6.1 Interview

Interview formed a major part of the researcher's data collection procedure. Gall et al (1996) are of the view that, interview permits open – ended exploration of the topics as well as elicited responses that are couched in the unique words of the respondents. Tuckman (1972) cited in Coheh and Marion (1994), explained that, interview is used as the principal means of gathering information having direct bearing on the research objectives. Avoke (2003) is also of the view that, generally, interviews allow respondents

to express and contextualize their feelings, rather than being compelled to tick a given statement with little or no opportunity for contextual explanation.

The interview was conducted in a semi-structured form. In using the semi-structured interview, prompts were used to follow-up on areas found interesting and necessary though not earlier on anticipated. The participants were motivated which enhanced the free and frank nature of their responses and feeling. Mwiria and Wamahiu (1995) noted that Semi-structured interviews are used to guide discussions. Fetterman (1998) stated that, semi-structured interviews offer the possibility of modifying a line of enquiry as well as following up interesting responses.

3.6.2 Documentation.

Information were also collected and observed from existing documents in the area of service delivery. It included health records, social welfare records, counseling records, school records and audiology records. These documents were called for after the interview and observed which helped ascertained the truth or otherwise of the respondent's claim of accessing related services.

A document according to Fraenkel and Wallen (2003) refers to any kind of information that exists in some type of written or printed form. Creswell (2005) stated that documents consist of public and private records that qualitative researchers obtain about site or participants in a study and they can include newspapers, minute of meetings, personal journals and letters.

3.7 Validity

Validity is an important aspect of research according to Cohen, Manion and Morrison (2003) as it is based on the views that, a particular instrument in fact measures what it purports to measure. Cohen et al (2003) again emphasized that, with the increasing adaptation of qualitative studies the focus on measuring validity is no longer in terms of figures since qualitative data emphasizes trustworthiness, truthfulness, honesty, rich and scope of the data.

The research was made valid through content related evidences. The content was appropriate and comprehensive, the instruments were employed logically which brought out the variables. Samples of items and questions represented the content which was assessed. The content and formats were consistent with the definition of the variables and the sample of the subject measured.
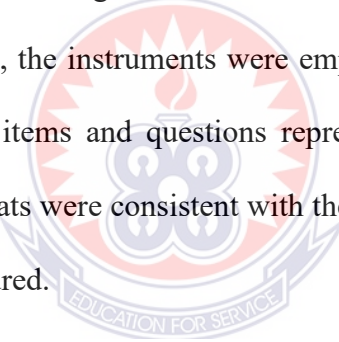
3.8 Reliability

Reliability according to Pratt and Swann (2003) refers to the consistency of the scores obtained. How consistent they are to each individual from one administration of an instrument to another and from one set of item to another.

Reliability according to Cohen et al (2003) cited in Avoke (2005) has to do with measuring the consistency over a period of time. It is the consistency and reliability over time, over instrument and over group responses.

The reliability of the research was enhanced by using pilot study procedure. In this case, the interview guide was administered on five pupils with special educational needs in a town known as Agbozume on different occasions. The data gathered from these pilot interviews was used to fine tune the items for the interview guide.

3.9 Data Analysis

Data analysis is a careful examination of collected information in an organized form in order to understand the growing trend of a situation (Montgomery, 1991). Further, Silverman (2004) indicates that, qualitative content analyses are presented as illustrative quotations. This is often described as a "thematic" analysis or sometimes as a "discourse" analysis and may be presented with the quotations integrated into the text rather in tabular form.
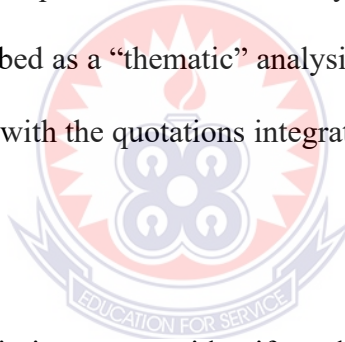
The researcher read the transcriptions over to identify and cautiously name the conceptual categories into the key themes. Words, phrases or events that appeared to be similar were grouped into the same category which was gradually modified or replaced during the subsequent stages of analysis.

CHAPTER FOUR

ANALYSIS AND DISCUSSION OF DATA

4.1 Introduction

This chapter deals with the presentation, analysis and discussion of findings of the study. The findings were discussed under various research questions

Of the twenty five (25) respondents selected five (5) were parents of children with special educational needs and were made of four (4) women and one (1) man. The age range for the parents was between 32 to 53. The rest twenty (20) were pupils with special educational needs in the regular classroom. Out of the twenty (20), five (5) were mentally retarded of which three (3) were health impaired. Five (5) of the pupils were visually impaired while another five (5) were hearing impaired and the final five (5) were physically challenge. The twenty pupils with special educational needs were again made up of twelve (12) boys and eight (8) girls who were selected from basic one to basic seven. All the selected pupils were between the mild and the moderate category

4.2 Research Questions 1: What services are available for pupils with special educational needs in Akatsi District?

This research question sought to find out the various support services that are available in the Akatsi District for which pupils with special educational needs patronized and are aware of.

Table 3- Services Available for Pupils with Special Educational Needs
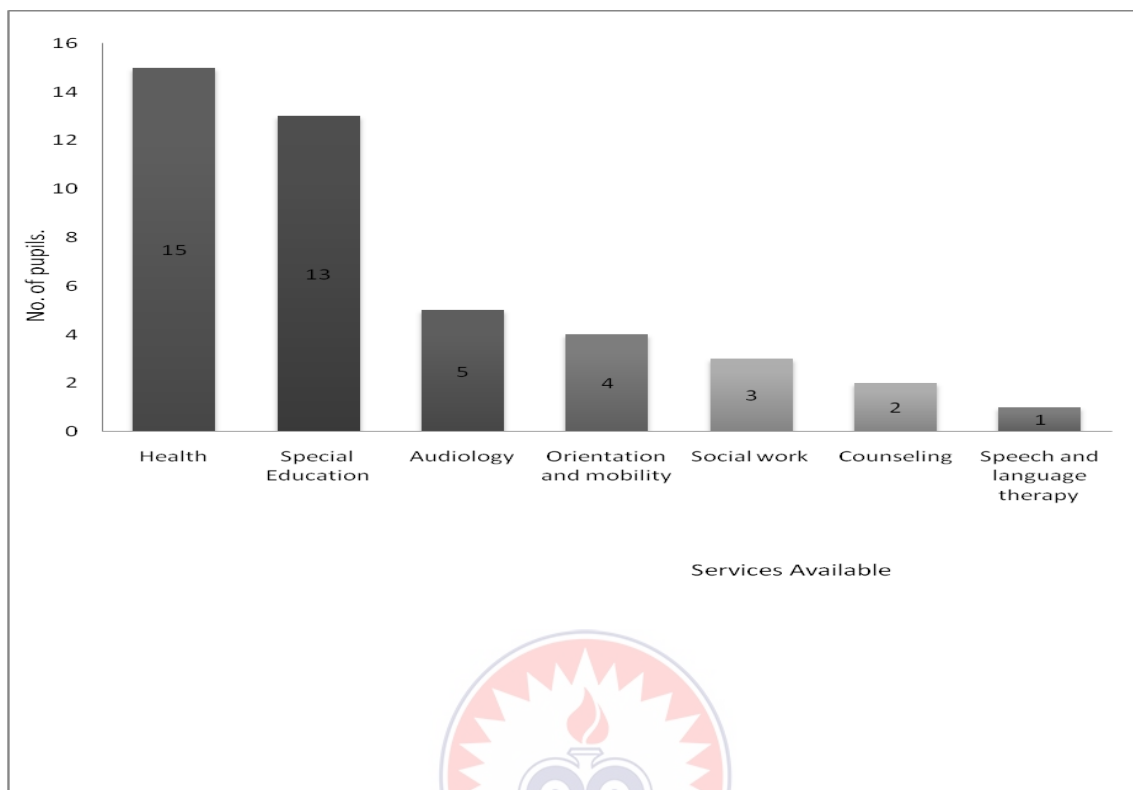
From the findings, 15(75%) of the respondents mentioned health services as the service they received, while 13(65%) added that they received Special Education or itinerant as a support service. Also, 5(25%) received Audiology services. Additionally, 4(20%) stated that they received orientation and mobility training as a support service. Out of the twenty respondents, 3(15%) added that they received social work services. One of the respondent received speech and language therapy as a support service.

From the data collected, it emerged that apart from education and health services which were well provided to pupils with special educational needs in Akatsi District, other related servicewere scantlyprovided.

However, as stated earlier in the literature review, Heward, (1996) stated that, there are several services that are to be delivered for pupils with disabilities before, during and even after school placement. These services include audiology, orientation and mobility, medical services, counseling services and itinerant or special education services. These services are crucial in the lives of pupils with special educational needs.

According to Reynolds and Birch (1977), through the provision of these services, many students with special educational needs need to enroll in their neighborhood schools. This according to them enhances effective monitoring and easy access.

4.3 Research Questions 2: How accessible are these services to special needs children and their parents?

Table 4- Frequency of Accessing Services

SREVICES	FREQUENCY	NUMBER OF PUPILS
EDUCATION	Daily	18
	Only when they are healthy	2
HEALTH	Once every 3 months	4
	Once every month	4
	On regular bases as prescribed	3
	As the service is needed	3
	Once every 6 months	1
AUDIOLOGY	Once in life time	4
	Twice in life time	1
MOBILITY TRAINING	Once a week for 6 months	4
SOCIAL WORK	Twice a year	2
	Twice in life time	1
SPEECH AND LANG THERAPY	Once a month	1
COUNSELING	Twice in life time	1
	Once in life time	1
SPECIAL EDUCATION OR ITINERANT	Once every term	6
	Once every year	4
	Once in life time	3

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In terms of accessibility, 18(90%) of the respondents indicated that they accessed educational services on daily basis: indeed they attended school like any other child in the community. However, 2(10%) of the pupils said they were unable to attend school everyday because of ill health. As a result, they only went to school when they were healthy enough.

Of the 15 pupils who indicated they received health services as a result of their disability, four reported that they received health services ones every three months. Four pupils also said they received this service once every month, three also said they visited health facilities regularly as prescribed. Three pupils however said they attended hospital only when they were indisposed. One pupil again indicated that he received medical attention ones every six months.

The five pupils who received audiology services, four indicated that they had received it once in his life time. One also said that he had received it twice in his life time. In addition, four pupils who received mobility and training services, all of them confirmed that they accessed the service once every month for six month.

Two out of the three pupils that accessed social work services indicated that, they received the service twice a year. However, one indicated that he received the service only twice in their life time. On counselling services, of the two pupils that received the service, one received it once while the other one received it twice. In terms of speech and language the pupil received the service ones a month.

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On the distance to the various service centres, 18(90%) of the pupils said they accessed educational services in their own communities and the distance ranges between 10 to 150 metres from their homes. 2(10%) had to walk a distance of about 2km to their various schools each day. This is because they do not have any school in their community.

All the 13(65%) of the pupils that received special education /peripatetic service indicated that it was school based. On audiology services 3(15%) of the pupils received the service at Accra while the rest 2(10%) received theirs at the University of Education Winneba audiology clinic.

For medical services, pupils indicated that they travel long distances to medical centres such as Akatsi District Hospital, Accra 37 Military Hospital, Kolebu Teaching Hospital, Dzodze St. Anthony Hospital and Sogakope Hospital in order to be catered for.

In terms of mobility and training services conducted for the physically challenged pupils with special educational needs, pupils indicated that the service was received at Abor Mobility Training Centre. Also, it emerged that counseling services were received on school bases. On few occasions however, it was organized by Catholic Secretariat at Akatsi. On speech and language services, pupil's reported that it was conducted for them Accra.

From the findings, it emerged that pupils with special educational needs most often had to travel long distances for related services required. This made accessibility of related services difficult for pupils with special educational needs in the district.

4.4 Research Questions 3: What challenges do pupils with special educational needs face in accessing related services?

This question is to bring out all the problems that pupil with special educational needs face in accessing related services. Leading questions were used as a guide.

Table 5- Challenges in Accessing Related Services

CHALLENGES	NO. OF PUPILS
Financial constraints	18
Unwillingness of parents to take pupils to service centres	13
Access to vehicle	12
Work schedule of parents	9
Difficulty getting access to important places	6
Pupils saw themselves as a burden	5
Pupil are not motivated	5
Look warm attitude on the part of professional	5
Lack of patience and love towards pupils with special educational needs	5
Lack of expertise and equipment at home	5
Punishment for failure	4
What to wore to service centres	3
Difficult mobility drills	3
Difficulty hearing information	3
Calling of names	3
Insufficient support at home	3
Drugs doses pupils off	3
Inadequate support during service delivery	2
Do not face any challenge	2

Financial constrains was identified by 18(90%) of the pupils as a major difficulty which even prevent them from accessing support services on many occasions. Also 13(65%) of the children again said that the unwilling of parents and elders in the family who were to take them to the service centres was also a challenge to them.

Twelve (60%) indicated that getting access to vehicle in their villages to service centres was usually very problematic as some of the places were very far. The work that some of their parents does was identified by 9(45%) of the pupils as constrains which does not gave them the needed time to take their pupils with special educational needs to centres for the support. Six (30%) of the pupils identified difficulty getting access to important places such as schools, hospitals among others for related services as a problem.

 Five (25%) of the pupils were again of the view that difficulties that they faced with their teachers and colleagues in class did not motivated them to go to school. This assertion is in line with Beechham & Knapp, 1999, that, negative attitudes, exclusionary policies, inadequate teacher training, particularly training of all regular teachers to teach children with diverse abilities, inflexible curriculum and assessment procedures, inadequate specialist support staff to assist t teachers of special and regular classes does not enhance special education delivery.

In another development, five (25%) of the pupils added that they saw themselves as burden on their parents as a result found it difficult to even inform them on the need to take them to service centres. Five (25%) of the pupils with special educational needs again identified lack of expertise and equipment to practice at home as their challenge. Also 5(25%) pupils with special educational needs mentioned look warm attitude on the part of professionals who are to provide related services as another challenge.

Five (25%) pupils again identified lack of patience and love towards them by professionals during service delivery. The data also revealed that punishment for failure was a challenge to some 4(20%) of the pupils with special educational needs. Three (15%) of the pupils identified what to wore to centres as a problem.

Another challenge identified by 3(15%) pupils was the difficult nature of mobility training drills. Also, 3(15%) pupils with special educational needs again mentioned punishment meted out to them as a result of poor performance as a problem. Difficulty hearing well, information delivered during service delivery was the challenge mentioned by 3(15%) pupils. In addition, 3(15%) cited the calling of names by "normal" colleagues as a problem.

Three (15%) pupils indicated that, medically, drugs received from medical professionals dosed them off at the time they should be awake. Also 3(15%) pupils indicated they faced a problem of insufficient support at home. Lack of vehicle to come back home after service delivery was mentioned by 2(10%) of the respondents. Also, two (10%) of the pupils recalled lack of support or assistance during service delivery as a challenge. While 2(10%) of them indicated that they had no problem about service delivery.

From the data above, it is obvious that, financial difficulties coupled with look worm attitude on the part of professional service providers and transport in view of the long distances they had to travel to for services were the major challenges Identified. Lack of access to important places was yet another major challenge. This assertion is supported by Bowe (2004), that the design and desire of built environment is a major consideration in serving children with physical disabilities. Whether services are delivered at the home, in a child care centre, or in a public school, the facility should be at a minimum to be accessible and optimally be a barrier–free. The accessible standard applies to existing buildings. The intent is to offer access that is ''reasonable'' and not excessively costly. Unfortunately however, these barriers exist in developing countries.

4.4 Research Questions 4: What are the views of parents about the provision of related services to their children with special educational needs?

The views of parent's, their involvement on service provision and their challenges were collected through question. On how parents support their children in the provision of related services, the following responses were given and represented verbatim.

Whatever I need to provide to make sure my

child is comfortable, I do it(parent A).

All the needs of my child is adequately

provided at all times (parent B).

Anything that must be provided for my child's

up-keep is always provided on time (parent C).

The needs of my daughter are not provided by

anybody, but are provided by me and only me

and I make sure I provide all for her (parent D).

I try to provide money for all the needs of

my child when the need arise (parent E)

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From the data, all the five parents said they support their children by providing their educational, medical and other needs for them. This finding contradicts the earlier speculation that parents of pupils with special educational needs in Akatsi District do not provide the needs of their children. The researcher however acknowledges the fact that some parents actually face challenges in the provision of their children needs.

On parents opinion on support services provided for children with special educational needs, the parents were happy about the support being given their special needs children. This is because they have seen an improvement in the lives of their children. The parents however added that, there was the need for improvement as indicated in their answers presented bellow.

I have seen that something is being done

in that regard but, the government must

do more (parent A).

Though my child is improving, it is not

at the rate of other children in the community
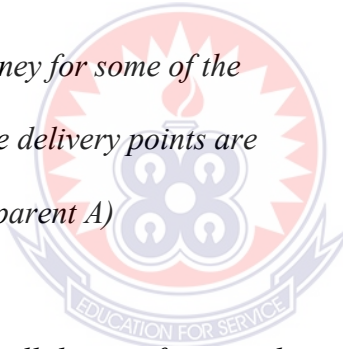
(parent B).

My child is now doing better and I am happy

about it (parent C).

I want my child to improve, and that is all I want

from the teachers (parent D).

The support being given my child is good but

I think there is room for improvement (parent E)

When parents were asked about the challenges they face in the provision of related services, all the parents mentioned financial constraints as their biggest challenge. Their views were also represented verbatim bellow.

It is difficult getting money for some of the

services and the service delivery points are

not in the community (parent A)

Why do I have to travel all the way for something

simple that can be provided here in this community

knowing that we do not have money?(parent B).

Drugs given are very expensive and nothing is

being done about it. There is no money too (parent C).

There is no money to cater for the growing needs

of my child (parent D).

Where to get money to travel long distances for

services and buy expensive drugs is my major

problem. Also, attitude of some service providers

is nothing to write home about (parent E).

From the findings it is evident that, parents support their children in the provision of their medical, educational and other essential needs. Parents were of the opinion that, though, support is being given to their children with special educational needs, there is still room for improvement. On challenges, financial constraints, distance to service delivery points were identified. Parents therefore appealed for support from the government.
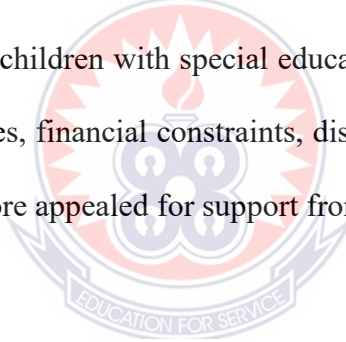
CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATION

5.1 Introduction

This chapter provides a summary of the study, presents information on the conclusions drawn from the study, recommendations and suggestion for further study.

5.2 Summary of the study

The main focus of the study was to find out on services available for pupils with special educational needs in the regular system in the Akatsi District of the Volta Region. The study sought to answer four main research questions, which were all focused on related services for pupils with special educational needs in relation to access, challenges, and parental role in relation to the provision of related services.

The design of the study was a survey and the sample was twenty five which comprised twenty pupils and five of their parents. Random and purposeful sampling technique was employed involving all categories of disabilities. Instruments used for the collection of data were interview and documentation. The interview was semi-structured to enhance effective data collection.

5.3 Summary of Findings

Analyzing the data revealed that, there are a number of pupils with special educational needs in our regular schools in the Akatsi District. These pupils are provided with few services as a way of managing them. It however became obvious that services being provided are not adequate to actually cater for the needs of these pupils. Challenges outlined by both parents and pupils of special educational needs points to the fact that there is still a long way to go in the quest to practice inclusive education.

Though parents and children acknowledge the fact that little is being done in the area of education and health, constrains such as finance, transportation, availability of related services, attitudes of professionals and society among others are hindering their potentials. They therefore call on stakeholders to do more in relation to the provision of related services for pupils with special educational needs in the Akatsi District.

5.4 Conclusion

Based on the findings, the following conclusion was drawn. There are various categories of pupils with special educational needs in our general school system in Akatsi district that need related services to cope and bring out their full potential. Unfortunately however, only few of these related services are received by the pupils and their parents.

Coupled with the problem mentioned above both pupils with special educational needs and their parents are faced with numerous challenges in the area of finance, availability of related services, attitude, inadequate knowledge on the disability law and rights among

others which in one way or the other are detrimental to their overall development and prevent them from bringing out their full potential.

It is therefore obvious that, though, something is being done, there is still much room for improvement. This improvement must be geared towards the provision of related services for pupils with special educational needs in the Akatsi District.

5.5 Recommendation

On the bases of the findings of this research, the following points are suggested for consideration.

- Teachers in the regular schools should be equipped with the necessary skills and attitude needed to manage pupils with special educational needs in their classroom.

- Related service for the pupil with special educational needs must be made available and accessible in the Akatsi District.

- Parents of pupils with special educational needs must be re-oriented on their roles and supported to enable them provide related services for their children.

5.6 Suggestion for future research

Finally, I suggest that further research is conducted on the provision of related services for pupils with special educational needs who are in the general educational systems in other in other Districts of the country.

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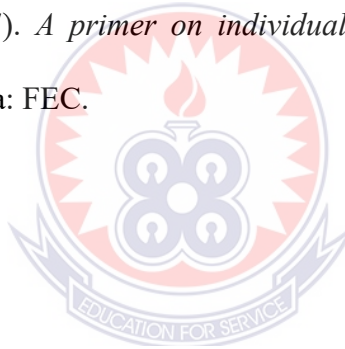
APPENDIXES

AN INTERVIEW GUIDE FOR PUPILS WITH SPECIAL EDUCATION NEEDS.

<u>SECTION – A</u>

AGE -   SEX -   CLASS -

SCHOOL -

TYPE OF DISABILITY -

DATE -   TIME -

<u>SECTION- B</u>

<u>TYPES</u>

- Related services available for pupils with special educational needs.

a. What support services do you get?

b. What other related services do you know of?

ACCESSIBILITY

- Accessibility of related services pupils with special educational needs.

a. How often do you get the service(s)?

b. How far or where do you access your service(s)?

CHALLENGES

- Challenges that pupils with special educational needs face in accessing related services.

a. What difficulties do you face when accessing the service?

DOCUMENTS TO LOOK FOR

- Health records.

- Educational records.

- Social welfare records.

- Audiology records.

- For any other, specify...

AN INTERVIEW GUIDE FOR PARENTS OF CHILDREN WITH SPECIAL

EDUCATIONAL NEEDS.

<u>PARENTAL ROLE</u>

- Role of parents in the provision of related services.

    a. How do you support your child in the provision of related services?

    b. What is your opinion about the services being provided for your ward?

    c. What challenges do you face as a parent in the provision of related services for your child?