

## Editorial

Teachers in special education have long recognised that their role cannot be effective in isolation. Meeting the needs of children with learning difficulties in any meaningful way, makes the concept of a closed, self-sufficient, independent classroom a contradiction in terms. Curricular integration, team-teaching, action research, modified environments and multi-disciplinary team building have all been innovations pioneered in special education. The urgency and variety of special educational needs have made these developments not an option but a necessity.

It is time that teachers in special education began actively seeking ways to share their expertise with their colleagues in mainstream schools. Strategies and approaches which have been consolidated over many years, such as the adaptation of materials for children with intellectual or physical impairments; the application of effective behaviour modification techniques; are all areas of 'specialist' interest which are increasingly required in the domain of ordinary teachers.

Teachers in special schools, and in special classes in ordinary schools, have an enormous wealth of expertise. Unfortunately, isolation from mainstream contact, lack of opportunity and recognition (and sometimes a misplaced modesty) have contributed to the low profile of many outstanding professionals. Happily, recent initiatives by the Irish National Teachers' Organisation Professional Development Programme, and the Department of Education In-Career Development Unit have provided significant opportunities for co-operative learning between teachers in a non-threatening, supportive manner.

The SERC Report (1993) recommended the establishment of 'Special Needs Resource Centres' (possibly in existing special school buildings) to act as a base for regional resource teachers serving children with special needs in ordinary schools, to provide a focus for in-service training, and a place where teachers might view specialised equipment and materials. The 1995 White Paper seems to have endorsed these proposals. It is also envisaged that these centres would be served by an expanded schools psychological service, and would have available also the services of speech therapy and social work personnel in collaboration with the Health Boards. Much is dependent, it would seem, on the emergence of the Local Education Boards/Regional Education Councils to implement and consolidate these plans.

Whatever structures emerge, the success of an effective support service will be contingent on the level of participation and involvement of all teachers of children with special needs. We need to reach out and do our part.

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Editor