

Spina Bifida Children in Ordinary Schools

Despite the lack of resources and information needed to support integration, results from this study indicate very positive attitudes of teachers and classmates towards the child with Spina Bifida in the primary school. Social and emotional benefits to the children were reported though reservations are expressed about academic performance.

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This article summarises a survey which was carried out on teachers in ordinary schools who were teaching spina bifida children. The aim of the investigation was to measure the attitude of teachers to disability, as evidenced by their behaviour in the classroom.

The target population was the total number of spina bifida children attending ordinary schools in Dublin. This figure was estimated to be 25/30 - 15 teachers took part in the investigation which was held during the Spring of 1984.

The Attitudes of Teachers to the Placement

A significant number (10) of teachers were not worried about the placement of spina bifida children in their classes. Each of these teachers had been teaching for at least ten years. Therefore, it can be assumed that professional competence was responsible for such a finding. At the same time, this result illustrates the high motivation displayed by teachers towards a forthcoming placement, and can be interpreted as a positive attitude to spina bifida children.

It would seem that the majority of teachers saw the child's disability as a challenge which they could successfully overcome. Even those respondents who were worried about the placement, cited the child's ability to cope rather than their own professional competence, as being the reason for their anxiety.

More than half (8) of the teachers did not have any previous knowledge of the nature of spina bifida. It appeared that the joint effects of apprehension and limited medical information, led to teachers demanding less from the spina bifida child than his peers. Many teachers also expressed an over simple conception of spina bifida. This in turn, led to hazy and mistaken ideas regarding management of a child with spina bifida.

It was significant that very few respondents realized that spina bifida could be a serious educational disability, as they perceived it merely to be "below the belt" paralysis. Holdsworth and Whitmore (1974) also found evidence of difficulty in maintaining a balance between over-protection and insufficient concern, among teachers of epileptics. Hegarty (1981) observed that over half of the teachers in his survey, described their knowledge of handicap as non-existent or poor. This finding of Hegarty's concurs with the findings in this research where thirteen teachers did not have any professional training in physical handicap. A 1983 Report in Britain also found evidence, that at least half of student teachers, currently being trained, had no specific training with regard to children with special educational needs.

It would appear, that the majority of teachers, in this investigation, had a positive attitude to the placement of spina bifida children in their class.

The Information made available to the Teachers regarding the Placement

Almost all teachers (14), received specific information on the spina bifida child in their class and this information was offered spontaneously. However, there were at least 8 different channels of information, with little or no co-ordination between them.

The central role of parents, in the process of integration, was illustrated by the 100 per cent response to this category. Holdsworth and Withmore(1976) also found that parents were the greatest source of information on epileptic children, attending ordinary schools.

Little or no information was available to teachers through medical channels and this caused concern among all respondents. In fact, the school health service was not aware of placement of spina bifida children.

If integration of handicapped children into ordinary schools is to be successful, the teachers must know the basic facts about the child's condition and be able to discuss problems with the school doctor. The teachers should be in a position to call on the expertise of the educational psychologist when necessary.

Three teachers relied on children themselves for information. This was usually the case with older children. While this channel did provide teachers with the child's view of his disability, it is a most unprofessional manner in which to filter information on spina bifida to the class teacher. Many teachers relied on non-professional channels for their information-2 relied on friends while 4 replied to the "other" category. This finding is a further illustration of the lengths teachers were prepared to go to, often going out of their way, to help them understand the child's problem.

The Teachers' Management of the Disabled Child

Many teachers commented, that the presence of spina bifida children, had led them to query their own attitude to handicap. Other respondents commented that attitudes among other children in the class, had become more positive since the arrival of the spina bifida child. It is significant that these changes in attitude, came about through direct interaction in the classroom.

Hegarty (1981) concurs with the findings of this survey; 87 per cent of teachers, in his investigation, felt that the placement of handicapped pupils in their school, was an appropriate one.

It emerged from the results that all teachers of junior infants, discussed the child's handicap in the presence of the class group. This positive attitude reflected the concern teachers felt for the child to integrate successfully.

A number of respondents teaching older spina bifida children commented, that there was "no need" to discuss the handicap with the class group, as the child was accepted and the other children responded accordingly. This finding establishes the link between positive attitudes to handicap and successful intergration.

The majority of respondents (12) did not feel they have to spend too much time helping the child at the expense of other children in the class. This finding belies the fact that one third of the respondents, lift the child out of a wheelchair. Spina bifida children, because of their immobility, are often overweight and because of the steel calipers attached to their legs, are quite awkward to carry. This problem increases with age and has yet to be monitored fully, as the majority of older children, in this investigation, has progressed to using crutches or were not severely paralysed. Had the children not progressed to crutches then the class teacher would have been presented with greater problems and would have needed help from ancillary staff. Another factor in this finding is, that the more mobile a spina bifida child is,

the more suitable the child is for integration.

Incontinence management did not pose major problems for teachers. In a quarter of the cases (4), parents came into the school to attend to the children during the lunch break. This presented little or no problems for classroom management, as parents and teachers worked together to achieve successful integration.

Parental Attitude to the Child

The schools in this investigation were keenly aware of their role as a support to parents in the management of handicapped children. This was evidenced by the findings that all parents of spina bifida children had met with the class teachers. Indeed, more than half of the teachers and parents (8) meet on a daily basis.

It emerged during the investigation, that many parents had refused a place offered in a special school, preferring the child to be nearer home, especially when a brother or sister was already attending an ordinary school.

A large majority of respondents (12) felt that the mother's attitude to the child was "very sensible". This finding is an important factor in the process of integration. Tew and Lawrence (1973) remark that:

we had the impression that many (mothers of spina bifida children) struggle through illnesses that probably would incapacitate parents without such a dependent child.

The Child's Ability to Integrate

It is significant that while almost all teachers (14) feel that the child is attending the appropriate school at this point in time, less than half (7) think that the child will be able to cope at second level.

One reason for this predicament is the lack of specialist help and advice, which becomes essential as the child grows older and progresses through the school. Another factor is the child's academic performance. While reading levels of the children in this investigation, were generally average - three-quarters of the teachers did not feel the child would benefit from extra teaching in reading - the picture changed dramatically when it came to number work. Three-quarters of the teachers felt that the child was below average in number work and would benefit from extra teaching.

Some teachers made the mistake of taking a less "blunt" approach than usual, in asking for poor work to be redone and tended "not to demand more from the child". Another teacher said she did not ask the child to repeat poor work because she feared "such stress" might precipitate anti-social behaviour, such as vomiting.

There is no doubt, that while integration is a welcome trend, it has to be tempered with professional discretion. In some cases, in the investigation, the teachers' tolerance levels had misled them into accepting a lower level of work, than would have been the case had the child not been disabled.

The problem of academic integration involves the remedial teacher and in turn, the total organization of the school. This factor plays an important part in the social integration of older spina bifida children and has not, to date, received the attention it deserves in the integration debate.

The Social Effects of Integration

This final section, of the questionnaire, dealt with the social and emotional aspect of integration. In general, the findings indicate a very favourable response to ordinary school

integration, on a social level. Teachers perceived this, to be the most successful area of integration, not only from the point of view of the children themselves, but also from the stand-point of their peers and from their own perspective as class teacher.

The respondents indicated, that more than half (9) of the children are very popular with their peers, and have a special friend. A small percentage (3) are teased, but incidence of this is minimal. This finding is significant and suggests a high level of acceptance of the illustrated by their class discussions on disability prepared the way for the absence of teasing.

Summary

The positive attitudes and values of both teachers and class-mates, which were generally held towards the spina bifida child, make them inclined to initiate social relations with the disabled child in their class. This was illustrated, in the results of the survey, by the high level of popularity which the spina bifida child experienced and by the high incidence of special friendships among disabled and able bodied children.

Social skills have certain features, including the need to establish rapport with another child and the need to motivate child and to reduce his anxiety and defensiveness.

It would seem that the reduction in anti-social behaviour in spina bifida children, attending ordinary schools, particularly in the areas of aggression, teasing and anxiety, has come about as a direct result of modelling peer behaviour in the classroom.

Many respondents commented on the lack of attention and poor concentration span among the children, as hindering academic integration. It could be concluded, that the specific training in social skills, which the children observed and imitated in the ordinary school, enabled them to integrate successfully with their peers on a social and emotional level.

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