

8. SPECIAL CHILDREN

You have already studied that the children grow and develop physically, socially and emotionally. All children are ‘unique’ yet similar to one another in most aspects of growth. However, some children are very different from their age-mates that they ‘stand out’. The obvious ‘standing out’ creates problems during the growing periods. Such children have to deal with the normal/usual problems of growth along with all those difficulties that may arise because of being different.

The child’s ability to cope with these problems is limited. The child is unable to deal with the social and emotional problems. This has marked effect on the child’s personal and social development. Such a child needs special attention during the formative years so as to be able to grow to the full potential.

According to Crow and crow “the term typical or exceptional is applied to a trait or to a person possessing the trait if the extent of deviation from the normal possession of that trait is so great that because of it, the individual warrants and receives special attention from his behavior responses and activities are thereby affected”

“One who deviates from what is supposed to be an average in physical, mental, emotional and social characteristics to such an extent that the child requires special educational services to help develop to the maximum capacity.”

I Children with Physical Disabilities :

Physical abnormalities : Such as webbed fingers, hunch back, sixth finger/toe, malformed ear, harelip, cleft palates, face and body birth marks.

Chronical defects : The defects that exist year after year are generally referred to as chronical defects i.e. congenital heart diseases, rheumatism and muscular atrophies.

Types of physical disabilities :

1. Blind and weak eye sighted children :

Vision is a critical tool that children use in obtaining information about the world in which they live. Impairment of vision can lead to partial or total blindness. The children without vision will need special materials and attention to develop fully.

Very often a blind child is not able to compete with the normal one. As a result these children may remain physically and economically dependent to a certain extent. It is possible to educate children with poor sight, total/partial blindness.

Books with big print and desk with proper light are of considerable help to the child with defective

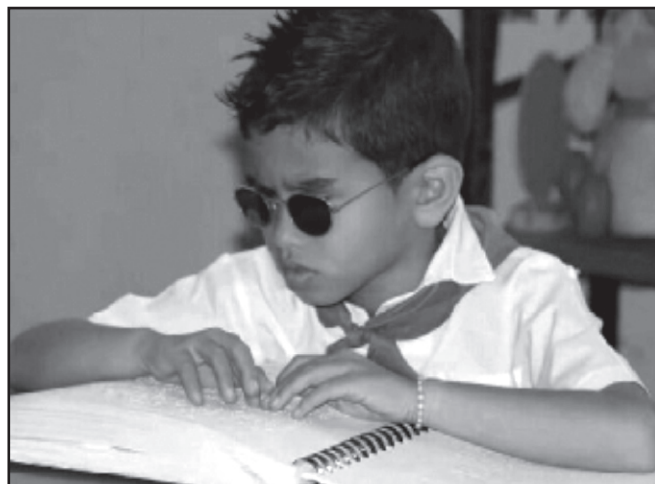


Fig. 8.1 : Braille Method

vision. Green/grey board instead of a blackboard, unglazed paper and use of soft black pencils improve the visibility for such a child. Handicapped children learn better with special equipment under the guidance of special educators. Children with severe defects will need to be educated with special tools. BRAILLE is a system of reading and writing the letters, numbers and words. The basic Braille is a six keyed device like a typewriter. The Braille dots are punched out one at a time from right to left. Children learn to use Braille with ease, once coached properly. Recorded tapes are being used to impart education to the blind. Blind children need to develop listening skills to better their learning.

Special attention is being given to the blind children in the form of education and training. More employment opportunities provided to the blind adults are an assurance of their legal and human rights.

2. Deaf and hard of hearing :

A Deaf child is one who has lost the sense of hearing before learning the language. This means that the child is born without the ability to hear. Such children are often mute and silent. Hard of hearing on the other hand is a defect that is acquired later in life. The child experiences varying degrees of hearing loss. Damage can be (i) congenital or (ii) acquired. The child may be dumb besides being deaf. The speech defects are common among children with hearing impairment. They have difficulty in learning language/vocabulary. It is an enormous challenge to learn to communicate in a language one cannot hear.

Consequently these children are low in intelligence because they are incapable of using available opportunities. Such children have suspicious minds because of lack of coordination between vision and hearing. Educational needs involve child's ability to understand the languages. They learn to communicate through visual and manual means. Oral Method or Lip-Reading is a special way of educating deaf children to identify sounds by watching the lip movement. It is slow method involving a lot of patience for the learner as well as the educator. Manual Method or Sign Language helps the child to communicate with gestures, cues and finger-spellings. Need to be independent is of utmost importance to the



Fig. 8.2 : Sign Language

deaf child. It reduces his/her dependency on parents, and siblings. The ability to be independent makes them important components of the society they live in. Invention of hearing aids have provided the much need relief to the deaf.

3. Crippled children :

A Child with affected limb is not able to perform fully the activities involving the use of bones, muscles and joints. Similar handicap is experienced by children with the missing limb. Such children are known to be orthopedically crippled.

Psychologist defines a child with affected and missing limb "as one who has a defect which causes a deformity or an interference with the normal functioning of bone, muscle or joint." Such orthopedic (bony) conditions may be congenital or acquired. Congenital Deformity can occur due to genetic problems. Pregnancy is a critical period. Foetal formation is adversely affected if the pregnant mother suffers from measles, mumps, jaundice and other severe viral infections. Drug abuse among pregnant mothers may also result in the improper foetal formation of bones, limbs and other important body organs. Acquired Orthopaedic Defects can occur at any stage in life. Polio and bone tuberculosis among small children has long lasting crippling effect on them. Congenital or acquired muscular atrophy (Muscular damage) affects the efficiency of muscular performance. The extent of damage is determined by the severity of the atrophy. Spinal injuries are often responsible for limiting the efficiency of one's motor activities. Accident involving limb amputations result in bone deformities coupled with varying degrees of

incapacitation. Education Needs involve and include activities that require ‘doing’. writing, playing, drawing, painting, knitting and even dancing are some such activities. How can a child with weak/missing limb move from one place to another? Use of stretchers and wheel chair improves the mobility besides boosting the confidence. Have you ever seen a child with a missing hand? Such children have been known to make beautiful paintings by foot/mouth. The environment of these children can be specially designed to promote education and learning among them.

4. Children with language disorder :

When a person is unable to produce speech sounds correctly or fluently, or has problems with his or her voice, then he or she has a speech disorder. Difficulties pronouncing sounds, or articulation disorders, and stuttering are examples of speech disorders. When a person has trouble understanding others (receptive language), or sharing thoughts, ideas, and feelings completely (expressive language), then he or she has a language disorder. A stroke can result in aphasia, or a language disorder. Problems with receptive language skills usually begin before age 4. Some mixed language disorders are caused by a brain injury. These conditions are sometimes misdiagnosed as developmental disorders. Language disorders may occur in children with other developmental problems, autism spectrum disorder, hearing loss, and learning disabilities. A language disorder may also be caused by damage to the central nervous system,



Fig. 8.3 : Crippled Children

which is called aphasia. Speech and language therapy is the best approach to treating this type of language disorder. Counseling, such as talk therapy, is also recommended because of the possibility of related emotional or behavioral problems.

5. Weak children :

Weak children are physically lean thin and nutritionally very feeble. Their work efficiency is very low. Child become weak due to deficiency of nutrients for this period or chronic diseases persist for longer intervals or any physical defect due to congenital diseases. Inefficiency level increases in the absence of proper caring. Such kind of children should not be indulged in exostive sports and other activities. Proper rest be advised inbetween of study hours.

II Children with mental disorder :

Mental retardation is an intellectual disability that appears in children at a tender age. Such children posses a lower-than average intelligence, cognitive ability and social skills. Mentally retarded children suffer from poor impulse control and react to simple situations aggressively. Due to the poor IQ levels, such children are easily agitated and frustrated by complex life events. They may master very basic self-care skills and some communication skills. The symptoms of mental retardation include delays in oral language development, deficits in memory skills, difficulty learning social roles, difficulty with problems solving skills, decreased learning ability or an inability to meet education demands at school, failure to achieve the markers of intellectual development and a lack of social inhibition.

1. **Mental disorder :** Many different systems for organizing the causes of mental retardation can be applied. Sometimes they are divided into four groups: socioeconomic and environmental factors, injuries, infections and toxins, and biological causes. AAMR divide them instead into three groups by time of onset—that is, by when the event or cause first occurred
2. **Mentally retarded :** While signs of mild retardation (i.e., those with IQs of about 52 to 79) may include a lack of curiosity and quiet behavior, signs of severe mental retardation (i.e.,

those with IQs of about 20 to 35) may include infant-like behavior throughout the patient's life, and those with profound mental retardation (i.e., IQs of 19 or below) are likely to have limited motor and communication skills and require lifelong nursing care.

Characteristics of mentally retarded children :

- Delays in reaching or failure to achieve milestones in motor skills development (sitting, crawling, walking)
- Slowness learning to talk or continued difficulties with speech and language skills after starting to talk
- Difficulty with self-help and self-care skills (e.g., getting dressed, washing, and feeding themselves)
- Poor planning or problem solving abilities
- Behavioral and social problems
- Failure to grow intellectually or continued infant-like behavior
- Problems keeping up in school
- Failure to adapt or adjust to new situations
- Difficulty understanding and following social rules
- Some students with mental retardation exhibit an apparent lack of interest in learning or problem-solving tasks
- Students with disabilities, especially those with mental retardation, often have trouble using their new knowledge and skills in settings or situations that differ from the context in which they first learned those skills.
- Students with mental retardation often have trouble attending to relevant features of a learning task and instead may focus on distracting irrelevant stimuli. In addition, individuals with mental retardation often have difficulty sustaining attention to learning tasks.
- The rate at which individuals with mental retardation acquire new knowledge and skills is well below that of typically developing children. Intellectual disability can be distinguished in

many ways from mental illness, such as schizophrenia or depression. Currently, there is no “cure” for an established disability, though with appropriate support and teaching, most individuals can learn to do many things. There are thousands of agencies around the world that provide assistance for people with developmental disabilities. They include state-run, for-profit, and non-profit, privately run agencies. Within one agency there could be departments that include fully staffed residential homes, day rehabilitation programs that approximate schools, workshops wherein people with disabilities can obtain jobs, programs that assist people with developmental disabilities in obtaining jobs in the community, programs that provide support for people with developmental disabilities who have their own apartments, programs that assist them with raising their children, and many more. There are also many agencies and programs for parents of children with developmental disabilities. Beyond that, there are specific programs that people with developmental disabilities can take part in wherein they learn basic life skills. These “goals” may take a much longer amount of time for them to accomplish, but the ultimate goal is independence. This may be anything from independence in tooth brushing to an independent residence. People with developmental disabilities learn throughout their lives and can obtain many new skills even late in life with the help of their families, caregivers, clinicians and the people who coordinate the efforts of all of these people.

III. Gifted children :

Gifted children are, by definition, “Children who give evidence of high performance capability in areas such as intellectual, creative, artistic, leadership capacity, or specific academic fields, and who require services or activities not ordinarily provided by the school in order to fully develop such capabilities.” here are some common characteristics the gifted child may possess. The gifted child may be:

- Self-disciplined, independent, often anti-authoritarian.
- Good sense of humor.
- Able to resist group pressure, a strategy that is developed early

- More adaptable and more adventurous
- Greater tolerance for ambiguity and discomfort
- Little tolerance for boredom
- Preference for complexity, asymmetry, open-endedness
- High in divergent thinking ability
- High in memory, good attention to detail

The main approaches to gifted education are enrichment and acceleration. An enrichment program teaches additional, related material, but keeps the student progressing through the curriculum at the same rate. For example, after the gifted students have completed the normal work in the curriculum, an enrichment program might provide them with additional details about a subject in the curriculum. An acceleration program advances the student through the standard curriculum faster than normal. When gifted students have completed the normal work, they move on to the next subject in the curriculum, even though the rest of the class is still working on the first subject.

IV. Delinquent children :

Juvenile delinquency, also known as “juvenile offending”, is participation in illegal behavior by minors (juveniles, i.e. individuals younger than the statutory age of majority). Most legal systems prescribe specific procedures for dealing with juveniles, such as juvenile detention centers, and courts. Individual psychological or behavioural risk factors that may make offending more likely include low intelligence, impulsiveness or the inability to delay gratification, aggression, lack of empathy, and restlessness.

Family factors that may have an influence on offending include: the level of parental supervision, the way parents discipline a child, particularly harsh punishment, parental conflict or separation, criminal parents or siblings, parental abuse or neglect, and the quality of the parent-child relationship.

V. Problematic children :

Every child has to adjust in his or her environment for the survival. They become problematic when they fail to do so. If their wishes are not fulfilled, not guided properly by family and society,

lack of love, over control and ignorance creates problem in child. Behavioral disorders refers to a category of mental disorders that are characterized by persistent or repetitive behaviors that are uncommon among children of the same age, inappropriate, and disrupt others and activities around the child. Some Common behavior problems of children’s are :

- (1) Thumb sucking
- (2) Nail Biting
- (3) Bed wetting
- (4) Lying
- (5) Stealing
- (6) Stuttering
- (7) Day Dreaming
- (8) Fearful
- (9) Destructive children
- (10) Jealous
- (11) Angry child

If parents, teachers and other people solve the problem of children with proper guidance from the beginning their behavior can be normal in less time.

Important points :

1. In children physical, mental, social and other difference are found due to the abnormalities in heredity and environment.
2. Children who have appropriate quality trait according to the norms are known as normal children whereas children with inappropriate quality traits are known as abnormal or exceptional children.
3. There are different types of normal children . Abnormality can be intellectual, physical, social behavior, adjustment, emotional language etc in one or more area.
4. Physical disability can be from birth or accidental or dangerous disease. Due to these disabilities their growth, development and learning abilities can not be normal.
5. Physical abnormalities such as webbed fingers, hunch back, sixth finger/toe, malformed ear, harelip, cleft palates, face and body birth marks.

With proper education and guidance abnormal person can also be a useful person for society.

6. Mental retardation is an intellectual disability that appears in children at a tender age. Such children possess a lower-than average intelligence, cognitive ability and social skills. Mentally retarded children suffer from poor impulse control and react to simple situations aggressively.
7. Mental disability can be due to heredity, birth issues, long term malnutrition, or an accident.
8. Mentally disabled are unable to work or help themselves. They are cared and secured as small children.
9. Physical and mentally disabled children should be treated as socially useful person.
10. Children with the IQ of more than 130-140 are known as genius children.
11. If parents, teachers and other people solve the problem of children with proper guidance from the beginning their behavior can be normal in less time.

Questions :

1. Choose the correct answer for the following questions :
 - (i) Children with inappropriate quality traits are known as :
 - (a) Normal children (b) Crippled children
 - (c) Abnormal children (d) Mentally disabled
 - (ii) Physical disability can be due to
 - (a) Adventitious (b) Accidental
 - (c) Due to disease (d) All of above
 - (iii) Educating the mentally disabled children priority should be given to:
 - (a) Mental activities (b) Physical activities
 - (c) Stress (d) None of above
 - (iii) Children deprived in mental abilities are known as :
 - (a) Weak (b) Strong
 - (c) Brave (d) Mentally challenged

- (v) IQ of mentally challenged children is below.
 - (a) 70-75 (b) 90-95
 - (c) 95-100 (d) 105-110
2. Fill in the blanks :
 - (i) By proper..... and abnormal children can be socially useful member.
 - (ii) Blind children can be given..... education in the school.
 - (iii) Children who are unable to hear and speak are known as.....
 - (iv) Due to malnutrition, long term disease or physical defect children can be.....
 - (v) Mentally challenged children are..... to help themselves and others.
 - (vi) To develop interest in mentally challenged person and..... education should be given.
 - (vii) IQ of genius children is more than.....
3. Define exceptional children.
4. Comment on :
 - (a) Problematic child
 - (b) Delinquent child
 - (c) Genius child
5. Write down the causes of physical and mental disability.
6. How does a mentally challenged child can be socially useful person. Explain with example.
7. There is a cripple child in your neighborhood. How will you behave with him. Discuss it in class with help of teacher.

Answers :

1. (i) c (ii) d (iii) b (iv) d (v) a
2. (i) Education, training (ii) Braille
(iii) deaf and dumb (iv) weak
(v) unable (vi) music, drawing
(vii) 130-140