

Models of Inclusive Education for Students with Special Needs

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Abstract: The call for inclusive education is to ensure that every learner is accorded with expected care, assistance, motivation among others in ensuring that the learners become useful to society. Several major models of inclusion (including the medical and social models) have been proposed in the context of inclusion of persons with disability. The medical model of inclusion posits that disability problem fundamentally dwell with the individual and health provider's duty is to resolve the problem, however, the social model imply that people with disabilities accomplish their lives in a social structure that is complex and typified by threats and opportunities arising from resilience, resources and systems. It is worth noting that to achieve inclusive educational goals, we should consider how best to implement the medical and social models of inclusion.

INTRODUCTION

In every institution of human learning, learners are usually of different type. According to Tomlinson^[1], the inevitability of children with special needs demands that the educational process should be planned in a way to foster effective learning and overall development of students. Florian^[2] stressed that engagement of professionals on the most preferable way of organizing education that will transform the learning abilities and skills of the special students has been on the discussion. Accordingly, Hardy and Woodcock^[3] stated that the socio-economic and political structure are key players in determining the effectiveness of inclusive education. On the other hand, Hansen^[4] was of the opinion that the design of inclusive education is dependent on national policy on education. Reacting, OECD added that the educational system of any given society is influenced by

the environmental norms (culture). Thus, efforts in planning, designing and developing inclusive education should be prioritized in all continent of the earth. UNESCO^[5] reported that the Netherlands is among the first country to start and formalize inclusive education in her educational system.

INCLUSIVE EDUCATION

According to Mitchell^[6], inclusive education is the type of education which accommodates all students especially students with special needs. Meijer^[7] defined inclusive education as any type of education designed to improve learning and social skills of students with special needs. Meijer buttressing further added that inclusive education can excel easily in a good or friendly environment with frequent and positive feedback, supportiveness, quality time for learning and conducive

learning condition for interactive teaching and learning. Collaborating, Ryan and Deci^[8] opined that the environment of inclusive learning should encourage students to make choice, participatory audience and enhancing individual competency. According to Dyson and Millward^[9], restructuring of the learning environment will fast-track the accommodation of all learning irrespective of learning differences. Considering the immeasurable importance of inclusive education, UNESCO^[5] outlined the following procedures for execution of inclusive learning: educational policy development of any country should give room for equal participation, there should flexibility of curriculum development in order to address the future needs of the people; facilitators should be trained to be tolerant and show love to all the learners disregarding learning difficulty and communities and families should be actively involved both in financial, moral and otherwise.

MODELS OF INCLUSION

The attainment of inclusive educational objectives may be jeopardized if inclusive education is delivered without models. According to Griffith *et al.*^[10] knowledge, feeling, skills and dispositions are components of the models of inclusive education. The scholars restated that the models of inclusive education encompass:

- Phase 1-D: creating an avenue for caring and friendliness
- Phase 2-D: establishing a ground where students can easily understand their feeling and individual differences
- Phase 3-D: creating an enabling environment for skill acquisition and other intervention programmes

The model of inclusive education tries to create enabling environment where students show caring and friendliness to one another, providing them with activities that will make them achieve their feeling while third on the assisting them to develop a skill that will facilitate self-development. According to Choltharnont^[11], models of inclusive education involve an inclusive learning guideline which promotes equal participation of community, students and a conducive environment for teaching and learning. Choltharnont also developed an inclusive model called SEAT (S for students: academic support should be given to students irrespective disability or ability, E for environment: that is, students with special needs should be provided least restricted and conducive environment, A for activities: meaning that inclusive education should not end in the classroom but rather accommodate external and internal learning for the sound development of emotional, physical and social aspects of

the learner while T stands for tools; meaning that all special learning apparatus should be provided to students in an inclusive education and/or classroom setting).

Collaboration model of inclusion was also said to be effective means of promoting inclusive education for students with special needs^[12]. According to Virajchai^[12], collaboration model is based on family, organization and community involvement in providing students with special needs all the needed facilities for adequate learning. The author added that inclusive education should include community-based rehabilitation and be class-oriented, emphasis equal education for all, adequate instructional materials for teaching and learning and ensure that the disabled is rehabilitated. Inclusive education according to Agbenyega^[13] should involve restructuring and reconsidering cum organization of curriculum for the provision and allotting of needed resources for equal educational opportunity for all. Avramidis *et al.*^[14] asserted that inclusive education gives favourable conditions for actualizing the goals of education for all. In another development, APACP Model of inclusive was said to be effective, interactive and fastest way of achieving inclusive education for students with special needs. This model advocates for sharing of collective ideas regardless of learning difficulty. Multilevel need and sustainability inclusive model was also championed to ensure that education is provided to everybody based on an individual's needs and should be sustained^[12].

Furthermore, it interesting to understand that there are many models of inclusive education, however, more concern has been given to the medical and social models of inclusion. The medical model centres on biological and psychological disorders. It as well identifies student's weakness and strength for the purpose of effective training and education^[15]. The authors further noted that the medical model of inclusive education gives sound rehabilitation and return hope to individuals with different impairments. The authors buttressing further pointed out that the medical model of inclusive education doesn't think or concentrate on how the society may change rather on how individuals with disabilities could fit into the society. Medical inclusion traces the handicapping to the bearer and as a result of the individual's handicapping, the person only need medical intervention on adequate skill in order to gain adjustment to the society^[16]. Stressing further, Pisha and Coyne^[16] noted that medical model of inclusion has more educational weight when considered on the line of teaching practice where sensory stimulation is need. Corroborating, Tejeda-Delgado^[17] stated that medical inclusion focuses of the problem rather than the individual's need. Griffith *et al.*^[10] asserted that in medical inclusion, the child remains the centre of discussion and every possible effort is geared towards ensuring that the child is transformed and integrated to the social environ

activities. Deducing from the literature, the medical model of inclusive education offers disabled persons the opportunity of diagnosis than treating on assumption; it tries to understand the relationship between biological factors and organic disorder and it allows the disabled persons to understand that their emotions can only be treated better by themselves^[18]. However, it neglects other professional or family members who may have beautiful contribution on transformation of the child.

Accordingly, Rieser and Mason^[15] articulated the relevance of medical and social model through comparison of the two models. To the authors, medical inclusion is centered on ascertaining the faulty of a child, diagnosis, give name to result, assesses and monitor situation from time to time. The authors added that medical model has the assumption that society does not change and therefore suspends every other activities and focus on the child till the child gets well and get integrated as needed while social inclusive gives value to the child's needs and strengths of the child is determined by self and others; identify learning obstacles and provide solution; designing of programme based on outcomes; availability of resources, experts and families engagement; maintaining of relationships among others are central in this model. Bickel and Bickel^[19] asserted that all form of inclusion education transforms the individual. To the authors, the process is achieved because others and the individual are fully welcomed.

Social model of inclusion is one the most essential models of inclusion^[20]. Social model of inclusion works faster in transforming the mind of the family, child and experts who will be involved in providing needed services to challenged person in ensuring that the individual gains societal adaptability. Social model addresses the problem and the child's need; recognizes the role of other professionals and it also sees family as an important institution that cannot be left out in the child's transformation. In sum, the medical model of inclusion posits that disability problem fundamentally resides with the individual and the providers' duty is to resolve the problem^[20]. However, the social model imply that people with disabilities accomplish their lives in a social structure that is complex and typified by threats and opportunities arising from resilience, resources and systems; the model proposes that such person's participation in society and their quality of life is affected both by environment and their physical or mental status^[20].

CONCLUSION

Inclusive education ensures that every learner is accorded with expected care, assistance, motivation

among others in ensuring that the learners becomes useful to the society. In order to achieve inclusive education goals, attention must be paid to how best to implement medical and social model of inclusion.

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