

# Inclusive education theory and practice: What does this mean for paediatricians?

Geoff Lindsay

## Abstract

Inclusive education has become the dominant approach to providing for children and young people with special educational needs (SEN) and disabilities, not only in the UK but internationally. However, this general term, inclusive education, is not a simple description of the educational provision. On the contrary, children and young people with SEN are a highly heterogeneous subgroup of the school (and pre-school, college and university) population and their education needs are varied. In this article I seek to provide a wider understanding of the nature of SEN; the legal and professional frameworks in which we work; the research evidence relevant to both the conception of SEN and provision needed to meet needs; and hence the background necessary for paediatricians to be aware of when assessing and making recommendations about individual children and young people.

**Keywords** diagnosis; disagreement resolution; inclusive education; needs led assessment; special educational needs; tribunal

## Why inclusive education? Rights and efficacy

Historically, the approach to special educational needs and disability (SEND) was driven by the concept of handicap, and segregation into special schools; e.g. schools for the 'deaf', for the 'educationally subnormal'. The Warnock Committee's report in 1978 was the first comprehensive review of special education and was the foundation, both conceptually and in shaping the law, for the present system in England and Wales. Warnock challenged the notion of a dichotomy between handicapped and non-handicapped children, arguing instead for a recognition of a continuum of 'special educational needs', which became the term we continue to use. The report noted single handicap provision ignored the evidence of large scale epidemiological research, such as the Isle of Wight Study, which showed many children had two, three or more areas of difficulty. For example, children with hearing impairment may have significant language difficulties and also associated behavioural problems. Hence the Warnock report stressed the importance of going beyond a 1-1 model (e.g. if deaf - school for the deaf), to a more refined model based on the nature of special educational *needs*, their relative severity, both the specific needs of an individual and relative to typically developing children. There was also a recognition that a

range of provision was needed, which provided a match to different children's combinations of needs.

In addition, Warnock identified that special schools were not necessarily, as generally believed by parents and mainstream teachers, islands of specialised knowledge and skills. Indeed, only about a quarter of their teachers had specialist qualifications. The Committee also stressed the important role of parents, in their knowledge and experience of their child. This underlined their importance in contributing to, and informing the assessment process. Furthermore, there was a build-up of concern that segregated provision did not necessarily lead to a better education. Also, by removing these children from society, special schools could limit or even impair their human rights, for example by restricting or removing their access to qualifications. Furthermore, society as a whole could suffer as typically developing children did not have the opportunity to develop with those with SEN or a disability.

## Legislation

Inclusive education was greatly stimulated by the Warnock report (although the term used was 'integration') and subsequent legislation and practice may be seen as developing and refining the foundation of the recommendations. In the 40 years since there have been major conceptual and legislative changes in our approach to children with SEN and disabilities in England and Wales (with similar changes in Scotland and Northern Ireland, and indeed other countries) leading to greater involvement of parents as partners and young people themselves. To fully conceptualise where we are now it is helpful to understand the historical context.

The Education Act 1981, was the first comprehensive legislation for SEN; there had been earlier acts which addressed different disabilities. The concept of special educational needs became central, with a stress away from using disability labels as the drivers. Statutory assessments requiring educational, psychological and medical advice were initiated. Parents were to be partners, including requesting assessments and contributing their own 'advice' to the statutory assessment. Annual reviews were introduced, based on the recognition that needs might change over time, and the primacy of inclusion as the general approach to educational provision was stressed.

The Education Act 1996 introduced special educational needs coordinators (SENCOs) in every school, the first Code of Practice and the Special Educational Needs and Disability Tribunal (SENDIST), now the First Tier Tribunal (Special Educational Needs and Disability) to address appeals by parents concerned about the system, e.g. the provision made, or not made, to meet their child's needs.

The Children & Families Act 2014, the most recent major legislation, replaced Statements of Special Educational Needs by Education, Health and Care (EHC) plans, partly to achieve a greater joined up system of assessment, thereby improving efficiency and cost effectiveness and limiting the demand on parents and their child. The coverage increased to 0–25 years; young people are more involved in the system of assessing and deciding about how to meet their needs; and all local authorities (LAs) have been required to set out the 'local offer' for children and young people with SEN and keep this under review. In order to

**Geoff Lindsay** BSc MEd (Ed Psych) PhD is Director of the Centre for Educational Development Appraisal and Research (CEDAR) at the University of Warwick, Coventry, UK. Conflict of interest: none declared.

improve the appeal system, with numbers increasing steadily year on year, multi-faceted disagreement resolution was to be set up in each LA, including mediation before any request for appeal to the Tribunal might proceed.

### Prevalence and variations

There are major differences not just in overall prevalence of different types of SEN; prevalence also varies, with the type of SEN, gender, age and ethnicity. Of particular note is the very high increase over recent years of children with a statement/EHC plan for whom ASD is their primary need.

Until recently children with SEN could be categorised in terms of three levels of severity: those at school action, when schools addressed their SEN from their own resources; school action plus, where outside professionals such as a speech and language therapist (SLT) or educational psychologist (EP) was called in to assist; or with a statement. This system has now been reduced to two levels: school support, effectively combining the first two categories, and EHC plan.

The proportion of children with a statement or EHC plan has stayed stable for 10 years (2007-17) at 2.8% whereas the proportion considered to have SEN but below a statement or EHC plan increased until 2010 and has then reduced from 2010 to 2016, from about 21% to 14.4%. This suggests that schools are identifying a substantially lower proportion of children with SEN, about a third less of those categorised as school support. With respect to the latest (2017) statistics: boys are more likely to have SEN: 4.0% boys v 1.6% girls statement/EHC plan; 14.6% v 8.1% school support. Poverty is also a strong factor: 26.6% of pupils with SEN are eligible for free school meals compared to 11.8% of pupils who are not eligible. And so is having English as an additional language (EAL): however children with EAL are *less* likely to have a statement or EHC plan: 2.3% of those with EAL compared with 2.9% of pupils whose first language is English. However, these data on SEN hide the different trajectories for different SEN categories as shown in Figure 1 (2010–2017): note the increase for speech, language and communication needs (SLCN), the increase for autism spectrum disorder (ASD) but a decline for moderate learning difficulties (MLD). The relative

trajectory for ASD is even greater if only those children with a statement/EHC plan are considered (19%–27%).

There are also substantial variations by age for different SEN categories. Figure 2 shows that over reception to year 11 (Y11) there were different trajectories for these four example categories: behavioural, emotional and social difficulties (BESD) increased from reception to year 11; MLD increased to Y5 and then declined; specific learning difficulties (SpLD) increased to Y5, plateaued until Y8 and then declined; and speech, language and communication needs (SLCN) reduced from reception to Y7 and then reduced at a slower rate to Y11. Furthermore, the relative proportions for each category varied.

These statistics raise important issues with regard to both the nature of SEN and also of the system of assessment and provision. Furthermore, there are substantial variations in these statistics between LAs, as shown by our own research for children with SLCN or ASD. Differences are also found when ethnicity, for example, is taken into account. For example, there is substantial under-representation of children with ASD of a Pakistani or Bangladeshi heritage compared with White British, and this pattern differs substantially by LA.

### Types of provision

The original driver for inclusive education was a concern to stop, or at least limit, the segregation of children with SEN into separate special schools, some of which were residential, limiting even further the children's contact with typically developing children. With respect to policy, the movement to develop inclusive education as the main approach to provision has been successful, although recently in England and Wales there has been a slowing down or halting of the decrease in the percentage of children in residential schools. Furthermore, for many the aim was not just mainstream school placement but *local* school placement.

The notion of mainstream school has become more complex as the school system has become more varied, with academies and free schools; parent preference may result in children from a primary school attending one of a large number of secondary schools, especially in London and to a lesser extent other areas of the country. Comprehensivisation has not resulted in

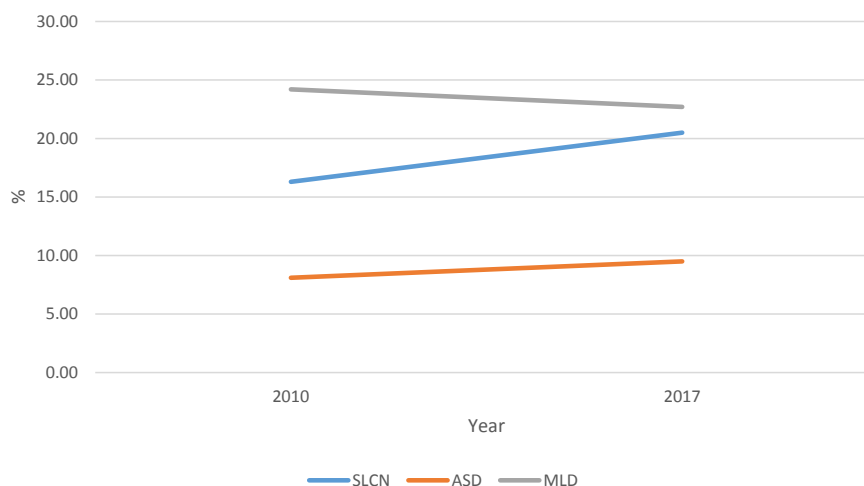


Figure 1 Percentage of pupils with MLD, SLCN and ASD 2010 v 2017.

Download English Version:

<https://daneshyari.com/en/article/8813063>

Download Persian Version:

<https://daneshyari.com/article/8813063>

[Daneshyari.com](https://daneshyari.com)