

Meeting Special Needs in Early Childhood Education Module 1

ECE 225 (Meeting Special Educational Needs in Early Childhood) Module 1

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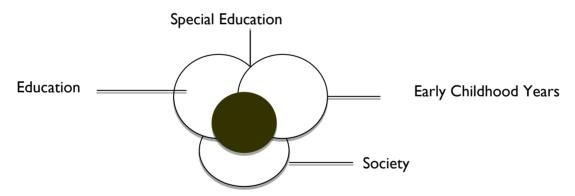
Module I Society, Education and Early Childhood Years

Introduction

The relationship between society, education and challenges posed in early childhood years is no doubt the essence of continuity, sustainability and development projection in every setting. From a conservative perspective, society is seen as the totality of the environment. On the other hand, a society is the contemporary totality of the world we live in, thanks to Satellite Technology.

Worldwide, education is the process of bequeathing age long societal achievement to the upcoming generation and improving of the future aspirations of society. Since no human existence can begin without the early childhood period, the quality of the period thus dictates fundamental issues in societal integration and self-actualization. The period demands considerable attention. This should be without prejudice to circumstances of birth, physical development, intellectual capacity and talent, challenges posed by society and other related human factors.

The scenario above show the justification for the place of meeting special education challenges in early childhood. Consisted in the module therefore is the critical examination of the interrelationship between society, education and the delicately precocious years of the early childhood.



Key Interaction of Society Education and Early Childhood

Four units are considered in the area namely:

Unit I The Concept of Education and Society

Unit 2 Early Childhood Years and Special Education Needs

Unit 3 Causes of Special Education Needs in Early Childhood

Unit 4 Types of Special Educational Needs in Early Childhood

Unit I The Concept of Education and Society

1.0 Introduction

Education draws its values from a given society, so it can have essential correlate to the individual benefiting from its content. In this unit, interplay of these two factors will be examined in such a way that a two-way relationship can be drawn: how education affects society and vice- versa, the place of education in building both the individual component making up a society and institutions serving as agents of society.

2.0 Objectives

At the end of this unit, you should be able to:

- state the meaning of society
- define education
- state the roles of education in society
- identify the institutions inherent in society
- relate how the societal forces influence education.

3.0 Main Content

3.1 The Concept of Society

Broadly, it is the totality framework in which human beings engage in social interactions. From another sense, it is regarded as a social environment comprising the aggregate of people as they influence and shape this or that person's behaviour. It can be regarded as both the micro and macro unit to which a child is born. There are interactions within a given society and across societies.

3.2 Dynamics of Society

This refers to the new born, the father, mother or the family, community, nation, continent and peoples as the case may be. Society has structure, beliefs, practices, government and language

3.3 Definition of Education

Education can be seen as a process of learning aimed at equipping people with knowledge and skills. One should be equipped, sufficiently enough as to be able to contribute to the functioning of society. By equipping the newborn with skills, new ideas, guided orientation, approaches and expertise to cope with life, education (as a mental process) exerts its impact on the individual's rational, critical and reasonable responses to life in general, to emergencies, choices or options (Ojo 1999).

Education is a component which no misfortune can depress, no crime can destroy, no enemy can eliminate. Education, in solitude is a solace, and in society an ornament. It

hastens vice, it guides virtue, and it gives grade and government to genius. Without education, man is a splendid slave and reasoning savage. The simple truth is that education empowers, emboldens, refines, civilizes, enlightens, enriches and gives confidence to the new born in the environment.

3.4 The Role of Education in Society

In identifying the roles of education in society, it is important to observe that there exist two types of education: the traditional education and the formal education. While the former is mostly family based, the latter is structured mostly within the school system.

Two principal roles of education are:

- Passing on knowledge from one generation to another
- Providing people with skills that enables them to analyse, diagnose and thus question.

Self-Assessment Exercise

Compose a group of four and discuss what it means not to be educated and the level of education e.g. quality and scope of group members.

4.0 Conclusion

In this unit, you have brought under the search light of what constitute society, the place of education in society and the gain of society from the concept of education transmission, self-actualization and participation. In other words, we have examined how an individual from the state of a harmless baby can learn up to a stage of influencing society.

5.0 Summary

In this Unit, you learnt that:

- Society is the totality of frame of influence
- Society can be immediate or global, without restriction due to satellite communication
- Society influences individual and vice-versa
- There are institutions in society which are based on beliefs, values, norms and practices
- Education process is the vehicle of societal values transfer
- Educations also equip a child with skills used in the analysis, diagnosis and questioning of age-long practices and improving on them.

6.0 Self-Assessment Exercise

Identify 15 areas of the influences of segments of society on Education.

7.0 References/Further Reading

Hills, P.J. (Ed.). (1982). A Dictionary of Education. London: Routledge & Kegan Paul p. 137.

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Unit 2 Early Childhood Years and Special Education Needs

1.0 Introduction

It is important to have an overview of what the period of early childhood covers. Often ignored is the period of pregnancy which serves as the bedrock for intellectual, psychosocial, physical, health, visual and hearing growth and development. In Nigeria, generally, the record of infantile and maternal mortality and morbidity reveals an alarming trend. Ogundipe (2006) citing the figures from Federal Ministry of Health states: Maternal mortality is between 339 and 1,716 per 100,000.

In 2004, Society of Gynecologists of Nigeria (SOGON) established that not less than 3,000 women die in every 100,000, UNFPAS 2002 state of the world population shows that Nigeria ranks among the highest in maternal mortality in sub-Saharan Africa. Essentially, therefore a mother and her child is at risk in Nigeria. If pregnancy results in death of mother, the possibility that remnant of effects will be passed over to the child is very high. This results in children developing exceptionally, thereby affecting them neurologically, psycho-motor wise and in general well-being. Since learning begins at conception, intervention should also be instituted from then.

In this Unit, we shall look into the foundations of early childhood period and education, explore what is special about special education and create an overlap of these two fundamentals to this course.

2.0 Objectives

At the end of this unit, you should be able to:

- state the importance of early childhood.
- identify the scope of early childhood
- list characteristics of a child in early childhood
- trace the trends of Early Childhood Education in Nigeria
- define Special Education Needs
- relate the effects of special Education Needs in Early Childhood.

3.0 Main Content

3.1 Early Childhood in Perspective

The period of early childhood symbolizes the foundation for life-long education. From conception to six years old, children undergo rapid mental and physical development and must be encouraged to learn.

This view was not made common until the '60s' when Hunt (1961) and Bloom (1964) in their works gave impetus to a new conception of the possibility of early childhood

education as a social instrument. The studies then raised fundamental question of how early and how comprehensive should education at the level be? View expressed here has led world into the establishment of daycare centres, both formally and otherwise in the community. Generally, the view of John Locke, a philosopher that an infant is a blank slate (Tabula rasa) upon which experiences can be written to support the education commencing as early as possible, even at conception.

In Nigeria, Agusiobo (2004) established that the early childhood education of the child start from home with the mother as the child's first educator and care giver. This role they have done to the best of their abilities. Others who are involved are cousins, siblings and people in the community. Usually, they care, tell stories and folktales. As they grow and develops in traditional societies, culture and customs, children utilized toys and copied skills from relevant arts and crafts in their environment.

However, with the increasing urbanization, the traditional systems are gradually being replaced by formalized systems where babies are domiciled as early as 7.00am till as late as 5.00pm. Here, it is expected that some forms of education would have taken place. The care should cover every need of the child; no matter how special is the demand.

3.2 Definition of Special Education

We have defined education in Unit I in relation to this course and the question at this level will entail answering the questions, what is special about special Education? And who are those regarded as having special needs. Essentially, a special need is a term that has been proposed recently. In the context of education, it refers to children who, because of either intrinsic (that is, within the child) or extrinsic (environment) limitations require some modification or adaptation of their educational programme to achieve their maximum potential. Thus, this definition encompasses two major groups, which often overlap: children who are termed handicapped and those whose early socialization environments may be less supportive and stimulating.

We must differentiate between the term "handicapped" and a "disability". A handicap is the societal imposed limitation whereas disability refers to an objective condition such as blindness, cleft palate etc. The focus at hand is that the more a society respond to the handicaps emanating from disabling condition, the more progress can be made educationally.

Self-Assessment Exercise

Discuss the challenges emanating from the definition of handicap and disability in the care of a child in the wheelchair who has no other intellectual limitation.

3.3 Implications of Special Education Needs in Early

Childhood

Since early childhood years are regarded as the fundamental period for far-reaching human developments a limitation caused by any of the causative factor (intrinsic or extrinsic) would definitely result in limited development. With the knowledge of the importance of early childhood, it has posed a great challenge also to teachers of children with special needs in early childhood. Regardless of the external surroundings, the environment of a child with a

disability is by definition depriving. If there is sensory deprivation, he cannot take in the best and if it is the case of hearing or language, which is the core to greater cognitive exploration, they are equally impaired. The essence of the early education therefore is to make up for the deprivations: cognitively, psycho-motor, socially, material wise, personnel wise and try to build the best out of them.

4.0 Conclusion

The concept of early childhood education and special needs being present is in a continuous. It could be envisaged from mild to severe and very acute. The focus is that the teacher should be able to consider the challenges emanating from the special needs and provide a "make up" for them. This process would be in terms of:

- · understanding the child
- the nature of limitations
- the gap in knowledge on the side of caregiver/teacher
- resource available at meeting the needs.

It is however the right of the child to be developed educationally no matter the causes of his limitation.

5.0 Summary

In this unit, you have learnt:

- the importance of early childhood years and education
- the definition of special education
- the place of early childhood years in responding to the special needs of the child.

6.0 Self-Assessment Exercise

Observe a child of between ages 4 and 9 which you are suspicious of being special for I hour. Write report of your observation. The report should not be less than 2 pages (single spacing). Do not interview the teacher or parent. Your report should be based only on your personal observation.

7.0 References/Further Reading

Agusiobo, B.C. (2004). Early Childhood Education in Nigeria: The State of the Art and Future Projections. Being a paper presented at the 8th Annual Public Lecture of the Uduogie Ivowi Education Foundation, Held at NERDC, Conference Centre, Ikeja December. 2004.

Bloom, S. (1964). Stability and Change in Human Characteristics. New York: John Wiley and Sons Inc.

Hunt, J. McV (1961). Intelligence and Experience. New York: The Ronald Press Company.

Unit 3 Causes of Special Education Needs in Early Childhood

1.0 Introduction

The essence of the content in this module is not to make a diagnostician or a physician out of caregivers and teachers that relates with children during the early childhood years. The underlying factor is to give an overview in the causative factors of special need. It is expected that part of the responsibilities of the teacher include prevention through continuous education of one's immediate environment. On the other hand, education is meant to enlighten and empower through additional information or issues.

From experience also, it is envisaged that present consumers of the content would have come in contact with causes related to issues discussed in this section. Although the given sub-heads are considered, it should be noted that virtually all the segments congenital, Peri-Postnatal causes, nutritional and health-related causes are related at one point of human development or the other.

Contemporarily, these causes are features observable on the pages of newspapers, on policy intervention strategies and even at the level of immediate community endeavour. What will be required ultimately is for individuals to relate the knowledge put forward in this unit into what we see around us regularly.

2.0 Objectives

At the end of this unit, you should be able to:

- list five causes of special needs in early childhood
- differentiate the factors causing special education needs in early childhood
- identify traits/behaviour associated with each of the factors discussed
- list issues resulting in special education needs in at least four Nigerian newspapers
- prepare brief advice for expectant parent/community on how to prevent five often causes of special education needs in early childhood.

3.0 Main Content

3.1 Causes for Needs for Special Education

Congenital Causes

These are factors that lead to dissatisfy of child before birth. In the process of conception, there are interplay of endowment contributed by the father and the mother. The product of these two forces can usually determine the presence of one disability or the other in a child. This factor is sometimes referred to as hereditary.

Genetic blueprint has revealed that some needs can be traced to what is prevalent in the family tree. For instance, congenital hearing impairment could re-occur in either the immediate generation or following generation. This case goes for most cases of special needs with congenital origin.

Chromosomal Aberration

This is a situation where there is an extra chromosome in the G group of chromosomes that are connected to chromosome 21. This can lead to Downs Syndrome, a common case of mental challenge. Clinical features associated with the syndrome are:

- Short broad head
- Round, flat face
- Small flat note
- Slanted eyes, with speckling of the iris common
- Small, angular, low-set ears
- Mouth usually held open
- Tongue fissured and usually protruding
- Short, broad neck
- Short (compared to other body features) feet, hands and fingers.
- Shorter than average at birth and at maturity
- Articulation often faulty
- Genitals underdeveloped in males, normal to overdeveloped in females.
- Muscle tone poor, especially at birth
- Heart problems and unusual tendency to have respiratory infections.

Often, age of mother has very high correlate with incidence of Down's syndrome.

Blood Incompatibility (Rh-Factor)

When the fetus has an Rh-positive blood type and the mother is Rh-negative a sensitization may occur between the mother and the unborn child. The Rh-negative mother forms an Antigen Rh-positive infant. When this occurs the red-blood cells of the fetus are destroyed.

Remedies for Rh problems includes: assure amount of Oxygen during and after labor, induction of early labor, injections of Rh hasten to prevent antibody formation, transfusions of blood to the newborn baby and fetal blood transfusions before birth.

Other causes which are congenital in origin include: Maternal Rubella (A case of measles in the first trimester of pregnancy)

- Effect of high fever during pregnancy, drug, sexually transmitted diseases (STD) Syphilis
- Pregnancy induced hypertension e.g. Pre-eclempsia
- Other physical assault to the mother during pregnancy, especially the first trimester.
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Peri-Postnatal Causes

These are factors emanating from the period of birth process or early months after birth. They include:

- Prolonged labour
- Abandonment of the newborn baby in the blood without care after delivery
- Jaundice at birth without any required treatment.
- Damage to the brain with the use of forceps (though this is becoming an obsolete practice) in most health facility even in developing nations.
- Cephalous pelvic disproportion (mother's pelvic is too small for the baby's head frequent in adolescents and circumcised women)
- Umbilical cord wrapped around neck
- Inadequate nutrition after birth e.g. absence of breast milk.

Nutritional Causes

The relevance of adequate diet during pregnancy and early childhood years cannot be overemphasized, because of the role it plays in building both cognitive, psycho-motor and general resistance against diseases. Lack of good nutritional food leads to problem in young children especially when there is metabolic disorders such as:

Phenylketonuria: This is a genetic defect resulting in inability of the body to metabolise a sugar found in milk. It is characterized by approximately 90 percent of all children with PKU having blond hair, blue eyes and fair sensitive skin.

Lack of lodine in the diet: This could result in marginal hearing deficiencies in children in early childhood. Generally, nutritional inadequacies can lead to stunted growth or marasmus such victims may not be responsive to their environment or experience acute reduction in interaction. The case of Kwashiorkor is a serious condition with high death rate. It originates from the intake of a diet hat is not deficient in calories but is relatively deficient in protein. The child's feet and legs, and sometimes the hands, and face are swollen, and the hair turns reddish. It is generally characterized by anemia, growth failure and a break down in immunity.

3.4 General Health Related Causes

Health as defined by the World Health Organization (WHO) is a complete state of physical, mental and psychological fitness and not necessarily only the absence of disease. The measurement of health related causes of disability in a child can therefore be traced to several factors underlying state of health. These may include:

- Health status of mother/child e.g. HIV Status
- Age of mother
- Low immunity against diseases e.g. measles, polio, Diphtheria and Peruses, BCG and other infectious diseases.

- Prolonged labour
- Premature birth: resulting in complications in adaptive behaviour and development in early childhood
- Physical conglomeration:
 - I. Cerebral Palsy
 - 2. Cleft palate
 - 3. Hydrocephaly
 - 4. Microcephaly
 - 5. Cretinism
 - Serological dispositions resulting from maternal abandonment, rejection and discrimination. Others may include experiences of the child from interactions with significant others.

4.0 Conclusion

The causative factors show that the period of maternal health should be supported throughout a woman's life to ensure her wellbeing while pregnant and while nursing the baby. It also includes the ability to deliver safely and care for a healthy newborn. It is equally true that we might never get to a stage when all the causes of special needs in children can be surmounted, it is vital to equip community at large with required reorientation, education and acquisition of necessary skills to prevent what could lead to the problems in children within the community.

The role of this unit is essentially to sensitize awareness in the areas of causes and subsequently empower the learners as possible counselors as the case may be. There are issues we find in our contemporary society on daily basis with far reaching consequences on the child, on both short and long term basis.

5.0 Summary

In this unit, you have learnt about factors which predispose a child to special needs. The factors dealt in details on:

- Hereditary
- Adventitious acquisition of special needs as a Peri and Postnatal occurrences
- Nutritional and metabolic issues were considered as prevalent in the case of PKU, lodine deficiency, Kwashiorkor, Marasmus and Cretinism
- General Health related factors dealt extensively on the health of the baby, mother and the environment of the child at birth
- Psychological factor which are essentially the preparation of the society to appropriately respond to the psychological requirements of a child without being abandoned.

6.0 Self-Assessment Exercise

Prepare a 3-page report of special Education related causes reported in five (5) Nigerian Newspapers. Cite page (s), issue, Name of Newspaper.

7.0 References/Further Reading

Aina T.A.; Etta, F.E. & Zeltlin, M.F. (Eds). (1992). *Childhood Development and Nutrition in Nigeria*: A Textbook for Education, Health and social Service Professionals (1st ed). Nigeria: FGN and UNICEF.

Biehler, B.F. (1981) Child Development Boston: Houghton Miffhn Company.

Gearheart, B.R. (1980). Special Education for the '80s' St. Louis: The C.V. Mosby Company.

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Unit 4 Types of Special Educational Needs in Early Childhood

1.0 Introduction

The umbrella covering special education needs in early childhood is very broad. Gearheart (1980) treated the needs from four categories.

Sensory impairments

- Education of children and youth who are hearing impaired
- Education of children and youth who are newly impaired.

Learning Disabilities and speech/language disorders

- Education of children and youth with learning disabilities
- Education of children and youth with speech and language disorders

Other handicapping conditions

- Education and training of the mentally retarded
- Education of children and youth who are emotionally disturbed
- Education of children and youth who have physical or health impairment or multiple handicapped

The most overlooked exceptional students. This category includes the gifted, talented and creative. Safford (1981) on his own adopted different perspective also results in four categories as stated below:

Sensory and communication handicaps

- Speech and language disorders
- Hearing impairments
- Visual impairments

Mild and moderate educational handicaps

- Mental retardation
- Specific learning disabilities
- Emotional and behavioral disorders.

Physical disabilities and severe or multiple handicaps

- Physical and neurological handicaps
- Severe or multiple handicap.

Gifted and talented children

Dunn (1978) examined the same needs from a broader perspective covering:

Children with General Learning Disabilities.

- I. Moderate and severe
- 2. Mild:
- children with major specific learning disabilities
- children with superior cognitive abilities
- children with behavioral disabilities
- children with oral communication disabilities
- children with hearing disabilities
- children with visual disabilities
- children with major specific learning disabilities.

The presentations above are reflections of the times, thinking and how humane and right-friendly the categorization of special needs has gone overtime. Dunn, represents the earliest thinking while Safford represent a not too far classification. However, it is important to appreciate that human dignity is gradually taking forefront in even categorizing persons with special needs. The derogatory clauses are giving way to more encouraging words. This line of thinking will be reflected in all units that will be studied in this course, especially in this unit.

2.0 Objectives

At the end of this unit, you should be able to:

- identify the types of special education needs in early childhood
- relate characteristics of special education needs with types
- categories the types of special education needs
- state the reason for the inclusion of a type as special
- relate the types to early childhood development and education.

3.0 Main Content

3.1 An Overview

The approach adapted in classifying special needs into their types follows an attempt to look at needs from developmental perspectives only and not from the perspective of definite (impairment, disability) or social limitation as in a handicap. Development is common to all. Targeting development can be encouraging rather than creating daily awareness with reference to one's disability neglecting the abilities inherent or yet to be discovered. A perception of negativity if planted from early childhood has a way of limiting a

child. The orientation is to see the limitation as "challenges" which both an individual/society would have to surmount.

They are no problems.

Disability: Refers to an objective condition, such as blindness, poliomyelitis or deafness. This is an undeniable occurrence in a child but not a name.

Handicap: is the response of society to a disabling condition. The society is the entity which can be handicapped. To an individual if an enabling environment is created, such a person will perform.

Challenges: Refers to what has to be done to enable an individual with special needs meet his educational, social and expected responsibility of developing society.

The Challenged: It refers to those who exhibit one form of disability or another, no matter how temporal or lasting the challenges are. These terms will feature prominently in this material. You will need a clear understanding so as not to be confused.

3.2 Intellectual

The inclusion is based on the fact that the quality of intellectual capacity cannot be met without considering other factors, adjustment and training for teachers.

There are three sub-groups discussed here. They include:

I. The Gifted and Talented Child

Who are they? The gifted child is very difficult to define, both in Nigeria and the developed country. Overtime, the developed countries have been able to collate factors prevalent in a child to categories his possible classification. They have considered intelligence, creativity and performance on task. In Nigeria, the effort has been more on educational setting. Since learning involves the production of novelty as well as remembering course content, the Nigerian child with very extra ordinary performance relative to age, purity of examination process and general developmental records are selected.

On the overall, a gifted child will show some rapid development and create new things (inventions) above his age group.

Also, such children are vast in convergent thinking, defined essentially in terms of logical reasoning ability; the ability to learn the "correct answer". Divergent thinking on the other hand, is thinking that may pursue many possible course and conceivable reach, any number of different answers. It is this capacity to generate many ideas (Fluency) of many kinds (flexibility) some of which may be highly uncommon (originality) that has been identified as the hall mark of creativity. A child should be followed up when these traits are observed during the early childhood years.

2. General Intellectual Challenges

This term is used to cover children who in the past are called the "idiot", "mentally retarded" and with "moderate and severe learning disabilities".

The case is such that due to case of general underdevelopment of the brain, which is the sole operator of human and animal adaptive behaviour, such children are not able to respond appropriately to learning from environment. They are the hydrophilic. Down's syndrome and severe genetic assault during development stage in life – mostly at conception. The effect on learning is general: speech, psycho-motor, perceptional, reading, writing and even general adaptive daily living skills.

3. Specific Learning Challenges

This is always with reference to disparity in general learning orientation in early childhood which cannot be traced to loss of sight, hearing, mental, brain damage or physical conglomeration. Specific learning challenges are likely to present in early childhood as confusion of laterality, inability to follow direction, loss of memory, delayed response to specific issues and sometimes poor use of hand/finger and poor perception.

At this stage, the expectation is that follow-up can be instituted to delve into the 'content' of the child. It is not meant to stigmatised or label. The idea of dyslexia is a common word used with children with specific learning challenges.

3.3 Speech, Language and Hearing

The grouping is done to depict the relationship between what we hear, say and use as language (writing, reading and communication).

Speech Challenges: Speech is defined as the ability to communicate through the use of spoken words.

Challenges are evident in:

- Articulatory disorders
- Challenges of phonation
- Fluency
- stuttering
- cluttering.

Language Challenges

- Delayed language
- Aphasia
- Nonstandard English/Mother tongue interference
- Learning disabilities (not always included).

Hearing Challenges

The term refers to a very general one that includes all degrees of hearing loss from very mild to perform. In addition to hearing loss, other factors are also considered. The outcome of <u>all</u> these considerations result in the types listed below.

- Conductive loss: Resulting from a reduction of conduction of sound into the inner sense organ. This type of loss relates to problem/challenges in the outer and middle ear.
- Sensori-neural loses. The inner ear is the basic source of problem/challenge.
- A deaf person is one whose hearing disability is so great that he or she cannot understand speech through use of the ear alone, with or without a hearing aid.
- A hard-of-hearing person is one whose hearing disability makes it difficult to hear but can with or without the use of hearing aid, understand speech.
- Prelingual deafness.
- Postlingual deafness (adventitious deafness). The essence is to consider the age before the loss. This will determine whether it is pre or post.

3.4 Visual

Refractive Errors

- Myopia (short sightedness)
- Hyperopia (far sightedness)
- Astigmatism uneasiness in the service of the cornea, leading to blur vision.

Lens abnormalities e.g. cataracts. This may be present during early childhood development, even though it is known to fully manifest in adults, children may have congenital cataract and be born with the situation.

Retinal effects: results in weak/disorganized sensation being transmitted to the brain and greatly reduced the ability of the brain to interpret.

Eye Muscle control problem: Damage to the optic nerve which carries sensation to the seeing part of the brain.

Any of the types mentioned above can result in total blindness in early childhood. It is important for teachers working with children in early childhood to be aware.

3.5 Behavioural and Emotional

In this segment, rather than listing types, lists of generalized behaviour are listed to assist in appreciating the needs of behavioral and emotional challenges in early childhood.

- Avoids eye contact with others
- Avoids eye contact
- Behaviour that is irritable
- Chronically disobedient
- Covert or covert hostility
- Disorganized in routine tasks or spatial orientation
- Displays temper tantrums

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- Disturbances of sleep or eating habit
- Emotional isolation
- Exaggerated or bizarre mannerisms
- Frequent and/persistent verbalization about suicide
- Frequent illnesses
- Frequent unexplained crying
- Frustration level is low
- Hyperactivity
- Inability to complete tasks
- Inappropriate verbalization and noises
- Inattentive
- Inconsistent in friendships
- Lethargic
- Out of touch with reality
- Physical withdrawal from touch
- Physically aggressive to others or property
- Rapid and severe changes of mood
- Refuses responsibility for actions
- Requires constant reassurance
- Repetitive behaviour
- Seeks attention
- Self-mutilating
- Severe reaction to change in schedule
- Sexual deviations
- Truant
- Unexplainable "accidents"
- Unexplained academic decline
- Unmotivated
- Unreasonable and/or unexplained fears
- Verbally aggressive
- Verbally disruptive.

3.6 Physical and Health Related

There are children with non-sensory physical disabilities or health related needs that require the use of modified or adapted settings, curriculum equipment to permit maximal social and educational development.

These include children with:

- Amputations
- Asthma
- Cerebral Palsy
- Epilepsy
- Diabetes
- Muscular dystrophy
- Poliomyelitis
- Spinal Bifida
- Left handedness (included due to cultural barrier observed among most people in Nigeria).

4.0 Conclusion

The study content in this unit is overview of all the types of special needs that could be discovered. Efforts are geared towards putting the Nigerian perspective into the categorization and down loading the types. It is most delightful that the content is aimed at stimulating inquisitiveness in those that study it.

5.0 Summary

In this unit you learnt that:

- Special education needs can be categories along the area of development
- Limitations and disabilities are challenges awaiting to be overcome
- Developments focus on challenges of:
 - I. Intelligence and adaptive behaviour
 - 2. Visual
 - 3. Speech Language and hearing
 - 4. Emotion and Behavioral
 - 5. Physical and health related issues.
 - The factors highlighted are essentially to equip you as teachers and counselor to meet the challenges you come in contact in children with special needs in early childhood.

6.0 Self-Assessment Exercise

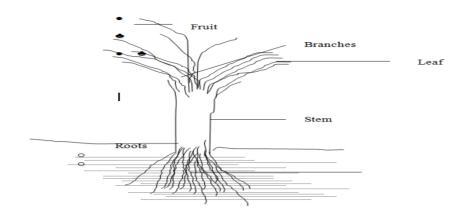
Select one type of Special Educational need in early Childhood, highlighting your perceived role in their development.

7.0 References/Further Reading

Dunn, L.M. (1973). (Ed.). Exceptional Children in the Schools: Special Education in Transition New York: Holt, Rinehart and Winston Inc.

Gearheart, B.R. (1980). Special Education for the '80s. St Louis: The C.V. Mosby Company.

Safford, P.L. (1978). Teaching Young Children with Special Needs. St Louis: The C.V. Mosby Company.



Illustrations: FUNDAMENTALS OF SPECIAL EDUCATION IN

EARLY CHILDHOOD

KEYS:

Roots: Causes

Tissues of the Root: Brain

Soil type and Nutrient: Health-Related Issues

Soil Nutrient and Fertilizer: Health Habit and Education

Branches of the tree: Types of Special Needs

Development:

Intellectual, Phyco-motor, Behavioral

Leaves and Fruits: Emotional, Hearing, Visual etc.

Early Childhood Years - Sun (A Permanent Influence).