

CHAPTER

V

FINDINGS,
DISCUSSIONS AND
SUGGESTIONS

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5.1 Introduction

Education is vital and needful in developing an equitable and just society. It empowers an individual economically and socially, helps face the world confidently and positively develops a personality. Education helps in transforming an individual into a good citizen, thereby contributing to national development. Primary education lays the foundation for an individual to climb the higher education ladder to the maximum extent. International bodies have stressed upon Universalization of Elementary Education. The government of India passed the historical Act, Right to Education, 2009, that guarantees free and compulsory education for every child of age group six to fourteen years in an appropriate environment. Every child in the Act includes children with disabilities too. Children with disabilities are the most neglected group among the disadvantaged section. The only way to empower them is to provide education along with financial support.

The government of India has passed legislation and brought out policies exclusively for persons with disabilities to uplift them socially and make them economically strong and bring them into mainstream society. The necessary Acts are Rights of Persons with Disabilities Act 2016 emphasizes the reservation for persons with disabilities in employment and providing education in an appropriate environment. The National Trust Act 1999 aims to enable and empower persons with disabilities to live independently and as fully as possible within and close to the community to which they belong. It helps to promote measures for the care and protection of persons with disabilities in the event of the death of their parent or guardian. The Rehabilitation Council of India Act, 1992 introduced the minimum standards of education to children with disabilities, it also recommended recognizing qualifications granted by universities in India for rehabilitation professionals.

Despite the efforts shown by the Government of India, we could not bring the children with disabilities to schools in desired numbers, which indicates that there is a lacuna in the implementation of the Acts and policies. The successful implementation of the Acts or policies depends upon the various stakeholders like administrators, teachers, parents of children with disabilities. Administrators include Block resource

centre coordinators, block resource persons, block inclusive education resource teachers, cluster resource persons and Headmaster. By looking at the scenario of education of children with disabilities, the following research question emerges.

1. What is the present status of Children with Disabilities in Inclusive Education of Bangalore Urban and Bangalore Rural Districts in Karnataka?
2. To what extent the goals of Children with Disabilities in Inclusive Education have been attained.
3. What is the general perception of administrators, Teachers and Parents concerning Children with Disabilities in Inclusive Education?

5.2 Statement of the Problem

A Study on Children with Disabilities in Inclusive Education in the Elementary Schools of Bangalore Urban and Rural Districts

5.3 Objectives of the Study

1. To study the policies and provisions of Karnataka State Government for Children with Disabilities in Inclusive Education with respect to
 - Objective
 - Target Group
 - Management Structure
 - Monitoring Mechanism
2. To study the enrollment and retention of Children with Disabilities with respect to
 - Gender
 - Class
 - Type of Disability
 - Level of Disability
 - Location
3. To study the problems faced by administrators in implementing the policies and provisions for Children with Disabilities in Inclusive Education.
4. To study the opinion of Teachers towards the policies and provisions for Children with Disabilities in Inclusive Education.

5. To study the opinion of Parents of Children with Disabilities towards the policies and programmes for Children with Disabilities in Inclusive Education with respect to
- Benefits received
 - Problems faced

5.4 Explanation of the terms

- Inclusive Education:** Education provided to Children with Disabilities in the regular school and in a common classroom along with Children without Disabilities.
- Elementary School:** The schools consisting of Standard I to Standard VIII with children with disabilities enrolled in the year 2017-18 and managed by the Government of Karnataka.
- Administrators:** Administrators working in the state of Karnataka for implementation of Act, Policies and provisions for children with disabilities like Block Resource Centre Coordinator, Block Resource Persons, Cluster Resource Persons, Block Inclusive Education Resource Teacher and Head Masters/Mistress.
- Teachers:** Teachers having a diploma in Education or Bachelor's degree in education and working as Teachers in government Elementary schools in the year 2017-18.
- Parents:** Parents or Guardians of Children with Disabilities who are studying in Government Elementary school.
- Children with Disabilities:** Children with Disabilities include Children having one or more disabilities like Visual Impairment, Speech disorder, Cerebral Palsy, Hearing Impairment, Locomotor Disability, Mental Retardation, Multiple Disabilities, Learning Disabilities, Autism and other disabilities specified in the Rights to Person with Disabilities Act 2016.

5.5 Operationalization of the terms

- Enrollment:** Children with disabilities enrolled in government elementary school from Class I to Class VIII in the year 2017-18 managed by the state of Karnataka.
- Retention:** children with disabilities enrolled in government elementary school from the year 2010-11 to 2017-18 irrespective of the Class the CwD joined at the time of admission.

- ❑ **Type of Disability:** Children having one or more disabilities like Visual Impairment, Speech disorder, Cerebral Palsy, Hearing Impairment, Locomotor Disability, Mental Retardation, Multiple Disabilities, Learning Disabilities, Autism and other disabilities specified in the Rights to Person with Disabilities Act 2016.
- ❑ **Level of Disability:** Children with disabilities with mild, moderate, severe and profound disabilities as certified by the recognized doctors by the government of Karnataka.
- ❑ **Location:** Children with disabilities are categorized into three groups based on the location of the enrolled school, Bangalore North district, Bangalore South district and Bangalore Rural district.

5.6 Delimitation of the Study

Elementary schools consisting of standard I to VIII with Children with disabilities enrolled in the year 2017-18 managed by the Karnataka state government were included in the present study. The private elementary schools were not included in the present study.

5.7 Methodology

This study has defined objectives and was conducted by survey method. The present research intends to study the children with disabilities in inclusive education in the elementary schools of Bangalore urban and rural districts. Further, the survey method was employed to study the enrollment and retention of children with disabilities, problems faced by administrators such as BRCC, BIERT, BRP, CRP, HM in implementing the policies and provisions for children with disabilities in inclusive education, opinion of teachers towards policies and provisions for children with Disabilities, opinion of parents of children with disabilities towards the policies and provisions with regards to benefits received and problems faced while receiving this benefits.

5.8 Population

In 1986, the Bangalore district was split into two urban Bangalore and rural Bangalore. Two deputy commissioners head the district administration for rural and urban Bangalore. They play a central role in coordinating the implementation of developmental programs.

For academic governance, the Karnataka state is divided into four divisions, namely Bangalore, Mysore, Dharwad, Gulbarga (Kalaburagi). Bangalore Divisions has 11 districts, Mysore division has eight districts, Dharwad division has nine districts and Gulbarga has six districts. In the Bangalore division, Bangalore urban district is divided into Bangalore north district and Bangalore south district. Bangalore rural district remains unchanged.

5.9 Sample

For the present study, the researcher adopted Multi-stage sampling. The detailed description of multi-stage sampling is as follows:

Stage 1: Out of 13 blocks from three districts – Bangalore North, Bangalore South and Bangalore Rural, three blocks from each district – Bangalore North- I, Bangalore South – II and Doddaballapur were selected randomly as samples for the present study.

Stage 2: Twenty per cent of the schools were selected randomly from each block. Samples consist of Administrators, teachers and parents of children with disabilities.

5.9.1 Sample: Administrators

The sample was drawn from the identified population through a multi-stage sampling technique. Accordingly, using the 'paper slip and container technique', 20% of schools were selected randomly from each block in the second stage of sampling. All the Administrators in these schools available on the school's visit were chosen as a sample of the study.

5.9.2 Sample: Teachers

The sample comprised fifty schools. In these schools, all the teachers were the sample of the present study and there were 354 teachers in the sample.

5.9.3 Sample: Parents of Children with Disabilities

The sample comprised fifty schools. In each school, one parent of children with disabilities was selected as a sample of the present study.

5.10 Tools

The present study required both quantitative and qualitative data on enrollment and retention of children with disabilities in elementary schools, problems faced by the administrators in implementing the policies and provisions for children with disabilities, opinion of teachers working in children with disabilities admitted schools towards the policies and provisions and lastly, problems faced by the parents of children with disabilities while receiving benefits. Accordingly, the following tools were constructed and validated by the investigator for the collection of valid and reliable data to fulfill the requirements of the present study. Information Schedule, semi-structured interview for administrators and parents of children with disabilities and Opinionnaire for teachers were the tools and techniques used in the study.

5.10.1 Document Analysis

The researcher has analyzed the various documents, Policies and reports of the Karnataka state government for children with disabilities in inclusive education. Most of the provisions were drawn from the Act, such as the Persons with Disabilities Act 1995, National Trust Act, 1999 and Rehabilitation Council of India Act 1992. In 2019, the Government of Karnataka enacted a rule called "Karnataka State Rights of Persons with Disabilities Rules, 2019; this rule was made based on the Act, Rights of Persons with Disabilities Act, 2016. Karnataka government implemented the policies and provisions related to the education of children with disabilities through Sarva Shiksha Abhiyan, Karnataka.

5.10.2 Information Schedule

Information schedules were developed to collect the data regarding enrollment and retention of children with disabilities in elementary schools. Information was collected from the academic year 2010-2011 to 2017-2018 for eight years. Information schedule consisted of questions related to the Name, Age, Gender of children with disabilities, Type of disability, Reason for disability (accidental/from birth), Level of disability, Year and the class in which the children with disabilities took admission and standard in which the children with disabilities was presently studying.

5.10.3 Semi-Structured Interview schedule for Administrators

The semi-structured interview schedule was developed to collect information from the administrators like Block Resource Centre coordinator, Block Inclusive Education Resource Teachers, Block Resource Person, Cluster Resource Person, Head Master/Mistress. The researcher has identified important provisions for children with disabilities at the elementary level, such as

- Access to Education
- The disability-friendly infrastructure of the school
- Inclusive Education training programs
- Scholarships
- Escort and Transport facilities
- Aids and Appliances
- Books & Uniforms
- Medical camps

Responsibility for implementing identified provisions was entrusted to administrators. While implementing these provisions, administrators come across various problems. The administrators were selected based on their preparedness to share the difficulties faced while implementing these provisions.

5.10.4 Semi-Structured Interview for Parents of Children with Disabilities

Parents of children with disabilities are entitled to receive the benefits mentioned in the policies. As per the identified important provisions by the researcher, it was also the responsibility of the Parents to provide accessibility to the quality education for children with disabilities, provide education in infrastructural disability-friendly setup, attend an inclusive training program conducted by the education department, receive the benefits such as scholarships, escort & transport facilities, aids & appliances, Books & Uniforms and take the child to Medical camps. The parents were selected based on their preparedness to share their experience in receiving benefits for children with disabilities and problems faced while receiving these benefits.

5.10.5 Opinionnaire for Teachers

The Opinionnaire was developed to collect information from the teachers teaching children with disabilities in inclusive education. The Opinionnaire had different

dimensions related to the teaching-learning process and other provisions for children with disabilities, such as

- ❑ Resource Room
- ❑ Including Children with Disabilities in a general classroom
- ❑ School Infrastructure
- ❑ Inclusive Education Training Programme
- ❑ Scholarships
- ❑ Escort and Transport facilities
- ❑ Aids and Appliances
- ❑ Books and Uniforms
- ❑ Medical camp

5.11 Data Collection

All the HMs, teachers, BIERTs, BRPs, BRCCs, CRPs and parents of children with disabilities constituted the population of the present work. Accordingly, the samples were selected based on the multi-stage sampling method. The investigator visited the sampled schools and administrators' offices to study the children with disabilities in inclusive education at the elementary level through various documents, information schedules, semi-structured interviews and Opinionnaire. The data collection was done in the year 2017-2018. The information schedule was developed to get the data related to enrollment and retention for eight years from the academic year 2010-2011 to 2017-2018. Schools were supposed to maintain the record of each child with disability separately. The investigator personally visited the school and obtained the data from the school record related to the Name, Age, Gender of children with disabilities, Type of disability, Reason for disability (accidental/from birth), Level of disability, Year and class in which the children with disabilities took admission, standard in which the children with disabilities was presently studying. Investigator developed separate semi-structured interview schedules for administrators like Block Resource Centre coordinator, Block Inclusive Education Resource Teachers, Block Resource Person, Cluster Resource Person, Head Master/Mistress as per the roles and responsibilities and personally collected the data by visiting their offices. The semi-structured interview schedule was prepared based on the eight essential provisions for children with disabilities as mentioned in the Acts and policies. A semi-structured schedule developed for parents of children with disabilities was regarding benefits accrued and

problems faced while receiving the benefits. Investigator collected data from the parents of children with disabilities when they brought their child to medical camp, conducted blockwise by the Education department. Investigator developed Opinionnaire for teachers and administered it personally by visiting the sampled schools. Questions were prepared based on the provisions for children with disabilities. The data were both qualitative and quantitative. The investigator had maintained personal notes as per requirement, which helped in day-to-day analysis. Based on this analysis, simultaneously, the investigator prepared semi structured interview schedule to probe into the depth of the state.

5.12 Data Analysis

Documents analysis was done based on the existing reports, policies, Acts brought out by the government of Karnataka and identified the essential provisions available for children with disabilities. The factual information collected through objective two and Opinionnaire administered on teachers through objective four was analyzed quantitatively using frequency and percentage analysis. Information obtained through a semi-structured interview schedule was qualitatively analyzed by following two-stage:

In the first stage, the following qualitative data analysis technique (a) Data reduction, (b) Data display, (c) conclusion drawing and verification were used.

In the second stage, qualitative content analysis technique (a) summarising (b) explicating (c) structuring were used.

The conclusive findings were drawn based on data obtained on information schedules, semi-structured interview schedules and Opinionnaire from administrators, teachers and parents of children with disabilities of the present study.

5.13 Major Findings

5.13.1 Analysis of Policies and provisions of Karnataka State Government for Children with Disabilities in Inclusive Education

According to the Department for the Empowerment of Differently Abled and Senior Citizens, Government of Karnataka, the following Acts and Rules have been existing in the state of Karnataka along with Acts passed by the Government of India.

- ❑ Karnataka State Rights of Persons with Disabilities Rules 2019
- ❑ Karnataka State Policy on Disability 2007

- ❑ Karnataka Mental Health Rules 2012

5.13.1.1 Karnataka State Rights of Persons with Disabilities Rules 2019

Department of Primary and Secondary Education and the Department of Empowerment of Differently Abled and Senior Citizens entrusted the responsibility to ensure the availability of Special Educators or Teachers in adequate number. In every institution, Training in Braille, Sign language and other special needs be given adequate emphasis. The scholarships for students at primary to higher education should be given based on the principles of gender equality to encourage girls/women to access education.

5.13.1.2 Karnataka State Policy on Disability

- ❑ Prevention and early detection of disabilities: The policy provides guidelines to Government Departments to coordinate and make concerted efforts to survey, investigate and research the causes of disabilities since prevention goes a long way in controlling the occurrence and elimination of disabilities. The Health Department should monitor corrective surgeries and encourage orthopedic surgeons to undertake the same at the District hospitals.
- ❑ Education: The Government should ensure that every child with disabilities get access to free education until the attainment of eighteen years of age, as it was mandated in the Persons with Disabilities Act. The Education department should promote inclusive education in an appropriate environment for children with disabilities. The appropriate departments should take steps to modify the syllabus, especially for children with disabilities and restructure the curriculum to facilitate learning among the visually and hearing impaired. The appropriate government should also provide free uniforms and book schemes for children with disabilities studying through class 10th. The appropriate Government Department should ensure a barrier-free environment in all educational institutions.

5.13.1.3 Karnataka Mental Health Rules, 2012

The important objectives were to constitute the Karnataka Mental Health Authority Body, to specify guidelines for Working of Karnataka Mental Health Authority Body, to authorize the Deputy Commissioners of the districts in granting license for establishment and maintenance of psychiatric hospitals and other psychiatric institutions in the districts of the state and to provide criteria for the classification of

Psychiatric hospitals and nursing homes and minimum facilities for treatment of inpatients.

5.13.2 Enrollment and Retention of Children with Disabilities

5.13.2.1 Enrollment of Children with Disabilities

Concerning GENDER: Enrollment of male children with disabilities was higher than the enrollment of female children with disabilities in the year 2017-18.

Concerning CLASS: Cent per cent enrollment of children with disabilities was seen in grades one, two and three, followed by grades five, four, six, seven and eight respectively.

Concerning TYPE OF DISABILITY: Highest enrollment of children with disabilities enrolled in the year 2017-18 were children having cerebral palsy, hearing impairment, autism spectrum disorder & speech disorder followed by children with locomotor disabilities, visual impairment, mental retardation, learning disability and least enrollment was children having multiple disabilities.

Concerning LOCATION: Highest enrollment of children with disabilities enrolled in the year 2017-18 were from the Bangalore rural district, followed by Bangalore north district and Bangalore south district.

Concerning LEVEL OF DISABILITY: cent percent enrollment was seen among children with moderate disabilities followed by children with a severe level of disabilities in the year 2017-18.

5.13.2.2 Retention of Children with Disabilities

Concerning GENDER: The retention among male children with disabilities was higher than the retention of female children with disabilities.

Concerning CLASS: cent percent retention was seen in grades one, two and three and least retention was seen in grade eight.

Concerning TYPE OF DISABILITY

- ❑ Cent percent retention was seen in CwVI admitted during 2016-17 & 2015-16 for two & three years respectively. The least (zero percent) retention was seen in CwVI admitted during 2010-11.
- ❑ Cent percent retention was seen in CwCP admitted during 2017-18 for one year. The least (zero percent) retention of CwCP was seen in 2013-14, 2012-13 and 2010-11.

- ❑ Cent percent retention was seen in Children with locomotor disabilities admitted during 2017-18, 2016-17, 2014-15, 2013-14, 2012-13 for one year, two years, four years, five years and six years respectively. The least (zero percent) retention was seen in 2011-12.
- ❑ Cent percent retention was seen in CwMR admitted during 2017-18 & 2016-17 for one year & two years respectively. The least (zero percent) retention of CwMR was seen in 2010-11.
- ❑ Cent percent retention was seen in CwHI admitted during 2017-18, 2015-16 and 2014-15 for one year, three years & four years respectively. The least (zero percent) retention of CwHI was seen in 2011-12 and 2010-11.
- ❑ Cent percent retention was seen in CwMD admitted during 2017-18, 2016-17 & 2015-16 for one year, two years and three years respectively. The least (zero percent) retention of CwMD was seen in 2010-11 and 2013-14.
- ❑ Cent percent retention of one year was seen in Children with Autism spectrum disorder admitted during 2017-18. There was no enrollment of children with autism spectrum disorder and thereby no retention from 2010-11 to 2016-17.
- ❑ Cent percent retention was seen in Children with speech disorders admitted during 2017-18, 2016-17 & 2015-16 for one year, two years and three years respectively. The least (zero percent) retention of Children with speech disorders was seen in 2011-12 and 2012-13.
- ❑ Cent percent retention was seen in Children with learning disabilities admitted during 2016-17 for two years. The least (zero percent) retention of Children with speech disorders was seen in 2013-14.

Concerning LOCATION

Bangalore Rural District: cent percent retention was seen in children with disabilities admitted during 2017-18, 2016-17 and 2015-16 of one year, two years and three years respectively and the least (zero percent) retention was seen during 2011-12.

Bangalore North District: cent percent retention was seen in children with disabilities admitted during 2017-18, 2016-17 and 2015-16 of one year, two years and three years respectively and the least (zero percent) retention was seen during 2011-12.

Bangalore South District: cent percent retention was seen in children with disabilities admitted during 2017-18, 2016-17 and 2015-16 of one year, two years and three years respectively and the least (zero percent) retention was seen during 2010-11.

Concerning LEVEL OF DISABILITY

Moderate level of disability: cent percent retention was seen in children with a moderate level of disabilities admitted during 2017-18, 2016-17 and 2015-16 of one year, two years and three years respectively and the least (30 percent) retention was seen during 2010-11.

Severe level of disability: cent percent retention was seen in children with disabilities admitted during 2017-18, 2016-17 and 2015-16 of one year, two years and three years respectively and the least (6.67 percent) retention was seen during 2010-11.

5.13.3 Problems of Administrators in implementing the policies and provisions for Children with Disabilities in Inclusive Education

- ❑ **Access to Education:** The majority of the administrators responded that children having severe and profound disabilities could not be educated in public schools since the education system was not fully equipped to deal with such children.
- ❑ **Infrastructural Needs:** Some administrators responded that ramps were not usable; disability-friendly toilets were not built in the school. Public schools should be built as per the model of special schools according to the children with disabilities need.
- ❑ **Inclusive Education Training Programmes:** Some teachers complained that there were no proper toilets, accommodation, or drinking water facilities; it was difficult for female teachers to attend training programs.
- ❑ **Scholarships:** Some responded that few children do not get scholarships due to non-submission of disability medical certificates etc. In addition, the amount given as a scholarship is significantly less and it was not sufficient to fulfill the needs of children with disabilities.
- ❑ **Escort & transport facilities:** Some of the administrators responded that the given amount is not sufficient to fulfill the needs of the said purpose; instead, the government should provide pick and drop service from home to school and from school to home.

- ❑ **Aids & appliances:** HM responded that they did not receive the aids & appliances at the beginning of the academic year; after two to three months, they received faulty aids & appliances.
- ❑ **Books & Uniforms:** Few administrators responded that children with mentally retarded & cerebral palsy should get an extra set of uniforms as they keep salivating most of the time. Some administrators responded that textbooks should be framed as per the needs of different kinds of disabilities.
- ❑ **Medical camps:** Few administrators responded that the duration of the camp should be three instead of one day and it should be organized in the school or nearby place.
- ❑ **Problems of Head Master/Mistress:** BRCC does not care about the problems of children with disabilities. BIERT specialization was not the same as the disability of the child. BRP & CRP does not bother about the problems related to children with disabilities as they tell them to contact BIERT.
- ❑ **Problems of Block Resource Centre Coordinator:** Few HM feels it as a burden to admit the children with disabilities in the school, as they were expected to maintain separate records, provide all the facilities like scholarships, escort & transport facilities and assist in conducting medical camps, etc. General teachers complain that they have not been trained to teach children with moderate and severe disabilities.
- ❑ **Problems of Block Resource Person:** Because of HM's hostile attitude, they do not cooperate in dealing with a matter related to children with disabilities. Neither do they collect the necessary document from parents of children with disabilities to process scholarships, nor do they provide proper information to give aids & appliances.
- ❑ **Problems of Cluster Resource Person:** Few CRP told that they do the work of postman, pass the information from BRCC office to school and get back data from the school to BRCC. They do not get time to conduct training programs for teachers or teach the students. They assist BIERT while conducting medical camps or any other programs in the school.
- ❑ **Problems of Block Inclusive Education Resource Teacher:** The majority of the BIERT responded that they do not face any problem with the BRCC as they work according to their job chart. BRP or CRP do not get involved in the matter of children with disabilities.

5.13.4 Teachers' opinion towards the policies and provisions for Children with Disabilities in Inclusive Education

Resource Room: General teachers consider that children with mild disabilities learn well even without the help of a resource room, but children with moderate disabilities require the assistance of a resource room to understand better.

Teachers' opinion towards children with disabilities in the inclusive classroom: Teachers opined that children with severe disabilities could not be educated along with normal children in the general classroom, the appropriate environment for children with severe disabilities was home-based education and BIERT should design the curriculum for home-based education and executed it, with the help of Individualised Education plan.

School Infrastructure: School was equipped with a disabled-friendly environment, toilets for children with disabilities were disabled-friendly, ramps were constructed in school and drinking water facilities were provided at the reach of children with disabilities.

Inclusive Education Training Programme: The Inclusive Education Training Programme provided to general teachers was appropriate, adequate to teach all kinds of children with disabilities, but the duration of the training program is minimal; it was not sufficient.

Scholarships: Scholarship provided to children with disabilities was sufficient, delivered at the beginning of the academic year. The specified amount reached the child without any deductions.

Escort and Transport facilities: Children with disabilities avail of the escort and transport facilities provided by the government, but it was not sufficient to meet the expenditure of said purpose.

Aids and Appliances: Good quality working conditioned aids & appliances have been provided to children with disabilities, but replacement of aids & devices has not been done immediately when repaired.

Books and Uniforms: Textbooks and uniforms were distributed to children with disabilities at the beginning of the academic year. The quality of the print material was good and the language used in the textbook was easy to understand by children with disabilities.

Medical camp: The expert doctors having specialization in all kinds of disabilities were conducting medical camps regularly.

5.13.5 Opinion of Parents of Children with Disabilities towards the policies and programs for Children with Disabilities in Inclusive Education concerning Benefits received and problems faced.

- ❑ **Medical Camp:** Thirty per cent of the parents of children with disabilities responded that doctors were very cooperative and supportive staff were very helpful while attending medical camp. Some parents responded that instead of one day, medical camps should be conducted for three days. Since most of them are daily wage workers, the government should provide DA and TA. Few doctors behaved rudely while treating the children with disabilities in the camp.
- ❑ **Books & Uniforms:** Seventy-six per cent of parents of children with disabilities responded that they received books and uniforms at the beginning of the academic year and the quality of uniforms and textbooks was good. Twenty-four per cent of parents responded that books and uniforms get delayed one or months. Children with mental retardation & cerebral palsy should get an extra set of uniforms as they keep salivating all the time.
- ❑ **Aids & appliances:** Seventy-two per cent of parents of children with disabilities responded that they received aids & appliances after attending the medical camp. Twenty-eight per cent of parents responded that aids & appliances got delayed for two months and some of them received faulty aids & appliances. There was no provision for repairing the faulty ones.
- ❑ **Scholarship:** Forty-four per cent of parents of children with disabilities responded they received scholarship amounts of 500 rupees to 1000 rupees per year based on the standard and level of disability. Fifty-six per cent of parents responded that the scholarship amount was significantly less, the government should allocate scholarship amounts based on the child's expenditure.
- ❑ **Transport & Escort facilities:** Eight per cent of parents of children with disabilities told that they received transport & Escort facilities of rupees 500 yearly once. Ninety-two per cent of parents did not know anything about the escort & transport facilities.
- ❑ **Training:** Eight per cent of parents of children with disabilities told that they received a training program to look after the child with mental retardation at

home. Ninety-two per cent of parents responded that they work as daily wage workers. If the government provides one day salary and transport allowance, they can attend the training program.

- ❑ **Problems with HM:** seventy-eight per cent of parents of children with disabilities told that HM does not cooperate with them, they remain busy always with their academic work, they do take care of normal children and they do not bother or take care of children with disabilities nor their problems.
- ❑ **Problems with BIERT:** Sixteen per cent of parents of children with disabilities responded that they were not cooperative during the medical camp, distribution of aids & appliances and attending sports meet for children with disabilities.

5.14 Discussion on Findings

Education has become an inseparable part of human life. Proper and good education is essential for all of us to lead a dignified life. How does education influence human life? Irrespective of the caste, creed, religion and region, quality education transforms an individual's life. Education is necessary for every individual to improve their knowledge, way of living and social and economic status throughout life. It transforms us entirely from inside and outside by changing our thinking, behavior and personality. An educated person becomes an excellent citizen in society. Government across the globe has concluded that every individual should be educated at least up to the elementary level. That's how the Universalization of Elementary Education came into the picture. No two individuals are the same in this entire universe, which means that every individual is unique in terms of thinking, behavior, action, personality, etc. Nobody is superior or inferior to each other; everybody is unique in their existence. Individuality should be respected irrespective of their ability, capability or disability. Education should be provided to an individual keeping all these perspectives into consideration. Even Internationally, Education is considered as a human right and stand for equal opportunity to all children and this is reflected in the UN Convention on the Rights of the Child (1989), the UN standard rules on the equalization of opportunities for the person with disabilities (1993), UNESCO Salamanca Statement (1994), The Biwako Millennium Framework (2003) and UN Convention on the persons with disabilities, 2006. The education of children with disabilities cannot be neglected. Without educating them, the Universalization of Elementary Education or many more goals, objectives mentioned in the different documents, education for all,

cannot be achieved. The population of persons with disabilities was significant in number across the globe. According to the WHO global disability action plan (2014-2021), there are more than 1000 million people with disabilities in the world, which is around 15 per cent of the world population. In India, there are 2.68 crores (2.21 per cent) persons with disabilities. The government of India has enacted various legislative Acts, policies and schemes to mainstream persons with disabilities in society. Persons with Disabilities (Equal Opportunities Protection of Rights with Full participation) Act, 1995, is the first major impactful Act enacted to empower persons with disabilities. After 20 years of implementation of the PwD Act 1995, considering the current status of persons with disabilities, in the year 2016, amendments have been made to the PwD Act 1995. Now the Act is called “The Rights of Persons with Disabilities Act, 2016”. Apart from this Act, the Government of India has also enacted the National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999 and Rehabilitation Council of India Act, 1992. Accordingly, the State of Karnataka has published in its Gazette notifications, namely Karnataka State Rights of Persons with Disabilities Rules 2019, Karnataka Mental Health Rules 2012 and Karnataka State Policy on Disability.

The main focus of the said Acts and Policies are to develop the persons with disabilities concerning Health, Education and creation of a Barrier-free environment and ensure inclusive society. Despite having so many Acts, policies, provisions and schemes implemented for persons with disabilities. Still, we could not achieve the desired result in terms of educating children with disabilities. Some section of society is looking at children with disabilities through the prism of pity. They were not considered equal with others and sympathy is shown towards them. Children with disabilities need empathy, not sympathy. They need their rights to be implemented with whole spirit, not pity. The present study points out that the government of Karnataka has come up with a comprehensive policy exclusively for the education of children with disabilities in inclusive schools across the state. Special schools should only be used as the rehabilitation Centre or preparatory institution towards admission in public school. Manason, P (2009) study pointed out that adjustment is needed in policies related to special education by considering the diverse belief of administrators. The education system needs a strategic change concerning the curricular perspective and teaching-learning process according to the child's type of disabilities and level of disabilities.

The first step in the success of the education of children with disabilities is to increase the enrollment and retention rate in general schools. Increasing the enrollment rate is the biggest challenge before the government. It involves meticulous planning to identify the core areas lagging and strengthen the existing education system concerning the specific needs of all types and levels of children with disabilities. The enrollment rate of children with disabilities is less compared to their counterparts. Among the enrolled children with disabilities, the Enrollment ratio of female children with disabilities is still behind the male children with disabilities. It is worse in the case of girl children with disabilities belonging to scheduled castes and scheduled tribes. From the present study, it can be seen that the enrollment ratio is in decreasing order from class one to class eight. The children with moderate and severe disabilities compulsorily need disability-friendly toilets, especially girl children with disabilities. Kelly, A. et al. (2014) study found that children with disabilities leave general school because these schools could not meet their academic, social, emotional and behavioral and access to health resource needs. The needs of every child with disabilities are not the same and it depends upon the type and severity of disabilities. The severity of disabilities varies from individual to individual child. The children with severe visual disabilities need braille scripted plates in the later stages of school. Children with severe locomotor disabilities need properly usable ramps and disability-friendly toilets without which the child could not continue the education. This is one of the reasons for the low retention rate in upper primary classes. Infrastructural problems are severe in the schools located in rural areas compared to urban areas. From the present study, it can be seen that the retention rate was more in grades one, two and three because still when the child was young and the disability was not identified properly, the child was allowed to get an education just like the children without disabilities. Once the child is identified with disabilities, instead of providing intervention and bringing it back to general school, the children with disabilities are pushed to get education in a special school or drop out of education by the people with a negative attitude. This kind of negative attitude and the lack of awareness about the capability of children with disabilities in society should change. The children with disabilities should be identified in the early stage itself. The government should track every child, right from the pregnancy stage or through an aadhaar number and make it mandatory to check for disabilities. At least in the initial stage, CwD should be given an intervention programme in an appropriate environment to

get successfully included in general school at a later stage. Government has to identify an appropriate environment to provide education for CwD according to the type and level of disabilities. Gupta and Ramachandran (2014) study pointed out that special education in the formative years is essential for children with intellectual disabilities associated with cerebral palsy to obtain inclusive education. Various stakeholders like administrators, teachers and parents of children with disabilities play a crucial role in increasing enrollment and retention rates and implementing various policies for children with disabilities. Jones (2013) study pointed out that collective efforts among the stakeholders led to the implementation of the inclusive program. The administrators who have been involved in implementing these Acts and policies at different stages are the block resource Centre coordinator, block resource person, block inclusive education resource teacher, cluster resource person and school Head Master/Mistress. According to the administrators, the biggest hurdle in the path of access to education for children with disabilities is the negative attitude of their parents. If parents decide to give education to their children, they find ways, time and will be ready to take risks and fulfill the goals. The problem here is that most parents of children with disabilities are illiterate and uneducated and they work as daily wage workers, drivers, house painters and helpers in constructing buildings. The education of children with disabilities is linked with the poverty of the parents of the child. The rich parents put their children in special residential schools. India is rich in religions and therefore most of the parents hold on to religious sentiments. Some parents consider that children with disabilities were born out of curse from God; they are not fit for anything. They consider that children with disabilities cannot be educated. The government, through administrators, aimed to change this negative attitude of parents, but due to various problems in organizing training programmes, this was unsuccessful. Block Resource Centre Coordinator informs Block Resource Persons or Cluster Resource Persons to pass information to children with disabilities through Head Master. Most headmasters will be busy with other works like mid-day meal programmes etc., so forget to pass the information to parents of children with disabilities regarding the training programme at the BRCC office. Many parents of children with disabilities do not know about the entitlements & benefits available for children with disabilities. Antony (2009) study pointed out that parents of children with disabilities were unaware of their rights related to disability or inclusive education but also unaware of the actual diagnosis of their children with disabilities

and its impact on their future. In some instances, even if some HM inform parents, they do not attend training programme because of loss of one-day salary. They are from an impoverished background, could not afford the loss and pressure from the employer. They are bread earners of the family. Government should make a provision to provide DA and TA for parents of children with disabilities for attending the training programme. Some of the parents of children with disabilities cite problems in the infrastructure of the school for not sending their child to the school like the absence of disability-friendly toilets, unusable ramps, etc. government should strengthen the monitoring mechanism in maintaining proper infrastructure. Administrators like BRCC, BRP, BIERT and CRP provide an inclusive education training programme to HM and general teachers to implement Acts, policies and provisions for children with disabilities. These training programmes are three days, six days, ten days, 30 days and 90 days. Many a time, BRCC could not find resource persons to provide training to teachers and HM due to the unavailability of specialized resource persons in different types of disabilities like multiple disabilities, autism spectrum disorder, learning disabilities, etc. sometimes HM does not permit the teachers to attend training programme due to less staff in school. Das et al. (2013) study revealed that regular school teachers did not receive training in special education. Many General teachers feel that the training programmes were conducted just for the namesake, no proper planning or any fruitful sessions. Most of the time, the training programme was conducted regarding the management of children with disabilities in inclusive classrooms or rights, provisions and legislative acts for persons with disabilities. General teachers need concrete training regarding how to teach children with disabilities in the inclusive classroom by integrating necessary techniques and the content for the benefit of children. General teachers complain that the training programmes were related to different disabilities other than the disability of the child studying in their school. Few teachers, out of interest, whole-heartedly teach the children with mild, moderate disabilities; to some extent, they even teach children with severe disabilities. Teachers with negative attitudes towards children with disabilities consider these children as burdens in the classroom. They do not give any attention to the children and control them to sit mute spectators in the classroom, especially with children with mental retardation and cerebral palsy. The duration of the training programme is not sufficient to teach children with moderate or severe disabilities in an inclusive classroom. Most of the general teachers consider that

BIERT is only capable of teaching children with disabilities because they possess B. Ed in special education. The present study opines that government should design or develop a training programme keeping the type of disabilities and level of disabilities; also, the target group should be selected based on the need and objective of the programme example training to teachers should be given based on the type of child's disability studying in the school and also the level of disability. Many of the teachers and HM complain that place chosen for training programme lacks basic facilities proper drinking water facilities, lack of toilet facilities or a good place for accommodation. Lady teachers face severe problems while attending training programmes, especially in the rural areas. The present study opines that the government should establish or construct a permanent institute or building at block level or nearby to BRCC office exclusively for providing training to teachers, HM, or parents of children with disabilities. With regard to scholarship, escort & transport facilities, the amount given to children with disabilities is very less, which is between five hundred rupees to thousand rupees depending upon the class the child is studying and the severity of the disability. Some of the children with disabilities do not get a scholarship due to various problems, as parents do not know anything about the scholarship or escort & transport facilities and the procedure to apply. It is the primary responsibility of the HM to inform the parents regarding the scholarship and forward it to the department through BIER or CRP because parents meet the HM and BIER & CRP keep visiting the school frequently. Administrators complain that it is because of the negative attitude of the HM; they do not show concern towards children with disabilities and do not bring it to our notice. Some of the HM complain that BIER or CRP do not visit the school as mentioned in the schedule, nor do they solve the problem of children with disabilities. The present study pointed out that due to the lack of a proper monitoring mechanism, the administrators do not show proper concern towards the problems of children with disabilities regarding scholarships, escort & transport facilities. With regard to Aids & appliances, books & Uniforms and medical camps, government conduct medical camp, distribute books & Uniforms and Aids & appliances at the beginning of the academic year. Many parents of children with disabilities do not bring their children to the medical camp due to lack of information about the medical camp or due to poverty, illiterate and daily wage working conditions; they do not attend the medical camp. Even after attending the medical camp, few children with disabilities do not get aids & appliances and few get

faulty ones. There is no scope for repairing the faulty aids & appliances. Common books & Uniforms are being distributed to all children. Some children with mental retardation and cerebral palsy requested an extra set of uniforms as they kept salivating. Some of the teachers expressed their concern to HM that the books should be devised as per the child's type and level of disability. So far, we have discussed the reasons for the left out children with disabilities who are out of the education system. It is also necessary to look back and see the roadmap through which the children with disabilities traveled from a few decades back to the present time.

Looking at the children with disabilities over the period, we can make two timelines, considering the developments that took place in the lives of the PwD, namely before legislation for PwD and after the legislation for PwD. Especially after the implementation of the Persons with disabilities act in the year 1995, we can witness a tremendous positive change in all the spheres of life of PwD, earlier, before the legislation for PwD, people looked at them as subordinate, they considered PwD are not intelligent enough for consideration. According to the majority of the general population, PwD was not normal and could not match the general population. They believed that PwD will remain always dependent on others throughout their life. People with disabilities were looked at with pity and sympathy (Addlakha, R. 2007 cited in Tarshi 2018). Since there was no concrete right or support for the person with disabilities to stand up and prove equal to others, their pain and grievances were not heard to the outer world. This entire scenario got changed after the passage of landmark legislation called PwD Act 1995, it was a very well thought out, meticulously planned Act to uplift the PwD because the Act categorically identified all the important areas, right from the grass-root level where the PwD were lagging, this act, not only provided them the opportunity but also made it as a right to get their demand met. The important areas identified in the Act were prevention and early detection of disabilities, education, employment, affirmative action, non-discrimination, research and manpower development, recognition of institutions for persons with disabilities, an institution for persons with severe disabilities, the chief commissioner and commissioners for persons with disabilities, social security. The progress in all these areas is commendable. Here, early identification of disabilities and education made a mark in the development of PwD. Earlier, there was no proper authenticated count of the population of disabilities in the country, Yeo & Moore, (2003) study revealed that due to the suspected underreporting and differences in the

definition of disability, it was hard to discern the exact numbers of the total population of persons with disabilities. The government of India, should be highly appreciated for this extraordinary work, because in the census of India 2011, there was a separate column included in the questionnaire with the aim to get a population count of disabilities in the country concerning different types of disabilities. This was a concrete step in identifying the population of disabilities. All the national reports related to disabilities mention this data in one or the other form. This data has become the fundamental foundation on which the government of India and other states make necessary policies, schemes and provisions to uplift persons with disabilities. After the early identification of disabilities, the second important area is education. Education is a powerful component, which has the potential to transform any individual's life, in all dimensions like physically, psychologically, socially, emotionally. The PwD Act, guaranteed education for children with disabilities irrespective of their abilities and disabilities. The enrollment and retention of children with disabilities gradually and significantly increased after the implementation of the Act. The present study findings revealed that the enrollment of children with disabilities in the academic year 2017-18 was 93.57 per cent which is a very significant number and the retention rate of one year, two years and three years were hundred percent. These figures reflect the government's unshakable commitment to achieve the universalization of elementary education is moving in the right direction towards the goal. The Government of India is helping children with disabilities in all possible manners. It has made it mandatory to build ramps in schools and in all public places in general, created a provision to transact the curriculum according to the needs of children with disabilities in an appropriate environment and this provision was not there earlier to the said PwD Act 1995, where they were given education in a separate setting by the voluntary organizations and Christian missionaries (NCERT 2006). Every year at the beginning of the academic year, the government conducts a medical camp in order to extend support in the form of providing aids & appliances, escort & transport facilities and in all possible manner to children with disabilities. The commitment of the government towards the upliftment of persons with disabilities is laudable. The government has not only passed PwD Act 1995, but it has also passed RCI Act 1992, NTA Act 1992 and recently in 2016, Rights of Persons with Disabilities Act 2016 and the same commitment should be shown by the other various stakeholder in order to achieve the goal of universalization of elementary education as

the present study too pointed out. The present study also stressed a need to establish a separate monitoring department exclusively to implement acts, policies and provisions for children with disabilities at the state, district and block levels.

5.15 Implications of the Present Study

Following Implications can be drawn from this study, which may bring considerable changes from school teachers to the policymakers.

- ❑ The study findings evidencing that the state of Karnataka should take measures to strengthen the monitoring mechanism of the role played by administrators at the district level, block-level and cluster level.
- ❑ The state of Karnataka should bring an effective policy especially for educating the children with disabilities according to the type and level of disability.
- ❑ Instead of distributing the responsibility to implement the policy or provision of children with disabilities to different departments like health department, labour department, etc., the government of Karnataka should establish a single department, entrust the responsibility and make it accountable for the implementation of policies.
- ❑ The retention rate of children with disabilities keeps decreasing from duration of one year to eight years.
- ❑ The educational needs of children with disabilities depend upon the type and level of disabilities. The needs of children with mild and moderate disabilities are different from the needs of children with severe and profound disabilities.
- ❑ Access to education for children with disabilities depends upon the attitude of various stakeholders, i.e., parents, teachers and administrators towards the children with disabilities.
- ❑ In most of the schools, ramps were not in usable condition. Government should regularly monitor the ramps, construct disability-friendly toilets in schools, which is very much necessary for children with locomotor disabilities.
- ❑ An inclusive Education training program should be provided to teachers as per the type of children with disabilities studying in that school. The teacher does not show interest in the training program. Emphasis should be given to the teaching-learning aspects as per the level of disability of the child. The training program should be conducted near the school or within the block level with proper accommodation, drinking water facilities and toilets.

- ❑ Scholarship, escort, & transport facilities provided to children with disabilities are not sufficient. To fulfill the needs of the child. Government should disburse the expenditure amount every year, make a provision for pick and drop facilities.
- ❑ Government should make sure that the aids & appliances reach all the children with disabilities and especially make a provision for immediate replacement or repairing the faulty aids & devices.
- ❑ Government should designate one government hospital as a disability specialty hospital at block level with all the specialist doctors at one place so that children with disabilities can visit the hospital throughout the year as and when necessary, instead of only one day in a year.
- ❑ Head Master/Mistress should possess a positive attitude towards children with disabilities to implement the policies and provisions in inclusive education effectively. Government should take necessary measures in this direction.
- ❑ Block Inclusive Education Resource Teacher should be appointed permanently in the school where the children with disabilities are admitted as long as the child is in the school and entrust the responsibility of providing all the benefits to children with disabilities as per the provision mentioned in the Acts & policies.
- ❑ BRCC, BRP and CRP should possess at least a one-year diploma course in special education along with practical experience in dealing with children with disabilities.

5.16 Suggestions for Further Research

Every research work gives insight to other researchers for further investigation. This study suggests certain areas to be investigated further, which are as follows:

- ❑ More research is needed on the Impact of implementing Acts, Policies and Provisions for children with disabilities in Inclusive Education.
- ❑ Research is also needed in enrollment, retention and dropout of children with disabilities not only at the primary level but also at the secondary level and in higher education.
- ❑ Further research is needed to explore existing perspectives towards children with disabilities, considering different geographical areas and various cultural practices.
- ❑ Further research is needed to study the performances of different disabilities concerning the various subjects by considering the severity of disabilities.

- ❑ Research is needed to establish vocational education for children with severe and profound disabilities.

5.17 Conclusion

Education for children with disabilities in the inclusive classroom right from the primary level helps them acquire education and develops the sense of “we feeling” among the children with disabilities and normal children. The children who cannot be taught together at an early stage cannot expect them to be together at the latter stage of life. If we want to create an inclusive society, inclusiveness should start from primary school since education is the most crucial weapon that can bind all individuals together, irrespective of their abilities and capabilities. The three pillars for the success of inclusive education are Administrators, teachers and parents of children with disabilities. The government of India should effectively implement inclusive education with the whole spirit, monitor the progress from time to time and make necessary changes as and when required.