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## chapter one

# The Context of Special Needs in Ireland

### CHAPTER OUTLINE

- ▶ Definitions of special need
- ▶ Models of disability
- ▶ History of special needs service provision in Ireland

This book is aimed primarily at students working towards a special needs qualification that will make them more employable as special needs assistants (SNAs) in Irish schools and for those providing respite care for children with special needs in the children's own homes.

## DEFINITIONS OF SPECIAL NEED

All children have needs, e.g. physical, safety and security, love and belonging, praise and encouragement. Children with special needs have these same needs together with some additional ones. Special needs can be defined or categorised in many different ways. They are often categorised according to how frequently they occur in the general population, or else according to the area of development affected by the special need.

### Classification according to frequency of occurrence

- ▶ **High incidence special needs:** These are special needs that **occur relatively frequently** in the general population. They tend to be less severe in that the child's overall development is not usually as severely affected by the special need as children with low incidence special needs. Examples of high incidence special needs are borderline general learning disability and dyslexia. Usually children with high incidence special needs do not receive many additional

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resources, e.g. they are not usually eligible for an SNA, but instead receive additional learning support hours.

- ▶ **Low incidence special needs:** These are special needs that **occur infrequently** in the general population. They tend to be severe in nature in that the child's overall development is often highly affected by the special need. Examples of low incidence special needs are autism, moderate or severe learning disability, syndromes such as Down's syndrome and physical conditions such as cerebral palsy or muscular dystrophy. In general, children with low incidence special needs require considerable additional resources, such as a special needs assistant, resource teaching hours, speech therapy and physiotherapy and they may be educated outside the mainstream school system.

For the purpose of allocation of resources and services, the Department of Education and Science classifies special needs as follows.

### Disability codes

No.	Category of special education need	Incidence
1	Physical disability	Low
2	Hearing impairment	Low
3	Visual impairment	Low
4	Emotional disturbance	Low
5	Severe emotional disturbance	Low
6	Borderline general learning disability	High
7	Mild general learning disability	High
8	Moderate general learning disability	Low
9	Severe/profound general learning disability	Low
10	Autism/autistic spectrum disorders	Low
11	Specific learning disability	High
12	Assessed syndrome	Low
13	Specific speech and language disorder	Low
14	Multiple disabilities	Low

## **Classification according to the area of development predominately affected by the special need**

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### **Physical health and development:**

- ▶ Epilepsy
- ▶ Sickle cell anaemia
- ▶ Diabetes
- ▶ Asthma
- ▶ Dyspraxia (difficulty with motor co-ordination)
- ▶ Dysgraphia (difficulty with handwriting)
- ▶ Visual impairment
- ▶ Disability resulting from accidental injury
- ▶ Cystic fibrosis
- ▶ Spina bifida
- ▶ Hydrocephalus
- ▶ Muscular dystrophy
- ▶ Cerebral palsy
- ▶ HIV and AIDS

### **Intellectual or cognitive development:**

- ▶ Borderline general learning disability
- ▶ Mild general learning disability
- ▶ Moderate general learning disability
- ▶ Severe or profound learning disability
- ▶ Specific learning disability, e.g. dyscalculia

### **Language and communication:**

- ▶ Hearing impairment
- ▶ Specific speech and language disorder
- ▶ Dyslexia
- ▶ Newcomer children whose first language is not English

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### **Emotional and social development:**

- ▶ Emotional problems
- ▶ Oppositional defiant disorder
- ▶ Conduct disorder
- ▶ Attention deficit hyperactivity disorder

### **Complex conditions and syndromes (affect more than one area of development):**

- ▶ Autistic spectrum disorders
- ▶ Down's syndrome
- ▶ Fragile X syndrome

Sometimes children will have multiple special needs, e.g. a child with ADHD may also have dyslexia and oppositional defiant disorder. In addition, children who are exceptionally able are also recognised under the Education Act 1988 as having special needs.

## **MODELS OF DISABILITY**

There are two main models or ways of looking at disability: the **medical model** and the **social model**.

### **Medical model of disability**

As the name suggests, with the medical model of disability, the focus is on the causes and symptoms of the disability and on its treatment. While this model does have its uses and advantages, the person is seen by this model as abnormal and remains so until the condition is cured. Many disabilities have no cure, so this model of disability can often have a negative effect on the person's self-image and self-esteem. With the medical model, the 'problem' is seen to lie with the person with the disability, so for example, a deaf person should learn to lip read because not many people know sign language.

### **Social model of disability**

The social model of disability focuses on the environment in which the disabled person lives. With this model of disability, the environment should be adapted to meet the needs of the disabled person, not the other way around. For example,

consider someone who uses a wheelchair. They are perfectly able to enter buildings, cross roads, travel along footpaths and drive if their environment facilitates them to do so with ramps, lifts and hand-operated cars. This model of disability does not label people as abnormal and is therefore much more respectful of people with disabilities.

## **HISTORY OF SPECIAL NEEDS SERVICE PROVISION IN IRELAND**

Swan (2000) described the progression of special needs education in Ireland in three phases: the era of neglect and denial, the era of the special school and the era of integration or inclusion.

Under English rule, the National Education System was established in 1831, making school attendance compulsory for all children between the ages of six and 14. By 1892, children had to attend at least 150 days of school each year (today, the primary school year is 183 days). The government did not consider that the education of children with special needs was necessary in that their needs were seen as purely medical. Many children with special needs lived in hospitals, asylums and county homes. However, some religious-run special schools were established at this time. For example, St Mary's School for Deaf Girls in Cabra, Dublin, was established in 1846 by the Dominican order, St Joseph's School for Deaf Boys in Cabra was established in 1857 by the Christian Brothers and St Joseph's School for the Blind was established by the Carmelite order in 1884 in Drumcondra, Dublin. Children from all over the country boarded in these schools from young ages.

From the foundation of the state in 1919 to the early 1990s, practically all education and care, including the education and care of children with special needs, was carried out by the religious orders in Ireland. As a result, there was very little government policy or legislation regarding special needs provision in Ireland. The situation remained largely the same until the numbers of religious in Ireland began to decline rapidly and many of the schools and institutions formally run by them were taken over by the state. This, together with an increasing awareness among parents, teachers and other professionals of how our special needs provision had fallen badly behind that of other nations, resulted in a relatively rapid change in government policy and the introduction of a number of new important pieces of legislation.

In 1947, St Vincent's Home for Mentally Defective Children (founded in 1926) was recognised by the state as an official school. The establishment of this school, along with other similar schools that followed, reflected the belief at the time that children with special needs should not be educated alongside their peers, as this was considered to be detrimental to the education of 'normal' children and their teachers (Commission of Inquiry into the Reformatory and Industrial School System

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1934–1936). Most children with special needs at this time were assessed in what were known as County Clinics. After assessment, options were generally limited to institutional care or some form of basic training. In 1959, the first inspector for special education was established, and throughout the 1960s, 1970s and until the mid-1980s, considerable numbers of new special schools were established throughout the state to cater for children with physical, mental and sensory impairments. This era represented the era of the special school, where it was recognised that children with special needs required education, but not within the mainstream setting. Today there are a total of 107 special schools in Ireland (some schools cater for more than one special need, hence when the numbers listed below are added together they total 129).

- ▶ Schools for students with mild general learning disability (30)
- ▶ Schools for students with moderate general learning disability (33)
- ▶ Schools for students with severe and profound general learning disability (6)
- ▶ Schools for students with emotional and behavioural disturbance (10)
- ▶ Schools for students with severe emotional and behavioural disturbance (9)
- ▶ Schools for students with physical disability (7)
- ▶ Hospital schools (6)
- ▶ Schools for students with hearing impairment (3)
- ▶ Schools for students of Traveller families (3)
- ▶ Schools for students with multiple disabilities (1)
- ▶ Schools for students with visual impairment (1)
- ▶ Schools for students with reading disability (4)
- ▶ Schools for students with autism (5)
- ▶ Schools for young offenders and disadvantaged students (11)

In the mid-1980s there was a worldwide lobby for the integration of children with special needs into mainstream schools. This lobby began to influence Irish educational policy and a number of classes for children with special needs began to be established within mainstream schools for children with mild learning disabilities or physical disabilities. Special education became part of teacher training courses in the state's teacher training colleges. By 1993, over 2,000 children were being educated in special classes within mainstream schools.

## ***The Report of the Special Education Review Committee (SERC) (1993)***

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In 1991, the government commissioned a comprehensive review of all special needs provision in Ireland from preschool through to secondary. On foot of this review, the *Report of the Special Education Review Committee (SERC)* was published in 1993 (Department of Education and Science 1993). This report was important for a number of reasons.

- ▶ It provided a definition of special needs that included those with severe and profound difficulties through to those who were exceptionally able and it included both physical and mental disabilities.
- ▶ It recognised the desire of the majority of parents of children with special needs that they be educated in mainstream schools.
- ▶ It recommended that there be a school psychological service linked to the existing school health service. The school psychological service should deal with issues of assessment and assist with planning.
- ▶ Integration was to be the most desirable option, with as little segregation as possible for all children, not just those at the milder end of the spectrum.
- ▶ It found that segregated special education inhibits the realisation of one of the main goals of education for children with special needs – that of equipping them with the necessary skills to live, socialise and work in their own communities.
- ▶ It identified that teacher training was inadequate in the area of special needs provision and that there was a lack of contact between special education and mainstream systems.
- ▶ It recommended the establishment of a continuum of educational provision to meet various levels of special educational need. Depending on individual need, children could have:
  - Full-time placement in a mainstream school with additional support
  - Part-time or full-time placement in a special class or school
  - Full-time placement in a residential special school
  - Part-time placement in a Child Education and Development Centre or special school

The 1995 White Paper on education, *Charting our Educational Future* (Department of Education and Science 1995), reiterated the report's findings when it stated 'all students, regardless of their personal circumstances, have a right of access to and participation in the education system, according to their potential and ability'. Other important documents and reports included the 1996 report *A Strategy for Equality* (Commission on the Status of People with Disabilities 2006), which



highlighted the lack of co-operation between special and mainstream schools, the lack of support services, transport, resources and equipment and the lack of flexibility within the mainstream curriculum for people with special needs. In 1999, the government published *Ready to Learn* (Department of Education and Science 1999), a White Paper on early childhood education. This report highlighted the importance of early intervention for children with special needs and called upon the government to improve this sector's provision by:

- ▶ Giving parents access to early childhood education experts
- ▶ Improving the training and skill of early childhood educators
- ▶ Increasing the level of provision for preschool children with special needs
- ▶ Increasing support for preschools already enrolling children with special needs
- ▶ Increasing resources with visiting teacher supports
- ▶ Extending the National Educational Psychological Service (NEPS) to the early years sector

There have been a number of legislative changes running alongside and as a result of these White Papers and reports. These will be outlined in chronological order in Chapter 2.

The National Educational Psychological Service was established in September 1999. NEPS was and still is responsible for all educational psychological services for children, with clinical psychological services provided by the Health Service Executive (HSE).

The National Council for Special Education was set up in December 2003. It has overall responsibility for special needs provision in Irish schools, assessing applications for and co-ordinating services throughout the country.