

## DIACRONY AND SYNCHRONY OF THE EDUCATION OF CHILDREN WITH SPECIAL EDUCATIONAL NEEDS (SEN)

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**Abstract:** *This study analyzes the very complex issues of people, especially children, with disabilities and their education. Children with disabilities make up about one third of the children outside school, generally in the world. The diachrony and the synchrony of the education of people with disabilities represent a challenge for society and school. The vision about these people (expressed in terminology and definitions), the way of identification, assessment and orientation, the institutions and mechanisms that intervene here, the general, political, economic and cultural aspects and priorities of a certain society, the dominant values in the education system, etc. – are a few of the elements that differentiate the access and school participation of these people – from one country to another. The educational inclusion and integration of children and the special educational needs (SEN) are one of the important objectives of Romanian education. The school institution as a whole must extend its educational aims in order to orientate towards the great diversity of children. It is necessary that education, in its capacity as a service provider, should adapt to the needs of the children, and not vice versa. The ultimate goal is to ensure that all children have access to education within the community, education that is appropriate, relevant and effective.*

**Key words:** *school integration; educational inclusion; special educational needs; specific learning disorders; disability.*

### Introduction

In any society there are certain people who, due to deficiencies, disabilities cannot be “integrated” into the community by their own strengths. The problem of people with disabilities is both emotional and social. Therefore, society, through various mechanisms and levers, must also pursue the satisfaction of the real needs/necessities of the people, especially of the children with disabilities, with special educational needs, to ensure the full respect of their interests, their dignity and their rights in any circumstance and in relation to any system.

The attitude of the society towards the people with disabilities, as well as towards other people in difficulty (disadvantage) has been throughout history mainly one of devaluation, rejection, isolation and segregation. Since antiquity we have witnessed radical segregation practices for children with disabilities (physical extermination in Sparta and optional – as a decision of the head of household – in ancient Rome) as well as differentiated attitudes, in certain countries or towards certain people with disabilities (the case of the attitude in Egyptian temples towards deaf people – less negative than towards other people with disabilities). The Middle Ages knew a number of specific attitudes, nuanced towards the same people, such as those of suspicion of witchcraft, curse or guilt of the parents. The empirical beginnings of social assistance – which gradually became associated with educational endeavours – have now included, but especially in the Enlightenment philanthropic period, among the target groups of people in difficulty also those with disabilities, through forms of ‘protection’ such as asylum and hospitals. A first opening to the possibility that children who learn with more difficulty deserve educational attention can be found in Comenius, in *Didactica Magna* (chapter IX): “The more someone is less intelligent and less gifted from nature, the more he needs help, to get rid of his marginalization and stupidity”.

The pioneer the experiences of specialized education is considered Gabriel Itard, the one who tried to humanize the wild child, discovered in Aveyron, in France (1799). The teaching-learning techniques developed by Itard were taken over and subsequently developed by Seguin, whose professional activity substantially influenced the progress of the “treatment” for the mentally disabled, in special institutions (asylums, hospitals). The onset of institutional concerns for the education of children with disabilities represents an important step in the evolution of the social attitude towards this human category – the stage of “granting reduced citizenship”. Children, especially young people with disabilities, were allowed access to schools – even if they were special – and then to (protected) workshops, which at that time represented a significant impulse in the gradual change of the attitude and the overall conception of society. If these people can learn, then they also represent a certain value in society, even if they learn or work partially and incompletely – compared to their peers. This conception has been maintained to this day.

Regarding the perception, identification, classification and definition of the needs/necessities of people with disabilities L. Manea, (2000: 16), quoting J. Bradshshaw, shows that “in the concrete situations it often happens that the meaning of this concept is not clear enough. Four definitions of the term can usually be identified. “A first significance is that of ‘normative need’, corresponding to the perspective of the specialist, who, as an expert, operates with the reporting of concrete situations to certain standards. A second way of defining the concept is to regard it as a ‘felt need’, which appears as a reflection of what people in a certain situation want. The third acceptance of the term is ‘expressed need’, which is in fact ‘the demand’, the request for a service, meaning the felt need transformed into action. The fourth definition of the term is ‘comparative need’, as a measure

resulting from the study of the characteristics of the beneficiaries of a service. When other people, having similar characteristics, do not benefit from the same service, they are considered to be in the situation of need.”

Children with disabilities make up about one third of the children outside school, generally in the world. The diachrony and synchrony of the education of people with disabilities is a very complex issue and a challenge for society and school. The vision about these people (expressed in terminology and definitions), the way of identification, assessment and orientation, the institutions and mechanisms that intervene here, the general, political, economic and cultural aspects and priorities of a certain society, the dominant values in the education system, etc. are a few of the elements that differentiate the access and school participation of these people – from one country to another.

They belong to the categories of population in need, “they are vulnerable with the risk of marginalization and require socio-educational intervention” (Constantinescu, 2018: 108). Regardless of the way we define “need”, in The United Nations Convention on the Rights of the Child, a convention unanimously adopted by the General Assembly on 20<sup>th</sup> November 1989, in article 23 it is shown “that for children with physical and mental disabilities, a full and decent life must be ensured, under conditions that guarantee their autonomy and facilitate their active participation in the life of the community, they will effectively have access to education, training, health care, re-education, preparation for re-employment, recreational activities, benefiting from these services in an appropriate manner, to ensure as complete a social integration as possible and an individual development, including his/her cultural and spiritual development.

International organizations (UN, WHO), as well as EDF (European Disability Forum) – consultation partner of the *European Commission*) attest that 10% of the population has disabilities. In many countries it is recognized that out of the entire school population, about 15-20% have difficulties in school learning – special educational needs (SEN). SEN have been and are increasingly associated with the significant group of students who face various forms and levels of school failure.

### **1. Terminology of special education, wider field of disability**

In order to use a terminology that is as neutral as possible, that does not have a pejorative hint, in the last decades, the terms of disability, person with disability have been replaced and nuanced through terms such as: deficiency, incapacity, disability, person with deficiencies, person with disabilities, people/children with special educational needs (SEN). The terms of disability and person with disabilities currently coexist with the terms mentioned above, being mainly used in legislative contexts and to designate a social disadvantage.

In the field of education, “children with special educational needs” are referred to as children whose special educational needs/necessities (SEN) derive mainly from physical, mental, sensory, language, socio-affective and behavioral

disabilities or associates, depending on their severity. They may be included in the category “special needs” and some children protected in residential institutions, as well as certain children/students in the regular education, who present special educational needs manifested by learning disorders/ difficulties and/or school adaptation. Special education envisages a mode/type of education, adapted and intended for people who are not (or are unlikely to be) able to reach in the regular education (temporarily or throughout schooling) the educational and social levels corresponding to their age. A special education is wanted for all, following:

- to be extended to all children who have certain learning difficulties or problems (see children with special needs);
- to prepare the school and society as a whole to receive and satisfy the participation of people with disabilities in the usual school and social environments, as natural components of human diversity, with its specific differences.

In this broad category of the field of disabilities we present briefly some learning disorders that are common among students and which fall into what we call children with *special educational needs*.

### **1.1 Specific learning disorders or specific learning difficulties (SLD)**

There is a specific type of learning difficulty that requires a diagnosis and lasts a lifetime.

**SLDs** are inherently intrinsic learning difficulties of the individual. They are permanent and have negative effects on the learning process, as well as serious consequences on the knowledge acquisition process. From SLD, we will focus more on those designated as part of the *Dys* spectrum.

**Dis** comes from Greek and refers to a difficulty or disorder. The prefix “Dys” is present in many Indo-European languages and forms words such as *dyslexia*, *dysphagia*, *dysortography*, *dyscalculia*, *dysgraphia*, *dyspraxia*, etc.

SLDs have a neurobiological cause related to how the brain processes information, that is, the way it receives, integrates, retains and expresses information. The phases of information processing by the brain are in an inseparable connection. When a problem arises in any of these phases, the entire process is constrained, with repercussions on basic or primary skills. These skills are essential and can be found in all areas of school learning, and any disruption of one of them causes significant delays in the other fields.

The symptoms of SLD can be confused with those of other learning difficulties that have intrinsic causes to the person but of different origin, such as attention deficit hyperactivity disorder (ADHD) and autism spectrum disorder (ASD). ADHD and ASD can co-exist with SLD and have negative consequences on the learning process. Unfortunately, they can affect other aspects of daily life. ADHD and ASD are classified as diseases by the World Health Organization.

From the SLD category, the “Dys” constellation, we present the following disorders:

- *Dyslexia* – reading and spelling disorder;
- *Dysgraphia* – writing disorder and difficulties in fine motor skills;
- *Dyscalculia* – calculation and arithmetic disorder;
- *Dyspraxia* – disorder in coarse and fine motor coordination (*Dyspraxia is classified as Developmental Coordination Disorder and not as a specific learning disorder*)

In some countries, dyspraxia is classified as a Developmental Coordination Disorder and not as a specific learning disorder. Dys-s are not considered pathologies, but rather developmental disorders, the effects of which can be mitigated with specialized corrective interventions.

Specific learning disorders are (according to the *Diagnostic and Statistical Manual of Mental Disorders*, 5th Edition, DSM-V, published by the *American Psychiatric Association*) types of neurodevelopmental disorders that affect the ability to learn or use certain academic skills (for example reading, writing or arithmetic calculation). Specific learning disorders affect two or three children in a class on average. They are called specific learning disorders because one or more of the skills-tools used in learning are disrupted. Reading, writing, speaking, arithmetic calculation are the tools used by children in academic learning. Learning is supported by these skills and their acquisition is the basis for further learning and development. So, even if the child has no mental delays or intellectual disabilities, he/she may develop inappropriate/inadequate/unfriendly tools for learning. If one does not use the right ingredients for a cake, the result will not be as expected.

SLDs are not all the same. There is a varied combination of strengths or weaknesses of these skills-instruments. Obviously, then, when we learn, we first process information (the brain receives information through the senses) and, if the brain perceives and/or processes information differently, the approach will be obviously different. Recent studies show that genetic, epigenetic and environmental factors can affect the brain’s ability to perceive and process verbal and nonverbal information correctly and effectively when one or more of these skills are impaired, the learning process is in danger.

### **1.2. Special educational needs (SEN)**

It is a phrase that has appeared and developed in the last 2-3 decades, mainly because of the desire to replace, as the case may be, educational abnormality or school maladjustment, which no longer corresponded to the new vision on the right to education. The concept was launched in 1978 in the UK. The expression was subsequently taken over by other countries, some even from the family of countries of Latin origin (Spain, Portugal), as well as by UNESCO (since 1995) and by Romania (through the *Law of National Education*). The notion of SEN designates the educational needs complementary to the general objectives of the school education, necessities that require a schooling adapted to the individual particularities and/or

characteristic of a deficiency (or learning disorders), as well as a specific intervention, through rehabilitation/recovery and proper compensation. Interestingly, this acceptance, although older, is presented in a slightly adapted form – also in the legislation of 2005 and 2006 in Romania. The notion of SEN seems similar to that of special education – in the last part of the definition above, but within SEN special education is seen in a wider context, complementary to the general education, accessible to every child/student.

SEN expresses an obvious need to give some children additional attention and educational assistance (affirmative, positive measures, due to the need to compensate for one/some disadvantages), without which one cannot effectively talk about equalizing the chances, access and school and social participation. The SEN sintagm is more relevant in psycho-pedagogical plan than that of deficiency, incapacity/disability or handicap. At the same time, the notion suggests a relativization of the traditional conception and practice of dividing into categories of deficiencies or disabilities as well as a new, non-categorical vision, which allows a more individualized (personalized) approach. SEN designates a continuum of special problems in education, from serious and profound deficiencies to light learning difficulties/disorders. Their register, in the acceptance of UNESCO includes:

- mental delay/deficiency;
- severe learning difficulties/disabilities/intellectual disabilities;
- physical/motor impairments;
- visual impairments;
- hearing impairments;
- emotional (affective) and behavioral disorders;
- language disorders;
- learning difficulties/disabilities (UNESCO, 1995).

Regardless of the field (registry), this is a group of children who need additional support, which in turn depends on the extent to which schools have to adapt their curricula, teaching and organizing and/or providing additional human or material resources to stimulate efficient and effective learning for these children (UNESCO, ISCED, 1997). From a statistical point of view, it was found that children with disabilities (intellectual, physical, visual and auditory) represent between 2-5% of a school population, children with S.E.N. there are many more, varying in some countries (USA, England, Denmark) between 10 and 20% of the school population.

## **2. Educational inclusion and integration**

### ***2.1. School inclusion and integration of children with S.E.N.***

In the last 15-20 years, innovations in the field of education have brought to the attention of specialists (be they teachers or researchers), but also of students and parents, new and unique educational situations, which have subjected the school environment to real tests. Ideological theories such as those related to *school inclusion and integration*, those related to the normalization of the learning

environment or the social one, still raise serious problems related to the practical implementation of this educational current ideology. The education system, the school institution in its assembly, must extend its educational purposes in order to orientate towards the great diversity of children. "It is necessary that education, in its capacity as a service provider, adapts to the needs of children, and not vice versa" (Tutunaru, 2018: 133). The ultimate goal is for all children to have access to education within the community, education should be adequate, relevant and efficient.

The international event that launched and enshrined this vision was the Salamanca Conference (1994), named – *Action framework in the field of education (learning) of special needs*. The definition now given to inclusive education and its principles have subsequently gained wide international recognition. Inclusive education is recorded in the document, incorporating the universally valid principles of a healthy, child-centered pedagogy. All children from a school community benefit from applying these principles. It starts from the premise that the differences between people are normal, that the education has to adapt to these differences and to the specific educational needs that derive from them, rather than to force the child to adapt to prefabricated assertions regarding the purpose and nature of education. Regular schools, with inclusive orientation, represent "the most effective means of combating discriminatory attitudes, a means that creates welcoming communities and builds an inclusive society that offers education for all. *Inclusive education seeks to meet the learning needs of all children, young people and adults, with a special focus on the vulnerable ones from the point of marginalization and social exclusion.*" (National Authority for Persons with Disabilities - A.N.P.H, 2009)

In Romania, "*Inclusive education* involves a permanent process of improving the school institution, aimed at exploiting the existing resources, especially human resources, in order to support the participation in the education process of all students within the communities" (HGR no. 1251/2005). School inclusion can be defined as "a set of measures taken to expand the purpose and role of the regular school, to cope with a great diversity of children" (Mara, 2004: 89). Inclusion implies change, so it is a process that contributes to increasing the degree of participation and learning for all students. Inclusion in education implies: equal valorization of all students and staff, increase of the participation of all students in education and, at the same time, reducing of the number of excluded students, the recognition of the right of students to education in the community of which they belong, etc.

Therefore, inclusive education is based on changes, transformations of the school (from the point of view of organization, goals, improvement of school instruction, etc.) in order to support the participation in the education process of all students within a community. It involves a process of continuous adaptation of the educational institution, so as to permanently ensure the exploitation of the existing material and human resources, in order to support and ensure the necessary support to all participants in education.

*Integrated education* refers to the “set of measures applied to the categories of population that seeks to eliminate segregation in all forms” (Hudițeanu, apud Cuomo, 2002: 11) and constitutes a dominant trend in approaching people with disabilities, at the level of social and educational policies, reflecting a process of transition from studying, finding and explaining to institutionalization and normativization (through laws, declarations and regulations), becoming a common practice both in the world and in our country. Integrated education represents an “institutionalized way of schooling children with disabilities (as well as other children with special needs) in regular schools and classes or in school structures as close to the regular ones.” (Vrăsmaș; Nicolae; Oprea; Vrăsmaș, 2005). The adoption, by the mass school, of the ideologies of the integrated education requires adaptations at the level of the teaching-learning-assessment process – by drawing up special documents materialized in the personalized intervention programs (PIP) and personalized educational programs (PEP).

Therefore, the integrated education aims more at the person with SEN and the measures of equalization of the chances at the individual level, the inclusive education places the emphasis on the social perspective – on the school environments and on the necessity of adapting them to an increasing diversity in the number of children, with a priority of those who are at higher risk of marginalization and exclusion. Marginalization, “social isolation, social maladaptation is painful at any stage of life, but especially during childhood, when the child tries to be accepted into a play group” (Constantinescu, 2004: 74).

## **2.2. Levels of educational integration and aspiration for inclusion**

*School integration* is a complex and long-term process that refers to the inclusion of children (in our case children with special needs) in regular school institutions, or in ways of organization as close to them. It is desirable to regard school integration as a continuous process of adaptation to the conditions of the school and social environment characterized by a constant change, the environment changing according to the needs of the individual’s integration. Moreover, the process of school integration of children with special educational needs must be conceived as a complex social action, the essence of which is not the mechanical, passive compliance of the student with the conditions of the school and social environment, but the correlation of both factors, the creation of those optimal, objective and subjective, because integration means not only adaptation, but also commitment. As processuality Patrick Daunt distinguishes within the school integration the following stages/levels/modes of integration:

- *physical integration*, which refers to the inclusion of children with special educational needs in a regular and/or special school institution. At this level, the presence of children with disabilities with the others is monitored, the reduction of the physical distance between children, the use together of physical spaces, materials and equipment, the facilitation of mutual knowledge and familiarization,

the creation of optimal conditions for the effective participation of the child/student in the activity of the group as well as the communication within it;

- *functional integration*, means participating in a common learning process, when the disabled child also assimilates certain knowledge, forms skills, along with regular children or children from the group of children in which he is included. There is talk about the functional integration of the child with special needs when he reaches a relatively equal level of participation in the school learning act with peers from the group/class, during the respective interaction period and on similar fields of pedagogical content. Functional integration may initially be limited as a sphere of action (for example physical education, musical education, practical activities, etc.) and over time may extend to other educational subjects;

- *social integration* involves establishing and developing relationships and inter-relationships within the work group, in which the child with special needs actively participates. Thus, the child with special needs is included in all the common activities of the school life, both to the actual learning and to the common activities of breaks, play, and other daily activities of the school life. There are established reciprocal, more or less spontaneous, relations of acceptance and social integration when the child integrated into the group of students acquires the feeling of belonging and full participation in the community, with the taking of roles.

- *social integration* supposes, "the full acceptance of the child with special needs by the other members of the school community, supposes the existence of the feeling of self-confidence and the others, supposes that the child with special needs assumes some social responsibilities in his particular contexts of life, concurrently with the exercise of influences on the partners in his/her life contexts (Daunt, 1996: 17) relatively equal participation in the life of the school group."

The social integration of children with special needs in the community refers to the coexistence and consistency of interpersonal contacts and relationships within social groups, to the concordance between norms and behaviors, to the functional interdependence of the elements of a social system/subsystem, etc. The content of the notion of "social integration" is dependent on the aspects of stability, consensus, social control that must characterize any society. Smaranda Mezei (1993) shows that social integration can be viewed as:

- a social process through which a permanent renewal of a social unit is realized, under the conditions of the postulation of the relative, structural and functional balance of this unit, necessarily involving the strengthening of its elements. During this process, through the interaction between the individual/group and the specific/integral social environment, modifications/adaptations take place both at the level of the individual/group that is integrated and at the level of the social system/subsystem that integrates. Depending on the individual's active character and the responsiveness of the integrating environment, several phases of the process are distinguished: accommodation, adaptation, participation and actual integration, which can often be a different synthesis compared to the initial components;

- a state of social balance, defined by the absence of marginality and by the convergence of two terms, initially, in a relation of tension, subsequently converted, in a relation of harmony and cooperative action;

- belonging and non-imposed participation of the individual to a set of norms, values and attitudes, common to the group, which once internalized and externalized by the individual in explicit behaviours, facilitates the strengthening of the functional solidarity of the group;

- the result of a series of adaptations and normative adjustments of the individual to a field defined by group relationships, a result that has as desired consequence that of eliminating conflicts and establishing cohesive and participatory relationships. Thus, the aim is to “conform the individual to the social needs and demands of the reference organizational environment (peer group, school, profession, etc.) as well as the characteristics of the process by which the individual/group gains the ability to live in a certain environment, acquiring knowledge, assimilating values, internalizing norms, etc. (Mezei 1993: 304).

Between these aspects/levels of integration there are interdependence relationships. They form a continuous integrator, each representing a basis for the achievement of the others. The principle of continuity is a stage one, from simple to complex, with the integration of the acquisitions of the previous stage.

## Conclusions

The issue of school integration is a favourite field of the school institutions, and the problem of the difficulties of social integration and segregation is the favourite area of action of the social assistance activities, as well as a major concern of the education system. Beyond this specificity, of each process of integration or inclusion, the physical and social reality requires the opting for a certain system for the benefit of the individual, to, why not, to correlate the steps in order to achieve the purpose. Thus, whether the efforts come from the child (in the case of integration) or from the school (in the case of inclusion), or, perhaps correlated, one in the other’s welcoming, the final result for the purpose of social inclusion must be aimed.

The fundamental principle of inclusive education – education for all, together with all – represents a desire, which can become reality by gaining more and more followers and by materializing in experiences and good practices, of integration/inclusion. Of great value in this regard for all teachers are national and European projects that address working methods and techniques for a variety of children’s learning disorders. (for example: *MoocDys Project*).

The integration/inclusion, in order to be achieved, implies the presence of an optimal legislative framework, the active presence of competent teachers, who promote dialogue, involvement, support from parents, and the whole community. Also, the relationships that are formed at the level of the class, without any

discrimination, based on empathy, tolerance and respect towards the child with special educational needs, represent the basis of social inclusion.

### References:

1. Constantinescu, M. (2004). *Professional and social competence*, Bucharest: Economica.
2. Constantinescu, M. (2018). *Integrated and proactive programs for vulnerable groups*, Bucharest: ProUniversitaria.
3. Cuomo, N. (2002). *Another side of school*. Sibiu: Psihomedica.
4. Manea, L. (2006). *Special protection for persons with disabilities*, Bucharest: Sansa S.R.L.
5. Mara, D. (2004). *Teaching strategies in inclusive education*, Bucharest: Didactica si Pedagogica.
6. Mezei, S. (1993). *Dictionary of Sociology*, Bucharest: Babel.
7. Tutunaru, R.-E. (2018). *School and social inclusion of children with special educational needs. Contributions of itinerant teachers in the Social Assistance Magazine*, Iasi: Polirom.
8. Vrasmas, E.; Vrasmas, T. (1993). „Children with special educational needs”, *Special Education Journal*, no.1.
9. Vrășmaș, E.; Nicolae, S.; Oprea, V.; Vrășmaș, T. (2005). *Guide for support teachers*. Bucharest: Vanemonde;
10. Vrajmas, T., Daunt, P., Musu, I. (1996). *Integration of children with special educational needs into the community*, Bucharest: UNICEF
11. \*\*\* American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*, the 5 Edition, Washington: New School Library [on line] available at [fromhttps://www.sciencetheearth.com/uploads/2/4/6/5/24658156/dsm-v-manual\\_pg490.pdf](https://www.sciencetheearth.com/uploads/2/4/6/5/24658156/dsm-v-manual_pg490.pdf)
12. \*\*\**Convention on the Rights of the Child in Human Rights. Documentary for teaching human rights knowledge in pre-university education*, ISBN, 1995, UNESCO, Salamanca, 1994
13. \*\*\* H.G.nr. 1251/2005 *Decision regarding some measures to improve the activity of learning, training, compensation, recovery and special protection of children/students/young people with special educational needs within the special and specially integrated education system*
14. \*\*\* UNESCO- United Nations Educational, Scientific and Cultural Organisation (2001), *Open File on Inclusive Education*, Paris [on-line] available at [www.unesco.org/education/educprog.sne](http://www.unesco.org/education/educprog.sne), [www.edu.ro](http://www.edu.ro)
15. \*\*\* World Health Organization, (2011). *International Statistical Classification of Diseases and Related Health Problems -10th Revision*, 4th ed. World Health Organization, Geneva.
16. \*\*\* Project Mooc Dys Romania [on-line] available at [www.moocdys.eu/ro/](http://www.moocdys.eu/ro/)