

Chapter II
Theoretical Orientation
**(Part of Research Thesis ‘Inclusive Education for Children with Special Needs: An
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She is so ugly" one of them remarked
"A complete misfit for our class" scorned the other
"Ever noticed, how people stare at her in disbelief" whispered one to the other
"If I was her, I would have shamefully hidden myself to death" smirked the loud one
The peer meeting was abuzz with thoughts that labelled her well.
But as soon as they noticed her around,
A staggering silence took the centerstage,
Amidst the exclusion her poise shone in abundance
Her simplicity was too austere to be comprehended
By minds that defined beauty physically or monetarily.
Then suddenly the youngest peer member stood up
Went close to her and hugged her
Holding her friend tight
She stood silently gathering the right words
As the raised eyebrows disapprovingly stared back
"Forged by destiny and bathed in fire
Her battles are no different than ours
Guided by valour she defied the odds much more powerful
By unravelling determination that she never knew she had
The only difference is, she abhors basking in lustre
The scar lets her pain define her mettle"
Jaws dropped, dawned upon by a long silence.
Suddenly they all came running,
Embracing the misfit.
Tears of joy poured,
she had always longed to have friends,
Just one step of love,
One step of empathy,
One step of compassion
Swept away the everlasting impression.
For they all became one. Gaur (2017)

2.1 Disability and its Models

Disability is the most common and widely spread term for any aberration at physical level with its implications stretching to activity or ability of a person. It is the most widespread phenomenon across cultures and Disabled Population is the largest minority group in the world (WHO Report, 2011). The World Health Organization defines the term ‘Disability’ as an umbrella term, including every impairments, activity and participatory restrictions. Impairment is a physiological problem in body structure. It leads to an activity limitation thus, encountered by the individual while executing any task or action termed as Disability. Thus, Disability is complex phenomenon experienced by an individual (by product of impairment) causing any lack or restricted activity in the range which is considered norm. Hence any deviation from the standard or norm in terms of activity / ability of a person is referred as Disability.

Disability is not a homogenous group. It is categorized into physical/ sensory/ developmental/ cognitive/ congenital or acquired based on the type or degree or time it occurred. Broadly, It can be divided into sensory, locomotor/ physical, cognitive/intellectual and multiple Disability. The sensory disabilities include impairment in eyes and ear leading to aberration in sight or hearing (commonly termed as blindness and deafness). Locomotor associated Disabilities include movement based restrictions caused by amputations, polio, crippled limbs or Cerebral Palsy (involuntary limb movement). Cognitive Disability includes Mental retardation, Mental Illness, Autism and Learning Disability. Any combination of the above disability together refers to Multiple Disability. The RPWD Act 2016 acknowledges few more conditions as Disability categories like Sickle Cell Anaemia, Dwarfism, Old Age, Thalassaemia, Haemophilia, Parkinson's Disease, Multiple Sclerosis, Acid Attack Victims etc. The reason of adding following medical conditions into the disability categories is the acknowledgement by Government of India that people suffering from following conditions require help, treatment, guidance, rehabilitation and benefits. However, their educational implications are either meagre or yet to be researched.

The study explored Ten Disability Categories. They can be broadly categorised as Sensory Impairments, Physical Impairments, Intellectual Impairments and Multiple Impairment:

1. **Sensory Impairment:** Impairment in senses can be termed as Sensory Impairment.
 - a) **Visual Impairment:** Impairment in vision even after correction which leads to reduced or loss of sight.
 - b) **Low Vision:** Low Vision refers to Impairment in Vision with significant residual vision.
 - c) **Children with Hearing Impairment:** Impairment in ear leading to significant loss in Hearing.
 - d) **Children with Speech Impairment:** Impairment in ear leading to significant loss in Hearing.
2. **Physical Impairment:**
 - a) **Locomotor/ Physical Disability:** Impairment limiting movement/ coordination or physical activities in performing daily functions.
 - b) **Cerebral Palsy:** Impairment leading to lack of or impaired muscle coordination
3. **Intellectual Impairment:**
 - a) **Learning Disability:** It is the condition leading to scholastic difficulties (reading, writing, calculation etc).
 - b) **Mental Retardation:** It is the developmental disability due to low Intelligence quotient leading to significant limitations at functional intellectual level.
 - c) **Autism:** Autism Spectrum Disorder is a mental condition leading to difficulty in language, communication and abstract thinking
4. **Multiple Impairment:** Combination of disability arising due to two or more above mentioned impairment.

The diverse Disability categories require equally diverse medical treatments/ aids/ teaching-learning methodology and experts. Thus, heterogeneous group of disability requires an amalgam of resources and resource persons and positive ambience to nurture.

However, the most difficult to achieve isn't the resources or resource person but the social acceptance towards Disability. It's because of the social stigma that Disability metamorphosis into Handicap. The term 'Handicap' involves relationship of Disabled with the society or how the society perceives the disabled. According to WHO Report (2011), Handicap brackets a person to a disadvantaged position by highlighting the inabilities and deviations from the norm. It in fact prevents the individual to fulfil its role as member of society to the best of his/her ability. The various facets of society and disability can be explained through the two prominent and contrasting Models of Disability.

2.1a The Medical Model of Disability

The Medical Model of Disability emerged during nineteen and first part of twentieth century as advancement in medicine field occurred. The result was identification of various impairments and their categorization. The Medical Model views Disability as a pathological condition requiring expert care and medical treatment. Thus, every impairment is a 'disease' with physiological reasons and implications. The Medical Model is a professional orientation with focus on pathology, sickness or aetiology instead of normalcy, well being or social ecosystem of the patient and his/her family. The biggest drawback of Medical Model remains that it focuses on the 'disease' or 'conditions' thus, lacking the social, psychological, political or educational aspects of disability.

In terms of Education, initially medical model was very helpful as it helped in categorizing people with disability and justified the pathological condition with reasons along with the suggestive treatments. However, it missed the holistic approach thus turning medical model from a boon to bane. For the Medical Model focused on individual and held him/ her along with the family responsible for the state of being. It omitted the society's role and responsibilities. Secondly, Medical Model when applied to education of CWSN was restrictive. Just as every ailment has a different medical treatment similarly every CWSN had different learning style in accordance to the disability. The Medical Model placed Disability in the bracket where the Disabled need to change/ improved/ treated in order to fit the norm. If not so, they must remain segregated. Thus, CWSN must choose the education system which it can fit into. However, Medical Model was rigid to accept that CWSN could perform tasks which were considered 'normal' for it believed CWSN as a pathological state (patient) requiring treatment. It also highlighted the education system for the disabled according to its pathological conditions be it special or home based education for it demarcated the disabled as trainable or educable.

2.1b Social Model of Disability

The direct repercussions of Human Rights model, evolution of Special and Integrated Education changed the rigid Medical Model into a more dynamic Social Model. The Social Model is the opposite of Medical Model in terms that it acknowledges Disability as an essential component of society. Instead of perceiving the disabled as being disadvantaged due to their impairment, the Social Model onslaughts the society for restricting the disabled with its practices, norms and attitudes. It further perceives Disability as a factor just like race, gender or colour. Thus, it is the responsibility of society to remove the prejudice and stigma associated with it and instead provide appropriate services as well as disabled friendly environment. Disability and the Disabled were no more seen as a matter of shame for the individual and the family. Disability thus became the responsibility of society and a social problem than an individual problem. This lead to social actions and Disability became responsibility of every individual or platform of society. Thus, Social Model believes in social empowerment, political empowerment, educational empowerment and work empowerment of the Disabled by the society.

The radical change in the perspective brought policy changes among various cultures. New terms like 'Disabled Friendly Zone' were coined. Various educational institutions, work organisations, Hospitals, Market Places, parks et al were made 'barrier free' for the disabled. The perspective shift impacted education largely for it became evident that CWSN must receive education in an ambience with everyone else. Thus, Inclusive Education developed was in complete synchronisation with the Social Model of Disability.

2.2 Historical Background: Inclusion of Children with Special Needs in Mainstream Education System

People with Disability, since the time immemorial were excluded from every format of society. Just like nature promotes strongest during the evolutionary process, thus, abandoning the weakest according to The Darwin's Theory, disabled population across the globe was either discarded or abandoned so as to perish. They were considered as evil, criminals and people with black magic or bad karma from past lives. Its impact can be witnessed in mythological tales as well; for example: In Mahabharata it was easy to visualize Shakuni as an antagonist or conspirator with the caricature of a being a lame. Similarly, in Ramayana, Manthara, the conspirator held responsible for all the tragedy is depicted as lady with hump or deformity. The detrimental attitude of society remained intact towards them for centuries to the extent that its shadow can be perceived even today. The only profession considered suitable for them was begging which meant being at the mercy of others. Begging by disabled became so common and acceptable that the term 'handicap' was coined out of it. 'Handicap' means 'cap in hand' which was used by Disabled people to collect money in caps while begging. For centuries the situation remained grim for the people with disability, they were an outcaste in every civilization thus, providing education to them was unimaginable.

The change began in late eighteenth century parallel to the era of scientific and industrial revolution. It was initiated by the Christian Missionaries, various philanthropists and philosophers which lead to opening of asylums, hospitals and hostels in various parts of Europe and the world. Despite the beginning and efforts the conditions of people with disability in these institutions remain controversial. Many asylums were reported as centre of inhuman treatment where People with Disability were chained for life and made to suffer. It was Valentin Huay, also called "Father of Blind" who established in 1784, 'The first Blind Institution' for providing a better life to them. It was during the same time various institutions opened in different parts of Europe: 1775 The School for Deaf in Germany, Paris 1760, Italy a784 et al. This was the first attempt to provide some sort of training to the disabled.

Significant breakthrough was achieved in the Nineteenth Century with new discoveries in the field of medicine, science, psychology and education regarding people with disability. The development of education system for the disabled what is termed now as Special Education is attributed to Jean-Marc Gaspard Itard (1801). He was a psychologist who worked with 'Victor' the famous 'Jungle or Wild Boy of Aveyron'. Victor was found in woods as eleven year old with very low Intelligence Quotient. He considered himself an animal and behaved like one. Itard taught the boy to speak, read, write and during the process developed the first of its kind Individualized Education Plan (IEP) which became the basis of Special Education later. His work proved that anyone can be trained and

educated. It was during the same time; Louise Braille in 1829 invented the Braille Language for blind. The raised alphabets brought a revolution in the education system. Special Education and Classification of various types of disabilities developed during the nineteenth century which was well established by the 20th Century. \

However these attempts remained at the periphery of society as People with Disability were still excluded from the mainstream society. It was American Civil War (1861-65) which resulted in 30,000 amputations of disabled soldiers post war that attitudinal shift towards disability began to happen. For the first time the Government of America and American society developed means to merge the disabled soldiers into society by opening various rehabilitation and vocational education centers for them. These attempts of integrating the disabled were short-lived as World War I and World War II occurred gripping the whole world. The Eugenics Movement started which eventually spread to whole of Europe and America with the motive of improving human genome thus, prohibiting disabled from marrying, moving or having any progeny. It lead to forced sterilization and institutionalization of people with disability. To add to the atrocity, Hitler in World War II began Operation 'Akton T4' which involved killing any being not fit for life. It included sick, old, disabled and Jews. According to National Consortium on Leadership and Disability for Youth it lead to mercy killing of more than 2,50,5000 people in Europe. The world wars bore enormous casualties and gave rise to a huge disabled population. The British Data museum estimates more than two million disabled British Soldiers during World War I only. Calculating the Disabled soldiers across the globe post two world wars summates to such a mammoth data that brings shivers down the spine. It was at this time that out of the great sorrow emerged the greatest blessings of our time. The United Nations came into being, Human Rights were created which involved every person including the disabled and disability emerged as a variance just like race, colour, religion or ethnicity instead of curse or any other superstitious belief. It lead to transition from the medical model of disability to the social model of disability. While in medical model the person/ child is considered responsible for the disability and its educational implications included child with disability adjusting to the school. Contrarily, in social model instead of the child or person with disability the society is held responsible with educational implications that lead to schools modifying according to the needs of child with disability. The Universal Declaration of Human Rights states that every individual has the right to social security, a life of dignity and free development of personality which must be ensured by all the member states (Article 22). Thus, Disability evolved as an integral aspect of human civilization. The Universal Human Rights Model believed that the societal barriers of environment including social, physical attitudinal or communication must be removed for people with disability to participate at every platform of society. The United Nations acknowledged education as the medium of bridging the gap for People with Disability. The Universal declaration of Human Rights (1948) directed member states to initiate education as fundamental right of every Child with Special Needs (CWSN) for the complete development of personality and live life of dignity (Article 26).

2.3 Developing the concept of Inclusive Education

Twentieth Century established Special Education as the primary education system for Children with Special Needs (CWSN). It involved development of curriculum, learning materials, instructional support and services in accordance with the special educational requirements of the CWSN. The teachers working in Special Schools were specially trained and called Special Teacher/ Educator. Special Schools were opened all around the world. Thus, Special Education became the primary source of education for the CWSN. However, despite Special Education People with Disability were not able to mingle with

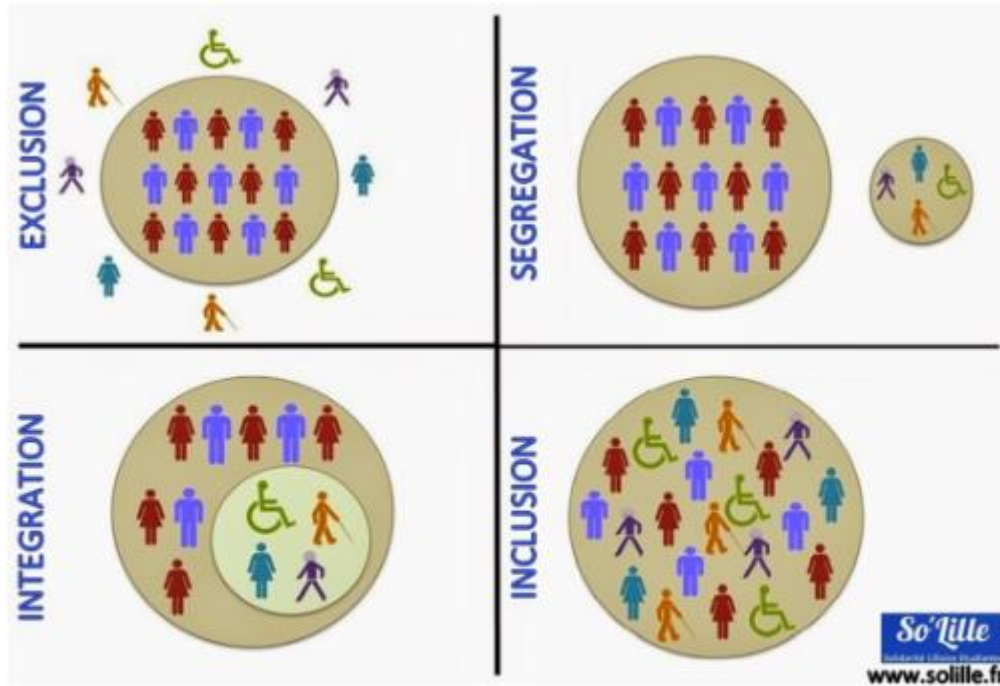
the society (2011, World Disability Report). Educationists argued that Special Education was a segregated system of education which wasn't helpful merging CWSN among various formats of society. People with Disability still remained isolated and disconnected with the rest of society. It dawned upon the policy makers that the only way People with Disability can become an integral part of society is when they blend into it from the very beginning. It was during the mid twentieth century that drawbacks of Special Education lead to 'Normalisation* Movement' in Scandavian Countries and 'Mainstreaming Movement*' in America that the term Integrated Education came into existence.

Integrated Education meant integrating the child into the mainstream education system as much as possible. However, it never directed the schools to change. The concept planned to expose CWSN with the regular school ambience but didn't emphasize that they become an active member in it. Integrated Education for the first time opened the doors for CWSN into regular schools which welcomed them with conditions/ caution. It lead to evolution of regular schools which had a separate Special Education Unit within the school premises. All the students met at the time of assembly; recess etc while classes were executed separately. The idea behind Integrated Education was to integrate CWSN socio-culturally. In India also in accordance to the international education policy, Integrated Education for Disabled Children (IEDC) was launched in 1975. Many model integrated schools were opened in the country. Yet the schools were rigid in admitting CWSN and only those children with mild disability and capable of managing regular school load were admitted. It was also discovered that integrated education was an expensive affair for schools which restrained the school from embracing it (1999). It was Salamanca Statement in 1994, which for the first time coined the term Inclusive Education. It believed that schools should welcome each and every child and it is duty of school to modify according to the needs and requirements of its students. It initiated the process of a learning environment where all children irrespective of abilities and disabilities studied together.

Inclusive education is advocated as an education system based upon humanistic values, nurturing a singular learning environment for 'All' children which will eventually pave way towards creating a united world that embraces disparities. Inclusive Education means a system of education wherein students with and without disability learn together and teaching – learning process is suitably adapted to meet the different learning of students with disabilities.(RPWD Act, 2016)

In Inclusive Education all students attend and are welcomed by the neighbourhood schools in age appropriate, regular classes and are supported to learn, contribute and participate in all aspects of the school activities.

"Inclusive Education means that schools should accommodate all children regardless of their physical, intellectual, social, emotional, linguistic and other conditions". Salamanca World Conference (1994) and Dakar World Education forum (2000)



Picture of the So'Lille association : <http://www.solille.fr/>

Figure: Difference Exclusion, Segregation (Special Education), Integration & Inclusion

2.4 What is Inclusive Education?

Inclusive Education focuses upon educating all children in the same environment, with schools ensuring a barrier free environment and resources (resource room and resource teacher etc) in accordance to its student's requirement. World Education Forum (2015) campaigned Twenty First Century Education as 'Education of all and by all'. It advocated that United Nations propagate twenty first Century as The Century of Equity and Equality. Inclusive education is child centred approach, a humanistic way and economical approach to education (UNICEF, 2012).

Rao (2003) believed Inclusive Education as the only way in developing a congenial and barrier free environment to recognise the potential and capacities of 'all' children to the best of their abilities in accordance to their needs. Thus, Inclusive Education is not a destination but a process to enable all the students with education, confidence and skills so that they become contributing member of society. Psychologically, Inclusive Education is a child centred approach where schools, curriculum, teaching methodology, teacher all work in accordance to the child's needs and requirements. It embraces that no two children understand or learn at the same pace because every child has needs specific to him or her irrespective of ability or disability. The only added feature in Children with Special Needs is that the basic needs are cumulated by the needs aroused due to the specific disability. Barton (1997) further intensified the changes required in the education system, be it the perception and acceptance of schools/ teachers/policy makers towards CWSN as part of mainstream education system. He strongly believed that unless schools are open to the inclusive policy and are willing to change, inclusive education shall remain a distant dream. In compliance to Len Barton; CBR Network (2005) reinforced the curricular changes, teacher skill development, disability sensitive teaching methodology and barrier free school ambience as the four prime changes required in every inclusive school.

Based on the Sustainable Development Goals (SDG) by United Nations and United Nations Convention on the Rights of Persons with Disabilities (UNCPRD) following fundamental principles of Inclusive Education is being drawn:

- ‘Every’ child has the fundamental Right to Education and equity as well as equality of educational opportunity.
- No child/ student face exclusion or discrimination because of race, color, gender, religion, language, disability or poverty.
- Education must benefit all children irrespective of diversity.
- Schools of Twenty First Century must adapt to the needs and requirements of its students.
- The students’ individual differences add to the diversity and richness of the school environment.
- The different needs and development pace of students are worked with an elaborate range of flexible responses and solutions.

Thus, according to Ainscow (1999) and Armstrong (2003), Inclusion is a process which involves sequenced values, principles and practices for social metamorphosis of education system all over the world. There’s no blueprint or fixed path to be followed. Wood (1998) opined that inclusion is a global policy for local problems. He further elaborated that the idea of: ‘What is Inclusive Education?’ has been bombarded by the various international organizations. But questions like: ‘Where inclusion can occur?’ and ‘How to implement Inclusive Education?’ are to be answered locally. Stainback & Stainback (1990) while discussing diversity stated that every society has unique diversity. For example: America experiences a substantial percentage of racial diversity be it Latinos, African Americans, Asians etc. However, India experiences diversity very different from America in the form of religion, region, linguistic, caste etc. Thus, inclusion of diversity in the education system has to be devised by the local government. Despite the varied diversity the core of inclusive policy remains intact i.e. to encompass all students/ children including CWSN into the umbrella of a unified education system.

Thus, Inclusive Education works towards rewiring the societal values and practices to build an inclusive society where exclusion has no place and everyone and everything is inclusive. It believes in strengthening the participation of ‘all’ by focusing upon identification and removal of barriers, developing an appropriate and easy to accessible curriculum, skillfully trained teachers and supportive family/ society.

2.5 Policies and Inclusive Education: India & The World

No policy emerges in vacuum. A series of events after ample brainstorming and contemplation by intellectual minds take the shape of a policy. Inclusive Education Policy expresses social change (Taylor, Miriam, Rizvi & Lingard, 1997) as a result of gradual changes in perception towards disability, evolution of Human Rights and emergence of large disabled population (10 percent of world population is disabled according to World Disability Report, 2011) over the centuries. The policy had significant ripple effect at the national and international level.

2.5a. Inclusive Education & Global Diaspora

1980- International Classification of Impairment, Disability and Handicap (ICIDH) issued by World Health Organization (WHO) in 1980 pioneered in categorizing and defining Impairment, Disability and Handicap which was used for more than two decades as the referenced text in describing disability as a phenomenon. Although it described 'Handicap' as the social outcome of Disability, yet the document couldn't segregate itself completely from the medical model of disability which held the individual responsible for the condition than the society.

1981- United Nations proclaimed the year 1981 as the International Year of the Disabled. It emphasised upon equal opportunities, rehabilitation and participation of People with Disability in society resulting in socio-economic development.

1982- United Nations General Assembly adopted The World Programme of Action concerning Disabled People in its 37th regular session

1982 – United Nations Proclaimed 1983- 1992 as the United Nations Decade of Disabled

Persons

1992 –Economic and Social Commission for Asia and The Pacific proclaimed the 'Asian and Pacific Decade of Disabled Persons, 1993-2002.'

1993- The Standard Rules on the Equalisation for Persons with Disability was adopted by United Nations General Assembly. They focussed upon equalisation and developing monitoring mechanisms.

1993- The World Conference on Human Rights recognised Human Rights and fundamental freedom as basic and universal rights of every human being including People with Disability

1994- Salamanca Statement and Framework for Action on Special Needs Education, UNESCO for the first time coined the term Inclusive Education. The World Conference on Special Education included three hundred participants from ninety Governments and twenty five international Organisation representatives. It pledged merging CWSN in inclusive schools to build an inclusive society.

"... schools must accommodate all children irrespective of their physical, linguistic, social, intellectual or other conditions. This includes disabled as well as gifted children, working children, the children from nomadic and remote populations, children from varied linguistic, cultural or ethnic minorities and the children belonging to other marginalized or disadvantaged areas and groups." (Salamanca Statament, para 2)

2000- The World Education Forum, The Dakar Framework introduced 'Education for All' as the Global movement and initiated education as Fundamental Human Right of every human. It prepared an action plan to achieve the eight 'Millennium Development Goals' which included quality education as well as 'Education for All' with special focus upon gender and disadvantaged group including Children with Special Needs by 2015.

2001- International Classification of Functioning, Disability and Health (ICF) was introduced by World Health Organisation (WHO) which categorised Disability as a social issue instead of medical. It identified the environmental factor as the most significant factor

during the development of Person with Disability. The ICF succeeded the International Classification of Impairment, Disability and Handicap (ICIDH) issued by WHO (1980).

ICF categorises Human Functioning into three parts:

- i. Individual structure of body and its functioning
- ii. Activities and Ability of Individual
- iii. Social or Community Participation

The three parameters of Human Functioning modified in case of disability to be following:

- i. Impairment in body structure and its functioning
- ii. Limitations with respect to activities and abilities by an individual
- iii. Restrictions regarding community participation

The ICF identifies three factors which affect the Human Functioning:

- i. Contextual Environmental Factors
- ii. Personal Characteristics such as Age/ Gender
- iii. Health Condition

Among the above mentioned three factors ICF identifies the most impactful factor as Contextual Environmental Factor defined as the factor capable of having both facilitating as well as debilitating effect on human functioning.

2006 – United Nations Convention on the Rights of Persons with Disability (UNCRPD) was adopted by General Assembly in continuation of the International Human Rights Treaty which pledged to work towards the dignity and rights of People with Disability to build an inclusive society of equity and equality.

2011- The first World Report on Disability was prepared by The World Bank and World Health Organisation to review the global scenario of Persons with Disability so as to plan directives for policy and implementation.

2015- The World Education Forum, The Incheon Declaration, Korea prepared Disability Inclusive Development Goals based upon the principles of UNCRPD (2006). It comprised of 10 interlinked goals, 62 indicators and 27 targets to be achieved during Asian and Pacific Decade of Persons with Disabilities, 2013 to 2022 which will manifest the complete inclusion of persons with disability in every format of society.

2015- Sustainable Development Goals (SDGs) were introduced by the goals United Nations post the expiry of Millennium Development Goals in 2015. It is a set of 12 goals related to economic and social development at the global level which include social justice, environment, urbanisation, energy, sanitation, water, gender equality, climate change, education, health, hunger and poverty. The prime base of SDGs is to build an inclusive society of equity and equality where no one is left behind. The SDGs work towards creating a Disability Disaggregated Data, an inclusive education, inclusive sustainable economic growth, reducing inequality and creating an inclusive society. 193 member states were signatory to the United Nations SDGs and pledged to achieve them by 2030.

2.5b. Inclusive Education & Indian Diaspora

India had been no exception to the worldwide exclusion of People with Disability in every platform of society over the centuries. In India, numerous superstitions had engulfed disability and the disabled since time immemorial. Thus, imparting education to people/ children with disability had been out of question. It was as late as nineteenth century when

Christian Missionaries opened first blind school in Amritsar, thus establishing the first special school in the country. Yet in a vast country like India opening of few special schools were insignificant as compared to the huge population of disabled. Post independence many national level institutions were established namely: National Institute of Visually Handicap (NIVH), National Institute of Mentally Handicap (NIMH) etc along with numerous special schools across the country. Yet, the population of out of school CWSN defeated the special schools established. The reason established being the negative attitude of society towards disability and the lack of awareness towards benefit of education for CWSN (Rao, 2003). India had been participant, fierce advocator and signatory to all the education policy reforms initiated by the United Nations since independence. Thus, studying India's Policy of Education, residue of global changes at any part of time can be witnessed. India has come a long way from 1947 and so has its education policy. India and Education specifically in terms of Disability, Disabled and Inclusive Education have been being time lined.

Constitution of India:

Article 15(1) & 15(3)- Article 15(1) and 15(3) stated that State shall not discriminate any citizen on the basis of gender and state shall ensure equal opportunities in education and work.

Article 15, 17 & 46- The Article 15, 17 & 46 safeguards the educational rights of socially and economically backward classes which include Scheduled Tribe, Scheduled Caste, People belonging to Below Poverty Line and Disabled.

Article 21-A (Eighty Sixth Constitutional Amendment) Right to Education Act, 2009

The constitution of India declared Right to Education as a Fundamental Right. The right directs both state and centre will provide free and compulsory education as fundamental right to every child irrespective of gender, caste, religion or disability up till the age of fourteen years or eight years of schooling whichever is applicable.

Article 29(1) - The Article 29(1) of Constitution safeguards admission to every child seeking admission to any educational institution maintained by the State or State Funds.

Article 30- Article 30 in the constitution specifies educational and cultural rights of minorities in establishing an educational institutional.

Article 45- The Article 45 of the Directive Principles of State Policy states that Education is the responsibility of both state and centre and lies in the concurrent list. Thus, both state and centre Government will provide free and compulsory education to every child irrespective of gender, caste, religion or disability.

Census, Government of India

- Census of India during Colonial Rule canvassed disability domain from 1881 to 1931.
- Disability was not enumerated during Census from 1941 to 1971.

- In 1981, Disability was canvassed under three categories (Blind, Dumb and Crippled) in the Population Census.
- Disability domain was again missed during 1991 Census.
- Census 2001 canvassed disability under five categories (seeing, speech, moving hearing and mental disability).
- During Census 2011, disability was estimated under eight categories (seeing, hearing, speech, movement, mental retardation, mental illness, multiple disability and any other)

The Census Data since 1881 depicts erratic data regarding Disability. The reason lies in changes in the definition and category of disability in successive Censuses. While Census during Colonial times had disability variable, yet the type of disability was restricted thus, not depicting the real picture of disabled in India. Post Independence till 1971 disability criteria was missing from the Census. It highlights the lack of weightage or importance signified to Disability by the Government of India. It was in 1981 when United Nations declared 'The United Nations Decade of Disabled People' that Disability domain was again brought into Census. However, it was estimated among three categories only which means the accurate estimation was still missing (Tamhane, 2013). Census of India decided that population Census wasn't the appropriate medium to collect data on Disability and the result was Disability was again dropped from 1991 Census. However, Disability was reintroduced in Census 2001 and five categories of disability were canvassed. The reason of modification being Passing of Persons with Disability Act (PWD Act, 1995) by the Parliament and International pressure to acknowledge disability as the largest disadvantaged group all across the world. It was in 2011 Population Census that disability appeared as full fledged criteria under eight disability categories in accordance to PWD Act. In order to enumerate accurate percentage of disabled population in India, the 2011 Census added category- Any Other among the eight type of disability. Disability has increased manifold from being less than One Million in 1881 to being 26.8 Million in 2011 thus estimating an increase from 369 persons per Lac in 1881 to 2208 persons per Lac in 2011 (Paul & Saha, 2015). The chart below (Table) enumerates the Disability numbers calculated over the years in Census from 1881 to 2011.

Table 1: Trend of Disability in India (1881-2011)

Infirmity/ Disability	1881	1891	1901	1911	1921	1931	1941	1951	1961	1971	1981	1991	2001	2011
Insanity/Mental Disability	8.66	8.67	9.87	9.72	10.27	10.93	13.05	13.48	13.67	13.77	13.84	13.88	10.33	8.30
Deaf-muteness/ Hearing	21.05	22.99	22.83	23.98	22.05	20.98	18.75	18.30	18.10	17.99	17.93	17.88	13.25	26.45
Blindness/in seeing	56.21	53.59	52.79	53.22	55.77	54.65	62.28	63.82	64.49	64.86	65.09	65.26	48.55	18.75
Leprosy	14.08	14.74	14.51	13.09	11.92	13.44	5.92	4.39	3.74	3.37	3.14	2.98	NA*	NA
In Movement	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	27.87	20.26
Any disability	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	18.36
Multiple disability	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	7.89
Total	937063	856252	670817	833644	860099	1100480	3267125	5433767	7600412	9767057	11933702	14100344	21906769	26840557

Source: Paul & Saha (2015). Burden of Disability in India (1881-2011)

https://www.researchgate.net/publication/301887725_Burden_of_Disability_in_India_1881-2011

Policies & Inclusive education

1964-66 Kothari Commission suggested education of Children with Disabilities on the basis of utility along with humanitarian grounds. The Commission accepted that very little has been done regarding education of Children with Disabilities and steps must be taken to make them part of the general education system in India.

1974 Integrated Education of the Disabled Children (IEDC) was launched by Department of Social Welfare, Govt. of India so as to integrate CWSN into the mainstream education system as much as possible. Under the scheme model integrated schools were built all across the country and children with mild and moderate disability were admitted along with regular students. The Integrated Education for Disabled Children (IEDC) was revised in 1992 with a view to providing educational opportunities for CWSN in general schools, to facilitate the retention in school system.

1986-1992 National Policy of Education (NPE) brought the fundamental issue of equality of Children with Special needs (CWSN) to the forefront. It stated that the objective should be to integrate physically and mentally disabled people with the general community as equal partners, to prepare them for normal growth & to enable them to face life with courage & confidence. The NPE set the stage for further integration/inclusion.

1987 Project Integrated Education for the Disabled (PIED) was jointly launched by Ministry of Human Resource & Development (MHRD), Government of India and UNICEF as a pilot project to establish Integrated Education in India. The project covered CWSN under all disability categories and was implemented in more than 15 states in India at Municipal and Block Level.

1992 Rehabilitation Council Act of India Act (RCI Act)

It is the regulatory authority which administers and standardizes training, rehabilitation, guidance -counselling policy for persons' with disability. The Act prescribes the council to recognise the minimum education standards established by the educational institutions in India in granting rehabilitation and skill development courses. It is responsible for manpower development, skill development, rehabilitation of persons' with disability.

1994 District Primary Education Program (DPEP) initiated the inclusion component among Integrated Education of Disabled in DPEP. It focussed on primary education, aiming in reduction of overall dropout rate in primary classes, to provide quality education and enhance achievement levels of all children including CWSN.

1995-2016 The Persons with Act (PWD Act) envisaged Equal Opportunities, Protection of Rights, Full Participation of people with disability in India. It stipulated the role of Government in providing free and compulsory education to every CWSN up till the age of eighteen years. The Right to Persons with Disability Act passed in December (RPWD) 2016 identifies 21 disability categories as compared to the 7 disability categories mentioned in Persons with Disability Act (PWD) 1995.

2000 Sarva Siksha Abiyaan (SSA) is the flagship program of Government of India with the objective of Universalisation of Elementary Education and zero rejection policy. Inclusion of CWSN in mainstream education system is the core of SSA.

2005 National Curriculum Framework (NCF) on school education recommended constructing a flexible curriculum to accommodate diversity among school children including CWSN in both cognitive as well as non-cognitive spheres.

2006 National Policy for Persons with Disabilities was manifested by Ministry of Social Justice & Empowerment recognising the disabled population as valuable human resource. It planned to seek environment of equal educational and working opportunities for the disabled population. It aimed to work in collaboration with SSA in identification, enrolment, aids and rehabilitation of CWSN in regular schools.

2010 Right to Education (RTE) The Right of Children to Free and Compulsory Education Act or Right to Education Act (RTE), is an Indian legislation enacted by the Parliament of India on 4 August 2009, which describes the modalities of the importance of free and compulsory education for all children between 6 and 14 in India under Article 21a of the Indian Constitution.^[1] India became one of 135 countries to make education a fundamental right of every child when the act came into force on 1 April 2010.

2.6 Why Inclusion is need of the hour?

Human civilization is more than two thousand years old. The evolutionary process has moved from exclusion to discrimination to acceptance to merger to finally celebrating the differences. The millennial citizens of the world aspire for an inclusive society where everyone enjoys Fundamental Human Rights. We cannot deprive any section of population from their basic rights like Right to live with dignity, Right to Education just because they belong to specific gender/ race/ ethnicity/ religion or disability category. It can be only achieved if since beginning we are bombarded with a diverse environment. A child who grows up with an understanding and respect towards the differences among individuals will create and thrive in an inclusive society (Singhal, 2006). For all these goals to be achieved, Inclusive Education is the answer. *‘Research revealed better scholastic and non scholastic results in an education system which embraces inclusion. It highlights benefit to both the CWSN and peer. Psychologically, scientist proved that the relationship nurtured in an inclusive schools have far reaching consequences in personality development of children both CWSN and Peer. Few benefits mentioned are: enhanced personal value, friendships, social skills, comfort level etc. While CWSN blossom into a more confident and positive personality the peer on the other hand develops empathy with acceptance and understanding of diverse individual needs’* (Singh, 2016). A lot of effort has been manifested towards building an inclusive society both nationally and internationally so as to bring the marginalised group into mainstream society. Thus, inclusive education is the building block of future society and schools are the social laboratories. Hence, the schools of twenty first century must embrace all students and provide quality education to all its students, thus meeting their diverse needs.

Singh(2016), Unicef (2012), Singhal(2006), Jha(2007), Narayana (1999) in various context have highlighted the financial aspect of inclusive education. According to them establishing one school that caters to diverse needs of all its learners is much cheaper and cost effective than maintaining the parallel educational settings of special and regular schools. Jhangira () and Jha (2007), referring to Indian context further elaborated the suitability of Inclusive Schools in developing country like India. They explained that in India, almost every village had a primary school. It could be a one room school with one teacher and minimal resources. All children irrespective of the differences (which could be social/ financial/ disability) attended the village school. Thus, it has worked as an inclusive school since its conception,

even before the policy makers became aware of the term inclusive education. MHRD (2009) statistics revealed that eighty percent of the children (approximately 8 million) in India live in rural areas without any special education format. Thus further gaining significance that inclusive education is the only option for the mammoth school going population of India.

While advocating for inclusive education, it's important to highlight the perspective shift that comes along with it. Since the conception of modern education system during Industrial Revolution, schools had the power to choose its pupil for the teaching learning process. It meant students had to adapt according to the school. The rigid concept of segregating the 'more able' from the 'lesser able' continued even through special education to integrated education policy. With upsurge of Inclusive Education, the autonomy of school was challenged. Inclusive Education withdrew the power of schools to choose its students. In accordance to the global shift from Medical Model of Disability to Social Model of Disability, Inclusive Education ensured every school provides quality education to all its students thus, meeting their diverse needs. Inclusive Education Policy advocated admission to all students seeking admission to school and ensuring schools adapts according to the needs of the child. This attitudinal shift is a major breakthrough in developing the inclusive society.

World Report on Disability (2011) established Disability as the largest minority group in world. It further estimated ten percent of world population as disabled which adds up to be 650 million approximately. It has to be ensured that such a vast population is equipped with Right to Life and a Life of Dignity. The only way, People with Disability can become a contributing member of the society (instead of being a burden, become self sufficient) and earn their living is through education. The answer lies in Inclusive Education.

Today there is no other way to prosper unless everyone is part of it. Thus, education of twenty first century cannot be anything except Inclusive Education where the demarcation of discrimination/ disadvantaged/ marginalisation in any form is blurred to create a cohesive world of participation such that every individual is respected and valued despite the differences.

2.7 Inclusion from the Indian Perspective

India is a vast country. It is multicultural, multi-linguistic, multi-religious, multi-ethnic society. The complex structure makes it all the more difficult for the government to achieve 'education to all' despite best efforts. The bracket of disadvantaged group is massive as it comprises of Children belonging to economically weaker section/specific gender (like female)/ scheduled caste/ schedule tribe/ religious minority groups (like muslim)/ disability etc. The result is that 'Universalisation of Elementary Education' the flagship program of Government of India under Sarva Shiksha Abhiyan (SSA), yet hasn't achieved complete literacy in primary education despite eighteen years of its conception. Thus, the grim picture reveals that India is still fighting to educate all its daughters and children belonging to various other disadvantaged groups such that among them disability becomes the last criteria to be fulfilled in case of education. The reason sought is large population of Children with Special Needs, scarce resources, damaging social attitude of society towards disability (Singhal, 2006) thus, delaying the education of disabled population.

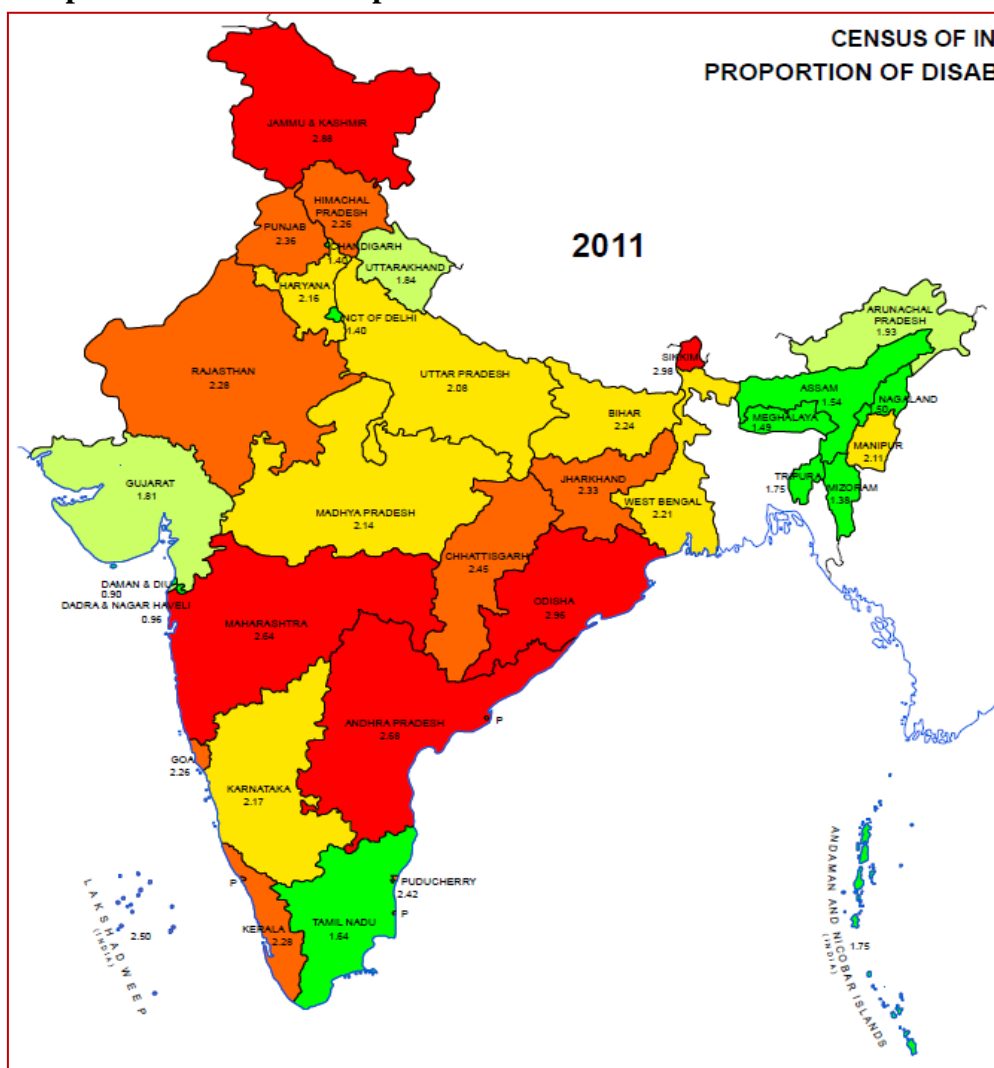
Also, The Government of India has dichotomised Children with Special Needs under two Ministries. The Department of Disability Affairs, Ministry of Social Justice and Empowerment have been responsible holistically for the wellbeing of Persons' with

Disability including Children with Special Needs (CWSN). On the other hand, Ministry of Human Resource Development caters to the educational needs of CWSN and adults with disability. Singhal (2000) highlighted the lack of coordination and synchronised effort between the two ministries. Post Right to Education Act (2010), education becomes a Fundamental right and it is the duty of Government to provide free and compulsory education to all children including CWSN in the age group of 6-14 years or eight years of schooling. Eight years post RTE, eighteen years after Sarva Shiksha Abhiyan (SSA) and one and a half years post Right to Persons' with Disability Act (2016), India stands at a crucial juncture. We have ample policies to support Inclusive Education. Reports have depicted sharp increase in CWSN enrolment after 2000 (SSA, 2007). However, from the school going population estimated by Census (2011) only 1.07 percent CWSN are attending educational institutions (U-DISE ...). It highlighted the lack of identification and assessment of CWSN and their participation in mainstream education system. Government of India requires adopting a systematised approach in providing social access to CWSN, easy identification and assessment, proper channelization regarding issuing aids & appliances or providing education and developing monitoring and evaluation system to assess the current scenario. World Bank (2009) in its Report '*People with disabilities in India: From Commitments to Outcomes*' explained the "Spill over Effect" international policies had among developing countries like India. It reported the mushrooming of inclusive model schools without any systematic process in the country. Another significant parameter included in the World Bank Report (2011) is the birth of Non-Government Organisation (NGO) and Self Help Groups (SHG) in providing education based upon inclusive policy. The reason sought included rigid school systems in India and accommodating features of NGO and SHG.

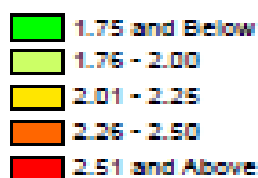
Census 2011 estimated 2.13% population as disabled. The states with high disabled population include Jammu & Kashmir, Maharashtra, Andhra Pradesh, Sikkim and Orissa. Whereas, states having low disability population include Tamil Nadu, Assam, Meghalaya, Nagaland, Tripura and Mizoram. Sikkim has the highest disabled population of 2.98% and Daman & Diu the lowest with 0.9%. Fifty percent of disabled belong to the five states namely: West Bengal (7.52 %), Andhra Pradesh (8.45%), Bihar (8.69%) and Uttar Pradesh (15.5%). A significant number of 7.62% of disabled population was estimated by Census 2011 belonging to 0-6years age. Bihar with 12.48% stood first having maximum CWSN and Kerala scored last with 3.44 percent.

Among the disabled population only 8.53% are graduate and above (Census 2011). The highest disabled graduates are in Chandigarh (19.68%) and lowest in Meghalaya (3%). Delhi has second highest graduate literates in the country (17.43%). Among the school going population (5-19 years), the state with highest number of CWSN attending school is Goa & Kerala with 73% each while Nagaland scored lowest with 39%. Proportion of the Disabled Population to total population was estimated highest in Sikkim (2.98%) and Lowest in Daman & Diu (0.9%).

Proportion of Disabled Population India and States/UTs : 2011

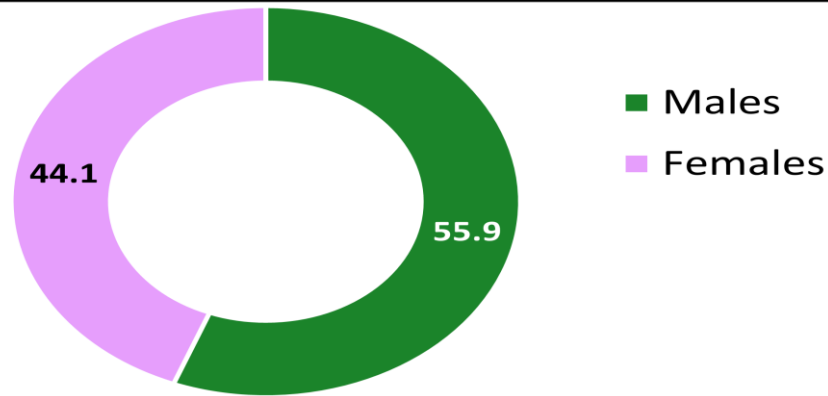


Percentage of Disabled Population to Total Population



The Census 2011 recorded seven disability categories across India which means out of 121 Crore population 2.68 Crore are disabled. Among the 2.68 Crore Disabled population 56 percent (1.5 Crore) are males while 44 percent (1.18 Crore) are females. Girls already in disadvantaged category with an added disadvantage of Disability makes it further difficult for the authorities to seek admission. It places females with disability into 'Double Disadvantage' Group. Special efforts are being implemented by the Government through various plans like 'Ladli Yojana' to ensure enrolment among schools.

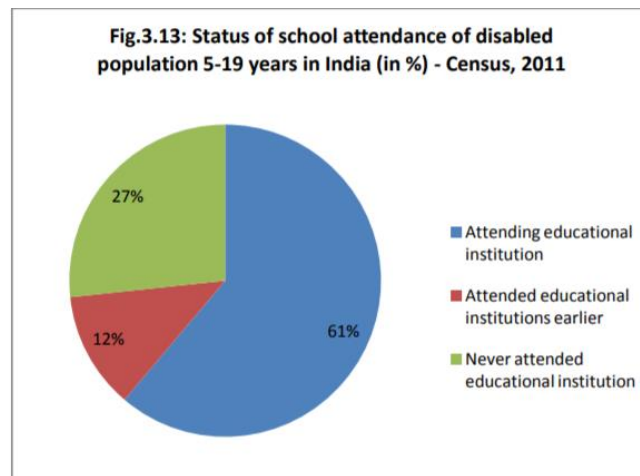
Percentage Share of Disabled Population by Sex India, 2011



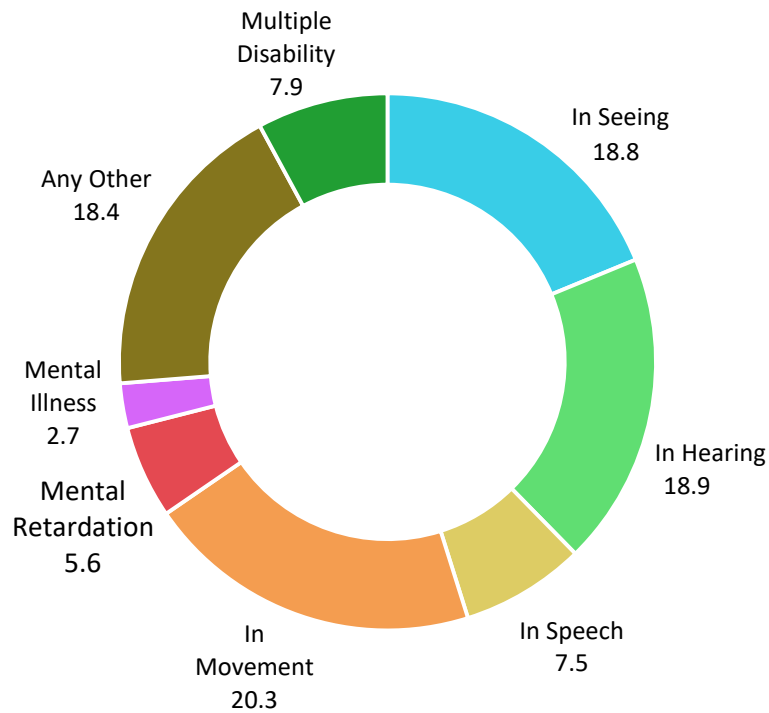
Source: C-Series, Table C-20, Census of India (2011)

Among the seven categories of disability recorded by Census 2011, the largest group comprises of Physical Disability (20.3%) followed by Hearing Impairment (18.9%) and Visual Impairment (18.8%). It is to hereby observe that a significantly high percentage of disability categories comprises of Any Other Option (18.4%). It reveals that more categories of disability are prevalent then measured by the Census 2011. It also means that there are number of People with Disability then calculated by the Census, 2011.

Census 2011 revealed among the disabled population 17% lies in 10-19 years age group and 16 percent among 20-29 years age group. Another noteworthy point is that among all the age groups the disability percentage is highest in 10-19 years. It becomes imperative for the Government to plan and execute education, guidance & counselling, rehabilitation and work status of People with Disability.

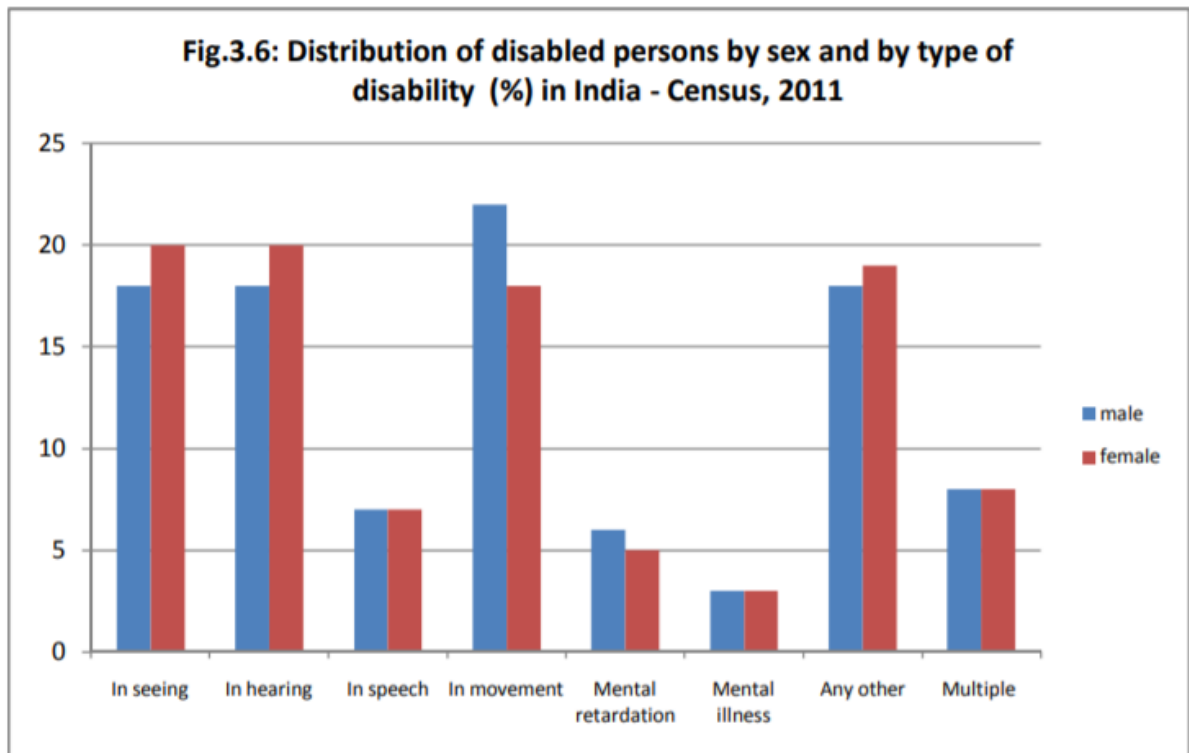


Source: Disabled Persons in India: A statistical Profile (2016)



Source: Disabled Persons in India: A statistical Profile (2016)

61% of the disabled children aged 5-19 years are attending educational institution. Among the disabled children aged 5-19 years who were attending educational institutions, 57% are male children. Post RPWD Act 2016, Census 2021 must assess disability in the mentioned 21 disability category for correct assessment of Disabled Population. If so, Census 2021 might reveal double the number of Persons' with Disability as compared to Census 2011.



Source: Disabled Persons in India: A statistical Profile (2016)

Thus, India can claim being a democratic society (Madan, 2005) only if all its members/ citizens including People with Disability receive equal opportunities, welcoming attitude and full participation among all the domains of society. The road to inclusion has begun. It's an ongoing process where more than the means dedicated efforts and intentions are required from schools, teachers, parents, government and society in general. Inclusive education with collaboration of all its stakeholders must manifest an education system which is accessible to all so as to enable all children to learn, participate, excel and build a society of social justice and equality.

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