

CONSIDERING THE CONCEPTUAL FRAMEWORK OF DIAGNOSIS AND ITS PLACE IN THE CHILD IDENTIFICATION PROGRAMME FOR EFFECTIVE INCLUSION

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Abstract

This paper examine the conceptual framework of diagnosis and its place in the child identification programme in relation to the framework for action on special needs education (SNE) for effective inclusive education practices. The effectiveness of any education programme designed, starts with proper diagnosis, identification and assessment of the pupil which inclusive education cannot be exempted. Absent of diagnosis and identification of children in an inclusive classroom setting is a disservice to the children with special needs. The paper then, closes with a recommendation for diagnosis and assessment leading to early identification and placement of children for an effective inclusive.

Introduction

Diagnosis is the act of discovering or identifying the exact cause of a problem. It is also the determination of the extent of impairment, so as to develop intervention programme. The conceptual framework of diagnosis leads to the identification of the characteristics of the individual screened. Obani (2009) said that diagnosis is the spotting, recognition and acceptance of a things, object and condition by gathering and analyzing a number of observed distinguishing characteristics of feathers, peculiar to it.

However in special education identification of children with learning disabilities is not something to be glossed over. It is very much akin to diagnosis in medicine. It is really the process which goes through the domain of screening, assessment placement and evaluation.

It is important to note that assessment and diagnosis is not a once and for all procedure but rather continuing process forming an integral part of teaching through the school. It is used to determine whether some particular children request special education service (classification) and which educational technique and approaches are most appropriate (intervention) (Alfred and Zamong-Duran, 1997).

In this note, the notion that inclusive education begins and ends with assessment and diagnosis is not an over statement, because they always been the most crucial aspect of inclusive education (Gbegbin and Ajobiwe, 2004).

Looking at the clinical teaching circle, one will discover that both diagnosis, identification and assessment are humped together. According to Lerner (2000), the phases of the clinical teaching process are:

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1. Diagnosis
 2. Planning
 3. Implementation of the diagnosis
 4. Evaluation and
 5. Modification of the diagnosis

In this paper, however, a critical review will be carried out on the conceptual framework of diagnosis and its implications in the field of child identification programmes for effective inclusion.

The Framework of Diagnosis in the Child Identification Programme

The framework of diagnosis or identification include

1. Screening
2. Placement
3. Program Planning
4. Review or evaluation of progress

Oyenuran (2007) is of the opinion that the four major assessment domain in which young children with learning disabilities will receive more services are getting to the:

1. Depth and breadth of assessment activities
2. Family involvement in assessment
3. Multidisciplinary team members involvement
4. Individualized education programme development

Therefore, there should be a thorough diagnosis, identification and assessment of all the areas both medically and educationally, so that the child could be placed adequately. There is need for the child to be properly asserted. The background of the child must be identified and documented and the family should be involved in the process of diagnosis.

The total involvement of parents in the program is a welcome development especially with the current idea called inclusive education.

The multidisciplinary team members made up of relevant professionals should be appropriately involved in the framework so that accurate, authentic and reliable information received are treated professionally.

With the acquisition of the necessary data on the child, planning and place programmes educationally would now be implemented.

Critical Review of the Conceptual Framework of Diagnosis

According to Osuorji (2005) educational diagnosis or assessment generally means a systematic process of gathering, analyzing and evaluating information from different sources about a child with a new to underlying the strengths and weakness, needs, problems and peculiarities, in order to make relevant instructional decisions.

Nicholas (1996) asserted that the main purpose of diagnosis in special needs education is to measure pupils progress, pinpoint pupils strengths and weaknesses, provide starting points for individual programmes, evaluate curriculum and teaching and to provide measures of accountability.

The preparation for method necessarily begins, with finding out, where children abilities are, as a place to begin teaching. Diagnosis certainly is an essential step in the method process for children with learning disabilities.

However, some experts have presented a cogent argument in the field of learning disabilities against early diagnosis according to Lere (2007). These experts based their case on two major problems.

The first one is the inherent difficulties of diagnosing learning disabilities at early ages as well as the inadequacy of current testing tools and procedures.

It is a well known fact that the existing diagnostic instruments do not have the adequacy needed to ascertain an intelligence quotient achievement discrepancy in nursery schools. A lot of militating factors and navigating influences of environment, culture and educationally experiences at that age might not be possible so as to illicit out facts in the diagnostic process. Again, the uncertainty and risk of misdiagnosing the presence of learning disabilities in a young student or pupil when in the actual fact none do exist is a big case (Oyeniran, 2007).

One can observe the complicating factors that make early identification so complex; such as lack of precision in definitions of learning disabilities and in test.

Inclusion Agenda for Children with Special Needs

In the 1990s, inclusion captured the field after the world conference on Special Needs Education in Salamanca in 1994, with the adoption of the Salamanca statement and framework for action on Special Needs Education.

This statement which was adopted by the representatives of 92 governments and 25 international organizations in June 1999 has definitely set the policy agenda for inclusive education on a global basis (UNESCO, 1994). To quote from the Salamanca statement.

We the delegate of the world conference on Special Needs Education hereby reaffirm our commitment to education for All, recognizing the necessary and urgency of providing education to children, youth and adult with Special Education Need within the regular education system, and further hereby endorse the framework for action, on Special Need Education, that governments and organizations may be guided by the spirit of its provisions and recommendations (UNESCO, 1994).

Inclusive education is a process of addressing and responding to diversity of needs of all learner through inclusive practices in learning, cultures and communities and reducing exclusion within and from education. It involves changes and modifications in content, approach structure and strategies with a common vision which covers all

children of the appropriate age range and conviction that it is the responsibility of the regular system to educate all children. (UNESCO, 2005).

Looking at this inclusion agenda for children with special needs and the framework for action and special needs education, one can deduce that, the framework of diagnosis and its place in the child identification programme really enhance inclusive education.

Adima et al (1988) stressed that the success of inclusive education programme depends on the proper diagnosis, screening and educational assessment, this shows that the identification and assessment of children in an inclusive classroom involved a multidisciplinary team approach. It is not a one man affair but different professionals are involved to assess the diverse disabilities encountered by the children in the setting.

Recommendation

The researchers are of the opinion that in as much as there is need for diagnosis and assessment leading to identification of the needs and the planning and re-evaluating of the programs for the children with learning disabilities; there is the urgent need to develop a programme that will vehemently support the acquisition of critical skills in the child with learning disabilities. Hence the need for the distribution of targeted learning and practice opportunities made available throughout the day. Again the integration of critical skill method are application into ongoing learning activities as well as the utilization of the activity based method or routing will go a long way to help.

However, the effect of misdiagnosis of children with learning disabilities can be minimized through the ongoing progress, monitoring and the open-entry and open-exit placement options.

The early identification instruments and procedures should be well selected and structured as well as evaluated on the basis of full prediction matrix.

Conclusion

Care should be taken during the early identification or diagnosis of children with learning disabilities, which should include the several phases components or framework of diagnosis – the location of the children, the screening of the children to select those for special education needs and services. Distinguished professionals should be involved, whose expertise in the different fields relating to the needs of the assessed children. Parents full involvements should be paramount.

The relevance of computer utilization in the diagnosis and assessment of children with learning disabilities should be accommodated.

The planning of programs with child-centered objectives should be intensified. There should be constant evaluation and re-evaluation of programs, so that children with learning disabilities could benefit adequately.

References

- Alfred, J.A. and Zamora-Duran (1997). Reading Disproportionate Representation of Culturally Diverse Students in Special and Gifted Education, U.S.A. CEC.
- Adima, E.E. Abang, T., Awanbor, D. Ladipo, S.O. and Ogbue, E. (1988). Fundamentals of Special Education. Ibadan: Heinemann Educational Books (Nig.) Limited.
- Lerner, J.W. (2002) Learning Disabilities Theories Diagnosis, and teaching strategies (8th Ed.) Boston, Ma; Houghton Mifflin. (web:<http://college.hinco.students/indexhtml>)
- Nicholas, J. (1996) Authentic Comment Brit. J. of Special Education Volume 23(1)
- Obani, T.C. (2009) Basic Skills in Diagnostic Assessment and Identification Process in Special Education for Nigeria; A lead paper presented at the Stakeholders meeting on special needs education, Abuja 9th – 10th February.
- Osuorji P. I. (2005) Implementing Assessment for Special needs children in the regular school. The journal of advocacy and rehabilitation in Special Education 3(3), 95-102.
- Oyeniran, O. (2007) Identification and Assessment practice for early childhood intervention programmes for children with learning disabilities. Journal of learning disabilities in Nigeria 1(1) 24-28.
- UNESCO (1994). The Salamanca Statement and Framework for Action on Special Needs Education, Paris: UNESCO
- UNESCO (2005). Guidance for Inclusion: Ensuring Access for All. Paris: UNESCO
<http://unesdoc.unesco.org/images/00410014/140224e.pdf>