

Contribution of Rehabilitation Psychologists towards Differently Abled Children

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Abstract

Rehabilitation is an integrated program of interventions that empowers differently abled children to achieve personally fulfilling, socially meaningful, and functionally effective interaction in their daily contexts. Rehabilitation Psychologists are uniquely trained and specialized to engage in a broad range of activities including clinical practice, consultation, program development, service provision, research, teaching and education, training, administration, development of public policy and advocacy related to differently abled children. Rehabilitation Psychologists provide services with the goals of increasing function and quality of life of differently abled children. Since disability impacts multiple areas of a child's life, rehabilitation psychologists provide services within the network of biological, psychological, social, environmental, and political environments to assist in achieving optimal rehabilitation goals through intervention, therapeutic support, education, consultation and interdisciplinary collaboration. Rehabilitation psychologists also plan and conduct teaching programs to reduce or ameliorate the negative impact of disability and optimize the well-being of differently abled children. Thus, rehabilitation psychologists help in removing obstacles to independence and aid in changing the destiny of differently abled children. The paper would disseminate knowledge about contribution of rehabilitation psychologists in providing succinct instructional strategies towards differently abled children which may be used by the teachers while dealing with differently abled children.

KEYWORDS: Rehabilitation, Psychologist, Strategies, Differently abled children, Teachers

INTRODUCTION

Rehabilitation psychology is evolving day by day and is developing rapidly due to its valuable contribution for welfare of differently abled children. Throughout the two landmark federal rehabilitation initiatives—the Rehabilitation Act of 1973 (as amended) and the Education of All Handicapped Children Act—psychology has been deemed a full partner. Programmatic initiatives under both the acts are of direct interest to the psychologists. Psychological services are viewed as being important to all differently abled children. Rehabilitation Psychologists play a key role in providing consultations regarding disability and health issues to educational institutions, governmental agencies, employers, attorneys, courts, and insurance companies, in addition to working directly with the persons served and their support systems. Since rehabilitation psychologists

advocate for improvement in quality of life for differently abled children, they are involved in the development and promotion of public policies and legislation that supports non-discriminatory practices and funding of services designed to maximize independence. They also conduct critical research on the occurrence of, and immediate and lifelong implications of circumstances leading to disability. Common research areas include, but are not limited to, risk factors for disability and associated prevention strategies; identification and reduction of co-morbidities; development, use and effectiveness of assessment and intervention tools and strategies; changes in social support, familial and cultural networks; coping needs and resources; educational and community re-entry and participation processes, developmental processes and aging after diagnosis; and healthcare access, resource needs, and cost. Rehabilitation psychologists also plan and conduct teaching programs to develop clinical and research skills for psychology and other health trainees. The ultimate goal is to help reduce or ameliorate the negative impact of disability and optimize the well-being of differently abled children.

Rehabilitation Psychologists address the problems of differently abled children in their life context, both currently and developmentally as the child's needs change over time. Rehabilitation Psychologists view differently abled children holistically and act as active partners in the rehabilitation process. They work together with an interdisciplinary and/or multidisciplinary team of professionals and the persons served to broaden opportunities to facilitate maximal individual functioning as well as participation in social relationships and activities, recreation, education, employment, and the community in general. Theodore Millon (1987), a personality psychologist suggested that changing societal values has led to a rise in psychological disorders. Social instability makes children perceive the world as threatening and unpredictable and thus increase the risk of developing disorder later in life. The rehabilitation psychologist consistently involves interdisciplinary teamwork as a condition of practice and services within a network of biological, psychological, social, environmental and political considerations in order to achieve optimal rehabilitation goals.

REHABILITATION PSYCHOLOGY

Rehabilitation is an integrated program of interventions that empower individuals with disabilities and chronic health conditions to achieve "personally fulfilling, socially meaningful, and functionally effective interaction" in their daily contexts (Maki & Riggat, 2004). Rehabilitation Psychology is a specialty area within psychology that focuses on the study and application of psychological knowledge and skills on behalf of individuals with disabilities and chronic health conditions in order to maximize health and welfare, independence and choice, functional abilities, and social role participation across the lifespan.

Rehabilitation psychology also includes areas such as programs for the blind, deaf, mentally handicapped and physically handicapped. Rehabilitation psychology is by necessity the wave of the future for psychology as well as for society. Thus, rehabilitation psychology is a specialty area within professional psychology which assists the individual with an injury or illness which may be chronic, traumatic and/or congenital, including the family, in achieving optimal physical, psychological and interpersonal

functioning. The focus of rehabilitation psychology is on the provision of services consistent with the level of impairment, disability and handicap relative to the personal preferences, needs and resources of the individual with a disability.

REHABILITATION PSYCHOLOGIST

Rehabilitation Psychologists are uniquely trained and specialized to engage in a broad range of activities including clinical practice, consultation, program development, service provision, research, teaching and education, training, administration, development of public policy and advocacy related to persons with disability and chronic health conditions.

Rehabilitation Psychologists provide services with the goals of increasing function and quality of life for persons living with disability, activity limitations, and societal participation restrictions. Because disability impacts multiple areas of a person's life, rehabilitation psychologists provide services within the network of biological, psychological, social, environmental, and political environments to assist the persons served in achieving optimal rehabilitation goals via intervention, therapeutic support, education, consultation and interdisciplinary collaboration, and advocacy. This necessarily includes the provision of training, educational and support services to families and primary caregivers as well as other significant people in the individual's social/community circle (e.g. teachers, employers, co-workers, friends).

Rehabilitation Psychologists who provide clinical and counseling services assist individuals and their significant others in coping with acute or chronic, and traumatic, progressive or congenital injuries or illnesses, that may result in a wide variety of physical, sensory, neurocognitive, behavioral, emotional, and/or developmental disabilities. Common populations with whom Rehabilitation Psychologists work include persons with spinal cord injury; brain injury; stroke and other health conditions typically associated with aging; amputations; neuromuscular disorders; chronic pain; other medical conditions, such as cancer, AIDS, multiple sclerosis, or limb weakness, that have the potential to limit functioning and participation in life activities; developmental disorders such as mental retardation and autism; psychiatric disability; substance abuse; impairments in sensory functioning, such as deafness and hearing loss and/or blindness and vision loss; burns and/or disfigurement; and impairments that may be compounded by cultural, educational and/or other disadvantages.

CONTRIBUTION OF REHABILITATION PSYCHOLOGISTS

The rehabilitation psychologists contribute a lot in bringing transformation in the lives of differently abled children. There are diverse students in every class. Therefore, rehabilitation psychologists must make maximum efforts to meet the needs of differently abled children. The psychologists and other special education personnels administer formal standardized tests to a student. They observe students' behaviour and refer those they suspect of having disabilities or serious problems for evaluation by a multidisciplinary team.

Rehabilitation Psychologists may belong to many professional organizations relevant to their area of practice and specialization. Rehabilitation Psychologists also participate in other education venues for psychologists and other healthcare professionals.

They may contribute by performing the following roles to address the multifaceted needs of differently abled children:

- Psychological assessment of differently abled children
- Planning rehabilitation programmes
- Executing rehabilitation programmes
- Accommodating individual child's needs
- Writing individualized educational programmes
- Providing training activities
- Instructing intervention and remediation procedures
- Communicating with parents or guardians
- Referring for evaluation
- Collaborating with other professionals
- Using technological advances
- Gaining knowledge of special education law
- Providing consultancy
- Doing research work on differently abled children
- Tackling serious behaviour problems
- Emphasizing on individual's assets rather than deficits

DIFFERENTLY ABLED CHILDREN

It can aptly be said that the disabled are differently able. Differently abled children refer to those who are "different" from their cohorts. Thus, differently abled children are those children who are found to be either hearing impaired, mentally retarded, physically handicapped, learning disabled, brain damaged, speech and language impaired, visually impaired or severely multi-handicapped. They may require a modification of school practices, or special educational services, in order to develop to their maximum capacity.

INSTRUCTIONAL STRATEGIES FOR DIFFERENTLY ABLED CHILDREN

The sensory impairments, physical disabilities and mental or emotional disabilities of differently abled children tend to make academic learning more difficult for them. Teachers must work with psychologists, doctors, and social workers etc. to determine a student's eligibility. Professionals like psychologists, physicians etc. rely on teacher to implement critical aspects of evaluation or treatment.

Differently abled children are often having difficulty in fitting in the normal society. Sad to say, many of these differently abled children are usually deprived of education because of their condition. The instructional strategies should be designed for such children that would take a holistic and integrated approach. Therefore, rehabilitation psychologist, special education teacher and a class teacher are all required to plan instructional strategies for differently abled children in an integrated and coordinated manner. The instructional strategies for some of the differently abled children which may be followed in an inclusive classroom are discussed below:

➤ **Instructional strategies for the visually impaired children**

The rehabilitation psychologist may give following instructional strategies to the teachers which should be taken into consideration while teaching the visually impaired children:

- Speak to the class upon entering and leaving the room or site.
- Call the visually impaired student by name if you want his/her attention.
- Seat the student away from glaring lights (e.g. by the window) and preferably in front row of the class.
- Use descriptive words such as straight, forward, left, etc. in relation to the student's body orientation.
- Be specific in directions and avoid the use of vague terms with unusable information, such as "over there", "here", "this", etc.
- Describe and tactually familiarize the student to the classroom, laboratory, equipment, materials, field sites, etc.
- Give verbal notice of room changes, special meetings, or assignments.
- Identify yourself by name, don't assume that the student who is visually impaired will recognize you by your voice even though you have met before.
- Orally, let the student know if you need to move or leave or need to end a conversation.
- It is not necessary to speak loudly to people with visual impairments.
- Always notify changes of class schedule in advance.
- Large-print books should be made available to children with visual impairment
- The background should be white with no background distinction.
- The child should be appreciated for each successful attempt. Never show dissatisfaction with the response of the student.

➤ **Instructional strategies for hearing impaired children**

The following strategies may be suggested by rehabilitation psychologist to the teachers while teaching the hearing impaired children:

- *Volunteer system* to be formed in the class where other children could guide and help the hearing impaired child as and when needed.
- *Concessions* to be given for oral examination, dictation and recitation.
- *Special announcements* or information to be written on the Black Board instead of only giving it orally or announcing on the mike.
- *Basic knowledge about the disability*, the problems faced by the child and how to deal with them among all the teachers in regular schools.
- *Sensitization* of normal children in the class room towards the disability.
- Hearing impaired child should be made to *sit in front* to be able to listen and lip read the teacher better.
- *Provide frequency modulation* system for these children. Frequency modulation system is an assistive listening device that helps the child to hear the teacher's voice very clearly without distortion and excludes other ambient sounds.

- *Provide easy access* for the parents to interact with the regular teacher to facilitate keeping track of what was being done in the class and helps solve day to day problems.

➤ **Instructional strategies for speech impaired children**

The following strategies may be suggested by rehabilitation psychologist to the teachers while teaching the speech impaired children:

- Work closely with speech therapist
- Minimize the pressure to perform verbally
- Reduce student's anxiety
- Use nonverbal listening skills such as eye contact and facial expressions
- Let the student finish talking
- Don't finish the student's sentences
- Do not allow other students to make fun of the student
- Provide positive feedback for all communication efforts

➤ **Instructional strategies for physically handicapped children**

The following strategies may be suggested by rehabilitation psychologist to the teachers while teaching the physically handicapped children:

- Ensure wheel chair accessibility to classrooms, toilets, office rooms, playground, etc
- The prescribed gradient of the ramp should be strictly adhered to and all ramps should be fitted with handrails.
- Aids and appliances like - wheel chairs, braces, special chairs, crutches, pencil grips, communication boards, etc. should be made available.
- Ensure adequate space allocation to meet individual needs of children using assistive devices
- Ensure proper positioning and safe/careful handling of children with cerebral palsy, with the help of the resource teacher/ parent.
- All classes and teaching facilities for these children should be provided on the ground floor.
- Arrange for a suitable writer for children with writing difficulties.
- Ensure enough response time to children. This is important as they might have communication and speech problems.

➤ **Instructional strategies for children with learning disabilities**

Another group of differently abled children that has attracted the attention of rehabilitation psychologists as well as educationists and parents is the children with learning disabilities. This group of children includes problems of dyslexia (reading disorder), dysgraphia (writing disorder), dyscalculia (mathematical disorder) etc. The rehabilitation psychologist may suggest the following instructional strategies to the teachers which they should kept in mind while teaching the children with learning disabilities:

- Encourage students to be aware of and to evaluate the strategies they use to study and to learn study skills, like note taking and time organization, need to be actively taught.
- Provide structure. Lists of the day's routines and expected behaviors can be of great help.
- Give plenty of warning when changes are made to the timetable, teacher or task.
- Teach how to ask questions. All students, especially the ones with LD, need to feel comfortable with seeking assistance.
- Break activities into small, sequential tasks. Give specific examples.
- Repeat, repeat, repeat – both old and new materials, in different ways.
- Do not expect the students to listen and write simultaneously.
- Mark positively- tick the good bits. Mark for content – not presentation or mark for presentation and not content.
- Do not use playtime to finish work.
- Reward any and all good behavior.
- Very important, seek opportunities to praise and build self-esteem
- Teach reading and writing simultaneously to enhance language comprehension through visual perception, auditory perception and tactile perception.
- Focus on most basic perceptual associations with which the child is already familiar.
- Plan learning experiences that the child can perform successfully.
- Construct reading experiences that use the skills that the child has learnt previously.
- Emphasize on over learning till it becomes automatic.
- Identifying the problem areas in maths is the first step towards helping the child. Concretizing the concepts, use of multi sensory approach, repeated drill and revision exercises once understanding of the concept is ensured, will help in consolidation and retention.
- Provide colour cues for operational signs to call attention to the signs. Also, draw circles or boxes around the signs to enable students to attend more closely to the signs.
- Students with LD may take much longer to learn and can also tire quickly. They have to try harder, which can be exhausting. Be aware that the pace of the normal class is likely to be too fast because they often need more to process language. Make a conscious effort not to speak too rapidly.
- Be prepared to learn from the parents. Interest, involve, and work closely with them. Use whatever works-home/schools agendas, face-to-face meetings, phone calls or e-mails.

Technology plays an important role in improving the life of differently abled children. The rehabilitation process for differently abled children often entails the design of assistive devices such as walking aids etc. intended to promote inclusion of their users into the mainstream of the society.

CONCLUSION

The demand for rehabilitation psychologists has been continuously on the increase. It has become imperative that the efforts and resources mobilized towards rehabilitation psychologists should be effective and relevant. All the people, including teachers, friends and family members, who are concerned with the education of differently abled children must have a positive attitude and should work in co-ordination with each other. Rehabilitation psychologists can contribute to raise standards of the learner and school performance by working in collaboration with the teachers of differently abled children. Thus, an efficient rehabilitation psychologist can enhance the quality of life of differently abled children and may help in enabling the differently abled children with disabling conditions towards normal adaptation to the community.

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