



INCLUSIVE EDUCATION

A CASEBOOK FOR GOOD PRACTICES

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Universidade de Évora
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UNIVERSIDADE
DE ÉVORA



AP HOGESCHOOL
ANTWERPEN



UNIVERSITÀ
CATTOLICA
del Sacro Cuore



CENTRO ZA KOMUNIKACIJO,
SLUH IN GOVOR PORTOROŽ
CENTRO PER LA COMUNICAZIONE,
UOVRIO E LA PERSUNANCA PORTOROZE



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MARIA'S INCLUSION – YES IS POSSIBLE!

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SUMMARY OF THE CASE

Maria, a student with Angelman syndrome, faces various impairments in intellectual, cognitive, sleep, attention, memory, and motor functions. Despite limited communication skills, she receives support from medication, augmentative communication strategies, and mainstream educational technologies. Her family, friends, peers, and community members provide full support. With personalized educational support, specialized therapies, and an individual-specific curriculum, Maria has successfully integrated into regular classes. She has now started secondary education in visual arts, focusing on autonomy and communication. Maria's journey highlights the importance of inclusive education and individualized support in nurturing the potential of students with special needs.

Vídeo Link: <https://www.youtube.com/watch?v=8ncSnGJCdm4> or
https://www.youtube.com/watch?v=y1Y_H7uuKHI

BACKGROUND AND CONTEXT

A successful history of inclusion within the school system is Maria's story. She is 18 years old and was born with Angelman syndrome, diagnosed through cytogenetic analysis when she was 15 months old. The student was assessed by reference to ICF, at the end of her pre-school attendance, one month before entering first grade. Maria began primary school in the 2013/2014 school year. From that assessment, we retain here what has not changed and mention the improvements we have been recording. In accordance with ICF's Body Functions

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and Structure, Maria displays a non-specified impairment in intellectual functions and cognitive dimensions. She has impairments in certain sleep functions, in attention, memory and basic psychomotor and cognitive functions. With regard to voice, articulation, fluency and speech rhythm functions, there is no verbal communication. She has impairments in digestive and urinary functions, as well as impairment in the stability of joint functions, muscular strength and tonus, involuntary motor reactions, imbalance impairment, exhibits a mild impairment in voluntary movement and muscles and function of movement. In relation to ICF's Activity and Participation, Maria has a severe impairment in interaction with objects, limitations in language acquisition and development, limitations in performing general tasks and demands, a severe impairment in body control, a severe impairment in communication, full impairment in self-care, a severe impairment in eating and drinking function. Concerning interaction and interpersonal relationship level, she also displays impairments. In the major life areas, she displays a complete impairment.

In relation to ICF's Environmental Factors (facilitators or barriers to participation and learning), we consider as a complete facilitator the use of medication to assure Maria's well-being as far as they prevent convulsive episodes that can harm her development, provoking a regression in her acquisition/skills. For communication as a moderate facilitator, the first phase of PECS was started, as a means of augmentative communication. For Education as a significant facilitator, we consider that the utilization of mainstream products and technologies for education could facilitate the acquisition of new skills.

Concerning the support and relationships, we consider the immediate family, friends, peers, colleagues, neighbours, and community members as full facilitators.

As a complete facilitator, individual attitudes from immediate family members, friends, acquaintances, peers, colleagues, neighbours, and community members and from health care staff and personal assistants who show complete receptivity to all of our suggestions and strategies.

As a complete facilitator, it is possible to register her good relationship with social security, with health (having timely medical surveillance of the child's needs and referrals) and with work and with the job (because the mother's job allows her to take care and respond adequately to Maria).

PROGRESS AND EVENTS

Considering the assessment in reference to ICF, the measures that we consider more suitable to respond to the pupil's needs were:

Measures from Decree-Law nº3/2008

- a) Personalized Educational Support – a) The reinforcement of the strategies utilized in group or class at organizational, space and activities levels; b) Stimulation and strengthening of skills and competencies implicated in learning; c) reinforcement and development of specific skills (Socialization, Autonomy, Communication, Motor Skills);
- b) Adjustments in the registration process – Attending school with a Unit of specialized support for the education of children with multiple disabilities, where these specific supports are ensured at the speech therapy and physiotherapy levels. The pupil goes 3 weekly hours to APCE in order to attend Music therapy and Riding Therapy).
- c) Adjustments in the Evaluation Process – The evaluation is qualitative and based on criteria such as attendance, behaviour, motivation, evolution, and attitude-facing tasks (availability, attention, rejection), in diverse areas from the ISC.
- d) Individual Specific Curriculum (ISC) – Removal of common curricular areas (Portuguese, Mathematics, Environmental Studies) and introduction of specific curricular areas (Augmentative Communication, Socialization, Autonomy, and Motor Skills).
- e) Supportive technologies – (tablet, suitable software, adaptive writing material)

Other measures

As required by law, the pupil benefits from a class with a reduced number of students, establishing that groups integrating children with special educational needs cannot exceed 20 students nor include more than 2 pupils with those conditions.

Bearing in mind that social interaction constitutes an important basis for development and learning, we intend Maria to be, when possible, in the classroom so she can have access to a diversified set of information and experiences that serves as a foundation for her cognitive and socio-emotional development. One of the strategies utilized is to match, in the class

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schedule, more inclusive moments (musical expression, dramatic expression, reading stories), with the time that the pupil is in the class. Her severe impairments at the activity and participation level imply educational approaches combining opportunities to explore the environment with interactive communication opportunities. In the classroom, the work with the pupil should have as a starting point group work, so that she has points of contact with her peers (the pupil studies numbers when her colleagues are studying Mathematics, she works with words when her colleagues are studying Portuguese, she works on rudimentary Environmental Studies content from her colleagues' curriculum, but at a very basic level and with adjusted activities).

Maria spends more than 60% of her school hours in the classroom (8h in therapies plus 17h in the classroom = 25 hours a week). She has Personalized Pedagogical Support from the Special Education teacher, 8 hours a week; Speech therapy from a speech therapist 3 hours per week; Physiotherapy from a physiotherapist, 3 hours per week; Music Therapy from a musical therapist, 1 hour a week; therapeutic riding from a physiotherapist, 1 hour a week).

The pupil has an educational action assistant who provides support for the moments in the classroom when the special education teacher is away, in extracurricular activities, while eating and for personal hygiene.

Finally, we review the inclusion of the pupil in a regular class at the Basic School of Portel, considering as strong points that Maria learned how to be in diverse contexts, adopting correct behaviour in the classroom and in other environments she attends. The importance for peers to interact with the difference, being able to learn about respect and compassion. As a weak point, the great difficulties in attention/concentration become serious challenges to learning and the amount of stimulus naturally present in the regular classroom does not always help in attenuation. Also, some adapted tasks developed with Maria are, sometimes, distracting for her colleagues. But in spite of the less positive aspects, we will always turn difficulties into challenges to our capability to increasingly improve our response to Maria, making the difference our biggest strength.

Maria finished the 2nd cycle of basic education (5th and 6th level) in the academic year 2018/2019.

CASE STUDY 1

Attended the 3rd cycle (7th, 8th and 9th level), between 2019-2022, remaining in the same class since the 1st year. During this period, they continued to work, essentially, on gait training, language acquisition and development, and intentional communication. The support, in carrying out activities with Maria, was given mainly in the context of the classroom, in the different areas of the curriculum.

In the academic year 2022/2023, she started Secondary Education in Évora, the district capital, about 40 km from where she lives, travelling every day by taxi. She is enrolled in the 10th grade, in a Visual Arts class.

Her adaptation to the new school took place quite smoothly, having established, quickly, affective ties with colleagues, teachers and operational assistants.

She accompanies the class in the disciplines of Physical Education and Drawing A, working individually or in a small group, with the Special Education teacher(s).

Maria's progress, in terms of learning, was limited, however very important for its development. Autonomy and communication continue to assume a priority role in the work carried out with Maria.

CONCLUSION AND THOUGHTS FOR THE FUTURE

In conclusion, Maria's journey within the school system has been marked by remarkable efforts to promote her inclusion and facilitate her development despite the challenges posed by Angelman syndrome. The support of her family, friends, peers, and community members has been instrumental in creating a nurturing environment for her. Personalized educational support, specialized therapies, and an individual-specific curriculum have catered to Maria's specific needs and fostered her progress. Although attention and concentration difficulties persist, Maria has successfully integrated into regular classes and has embarked on secondary education in visual arts with enthusiasm. Continued focus on autonomy and communication will remain pivotal in ensuring her continued growth and learning. By transforming challenges into opportunities, Maria's journey exemplifies the power of inclusive education and underscores the importance of individualized support and positive relationships in unlocking the potential of every student.



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