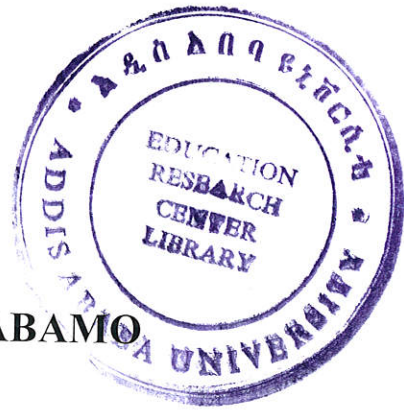
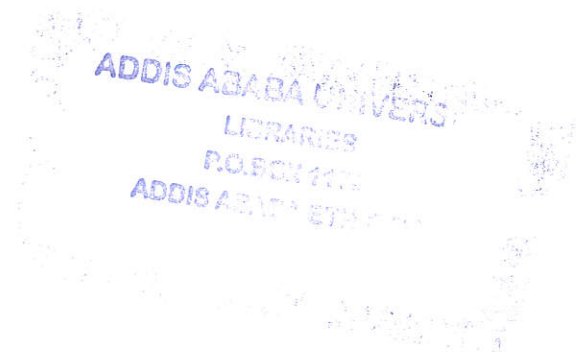


**LEARNING CONDITIONS AND CHARACTERISTICS OF
MENTALLY RETARDED CHILDREN IN INCLUSIVE
CLASSROOMS IN ADDIS ABABA**



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ABSTRACT

This research paper focused on the learning conditions and characteristics of mentally retarded children in inclusive classrooms in Addis Ababa. The investigation examined 9 cases of mentally retarded children in Kokebe Tsibah School. With the objective to determine the attributes of learning in the settings, a review of practice from the experience in advanced country, namely the Federal Republic of Germany was undertaken.

With this aim in view, various instruments were employed to get data from relevant sources. The areas assessed by the study comprehend specific learning abilities, receptive and expressive language development, application to subject matter, cognitive, and socio emotional skills by the mentally retarded children. Supplementing the data, assessment of teaching strategies in the classrooms is endeavored. Observation of cases and the interview of the participants were applied. In addition, assessment of attitude of non-handicapped peers is attempted. This embodied attitude of the peers toward MR children, peers knowledge about mental retardation, and the interaction among the MR children and peers in and outside of classroom settings. The findings have shown that challenges outweighed the opportunities of learning by MR children in the classrooms. Hence, the children were found to receive little or no concrete services, but meaningful and involving learning experiences in the classrooms.

CHAPTER ONE: INTRODUCTION

1.1. Background

Mentally retarded children suffer from delays in development. These delays are characterized by slow rate of learning with evidence in specific areas. Most often, these delays range across the major developmental domains: cognitive motor, social, self-help, and language skills. The generalized pattern of learning is peculiar to this population, owing to the groups' sub average intellectual functioning.

In Ethiopia, currently, mentally retarded persons constitute 6.5 % of the disabled population, which constitutes 10% of the total population of the Country. Among the MR, only less than 0.01% has access to school. Moreover, enrollment of mentally retarded children has become more problematic due to lack of a deliberate Act setting out strategies and instruments in order to render educational services to the mentally retarded in the Country (Adugna, 1991; Tirusew 1999; and Numma, 2000).

A good start is exhibited by the Government to address the situation of education of mentally retarded persons. In 1994, the Government issued the education and training policy that was instrumental to the education of the disabled. The educational service rendered to the mentally retarded persons, however, is still at an infant stage. The available provisions of services are limited to trainings on daily living skills and /or instructions in a classroom setting.

To date, mentally retarded children, in the country, can only be admitted in three schools. Since 1987 G.C., Mekane Yesus Church & Save the Children-Norway have been providing services to the mentally retarded children in Addis Ababa. The third is the Kokebe Tsibah School., which is the domain of this study (Numma, 2000).

Earlier, Tadesse (1991) quoting the reports of special and regular enrollment of students by MOE (1984-88) indicated a state of segregated education in Ethiopia. However, such segregated education for the handicapped had been decreasing and integrated education increasing. Accordingly, the growth rate has reflected public awareness towards education of the handicapped and the desire by Governmental and International Organizations to educate the disabled in integrated settings.

Tirusew (1999) also indicated the small growth rate in expansion of special education services and the distribution in the education of the handicapped. For example, the study noted that the special classrooms for the handicapped are mostly in Addis Ababa. In fact, it was indicated that only those who live in big towns have been getting the necessary services for their education. It was recommended to consider provisions of similar services in small towns.

Cognizant of the principles of inclusion enacted in the Salamanca Statement (UNESCO, 1994), a new approach of instructions in some classrooms is being considered in all continents of the world. The principle of inclusion underscores that all Governments of all Countries have to teach all pupils in all classrooms settings according to their needs unless there are compelling reasons for doing otherwise (Jonson, 2002).

In Ethiopia, currently, few classrooms are being tried that have just targeted on the inclusion of different groups of disabilities in regular classrooms. For the first time, inclusive classrooms are being attempted in two schools in the Capital and one in Sebeta. They are Kokebe Tsibah School, German Church Primary School, and Mulugeta Gudeta School, respectively. Among these schools, however, mentally retarded children are accepted in regular classrooms only in Kokebe Tsibah School. Earlier, there were 19 mentally retarded children attending these classrooms among 55 mentally retarded children in the school. The rest are in segregated classrooms.

1.2. Statement of the Problem

Inclusive classrooms in Ethiopia have affected the learning conditions and characteristics of some mentally retarded children. Recently, some classrooms have started inclusion of mentally retarded children in regular classrooms in Kokebe Tsibah School, Addis Ababa. As a pioneer of the move in the Country, the school has been involved in implementation of related activities within the last decade.

In Ethiopia, educational services aimed for the mentally retarded in inclusive classroom settings are at infantile stage. According to Numma (2000), educational services to the mentally retarded lack the means of identification, assessment materials and most importantly, the resources to suit different educational environments (for example, special classrooms, teaching aids, specially trained teachers, resource rooms and etc) .

1.3. Objectives of the study

In general, the study elaborates two conditions of provision of education in Ethiopia .It attempts to contribute to research and development in inclusive education and education for the mentally retarded, which are at early stages in the Country. In this regard, specific objectives of the study include:

1. Gathering of primay & secondary data on conditions of inclusive education to mental retarded children in Ethiopia
2. Identifying and determining the learning conditions and characteristics of the children with mental retardation in Kokebe Tsibah school
3. Examining the quality of services provided in the inclusive classrooms of Kokebe Tsibah School.

4. Identifying and determining the magnitude of inclusion of the children into the inclusive classrooms of Kokebe Tsibah School ; by observing the practices of advanced Countries such as the Federal Republic of Germany.

1.4. Delimitation of the study

The study mainly deals with the exploration of inclusive classroom practices of mentally retarded children in kokebe Tsibah School. The study is limited to 19 mentally retarded children of kokebe Tsibah School, who attend inclusive classrooms.

1.5. Definition of Key terms

Adaptive Behavior

The ability to cope up with the demands of every day School life ; including specific learning abilities, receptive and expressive language development, application to subject matter , cognitive development and socio emotional skills of mentally retarded children in Kokebe Tsibah School

Assessment

The practice of gathering data to determine learning conditions and characteristics of mentally retarded children by teachers of the Kokebe Tsibah School and the investigator

Children

Pupils in Kokebe Tsibah Elementary School

Inclusive Education

The practice of admitting of a mentally retarded child in a regular classroom by Kokebe Tsibah School

Interview

An informal assessment procedure in which the investigator questions teachers and non mentally retarded peers of mentally retarded children in inclusive classrooms of Kokebe Tsibah School

Learning

Experience that result in better achievements in mastery on required areas of every day life skills Kokebe Tsibah School community

Mental Retardation

Limitation in present intellectual functioning of children and self-help skills as recognized by the Kokebe Tsibah School

MOE

Ministry of Education

MR

Mentally Retarded

Poverty

Less than 200 Br of income in a household by parents of mentally retarded children in Kokebe Tsibah School, as reported by records of pupils in Kokebe Tsibah School

Pupil

A person who is being taught in schools at elementary level

School

The institution for educating children in and out of classroom settings

SEN

Special Educational Needs

UNESCO

United Nation Education Science and Culture Organization

CHAPTER TWO: REVIEW OF LITERATURE: IMPLICATIONS OF INCLUSIVE EDUCATION TO LEARNING CONDITIONS AND CHARACTERISTICS MENTALLY RETARDED CHILDREN

2.1 The philosophy of Inclusive Education

The philosophy of inclusive education has emanated from the movement of parents, educators and community members who sought to create schools and other institutions that are based on acceptance and belongingness. Inclusion has earlier focused on individuals with disabilities. At present, its scope has widened, to include, entirely, the philosophy of educating children, who challenge the system. Advocates of inclusion seek to restructure schools to be a unified system found on shared principles (Salend, 1994).

Inclusive school communities are societies where all students' needs are met irrespective of talent, disability, socio-economic and cultural background, in supportive mainstream schools and classrooms. In this regard, the basic presumption of inclusive school communities is that all children, with or without disabilities, and including those with linguistic, ethnic, cultural, and socio-economic differences, belong in one school, and should have access to similar educational services. Inclusive school communities are both a process and outcome of social justice, equity and democracy within the educational system (Sands, J. 2000).

Kissanji (2000), in his article on inclusive education and deaf education, had attempted to describe the meaning of inclusion. One thing that he indicated is the understanding that it is not a state of being, but a process and goal. Beyond this idea, inclusive education meant different things to different people. Inclusion can be constructed as social and educational as outlined below.

1. Social inclusion

- From institutional to deinstitutional action or open society
- From injustice to justice and human rights
- From social intolerance to tolerance of diversity
- From domination to democracy
- From inequality to equality of opportunity

2. Inclusive education

- From parallel system of education to a unified system
- From disability to special needs
- From special needs to education for all
- From schools for some to effective schools for all
- From competition to collaboration
- From education at school to education in relationship within community

To sum up, according to Farrel and Ainscow (2000), inclusion refers to the commitment to educate the child, to the maximum extent appropriate, in schools and classrooms he or she would attend. Inclusion has an underlying philosophy that all children belong together. It involves bringing the support services to the child (rather than moving the child to services) and requires only that the child will benefit from being in the classroom.

2.1.1. Roots of Inclusive Education (Thin lines among Mainstreaming, Integration and Inclusion)

With regard to inclusive education, it could be traced to earlier philosophies of normalization, mainstreaming, and integration. Thus, it is essential to elaborate on these philosophies.

1. Normalization

As Salend (1994) referred to Nirje (1969) normalization has been a philosophy that asserts the need to adjust social interactions and experiences to adults and children with disabilities. The philosophy had influenced to large extent the realization of the philosophy of mainstreaming. It is also noted with normalization all opportunities meant for the disabled should match those enjoyed by others who are not disabled. With breaking new ground, the normalization philosophy has been instrumental. Still, it is serving as a guideline to the delivery of services to individuals with disabilities.

According to Howard and Orlansky (1980), historically, residential institutions for the handicapped and severely disturbed have come under attack by professionals and by the courts as being unable to provide the care and educational services needed by the persons living in them. Given the principle of normalization, large residential institutions are inappropriate places in which to place handicapped citizens, even if all of the institutions were providing humanistic care and good educational programming.

2.1.2. Mainstreaming

Mainstreaming is the education of mildly handicapped children in the regular classroom. It is a concept compatible with the least restrictive environment provision requiring that all handicapped children be educated with their normal peers whenever possible.

Mainstreaming is based on the philosophy of equal educational opportunity that is implemented through individual planning to promote appropriate learning, achievement, and social normalization. Historical roots of mainstreaming grows from a number of different influences; the advocacy movement, litigation, research and evaluation studies, professional maturity of special educators, legislation, and changing public attitudes about what constitutes appropriate treatment of exceptional pupils (Stephens,T et al.1982) .

In classroom settings, mainstreaming denotes the carefully planned and monitored placement of students into regular education classrooms for their academic and social education program that lies with the regular education teacher. Overall, the philosophy asserts that regular classroom environment be adapted to address the instructional needs of the student (Solner and Thousand, 1995).

2.1.3. Integration

The concept of integration and, recently inclusion has evolved over the last 20 years or more. However, the issues remain controversial, and there are still different views about the meaning of integration among academics, policy makers and practitioners. According to Farrel and Ainscow (2000), the term integration was used to describe a much wider variety of educational provisions. The review indicates that this could range from a special to mainstream school, to full time placement in such schools.

Integration, in school, is a planned interaction based on the placement of students in mainstream classes. The rational behind integration, according to professionals in the fields of education, is the requirement to fill in the gaps between in and out side of the classroom settings needs of mainstreamed students. Thus, illustrating the points of departure, placement of a student with mental retardation into physical education class with regular education peers

twice a week would be an example of integration while the placement of students with mental retardation in regular classrooms for his/her academic performance with supplemental assistance from resource room teacher once a day is considered mainstreaming (Salend, 1994).

An obvious problem with defining integration solely in terms of provision (i.e. the setting in which a pupil is placed) is that it tells nothing about the quality of education that is received in this provision. 'Are pupils placed in units attached to a mainstream school, for example, more integrated?' is the question raised to put the point? It is argued that such units can be just as segregating. Indeed, even pupils placed in mainstream class may be isolated from the rest of the class and not truly 'integrated' within the group, particularly, if they are supported in one to one sessions for the majority of each day. Integrated placements, therefore, may still leave the pupil segregated (Farrel and Ainscow, 2000).

2.1.4. Inclusion

With reference to education of learners with special educational needs, integration and inclusion are often used interchangeably. Yet there is a big difference between them. With Inclusion, it is the Childs' right to education is the core. The emphasis is on reviewing school systems and changing them rather than trying to change the learning environment, which is often the case in integration (Kriestensen, 1997).

For various reasons, the term inclusion has become a more usual way of describing the extent to which a pupil categorized as having SEN is truly 'integrated'. Used in this way, the term refers to the extent to which a school accepts pupils as full members of the group and values them for their contribution (Farrel and Ainscow, 1995).

Another way of thinking about inclusion is that considering who is responsible for the child being ready to learn the adults must be able to design appropriate educational opportunities that foster the individual students' growth. Making the adults responsible for students learning is a shift from the traditional practice of the student demonstrating specific competencies before being able to enter a specific programme (Armstrong, F.2003).

Apart from that, advocates of inclusive education seek to restructure schools to be a unified system based on the following governing principles;

1. All students regardless of their race, linguistic ability, economic status, gender, age, ability, ethnicity, religion and sexual orientations should have the right to all opportunities in the mainstream society.
2. All students are valued individuals who are capable of learning and contributing to society.
3. All students are entitled to equal access to quality services that allow them to be successful in school and life
4. All students have access to individualization in terms of diagnostic services curriculum accessibility, instructional strategies, and related services based on their needs.
5. All students have opportunities to work and play together.
6. All students are taught to appreciate and value human differences and similarities.
7. All professionals, parents, peers, and community members with in collaboration should share resources skills and advocacy.
8. All schools should involve parents and community members in the educational process (Salend, 1994).

2.2. Profiles of learning conditions and characteristics of mentally retarded children in inclusive classroom settings

2.2.1. A summary of learning conditions and characteristics of mentally retarded children

Learning of mentally retarded children is characterized by delays. It is epitomized by slow rate of development in most areas of development. Most often, the delays range from 1 to 3 years across various curriculum domains: cognitive, motor and social development, self-help, language development and academic readiness skills (Tirusew, 2000).

According to Ittlenbach et al. (1994) , mental retardation is the occurrence of significant sub - average intellectual functioning coexisting with substantial limitation in two or more of the following applicable adaptive skills in human beings. These are community use, self-care, home living, social skills, self-direction, health and safety, functional academics, leisure and work. As conventionally, considered mental retardation is manifested before the age of 18.

According to Sue (1997) the causes of mental retardation are noted as post natal, peri -natal and prenatal conditions of biological or medical and cultural familial malfunctioning. Mentally retarded persons with no brain damage or other physical problem indicate conditions of poor socioeconomic and cultural environment early in the child's life. Clinical or pathological retardation is caused by factors categorized under infections, intoxication, trauma and physical agents, metabolic disorders, brain disease, prenatal influences, chromosomal abnormality, gestational disorders and psychiatric disorders.

Mental retardation is classified by degree of severity that is measured on IQ tests. According WHO (1993), we find those labeled as mildly retarded with scores ranging from 50-75 and those labeled as moderately retarded with a score ranging from 35-49 on the test. Mean while, severely retarded children are found out to score with in the ranges of 20-34 and the profoundly retarded children score points below 20.

Above all, the significance of the tests is related to the placement of mentally retarded children in different educational settings for provisions of services. Mildly retarded children are considered educable and capable to be placed in regular classrooms with or without being assisted permanently. Children with moderate retardation would require consistent support to attend regular classrooms and, often, they are regarded to benefit from trainings on various skills by attending vocational education. However, they are usually limited to mastery on daily living skills. For profoundly-retarded children, educational services are rendered in day care centers, at home and even in hospitals (Gearheart et. al, 1988).

Common characteristics that accompany mental retardation are dependency, passivity, low self- esteem, frustrations, low tolerance, depression and self-injurious behaviors. The more severe are the levels of mental retardation are associated with speech difficulties, neurological disorders, cerebral palsy and vision or hearing problems. It was also noted that social and vocational skills and degree of adaptability might vary with in each categories (Sue, 1997).

Recent findings from late reviews suggest to moves toward changes on the term mental retardation. Walsh (2002) asserts that traditional definition included adaptive behavior (and yet there is nothing-adaptive behavior readily accessible in the words mental retardation). Using intellectual disability or cognitive disability only makes the same mistake again. Learning disability may be a bit closer and may seem to incorporate adaptive behavior elements, but the term is already taken.

To consider adequately both cognitive as well as adaptive elements, we would find that the most appropriate term necessarily be hyphenated (e.g. cognitive – adaptive delay). The rationale behind is that cognitive disability or delay may have the benefit that it may be immune to corruption into pejorative overtones (i.e. one could speak of aspects cognitive, adaptive, capabilities, skills, abilities, limits, levels, in addition to disability and so forth with ease). The term referred to specific skills, capabilities, and characteristics, and, therefore would even be more resistant to the acquisition of negative connotations (ibid.).

2.2.2 Learning of mentally retarded children in inclusive classroom settings

The basic principle of inclusion in classroom settings is that classroom curriculum is accessible to each pupil could be developed. Nevertheless, the freedom of the the teacher to determine the content of the curriculum and the timing of its delivery has been constrained by the introduction of the National curriculum and with its programmes of study (Mittler, 2000).

Inclusive curriculum can be developed that provide effective learning oppotunities for all pupils' .Three key priniciples for developing a more inclusive curriculum inlcudes:

- Setting suitable learning challenges
- Responding to pupils' diverse learning needs and
- Overcoming potential barriers to learning and assesment for individuals and groups of pupils (ibid).

The point of departure that should be particularly emphasized is that there are quite a few teaching strategies or materials, which are uniquely usefull to a given category of students. Thus, regardless of whether a student might be diagonised as mentally retarded or learning disabled, teachers' woud use the same techniques to teach them if their educational needs are

the same. In general, with regard to teaching strategies, the following are concepts that are of considerable importance.

- Making the good use of resource personnel who are available to support efforts in working with these students
- Learning is facilitated, if there is a relatively structured classroom.
- Learning can be improved and behavioral problems can be diminished if systematic approaches to instruction are used. (Stephens, T et .al. ---1982).

Along with the specific domain of teaching mentally retarded children in inclusive settings various skills and rearrangement must be mastered and rearrangements in the ordinary classroom settings (Gearheardt, 1988).

General suggestions applicable accross subjects and skill areas

1. Building motivation to learn in different possible ways
 - a) Using specific reward systems(as with behavioral modification techniques)
 - b) Relating learning situations to the pupils known areas of interests
2. Being aware of skills, informations and concepts that are prerequisites to new learning tasks attempting not to teach new tasks until these prerequisites are parts of the students' repertoire.
3. Using concrete (rather than abstract) examples as much as possible

E.g. In teaching that 4 plus 3 equals seven, it would be better to ask how many pieces would I have, if I had four oranges in this hand and three oranges in this).This approach assists the student to learn the addition process.

4. Being aware of variety of possible readiness and ability levels both across and within subject areas as well as modifying assignments necessary in recognition of these variations
5. Making use of group experiences as a vehicle for learning. This suggestion is included in the preceding discussions of the need to modify learning assignments but should also be followed in all areas of the school curriculum
6. Creating opportunities for verbal expression .The rationale behind is that mentally retarded pupils are often less adaptive at self – expression skills than non-handicapped pupils
7. Being alert to special needs in the abilities to generalize and conceptualize by mentally retarded pupils
8. Using a variety of techniques to support or simplify the learning task ,considering general characteristics of mentally retarded pupils that include:
 - a) Reducing distractions in the learning environment as much as possible
 - b) Providing for more frequent review
 - c) Simplifying instructions
 - d) Introducing new vocabulary words before initiating new assignments (experiences indicate which word may be more likely to cause difficulty). There is no rule to a list of difficult words applicable to all students.
 - e) Assigning problems in small clusters
 - f) Using color-coding whenever appropriate
 - g)Using picture, arrows and so forth on dictation or other written assignments

Generally, there is a need for expertise where mentally retarded children are admitted in inclusive classrooms. In these classrooms, teachers are required to attain skills and knowledge about the variety of individual levels of mastery, specific needs, barriers to the well being and learning of their learning environment, and all pupils' different possibilities and needs for support (Johndson, 2002).

As it is learnt from Germany's experience, the various levels of expertise needed qualifications in

- Teaching mentally retarded children (Equivalent to B.A degree, teachers attend higher learning institutions for 4 years or more.)
- Teaching children in elementary schools at individual level (given courses at undergraduate level supplemented with practical application in schools)
- Teaching elementary school age children in a team (given courses at undergraduate level supplemented with practical application in schools) (Fitsum, 2004).

The findings from the same review unveil the management of physical and human structuring of classroom settings is important. It was learnt accessible resource room would be available with proper structuring. A classroom with two constituent rooms, the main classroom opening to a smaller sized room was an option. The latter would serve for intermittent support to MR pupils with occasional separate instructions in required skills.

Each of the teachers in a team are expected to master the skills of managing the classroom structure. Often, three teachers are in a team. Out of them, a graduating student from a higher learning institution is a member. The case was valid with all classrooms visited by the investigator. The roles teachers exchange include giving lessons, conducting assessment, providing alternating support in resource room.

The major finding was that, in the inclusive environment, it is noted the MR children can suggest

- movements as well as observe the movement of the teacher and peers and imitate those
- movements. In addition, the children are in a better position to learn the vocabulary for different
- movements they do (i.e. Walk, jump, run, etc), if proper management of the classroom environment is maintained.

CHAPTER THREE: METHODS AND FINDINGS

3.1. Study Site

Kokebe Tsibah School is located in Addis Ababa. The special education unit for mentally retarded children of Kokebe Tsibah started in 1988 on a pilot basis by the Ministry of Education.

It was the first program of its kind in Ethiopia to provide educational services to MR children in integrated settings. At present, 55 mentally retarded children are attending the school. There are 11 male and 8 female mentally retarded pupils in inclusive classrooms.

3.2. Participants

Nineteen pupils, the population of mentally retarded children in inclusive classrooms, were initially screened. Using purposive sampling method, 9 children were selected to take part in the study. The children were preferred resting on time and funding limitation, as well as the availability of their complete records.

In each of the inclusive classrooms, only one mentally retarded pupil was placed. In this study, there were four males and five females of varying socio economic background. Two teachers of the MR children were contacted .Four non mentally retarded peers of the children were also contacted respectively. Overall, 15 participants were included in the investigation.

3.3. Instrumentation

The following instruments are developed, and some are adopted to meet the end.

1. Scale 1(2004): It was the instrument used by the main study .The original scale was Numma (2000). It has two categories. In category one there are 40 items, and in category two 44 items making 84.

The study of learning conditions and characteristics of mentally retarded children in the inclusive classrooms needed the development of the administered scale. In addition, some items are incorporated to suit the assessment in inclusive classrooms. Therefore, the pertinent scale consisted five categories with 18 items .Under each category three sub items were identified.

For example,

1-.Visual skills

- Can see as required
- Can see at a distance of 2 metres with magnifying lenses
- Can see at a distance of 2 metres without magnifying lenses

Instructions

a. In order to decide whether the expected behavior is consistent or not, continuous and repeated observations were required. Each form of the observations was, in average, shown three times. During the sessions, the observer marks (x) in the space against each characteristics under the respective columns and numbers (3, 2, 1, 0).

e.g.

Often with out	Often with slight	Often with much	No exhibition of
3	2	1	0

was tested on a sample population of four children from two classrooms. The contents and structure of the instrument were then revised to represent the final version.

3.4. Method of Analysis

Based on past research and from reviews of existing program instruments were developed to assess the case of learning conditions and characteristics of mentally retarded children under investigation.

Majority of the data were analyzed qualitatively complemented with quantitative techniques. The quantitative data from the instruments were processed through SPSS, where bar graphs were analyzed qualitatively. This case is the data from scale 1(2004).

3.5. Procedures

The conducting of the empirical study was followed with these succeeding procedures.

1. The researcher contacted the directress of the Kokebe Tsibah Elementary School. After obtaining the letter of collaboration from the Department of Educational Psychology at Addis Ababa University, the researcher briefed the directress on the research objectives and design; terminating the session with taking appointments to contact participants of the study after a week.

2. In the presence of the Head of the special education unit in the school, the directress and the researcher selected two teachers among the domain of equivalently trained and those with relatively closer years of duration in the service. The weight given to the aspects was equal.

3. Due to shortage of time, the investigator has decided upon conducting assessment of the adaptation / maladaptation of the MR pupils to the inclusive classrooms by the two teachers in the school.

4. The teachers were given trainings on various skills of applying the Scale 1(2004) for one week; an assessment of learning conditions and characteristics of mentally retarded children was undergone for three weeks.

5. Considering the children's developmental level, the decision was made for the sessions to be approximately 16 hours long with each child. There were five sets of observation scheduled with each child. The sets of observations are shown in these forms. These are observations of

- Specific learning abilities
- Receptive and expressive language development
- Application to subject matter
- Cognitive skills
- Socio emotional skills

Assessments of the sets of observation are undertaken for three hours long taking 10 – 15 minutes of recess. Each of the expected skills to be mastered is observed three times.

6. Every three days teachers submitted the data collected to be supervised by the investigator.

7. Some doubtful data were sifted out through casual contact with the respective teachers.

8. After a month of working on collecting the raw data on the adaptive and maladaptive behaviours, a recess of two days was taken to begin the assessment of teaching strategies followed with instructions by the two teachers. The researcher conducted observation of the teaching strategies for one week.

9. Observation and interview of randomly selected non-retarded peers attending the same classrooms with MR children was conducted for six days long by the investigator. In addition,

four days were allotted to observe the qualities of interaction in and outside of classroom settings of these children. In the next two school days, interview of the non-retarded peers was undertaken.

10. The last task carried out by the empirical study is interview of the teachers. The interview was conducted with each individual teacher.

3.6. Findings

The following data had been collected by the study.

- Assessment of levels of mastery in required areas of learning by MR children.
- Assessment of teaching strategies in inclusive classrooms
- Assessment of attitudes of the non mentally retarded peers towards mentally retarded children in/outside classroom settings

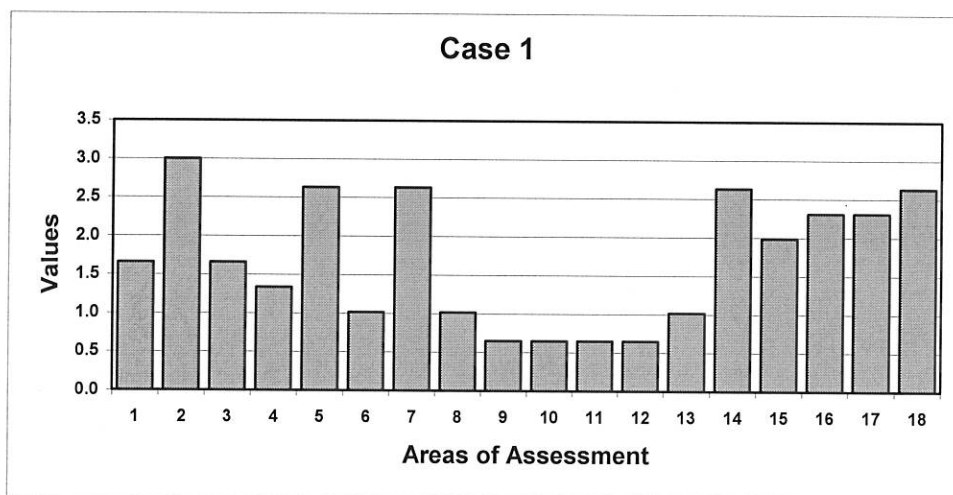
I. Assessment of levels of mastery of mentally retarded children in required areas of learning

The findings on this part gave the data gathered for the main study. In terms of dealing with adaptation/ mal adaptation of the mentally retarded children, the children were observed on (1) specific learning abilities (2) receptive and expressive language development (3) abilities of application to subject matter (4) cognitive skills (5) socio emotional skills

Case 1

Background

Case 1 is a 19 years old girl in grade 4. The cause of her mental retardation is an accident that happened to her mother (Lightening). The condition was diagnosed in 1981 E.C. She has been attending the special education program for the last nine years in the school. She is reported to come from poor family.



Graph 1 Case 1 s levels of mastery on specific skills

Indicators

N =the number of areas assessed by the Particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture
5. Expression of self through speech

6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills
10. Work skills of doing assignment
11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity
17. Participation in social life activities
18. Temper management

Discussion

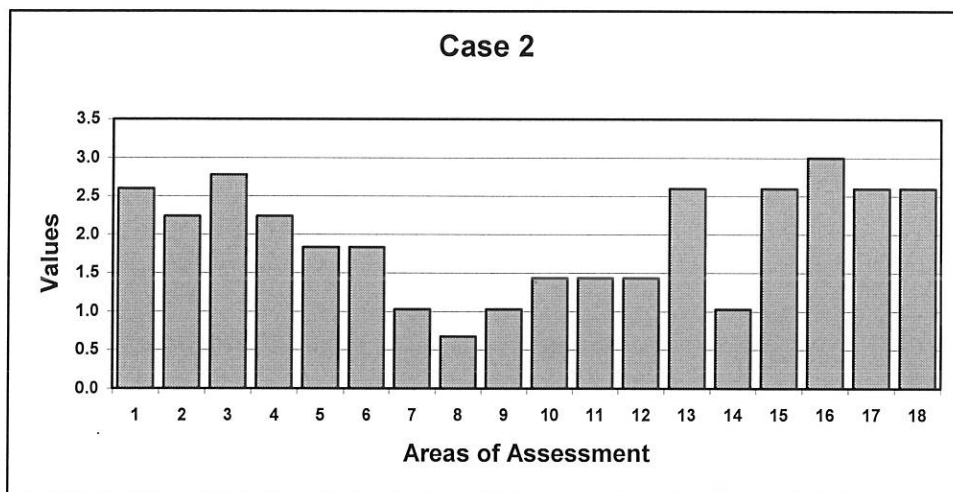
From this table one can understand that Case 1 is high in hearing, expression of self through speech, comprehension of listening skills, work, and temper management skills. Perseverance and persistence, socio maturity and participation in social life skills are also above the moderate range.

Case 1 is average in visual, motor, and expression of feelings through voice and / or gestures skills. Relatively, Case 1 is deficient in writing, work skills of doing assignment, mathematics, and task management skills. Comprehension of speaking skills, note taking skills and attention span are also shown low.

Case 2

Background

Case 2 is a 16 year old girl in Grade 4. She is an orphan living with her relatives. The retardation in the girl is caused by lack of nutrition due to lack of resources by her parents. The time of onset when diagnosed is 1990 E.C.; she is enrolled in special needs education program in the School.



Graph 2 Case 2 s levels of mastery on specific skills

Indicators

N = the number of areas assessed by the Particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture
5. Expression of self through speech
6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills
10. Work skills of doing assignment
11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity

17. Participation in social life activities

18. Temper management

Values = Range of scores on areas of assessment

Discussion

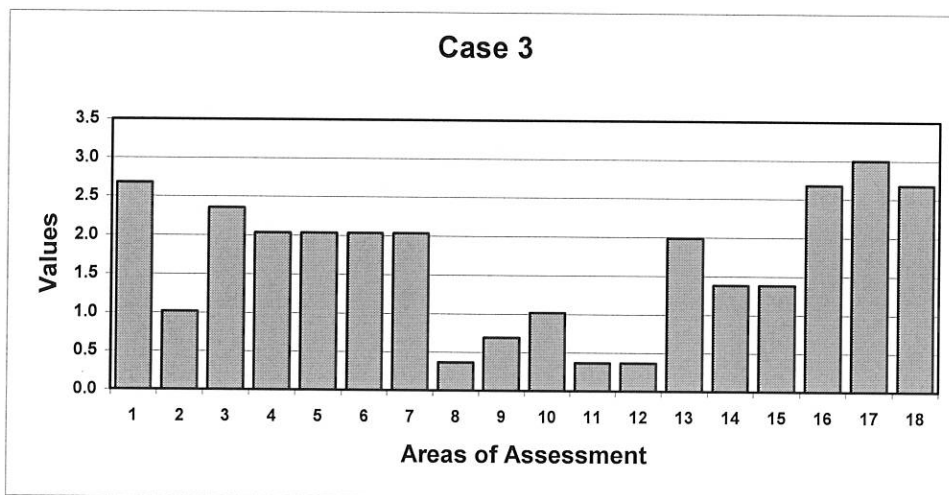
The graph above shows case 2 is top in sociomaturity, motor, attention span, participation in social life activities skills. The skill of attention span by case 2 is peculiar. The hearing, expression of feelings by voice and / or gesture, expression of self through speech, expression of feelings by voice and / or gesture, expression of self through speech, comprehension of speaking skills are also portrayed above the average range.

Case 2 is moderate in work skills of doing assignment, mathematics, and task management skills. Work skills by the case are signified as it is revealed low. It is also presented Case 2 is deficient in comprehension of listening, note taking, and writing skills.

Case 3

Background

Case 3 is a 15 year old boy in Grade 3. . He is from a well to do family. He is epileptic, prenatal conditions causing retardation in him as diagnosed in 1985.E.C.For the last six years; he is in special needs programe in the school.



Graph 3 Case 3s levels of mastery on specific skills

Indicators

N = the number of areas assessed by the Particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture
5. Expression of self through speech

6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills
10. Work skills of doing assignment
11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity
17. Participation in social life activities
18. Temper manager

Values = Range of scores on areas of assessment

Discussion

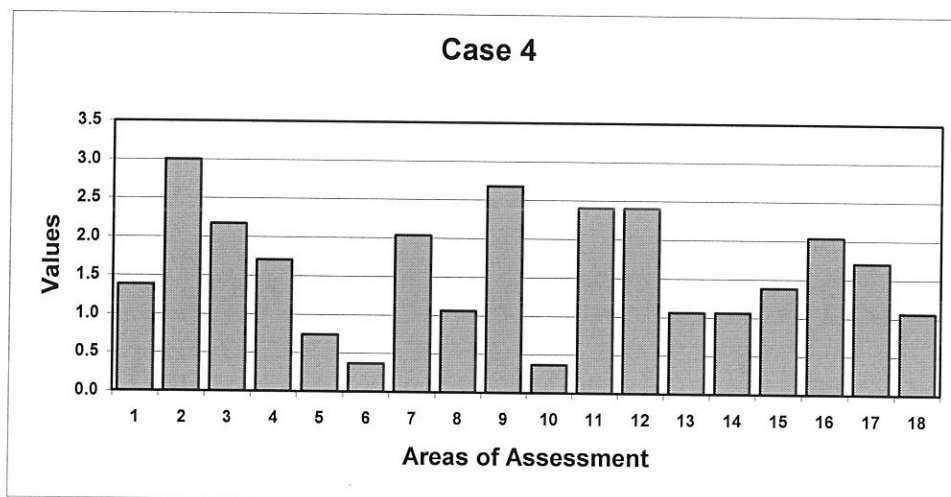
Graph 3 gives Case 3 high in visual, soci maturity, participation in social life activities, and temper management skills. Case 3 is also above the average range in motor, expression of feelings by voice and / or gesture expression of self through speech, comprehension of speaking skills, and comprehension of listening skills.

Case 3 is moderate in work and perseverance and persistence skills. It is evident in the above graph that Case 3 is at the bottom in note taking, mathematics, task management skills. To boot, hearing, writing and work skills of doing assignment are also low.

Case 4

Background

Case 4 is about a girl in Grade 2. She is from a poor family. It is reported that her retardation is caused by malnutrition due to famine in the Northern part of Ethiopia around the mid 80s. It is noted a condition of dental Retardation with out any possible pathology resulting from poor socioeconomic and cultural environment early in the childs life. The time of onset when diagonised is 1988 E.C.Since 1989. E.C: the girl is attending the special education program in the school.



Graph 4 Case 4s levels of mastery on specific skills

Indicators

N =the number of areas assessed by the particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture
5. Expression of self through speech
6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills
10. Work skills of doing assignment
11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity

17. Participation in social life activities

18. Temper management

Values = Range of scores on areas of assessment

Discussion

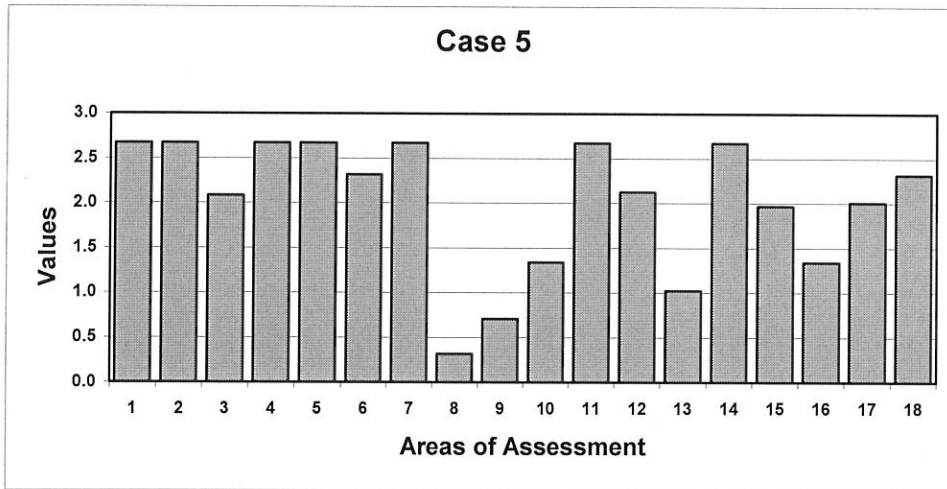
Graph 4 reveals Case 4 is at the apex in hearing skills. In addition, Case 4 is high in writing, mathematics task management skills. The graph also disclosed motor, comprehension of listening, and socio maturity skills are above the average range.

It appeared Case 4 is moderate in visual, expression of feelings and / or gesture, perseverance and persistence skills. Besides, Case 4 is deficient in expression of self through speech, comprehension of speaking, and work skills of doing assignment skills. Case 4 is also low in attention span, work sociomaturity and temper management skills, which makes it different from the other cases.

Case 5

Background

Case 5 is about an 18 years old boy. The records show that the retardation in him is caused either by meningitis or genetic disorder. It was taken in the records that the case is down syndrome. He is from middle class family and attends Grade 4 in the school. The time of onset when diagnosed is 1979 E.C; and he has been attending special education program from 1988 E.C. on wards. The impairment in him is caused by meningitis while he was only five months old.



Graph 5 Case 5's levels of mastery on specific skills

Indicators

N =the number of areas assessed by the particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture
5. Expression of self through speech
6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills
10. Work skills of doing assignment

11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity
17. Participation in social life activities
18. Temper management

Values = Range of scores on areas of assessment

Discussion

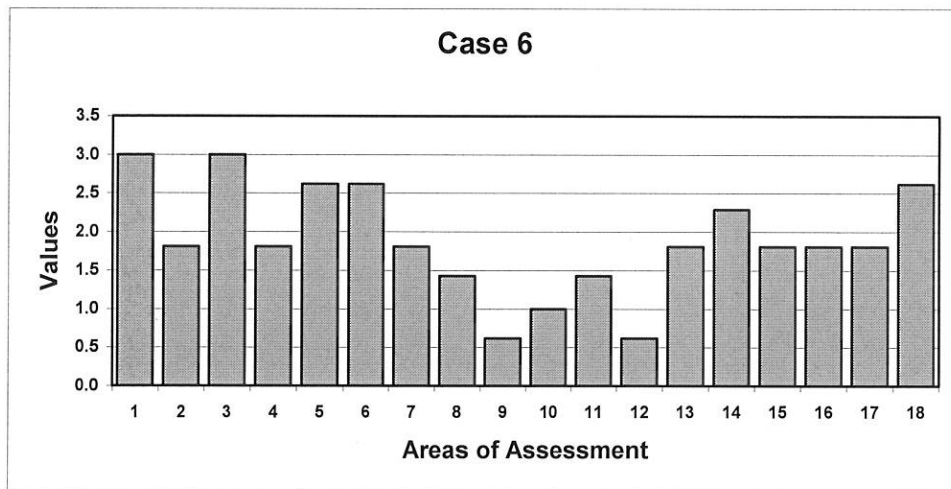
It is sketched on Graph 5 Case 5 is high in most skills. This is distinct from the other cases. One can find at the apex visual, hearing, expression of self feelings by voice and / or gesture expression of self through speech, comprehension of listening, mathematics, and work skills. Case 5 is also high motor, comprehension of speaking, temper management and task management skills.

It is shown Case 5 is above the moderate range in perseverance and persistence, and participation in social life activities skills. The moderately attained skills are in the areas of work skills of doing assignment and sociomaturity. Case 5 is low in note taking, writing and attention span skills.

Case 6

Background

Case 6 is about a 16 years old boy in Grade three. The retardation in him is also a blended case. For one thing it was reported to be a boy with syndrome. For the next, the retardation in him is caused by post natal incident during his mothers' temporary absence after giving birth to him. The onset of the impairment in the child is diagnosed in 1984 E.C. For the last seven years, the child attended the special education programme in the school.



Graph 6 Case 6 s levels of mastery on specific skills

Indicators

N =the number of areas assessed by the particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture

5. Expression of self through speech
6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills
10. Work skills of doing assignment
11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity
17. Participation in social life activities
18. Temper management

Values = Range of scores on areas of assessment

Discussion

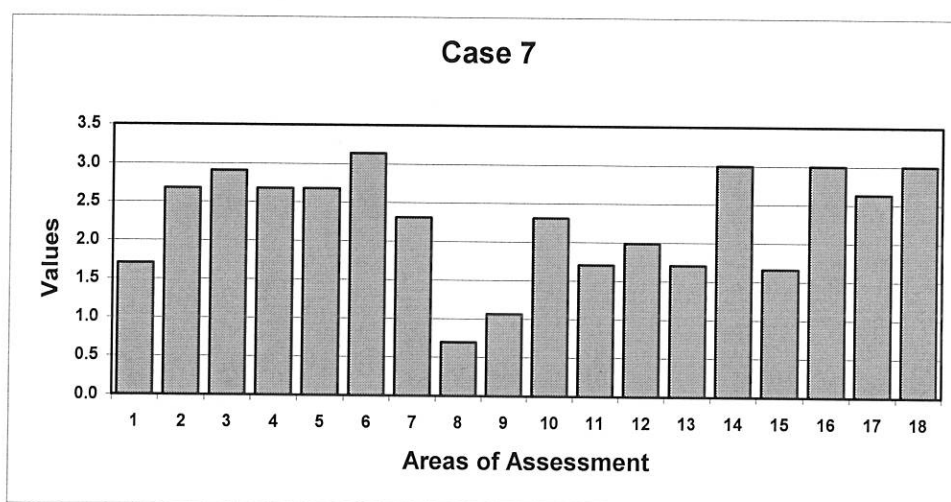
Graph 6 portrayed cases 6 is at the apex in visual and motor skills. This case is also high in expression of self though speech, comprehension of speaking skills and work skills. His skills are also above fair range in persistence, socimaturity, participation in social life activities.

The graph indicated case 6 is moderate in note taking, and mathematics skills. It is also noted case 6 is low in writing, work skills of doing assignment, and task management skills.

Case 7

Background

Case 7 is a 17 years old girl in Grade 5 in the school. She is an orphan living with a help of Non Governmental organization giving services to the disadvantaged children. The mental retardation is caused by malnutrition, which is occured during the recurrent famine in the Northern part of Ethiopia. It is considered Mental retardation without any possible pathology resulting from poor socioeconomic and cultural environment early in the Childs life. Her case in diagnosed in 1987 E.C., the girl is attending the special education program in the school.



Graph 7 Case 7 s levels of mastery on specific skills

Indicators

N = the number of areas assessed by the particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture
5. Expression of self through speech
6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills
10. Work skills of doing assignment
11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity

17. Participation in social life activities

18. Temper management

Values = Range of scores on areas of assessment

Discussion

The illustrations on Graph 7 give case 7 is top in motor, comprehension of speaking, work, socio maturity, and temper management skills. Case 7 is also high in hearing, expression of feelings through by voice and / or gesture, expression of self through speech, and participation, and participation in social life activities skills.

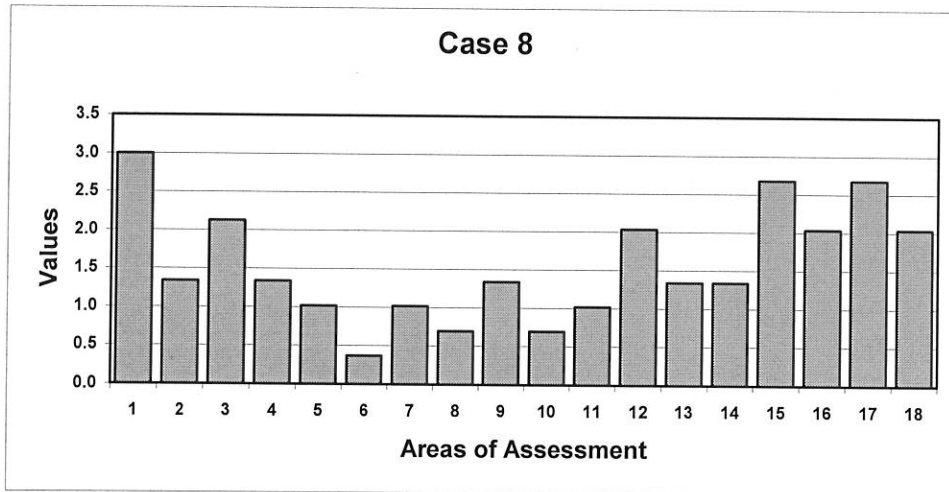
It is also depicted case 7 is above the moderate range in work skills of doing assignment, and comprehension of listening skills, task management skills. The earlier skills above the moderate skills are marked.

It is revealed case 7 is moderate in visual, mathematics, attention span, and perseverance persistence skills. This case is low in note taking and writing skills.

Case 8

Background

Case 8 is about an 18 years old girl in Grade 4 in the school. It is reported the cause of retardation in him is post traumatic effects of his fathers' death. It is hold to be clinical or pathological retardation related to trauma. The retardation in him is identified in 1986 E.C. since 1990 E.C., the boy is attending special education program. Economically, he is from a middle class family.



Graph 8 Case 8 s levels of mastery on specific skills

Indicators

N = the number of areas assessed by the particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture
5. Expression of self through speech
6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills
9. Writing skills

10. Work skills of doing assignment

11. Mathematics

12. Task management

13. Attention Span

14. Work skills

15. Perseverance and persistence

16. Sociomaturity

17. Participation in social life activities

18. Temper management

Values = Range of scores on areas of assessment

Discussion

Case 8 is shown top in visual, preverance and persistence, and participation in social life activities skills. It is also evident case 8 is above the average range in motor, task management, sociomaturity, and temper management skills.

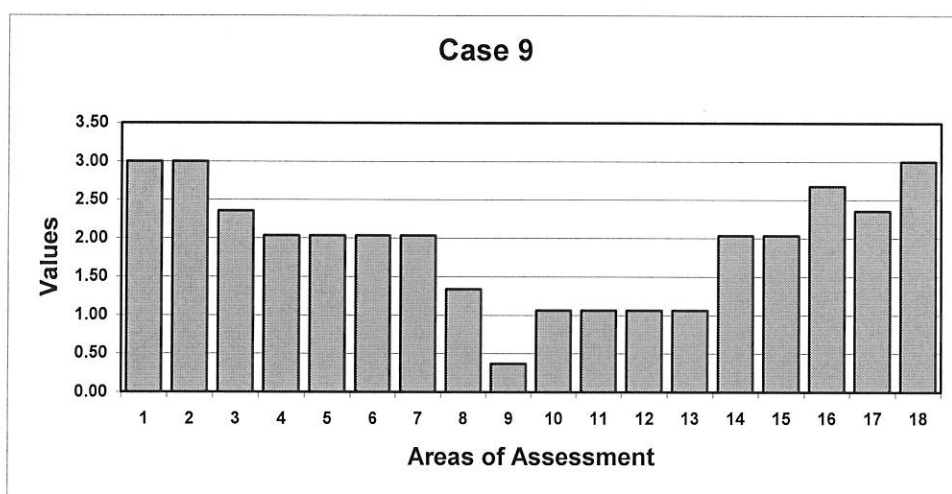
The moderately attained skills by case 8 seem in hearing, expression of feelings by voice and gesture, writing, attention span, and work areas.

It is displayed the particular case in low in most skills. Case 8 is deficient in comprehension of speaking, not taking, and work skills of doing assignment skills. It also noted on the graph, expression of self through speech, comprehension of listening, and mathematics skills are low.

Case 9

Background

Case 9 is about an 18 years old girl in Grade 1 in the school. The cause of her retardaiton is related to her mothers' intake of drugs with an attempt to abort. The retardation is diagnosed in 1986. E.C. She is from a poor family. Since 1992 E.C., she has been attending special education program.



Graph 9 Case 9 s levels of mastery on specific skills

Indicators

N = the number of areas assessed by the particular analysis which in this case is 18. It includes

1. Visual skills
2. Hearing skills
3. Motor development
4. Expression of feelings by voice and gesture

5. Expression of self through speech
6. Comprehension of speaking skills
7. Comprehension of listening skills
8. Note taking skills writing skills
9. Writing skills
10. Work skills of doing assignment
11. Mathematics
12. Task management
13. Attention Span
14. Work skills
15. Perseverance and persistence
16. Sociomaturity
17. Participation in social life activities
18. Temper management

Values = Range of scores on areas of assessment

Discussion

As shown in this graph, Case 9 is at the apex in visual, hearing, and temper management skills. To add, Case 9 is high in motor, sociomaturity, and participation in social life activities skills. It is revealed in the graph that most skills are beyond moderate by the Case that include

expression of feelings by voice and / or gesture, expression of self through speech, comprehension of speaking skills, and comprehension of listening skills.

It appeared Case 9 is fair in note taking skills. Besides, Case 9 is low in work skills of doing assignment, mathematics, task management, and attention span skills by the case seem deficient.

II Assessment of attitudes of non mentally retarded peers towards the inclusion of the MR children

In order to study attitudes of the non mentally retarded peers, instruments were developed to assess the aspects pervasively. To this end, interview of the peers and observation of the peers in and outside of inclusive classrooms is undertaken.

Procedures

1. A guideline for open-ended interview and observation checklist were designed to investigate attitudes of non-retarded peers toward the acceptance of the mentally retarded children in their classroom.
2. Four pupils from the same classrooms were selected randomly for the main study. Two of them were male and the other was female, respectively.
3. Observation of the non-retarded peers was undertaken for four days.
4. In the office of the head of the special education unit, interview of the non-retarded peers took place for two days. Each day, a boy and a girl were invited from the classrooms with the assistance of their teachers.

5. The data on their attitudes toward learning in inclusive classroom with mentally retarded peers is collected and analysed.

Findings

With informal interview of non-retarded peers, it is found the other peers have the feeling about good self-concept and presence of on going interaction with the mentally retarded children. With the open-ended interview, however, it is noted these children are not aware of the disposition of mental retardation.

Illustrating the point, a boy has reported 'I think the children are born that way and I don't know why they are born that way'.

The above statement gave an overview of values attached to mentally retardation by the non mentally retarded peers .The findings also suggested they are not knowledgeable about the future with the mentally children.

Excepting the above deviations, interview of the non mentally retarded peers indicated environment with the mentally retarded children is an all embracing.

In the case of learning with the mentally retarded children, findings reported an acknowledged situation .All of the informants responded they liked learning with the children. It is interesting to note a female respondent gave opinions on the hindering factors for better learning with the mentally retarded children. One of the girls suggested a separate instruction to their mentally retarded peers.

'The children can better learn from us and our teachers, if they are given separate instruction before they are enrolled in our classrooms. They are not doing well with memorizing what the teacher say to us. They don't remember much of what our teachers say'.

Playing with the mentally retarded children was also found an easy going and even-tempered condition. All of the non mentally retarded peers came back 'I don't get sick playing with mentally retarded children' and 'I am not afraid of the mentally retarded children'.

With observation of non-retarded peers, it is indicated that their attitude towards the children is more than average; it is learnt expressions of confidence and a higher self-esteem in interacting with the MR children.

It is worth to note that their peers were not avoiding most of the opportunities of contact; it is shown irregular contacts with the mentally retarded children. At most, the non mentally retarded children used instances, the incidental opportunities.

It is evident that the mentally retarded children are not discriminated during day-to-day interactions. The qualities taken into account were playing with MR peers, walking the way home with MR children, eating with MR peers, and inviting MR children.

It may be guessed, however, that the investigator's presence in the various settings would affect their zeal during interactions. Sympathetic approaches had dominated the interactions even during the few opportunities of observation.

III Teaching strategies in inclusive classrooms

Instruments were developed to assess teaching strategies in inclusive classrooms. These were an observation checklist and an interview guideline developed by the researcher. The data got from the interview guideline were used to supplement the data from the observation checklist. These data were analyzed qualitatively.

Procedures

An interview guideline and an observation checklist were developed to assess perspectives of teachers. It was aimed to gain information on the skills and competences required with teaching in the inclusive classrooms, and identify the mechanisms of coping up with the recurrent challenges in the classrooms.

1. The two teachers who took part in the main study site were contacted. The rationale behind is that these teachers were considered in better positions to realize the research objective Besides , time and resources bounded to take on the evaluation in other classrooms.
2. Appointment was taken to undertake the empirical study.
3. Observation of learning and teaching in the classrooms was carried out for one week.
4. Each of the individual teachers was interviewed at the end of the visit in the school.

Findings

The observation of teaching strategies uncovered the quality of services in the classrooms.

Teachers were not shown, at any instance, planning appropriate arrangements and adaptation of the classroom physical environment. Neither was they shown to conduct class activities in ways to encourage children's interaction.

Teachers were not able to gather data on learning needs of their pupils. The aspect did not address the need to determine the educational needs of each pupil. The same lies with the mentally retarded children. They were not also in a position to design teaching procedures that provide for individual differences.

Assessment tools in the classrooms are lacking .It is learnt a related tool is available in the School. However, it can no better serve than as a screening battery with the enrolment of the MR children in classrooms. Materials that provide with on going assessments required in the classrooms not available

Plans for using human and material resources were not developed to teach mentally retarded children in the unique settings. Individualized teaching methods to instruct students within their level of capability were also not developed.

However, the involvement of the MR children in-group activities was relatively good. It was shown to attempt a variety of grouping patterns that provide opportunity for the MR children to interact with others.

The findings also revealed setting of social and academic goals by the teachers. Warmth acceptance of the MR children was as well noted, but it was not genuine enough.

Most clues of trainings of various skills were given from the podium. It was observed on provision of stimulus to learn for the pupils. However, with the case of mentally retarded children, individual support is given without professional skills.

The interview with the teachers revealed opinions, challenges and opportunities related to teaching in the classrooms. It was learnt the teachers, primarily, lack an adequate training. Both teachers are qualified to teach in elementary classrooms without attending any single course in Special Education. In fact, they are graduates of Teachers Training College (TTC) at Diploma level.

The major challenge the teachers faced is the large classroom size. One of the teachers said

“The number of pupils we serve range from 55 to 60 in one classroom. Each day we have to give lessons based on the weekly lesson plan. It is designed in the formats of the National Curriculum. We have to cover the task.”

The teachers suggested that the mentally retarded children are welcome to the classrooms. Opportunities of their inclusion with the non mentally retarded pupils are welcome. The teachers further explained that caring and sharing have become common after the admittance of the mentally retarded peers.

In particular, teachers felt that the inclusion of the mentally retarded is of a greater value to the mentally retarded children themselves. Above all, these children are going to school instead of staying at home. Under present circumstances, the children are going to regular school.

In future, the teachers have reported their expectations. From government, the teachers expect

- Trainings on the special skills in the classrooms.
- Equipments to teach pupils in inclusive classrooms
- Guarantee of safety for the mentally retarded children

As one of the teachers pointed out ‘This week I have learnt that one of the mentally retarded pupils is pregnant .I think the guy had exploited the girl using her inability to say No’

Furthermore, the teachers reported that replacement of officials became a major hinderance. Officials at Zone Education Bureau, who were authorized to finance the special education program were moving from position to position. Earlier efforts to establish budget are continuously coming under attack.

Due to lack of the importance of the program by the lately coming officials, finance is lacking for the yearly budget. Consequently, the children are not being fed well and teachers could not have the necessary teaching aids. The annual expense to the MR s uniforms is not also covered.

According to the teachers, society has to take the leading role in protecting the mentally retarded children. For society, the first step to take is to learn about mentally retarded children. The agents working on the particular case should work extensively. The different parts of the society should have to collaborate with the change agents.

Teachers' opinion on parents' role elicited ongoing support at home. They expect parents will be more motivated in carrying out their parts in the future.

Teachers have also suggested in the future of their mentally retarded pupils. They agreed that the children can benefit from vocational trainings after leaving from the school. With trainings on various skills, they would be capable of supporting themselves.

CHAPTER FOUR: DISCUSSION IMPLICATIONS OF INCLUSIVE CLASSROOM PRACTICES TO THE LEARNING CONDITIONS AND CHARACTERISTICS OF MENTALLY RETARDED CHILDREN IN REGULAR CLASSROOMS OF KOKEBE TSIBAH SCHOOL

The basic premise of inclusive school communities is that all children, with or without disabilities, and including those with linguistic, ethnic, cultural, and socio economic differences belong in one school, and should have access to similar broad educational benefits (Sands, J. 2000). From the conceptual point of view, the distinctiveness of 19 classrooms in Kokebe Tsibah School was sound.

Inclusive school communities are societies where all students' needs are met irrespective of talent, disability, socio-economic background, or cultural origin-in supportive mainstream schools and classrooms. Assessment of the mentally retarded children in regular classrooms of Kokebe Tsibah School presented students coming from diversified upbringings in the school and classrooms.

Inclusive school communities are both a process for and outcome of social justice, equity and democracy with educational system (Sands, J et al. 2000). In line with this, as Farrel and Ainscow (2000) stated inclusive classroom practice involves bringing the support services to the child (rather than moving the child to services) and requires only that the child will benefit from being in the classroom (rather than having to keep up with other children).

In respect to the rights of mentally retarded children in Kokebe Tsibah School to get the necessary services, they were denied .It was tangible the children are not being fed well and teachers could not have the necessary teaching aids. The annual expense to their uniforms was not also covered.

It is taken into account inclusion has become a more usual way of describing the extent to which a pupil categorized as having SEN is truly integrated. Bearing in mind the stretch, the term refers to the extent to which a school accepts pupils as full members of the group and values them for their contribution (Farrel and Ainscow, 1995).

With regard to inclusion of the mentally retarded children in Kokebe Tsibah School, the children were accepted as unabridged members of the group and were cherished for confer they provide. Findings from the assessment of attitudes of non-retarded peers toward the inclusion of the MR children ascertained learning with mentally retarded children was an acknowledged experience. They were welcome to playing with MR peers, walking the way home with MR children, eating with MR peers, and inviting MR children.

Most of the mentally retarded pupils in the regular classrooms of Kokebe Tsibah School faced difficulties in accomplishing learning tasks (e.g. note taking, writing) that require to conceptualize and/or to generalize information .According to Gearheart (1988), one of the required skills of teachers in inclusive classrooms in the school is being alert to special needs in the abilities to generalize and conceptualize of mentally retarded pupils .By definition, they have lower than average ability in these two areas. To the exception of Case 6, the rest of the MR children were shown deficient in note taking skills .Along with, Case 7 was exclusively above the moderate competence in writing skills.

According to Fitsum, 2004, in the inclusive environment, it is noted the MR children can suggest movements as well as observe the movement of the teacher, peers, and imitate those movements. In addition, the children are in a better position to learn the vocabulary for different movements they do (i.e. Walk, jump, run, etc).In Kokebe Tsibah School, it was exhibited by most of the MR children relative strengths in skills that require early sensory stimulation. To

boot, Case 3s hearing skills, Case 4s visual skills, and Case 8s hearing skills were the only exceptions below the fair level among areas assessed by the study.

Among the principles of inclusive education as offered by Salend (1994),

- All students have opportunities to work and play together
- All students are taught to appreciate and value human differences and similarities.

The findings from observation of the MR children on socio maturity, participation in social life, and temper management skills revealed a function of inclusive classroom practices .Case 3's skills in temper management and Case 4s socio maturity were the anomalies below board. The childrens' skills in socio emotional life activities were found outstanding.

With learning of mentally retarded children , it was eminent social and vocational skills and degree of adaptability may vary with in each categories of mentally retarded pupils (Sue,1997).It was recognized with the investigation in the Kokebe Tsibah School differing levels of mastery on receptive and expressive language development. It is apparent curriculum and individual lessons that are accessible to all pupils were not developed.

The case study further revealed most of the MR children are high, moderate and / or impaired in cognitive skills.Gearheart's (1988) findings on MR pupils in inclusive settings is not much different. It was suggested to the teacher to be aware of variety of possible readiness and ability levels both across and within subject areas as well as modifying assignments necessary in recognition of these variations.

The basic principle of inclusion in classroom settings is that curriculum and individual lessons that are accessible to all pupils is developed. However, freedom of the teacher to determine the

content of the curriculum and the timing of its delivery has been constrained by the introduction of the National curriculum and with its programs of study would affect (Mittler, 2000).

The same lies with the case of teachers in Kokebe Tsibah School. It was apparent the blueprints for using human and material resources were not developed to teach mentally retarded children in the unique settings. Individualized educational plans to instruct students within their level of capability were not available. The teachers followed with the procedures of the National curriculum in the classrooms.

In 1994, the General Assembly of UNESCO passed the resolution, which advocates the principle of inclusion. The resolution underscored that all Governments of all Countries have to teach all pupils in all classrooms settings according to their needs unless there are compelling reasons for doing otherwise (Jonson, 2002).

Appealing to the cause, in Kokebe Tsibah School, teachers were found teaching in similar classrooms subdued by

- Lack of adequate training
- Lack of adequate teaching materials
- Following with set curriculum (i.e. The National curriculum)
- Objectionable teacher –learner ratio (50-60 pupils in a classroom).

There is a need for expertise where mentally retarded are admitted in inclusive classrooms. In these classrooms, teachers are required to attain skills and knowledge about the variety of individual levels of mastery, specific needs, barriers to the well being and learning of their learning environment, and all pupils' different possibilities and needs for support (Johnson, 2002).

It is known teachers in the regular classrooms of Kokebe Tsibah School were qualified to teach in elementary classrooms without attending any single course in Special Education. They have had not even in service training. They are graduates of Teachers Training College (TTC) at Diploma level.

Stephens, et al. ---1982, have indicated basis of teaching strategies in inclusive classroom settings .These are

- Making the good use of resource personnel who are available to support efforts in working with these students
- Learning is facilitated if there is a relatively structured classroom.
- Learning can be improved and behavioural problems can be diminished if systematic approaches to instruction are used.

The findings from the inclusive classroom Practices of Kokebe Tsibah School revealed incapability of teachers to planning appropriate arrangements and adaptation of the classroom physical environment. It was evident clues of trainings on various skills were given from the podium in the classrooms.

Implications of teaching mentally retarded children in inclusive classrooms included a, developing individually based educational plan b, setting of academic and social goals c, building motivation of learners and being aware of prerequisites of learning new tasks d, creating opportunities of group interaction ,and e,managing physical and human structure of classroom settings (Gearheart,1988 and Fitsum ,2004).

In light of the above findings, the case of practices by classrooms in Kokebe Tsibah School was

near to lack all the unraveling. As the results of assessment of teaching strategies in the classrooms revealed the fact

A. teachers were not shown, at any instance, planning appropriate arrangements and adaptation of the classroom physical environment

B. teachers were exposed on setting of social and academic goals but it was not genuine enough.

C. the involvement of the MR children in-group activities was relatively good; teaching strategies were revealed to attempt a variety of grouping patterns that provide opportunity for the MR children to interact with others

D. most clues of trainings of various skills were given from the podium indicating a teacher centred instruction.

By way of summary, the implications of inclusive classroom practices to learning conditions and characteristics of mentally retarded children in regular classrooms of Kokebe Tsibah School can be exposed as follows these are

1. The Kokebe Tsibah school community accepted the mentally retarded children as full members of the group and values them for their contribution.

2 .The mentally retarded children in regular classrooms of Kokebe Tsibah School like all children with or without disabilities, were enjoying the right to belong to one school, and access to similar educational benefits.

3. The mentally retarded pupils were shown to attain specific skills in the classrooms at differing levels that suggested to varying needs of pupils in inclusive classrooms.

- 4 .Most of the mentally retarded pupils in the regular classrooms of Kokebe Tsibah School had trouble in mastering skills those require requiring to conceptualize and/or to generalize information. This is typical of mentally retarded pupils in inclusive classrooms.
5. The school made the use of resource personnel who are available to support efforts, as working with the mentally retarded children in regular classrooms required. However, it did not make the good out of it, at least.
- 6 .Teaching strategies in regular classrooms of Kokebe Tsibah School are constrained by following with the National curriculum.
- 7.The practices in the regular classrooms have attempted to teach the mentally retarded in the available classroom settings.
8. It is understood the mentally retarded children in the classrooms are accepted as full members of the group and are esteemed for their contribution.
9. The teachers in the regular classrooms of Kokebe Tsibah School did not acquire skills and knowledge about the variety of individual levels of mastery, specific needs, barriers to the well being and learning of their learning environment, and all pupils' different possibilities and needs for support.
10. Teachers in the regular classrooms of Kokebe Tsibah School were not able to plan appropriate arrangements and adaptation of the planning classroom physical environment.
11. Teaching strategies followed with teachers of the regular classrooms of Kokebe Tsibah School lack near to all the basic inputs. These are
- Development of individually based educational plan
 - Setting of academic and social goal

- Building motivation of learners and being aware of prerequisites of learning new tasks, creating opportunities of interaction
- Managing physical and human structure of classroom settings

CHAPTER FIVE: CONCLUSION & RECOMMENDATION

5.1. Conclusion

In Ethiopia, learning conditions and characteristics of some mentally retarded children are affected by some inclusive classrooms. In this study, certain specific skills of the mentally retarded children are noted. The findings have shown unique conditions and characteristics of each mentally retarded child.

In general, aspects that are considered to be assessed have indicated various levels of mastery attained by each pupil. It is, thus, justified the experience under investigation require individual assessment. The challenge and opportunities of learning in the inclusive classrooms, draws on individually based type of assessment.

The assessment indicated the relative strengths and limitations of each levels of mastery by each child. It is implied further that research take into consideration the related factors from various angles.

This study revealed, the challenges and opportunities of learning in inclusive classrooms of Kokebe Tsibah School by mentally retarded children .First, the opportunities are

1. The MR children in inclusive classrooms brought to light they have relative strengths in skills those require early sensory stimulation (i.e. visual, hearing and motor).
2. The mentally retarded children were shown relatively strong in skills of socio emotional life manners that are attributed to experiencing moments of learning and playing together with other children.
3. It provided opportunities of getting information on the possibilities of sending MR children regular schools for members of society.

4. It contributed to the scope of needs of MR children with learning in regular schools and classrooms by practitioners.

5. The mentally retarded children, as all children, in regular classrooms of Kokebe Tsibah School were enjoying the right to go to school.

Second, the challenges by learning in inclusive classrooms of Kokebe Tsibah School stemming from the following factors are

1. It lacks acceptable teacher learner ratio (55 to 60 pupils in a classroom).It was found inaccessible for both teachers and pupils.

2. Lack of adequate educational materials for the learners. There was no teaching aid used during regular instructions.

3. There were no accessible resource rooms to meet the needs of the mentally retarded children in the school.

4. Lack of individualized educational plans. The teachers were strictly following with the National curriculum and examination systems.

5. Part of the sources for the limitations is lack of knowledge about education of the mentally retarded from members of society. An example is the case of recurrently relocating officials.

It is underlined that schools and the education system do not function in isolation. What is observed in the Kokebe Tsibah School is a reflection of the society in which the school functions. Those who are in the school are citizens of the society and local community with the same range of beliefs and attitudes as any other group of people.

5.2. Recommendation

Hence, the author suggests early intervention is critical with enhancing learning among MR children. Most children have come to school late after 6-7 years. It implied either interventions are started late or to begin after they are already school age children. Here are few strategies.

- Establishing community based rehabilitations services
- Empowering local institutions with knowledge about education of the mentally retarded (idirs, iqubs, etc.)
- Empowering local institutions and community based organizations knowledge about the rights of handicapped.

In Ethiopia, the education of the mentally retarded is lacking at insignificant level (only 0.01% MR children are in school). As all the objectives of the entire global programs of education of the mentally retarded are not to create elite mentally retarded persons, progress by Kokebe Tsibah School is noteworthy. It is a cheap way of reaching out the handicap, if the necessary inputs are provided.

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APPENDIX: A

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SCHOOL OF GRADUATE STUDIES

DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

Checklist of assessment of records of MR children (06)

Instruction

1. Identify and fill out the relevant items

A .Regarding subject's demographics

1. Sex 1.1 Female _____ 1.2 Male _____

2 Age _____

3. Grade _____

4. Parents socio economic status _____

B Regarding information on diagnosis of mental retardation

1. The cause of retardation

2. Time of onset

3. Duration on special needs program

APPENDIX: B

ADDISS ABABA UNIVERSITY

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DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

Scale 1 Assessment of levels of Mastery of MR children (01)

Instruction

The Scale 1(2004) is considered to be administered both in and out of classroom settings. First, the observers familiarize her/him with each specific instruction given below and comprehend them very well.

a. In order to decide whether the expected behaviour is consistent or not continuous repeated observations were required. Each form of the observations was, in average, shown three times. During the sessions, observer marks (x) in the space against each characteristics under the respective columns and numbers (3, 2, 1, 0).

e. g.

Often with out difficulty	Often with slight difficulty	Often with much diificulty	No exhibition Of difficluty
3	2	1	0

b. Checking the manifestation of behavioral activities, which occurred during the observations, the observer has to mark (x) under the respective column and number against each item. (N.B. The calculation of mean score value will be done later by the researcher).

Scale 1 Assessment of levels of Mastery of MR children (01)

Areas of Assessment / Levels of Mastery	Often without	Often with slight difficulty	Often with much difficulty	No exhibition off difficulty
A. Specific Learning				
1. Vision				
-Can see as required				
-Can see at a distance of 2				
-Can see at a distance of 2				
2. Hearing				
-Able to hear as required				
-Can hear with out hearing				
-Can hear with hearing aid at				
3. Motor development				
3.1 Physical skills				
-Sits straight and keeps				
-Walks straight				
-Stands on foot for 1- 2				
3.2 Eye-hand- coordination				
-Lifts a book or pad with one				
-Able to paint				
-Grasp coins with thumb or				

3.3 Eye foot coordination				
-Brings a ball in hand				
-Supplies a ball kicking				
-Kicks a ball supported from				
B. Receptive and				
4.Expression of feelings by				
-Expresses feelings through				
-Expresses feelings by				
-Expresses feelings by voice				
5.Expression of self				
-Speaks controlling time and				
-Insructs short sentences to				
-Speaks in /out blocking and				
6.Comprehension of				
-Asks questions using words				
-Speaks using simple				
7.Comprehension of skills				
-Hears , follows rules and				
-Hears , understands				
-Hears ,understands when				
C.Application to subject				
8.Note taking skills				
-Realizes the importance of				
-Establishes structure to take				

-Asks the teacher and peers				
9. Writing skills				
-Writes couple of numbers				
-Copies what is given				
- Manages writing dictation				
10. Work skills of doing				
-Organized on the front side				
-Writes on line				
-Keeps good space				
11. Mathematics				
-Identifies numbers				
-Counts by finger				
-Counts more than 20 orally				
12. Task Management				
-Comprehends the idea of				
-Pays attention to				
-Attends important aspects				
13. Attention Span				
-Recognizes information that				
-Pays attention to				
-Does not go absent minded				
14. Work Skills				
-Has positive attitude				
-Is sociable and cooperative				

-Explores surrounding				
15. Preserverance and				
-Does not become easily				
-Participates in activities				
-Involves in group tasks				
E.Socio emotional				
16.Socio maturity				
-Involves in plays and games				
-Sociable to others				
-Considerate to others				
17.Participation in social				
-Plays with others at least				
-Participates in games and				
-Plays with others following				
18.Temper management				
-Does not cry and scream				
-Does not throw self on				
-Does not attempt threats of				

APPENDIX C

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Observation of teaching strategies augmenting learning among mentally retarded children in inclusive settings.

Instruction

1 Familiarize self with each specific instruction given below and comprehend them very well.

2 Make sure each form of the observation is, in average, shown three times.

3 Mark (x) in the space against each characteristics under the respective columns

Part I Special Skills in teaching mentally retarded children in inclusive classrooms.

Items	Often	Rarely	No exhibition
A.Modeling			
1.Conducting review observation with the students			
-Conducts review on language skills			
-Conducts review on adaptive behaviour			
-Cues that promotes social interactions			
-Developes strategies for language initiation			
2.Role playing			

-Plays on role (exemplary) under proper environmental milieu			
-Gives corrective feedback regularly			
-Gives corrective feedback relevant to performance			
3.Prompting			
-Targets environmental stimuli			
-Helps the students identify stimuli			
-Discusses how the stimuli promote socialization			
-Uses object that illicit statement			
4.Coaching			
-Guides students in recognizing			
-Describes techniques to engage to verbalize and follow with rules of conversation			
B.Adapting multilevel teaching method			
5.Identifying underlying concepts			
-Identifies objectives and materials			
-Examine lessons			
-Determine potential with regards to content			
6.Considering methods of presentation			

-Consider different learning style			
-Considers different cognitive skills			
-Consider various presentation modes			
7.Considering methods of student practice and performance			
-Consider ways of how one can produce skills and conceptualize			
-Consider ways of how one can show skills and concepts			
- Encourages different response needs			
-Allows demonstration of skills mastery and understanding of concepts			
-Encourages different response			
8.Considering methods of evaluation			
- Individually assesses students' mastery			
-In large group assesses students' mastery			
-In small group assesses students'			
9.Modifying assignment			
-Modifies reading assignments accordingly			
-Modifies assignment in relation to the other			

school curriculum			
-Modifies arithmetic assignments			
-Involves MR students whenever possible			
10.Using concrete rather than abstract examples			
-Uses structured experiences			
-Uses individually oriented experiences			
-Uses incidental opportunities			
-Alert to bilingual or bicultural influences			
11.Alerting to special needs of generalization and conceptualization			
-Illustrates applications or principles			
-Illustrates requirements of participation			
-Illustrates applications in the adult world			
-Illustrates job related tasks			
-Illustrates job related			
-(reorganizers) presents overview that stresses points of the material to be covered			
-(Organization)present materials in an organized,logical fashion			

APPENDIX: D

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DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

Interview of teachers in inclusive classrooms (02)

1. Fill in the spaces provided in appropriate gaps.

A. Regarding informants' background

1. Sex 1.1 Female _____ 1.2 Male _____

2 Age _____

3. Marital Status _____

4. Monthly Income _____

5. Training 5.1 Formal _____ 5.2 Special Education _____ 5.3 Both _____

6. Service _____

B. Regarding teaching in inclusive classrooms

7. Were you trained on rendering services with teaching MR children in inclusive classrooms?

If yes, what is your qualification?

8 .On your current practice, what methods have you adapted, in general with, teaching in inclusive classrooms?

9. In your perspectives, what are pros and cons related to teaching in your classrooms

10. What do you expect to be done in the future?

A. From Government

B. From Family

C. From Society

APPENDIX: E

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Interview guideline of non-retarded Peers (03)

Instruction

1. Fill in the spaces provided in appropriate gaps.

A .Regarding informants demographics

1 Sex 1.1 Female _____ 1.2 Male _____

2.Age _____

3.Grade _____

4 Placement profile

4.1 Formal education

4.2 Special needs education

4.3 Others _____

B. Regarding attitude of non-retarded peers towards MR children

5. Tell every-thing you know about a mentally retarded person

6. Do you like learning with mentally retarded children?

7. Do you get sick playing with mentally retarded children?

8. Are you afraid of mentally retarded children?

9. Do you think that mentally retarded children seem a lot different from you?

C.Regarding information's on MR

1. Is a person with MR usually sick?

If yes, Why?

If no, Why

2. Can a person who is mentally retarded go to shops?

If yes, Why?

If no, Why

3. Were children with mental retardation born that way?

If yes, Why?

If no, Why

4. Do you feel sorry for someone who is mentally retarded?

If yes, Why?

If no, Why

5. Are you happy that MR children are going to your school?

If yes, Why?

If no, Why

APPENDIX: F

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SCHOOL OF GRADUATE STUDIES

DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

Observation checklist of non-retarded peers in / out of classroom settings(05)

Instructions

1. Maintain an anonymous relation
2. Make sure to observe behaviours at three opportunities.
3. Fill in a box provided under each item.

1. Is there one mentally retarded child among three students sitting with the case during lunch?

Often

Not often

Rarely

--	--	--

2. Is there one mentally retarded child among three students with the case walking ontheway home?

Often

Not often

Rarely

--	--	--

3. Is there one mentally retarded child playing with the case during recess time ?

Often

Not often

Rarely

--	--	--

4. Is there one mentally retarded child among three children invited for happenings with the case?

Often

Not often

Rarely

--	--	--

Declaration

The thesis is my original work and has not been presented for a degree in any other University and that all sources of materials used for the thesis have been duly acknowledged.

Name FEBUN JAROKEN

Signature 

Date 25-04-05

Advisor 


Signature