

**RESEARCH PAPER****A Critical Analysis of Progress of Inclusive Education in Terms of Direct Services Provided to Children with Special Needs in Odisha****Sunanda Jati¹ and Harihar Sarangi²**¹S.S.D.M.T. Prabhavati Public School Titilagarh, Bolangir²G.M. University, SambalpurEmail: drsunandajati@gmail.com, hsarangi@rediffmail.comReceived: 2nd August 2017, Revised: 31st October 2017, Accepted: 5th November 2017**ABSTRACT**

The objective of the present study was to analyse the progress of inclusive education in terms of direct services provided to children with special needs in Odisha. Sample of the present study consisted of one state coordinator and five district co-ordinators that were selected purposively. Information Blank cum Interview Schedule was developed by the investigators in consultation with experts. The findings emerged were i) Odisha was having low identified CWSN in comparison to National figure; ii) Ganjam was the only district to have 100% enrolment in 2011-12; except Ganjam and Khordha enrolment of CWSN in rest of the sample districts along with the state of Odisha declined from the year 2009-10.

Key words: *Inclusive education, children with special needs, direct services*

INTRODUCTION

Direct services and support services has been provided to children with special needs (CWSN) to help them in achieving the target of self-reliance in inclusive educational setting under Sarva Sikshya Abhiyan (SSA) (GOI, 2003). Direct services include identification, assessment and enrolment of CWSN; providing assistive devices to CWSN; home based education to severe category of CWSN; preparation of individualised profile (IEP) to monitor the progress of CWSN and to provide need based services; providing barrier free environment for physical access; organisation of different camps like medical camps for surgical operations, physiotherapy, speech therapy and theme-based camps etc. Research studies found out that 90 percent of the sample schools had ramps for accommodating orthopedically handicapped children (Dash, 2007), and 87% of schools had ramps and 60% schools had disable friendly toilets accessible to CWSN in Ganjam (Indian Council for Market Research, New Delhi, 2009). Guha (2012) attributed the reason of drop out of CWSN to lack of appropriate, need based and timely provided assistive device. It is reported that 90% of the civil works not started in the state of Chhattisgarh pertaining to ramps, girls' toilets and electrification (Kumar, 2012). Retrospective review of research studies revealed that there is a dearth of systematic research conducted to study the progress of inclusive education in terms of direct services provided to children with special needs in Odisha, for which present study was conducted.

OBJECTIVE

To analyse the progress of inclusive education in terms of direct services provided to children with special needs in Odisha.

SAMPLE

Sample of the present study consisted of one state coordinator, five district coordinators, 50 Headmasters, 125 block resource teachers, 225 general teachers and 50 parents of CWSN.

TOOLS

Information Blank cum Interview Schedule consisting of items relating to the role of stakeholders, list of schools providing IE, number of CWSN identified & enrolled, number of individualized IEP

file, activities conducted to provide direct services to CWSN, Total number of CWSN requiring and number of children actually provided with different entitlement was developed by the investigators in consultation with experts. The content validity of the Information Blank cum Interview Schedule was determined by the experts' judgment. Test re-test reliability calculated was .92.

RESULTS

Table 1 shows that CWSN between the age group 6-14 years identified in the state against national population(2%), was 1.6% in 2007-08, 1.67% in 2008-09), 1.9% in 2009-10, 1.83% in 2010-11 and 2.0% in 2011-12.

Table 1: Summary of the number and percentage of CWSN identified in Odisha as compared to national population of children (6-14) years

Magnitude	2011-12	2010-11	2009-10	2008-09	2007-08
Total Population of Children (6-14) years	6488873	6488873	6488873	6488873	6488873
Total Population of CWSN Identified	130939	123101	124741	108674	103939
Total Population of CWSN Enrolled	126162	115838	115838	96319	88201
Percentage of CWSN	2.00%	1.83%	1.90%	1.67%	1.60%

Source: OPEPA, IE Cell, Odisha

Table 2: Summary of the number of CWSN identified and enrolled in the sample districts and state of Odisha

Name of the District	No of CWSN Identified in regular schools					No of CWSN Enrolled in regular schools				
	2007-08	2008-09	2009-10	2010-11	2011-12	2007-08	2008-09	2009-10	2010-11	2011-12
Ganjam	12629	7608	7610	9894	9363	10756(85.2)	6646(87.4)	7136(96.99)	9182(92.8)	9363(100)
Keonjhar	3605	3712	5365	5431	4964	2767(97)	3262(98.6)	5091(95.05)	5051(93)	4294(86.5)
Khordha	4084	4474	4644	4996	4965	3742(91.6)	4121(92.1)	4281(92.1)	4822(96.6)	4869(98.07)
Sambalpur	3265	2446	3338	3127	3326	2465(75.5)	2356(96.3)	2844(85.8)	2894(92.6)	3044(91.6)
Sundergarh	9400	11361	9892	4570	4868	8556(91)	10145(89.3)	9230(94.81)	4570(91.2)	4400(97.9)
Odisha (State)	103939	108674	130939	123101	124741	88201(84.9)	96319(88.7)	126162(96.3)	115538(93.9)	116801(93.7)

Source: OPEPA, IE Cell, Odisha

Table 3: Summary of the percentage of CWSN enrolled in the state of Odisha both category wise and year wise

Year	TB/VI	LV	HI	SI	OI	MR	CP	MD	LD	Aut	DB
2009-10	90.6	0	91.6	93.8	91.2	89.7	76.1	80.6	100	0	0
2010-11	86.1	95.1	93.6	94.5	93.8	91.8	80.4	82.5	99.8	79.5	0.0
2011-12	88.5	96.1	95.6	96.0	95.3	92.7	87.1	84.8	99.3	89.2	81.8

Source: OPEPA, IE Cell, Odisha

As can be seen in Table 2, total number of CWSN identified in 2007-08 were 103939, in 2008-09 were 108674, in 2009-10 were 130939, in 2010-11 were 123101 and in 2011-12 were 124741. It can be concluded that highest number of CWSN was identified in the state of Odisha in 2009-10 where as lowest number of CWSN was identified in 2007-08. Further it was found out that the number of CWSN enrolled in schools in 2007-08 were 88201, in 2008-09 were 96319, in 2009-10

were 126162, in 2010-11 were 115538 and in 2011-12 were 116801. It can be concluded that highest number of enrolment 96.3% was done in 2009-10, in the state. Further it shows that percentage of CWSN enrolled against identified CWSN in 2007-08 were 84.85%, in 2008-09 were 88.63%, in 2009-10 were 96.35%, in 2010-11 were 93.86% and in 2011-12 (100%). And it was found that except Ganjam and Khordha enrolment of CWSN in rest of the sample districts along with the state of Odisha declined from the year 2009-10.

Table 3 depicts that in the year 2009-10, 90.6% visually impaired children, 0 % low vision, 91.6% hearing impaired cerebral palsy, 82.5% multiple disable, 99.8% learning disabled, 79.5% autistic, 0% deaf-blind, 93.8% speech impaired, 91.2% orthopedically impaired, 89.7% mentally retarded, 76.1% cerebral palsy, 80.6% multiple disable, 100% learning disable, no autistic and deaf-blind, in 2010-11, 86.1% visually impaired children, 95.1% low vision, 93.6% hearing impaired, 94.5% speech impaired, 93.8% orthopedically impaired, 91.8% Y2mentally retarded, 80.4% and in 2011-12, 88.5% visually impaired children, 96.1% low vision, 95.6% hearing impaired, 96.0% speech impaired, 95.3% orthopedically impaired, 92.7% mentally retarded, 87.1% cerebral palsy, 84.8% multiple disable, 99.3% learning disabled, 89.2% autistic, 81.8% deaf-blind were enrolled in Odisha. It can be concluded that there was no steady progress in enrolment in the State as well as in sample districts of Odisha.

Table 4: Summary of year wise number of CWSN covered through Home Based Education (HBE) in the sample districts and state of Odisha

Sl. No	Name of the sample District	No of CWSN covered through HBE				
		2007-08	2008-09	2009-10	2010-11	2011-12
1	Ganjam	0	949	30	30	247
2	Keonjhar	0	0	174	174	48
3	Khordha	0	0	174	174	96
4	Sambalpur	0	0	55	55	173
5	Sundergarh	0	0	162	162	101
6	Odisha (State)	1168	4723	2777	2777	3194

Source: OPEPA, IE Cell, odisha

Table 5: Summary of number of IEP file opened in the sample districts and Odisha up to 2011-12

Sl. No.	Name of the sample Districts	CWSN identified	IEP file opened	% Of IEP file opened
11	Ganjam	9363	9493	101.39
18	Keonjhar	4964	4294	86.50
19	Khordha	4965	4996	100.62
28	Sambalpur	3326	3232	97.17
30	Sundergarh	4868	4207	86.42
	Odisha (State)	130939	95569	72.99

Source: OPEPA, IE Cell, Odisha

Table 6: Summary of year wise aids and appliances distributed to CWSN in the sample districts and Odisha

Name of the sample District	2007-08	2008-09	2009-10	2010-11	2011-12
Ganjam	3724	5459	3461	1168	3286
Keonjhar	78	1288	1236	533	0
Khordha	0	0	460	190	209
Sambalpur	157	135	154	215	187
Sundergarh	330	474	476	390	540
Odisha (State)	13484	14853	15515	9610	13022

Source: OPEPA, IE Cell, Odisha

Table 4 shows that in 2007-08, not a single sample district was provided with HBE. Further it was found that in 2008-09, only in Ganjam (949) HBE was provided, whereas no HBE was provided in other sample districts. In 2009-10 and 2010-11, highest (174) HBE provided in both Keonjhar and Khordha district followed by Sundargarh (162), Sambalpur (55) and Ganjam (30). In 2011-12, highest (247) HBE was provided in Ganjam followed by Sambalpur (173), Sundargarh (101), Khordha (96) and Keonjhar (48). It can be concluded that there was no steady progress in providing HBE to CWSN in the state as well in sample districts of Odisha.

From the Table 5, it is seen that in Odisha the percentage of IEP files opened was 72.99% against number of CWSN identified. Whereas in Ganjam and Khordha 101.39% and 100.62% of IEP files were opened, this was more than number of CWSN identified. This mismatch was further identified due to doubling of IEP files of some of the CWSN by functionaries.

Table 6 depicts that there was increasing in number of aids and appliances distributed to WSN from 2007-08 to 2009-10 i.e., 13484, 14853 and 15515 respectively. But in 2010-11 it was suddenly declined to 9610, whereas in 2011-12 there was a hike in distribution of aids and appliances to 13022. Ganjam was the district, where highest number of aids and appliances were distributed in 2007-08 (3724), in 2008-09 (5459), in 2009-10 (3461), 2010-11 (1168) and 2011-12 (3268). It can be concluded that there was no progressive trend in providing aids and appliances to the CWSN in Odisha as well in sample districts.

Table 7: Summary of year wise number of medical camps conducted in the sample districts and Odisha

Name of the sample District	2007-08	2008-09	2009-10	2010-11	2011-12
Ganjam	23	23	46	14	37
Keonjhar	13	39	13	13	14
Khordha	0	0	9	10	11
Sambalpur	9	9	9	9	9
Sundargarh	18	18	36	34	40
Odisha (State)	1163	2922	2082	2200	3340

Source: OPEPA, IE Cell, Odisha

Table 8: Summary of other camps organised in the sample districts and Odisha

Name of the districts	No of Speech Therapy camp conducted					No of Physiotherapy camp conducted					No of Theme-based camp conducted				
	2007-08	2008-09	2009-10	2010-11	2011-12	2007-08	2008-09	2009-10	2010-11	2011-12	2007-08	2008-09	2009-10	2010-11	2011-12
Ganjam	23	46	23	23	46	0	0	46	14	37	207	207	207	138	138
Keonjhar	13	13	13	13	13	1	0	13	13	13	0	10	39	39	29
Khurdha	12	22	12	22	11	0	0	0	11	11	0	0	56	35	46
Sambalpur	10	10	10	10	13	0	30	0	0	0	30	30	36	30	35
Sundargarh	18	36	36	34	40	18	26	18	36	20	0	38	36	40	36
Odisha (State)	1509	1856	866	673	933	96	223	254	277	280	3452	5102	2315	2533	3267

Source: OPEPA, IE Cell, Odisha

Table 7 shows that in 2007-08, 2008-09, 2009-10, 2010-11 and in 2011-12 number of medical camps held in the state were 1163, 2922, 2082, 2200 and 3340 respectively. In 2011-12, highest numbers of medical camps (3340) and in 2007-08 (1163) lowest numbers of medical camps were organised in Odisha. Amongst the sample districts of Odisha, all districts conducted medical camps except Khurdha in 2007-08 and 2008-09. Highest number of medical camps were organised in Ganjam in 2007-08 (23) followed by Sundargarh (18), Keonjhar (13) and Sambalpur (9). Whereas in 2008-09, highest number of camps were organised in Keonjhar (39) and lowest in Sambalpur (9). In 2009-10, highest number of medical camps were organised in Ganjam (46) and lowest in Khordha (9) and Sambalpur (9). In 2010-11 highest number of medical camps were organised in Sundargarh (34) and lowest in Sambalpur (9), and in 2011-12, highest number of medical camps

were organised in Sundargarh (40) and lowest in Sambalpur (9). It can be concluded that there was no steady progress in providing medical services to CWSN in Odisha.

Table 8 shows that highest number of speech therapy camps were organised in Odisha (1856) during 2008-09 and lowest during 2010-11 (673). Amongst sample districts highest number of speech therapy camps were organized in Ganjam in 2007-08 (23), 2008-09 (46) and 2011-12 (46) and lowest in Sambalpur (10) from 2007-08 to 2011-12. As compared to speech therapy camps, less number of physiotherapy camps were conducted in the state as well in sample districts of Odisha from 2007-08 (1509, 223) to 2008-09 (1856, 254) to 2009-10 (866, 277) to 2010-11 (673, 280) to 2011-12 (933, 280). In 2007-08, highest number of theme-based camps were organised in Ganjam from 2007-08 to 2009-10 (207) and 2010-11 to 2011-12 (138). It can be concluded that though different types of campus relating to direct services to CWSN were organised in Odisha, there found progressive trends in organisation of physiotherapy camps, whereas organisation of speech therapy and theme-based camps showed no steady progress.

Table 9: Summary of number of Braille books provided year wise to total blind students (TB) in the sample districts and state of Odisha

Sl. No	Name of the sample District	2007-08	2008-09	2009-10	2010-11	2011-12
1.	Ganjam	0	40	78	178	326
2.	Keonjhar	0	0	43	41	35
3.	Khordha	0	0	67	182	242
4.	Sambalpur	15	16	17	16	23
5.	Sundergarh	0	41	48	49	71
6.	Odisha (State)	811	2922	1093	1300	2050.5

Source: OPEPA, IE Cell, Odisha

Table 10: Summary of number of CWSN provided with Escort allowance in the sample districts and state of Odisha

Sl. No	Name of the sample District	2007-08	2008-09	2009-10	2010-11	2011-12
1.	Ganjam	262	553	633	748	1077
2.	Keonjhar	0	0	125	125	225
3.	Khordha	0	0	241	269	335
4.	Sambalpur	0	0	100	120	125
5.	Sundergarh	0	0	84	124	260
6.	Odisha (State)	340	762	4736	5681	8446

Source: OPEPA, IE Cell, Odisha

Table 11: Summary of year wise barrier free construction held in the sample districts and state of Odisha

Sl. No	Name of the sample District	No of Ramps with handrail constructed				
		2007-08	2008-09	2009-10	2010-11	2011-12
11	Ganjam	738	220	400	1014	110
17	Keonjhar	200	427	342	560	65
19	Khordha	0	0	266	400	96
28	Sambalpur	428	100	236	349	0
30	Sundergarh	247	956	307	46	0
	Odisha (state)	6973	7512	7074	9081	1278

Source: OPEPA, IE Cell

From Table 9, it is evident that in 2007-08 only in Sambalpur ditrict (15) braille books were provided to TB children. In 2008-09, highest number of braille books were provided in Sundargarh

(41) followed by Ganjam (40) and lowest in Sambalpur (16), in 2009-10, 2010-11 and 2011-12 highest number of braille books were provided to CWSN in Ganjam district (78, 178 and 326) and lowest in Sambalpur (17, 16 and 23) respectively. In the state highest 2922 number of braille books were provided to TB CWSN in 2008-09 and lowest 811 in 2007-08. It can be concluded that progressive trend in providing braille books was found in districts as well as state of Odisha.

Table 10 depicts that there is gradual increase in providing escort allowance to CWSN in the state. In 2007-08 (340), 2008-09 (762), 2009-10 (4736), 2010-11 (5681), and 2011-12 (8466) number of CWSN were provided with escort. In 2007-08 and 2008-09 not a single CWSN was provided with escort allowances in Keonjhar, Khurdha, Sambalpur and Sundargarh districts. In 2007-08 and 2008-09, 262 and 553 numbers of CWSN were provided with escort allowances in Ganjam district, which was 77.05% and 72.57% respectively of the whole state figure. Ganjam was the only district to provide escort allowances to CWSN in all five years. Whereas in 2009-10 (24.97%), in 2010-11 (24.39%) and in 2011-12 (23.94%) of CWSN were provided with escort allowances by all sample districts in comparison to State figure. It can be concluded that there was progressive trend found in providing escort allowance to CWSN in sample districts and state Odisha.

Table 11 shows that in the state highest number of ramps with handrail were constructed in 2010-11 (9081) and lowest in 2011-12 (1278). Amongst sample districts in 2007-08 highest numbers of ramps with handrails were constructed in Ganjam (738) and lowest in Khordha (0). In 2008-09, highest numbers of ramps were constructed in Sundargarh (956) and lowest in Khordha (0). In 2009-10, 2010-11 and 2011-12, highest ramps were constructed in Ganjam and lowest in Sambalpur in 2009-10 and 2011-12, whereas in 2010-11, Sundargarh was having lowest construction. In all sample districts total numbers of ramps constructed in 2007-08 (23.13%), 2008-09 (22.67%), 2009-10 (21.92), 2010-11 (26.08%) and 2011-12 (21.20%) of State figure. It can be concluded that there was no steady progress in barrier free environment facilities in schools of Odisha.

Table 12: Summary of disable friendly toilet (DFT) constructed in the state and sample districts of Odisha

Sl. No	Name of the sample District	No of Disabled friendly toilet constructed				
		2007-08	2008-09	2009-10	2010-11	2011-12
11	Ganjam	0	0	0	372	69
17	Keonjhar	0	0	42	167	39
19	Khordha	0	0	0	76	33
28	Sambalpur	0	0	0	92	0
30	Sundargarh	0	30	150	130	0
	Odisha (state)	0	48	353	2691	980

Source: OPEPA, IE Cell

Table 13: Summary of the percentage of schools made barrier free up to September 2013

SlNo.	Name of District	% Schools made barrier free	% schools with DFTs
1	Ganjam	66.21	1.5
2	Keonjhar	79.74	7.74
3	Khordha	83.62	3.82
4	Sambalpur	79.43	6.34
5	Sundargarh	89.07	5.21
6	State	70.74	5.03

Source: OPEPA, IE Cell, Odisha

From the table 12, it was found that in 2007-08 there was not a single DFT was constructed either in state or in sample districts of Odisha. In 2008-09, in the state 48 and only in Sundargarh district 30 (62.5%) DFT, 2009-10, in the state 353 and in sample districts total 192 (54.39%), in 2010-11, state (2691) and in sample districts 837 (31.10%), in 2011-12, state (980) and in sample districts

total 141 (14.38%) DFT were constructed. It was found that in 2011-12 lowest 14.38% DFT were constructed in sample districts. It can be concluded that there was progressive trend in providing disable friendly toilet for CWSN in schools except 2011-12.

Table 13 depicts that in the state total 70.74% schools were made barrier free, where as in Sundargarh district highest (89.07%) and in Ganjam (66.21%) of schools were made barrier free. While 5.03% DFT were constructed in schools of the state in and highest DFT were constructed in Kenjhar (7.74%) and lowest in Ganjam (1.5%).

MAJOR FINDINGS

1. Odisha was having low identified CWSN in comparison to National figure.
2. Except Ganjam and Khordha enrolment of CWSN in rest of the sample districts along with the state of Odisha declined from the year 2009-10.
3. There was no steady progress in providing HBE to CWSN in the state as well in sample districts of Odisha.
4. There was no progressive trend in providing aids and appliances to the CWSN in Odisha as well in sample districts.
5. There was no steady progress in providing medical services to CWSN in Odisha.
6. Though different types of campus relating to direct services to CWSN were organised in Odisha, there found progressive trends in organisation of physiotherapy camps, whereas organisation of speech therapy and theme-based camps showed no steady progress.
7. There was mismatch in opening of IEP file against number of identified CWSN
8. Though different types of campus relating to direct services to CWSN were organised in Odisha, there found progressive trends in organisation of physiotherapy camps, whereas organisation of speech therapy and theme-based camps showed no steady progress.
9. Progressive trend in providing braille books was found in districts as well as state of Odisha.
10. There was progressive trend found in providing escort allowance to CWSN in sample districts and state Odisha.
11. No steady progress in barrier free environment facilities in schools of Odisha was found.
12. There was progressive trend in providing disable friendly toilet for CWSN in schools except 2011-12.
13. There was no progressive trend in providing aids and appliances to the CWSN in Odisha as well in sample districts.

DISCUSSION

The finding emerged that category wise CWSN identified in the state of Odisha varies in number from year 2009-10 to 2011-12 substantiated the finding of Guha (2012) who reported that there was definite concern about mis-diagnosis especially in MR, CP, MD and speech impairments (not officially gazetted by the Health Ministry) and that had negative impact on interventions, apart from wrong labelling. The finding that except Ganjam and Khordha enrolment of CWSN in rest of the sample districts along with the state of Odisha declined from the year 2009-10 can be attributed to the non-supportive attitude of parents for sending CWSN to schools. Though at state level there found gradual decrease in rate of drop outs but in some of the sample districts there was increasing trend in rate of drop outs, which may be attributed to severity of disability, lack of psychological support and apathy of parents. There was no steady progress in providing HBE to CWSN in the state as well in sample districts of Odisha can be attributed to huge gap of CWSN and special educator ratio and lack of sufficient time on part of resource teachers to provide HBE. No progressive trend in providing aids and appliances to the CWSN in Odisha as well in sample districts can be attributed to late supply of aids by ALIMCO. This finding is substantiated the report of Tripathy (2011) and Guha (2012). Though different types of camps relating to direct services to CWSN were organised in Odisha, there found no steady progress in providing medical facilities. This can be attributed to lack of availability of medical professionals with specializations. It can be concluded that there was no steady progress in barrier free environment facilities in schools of Odisha can be attributed to negligence in part of school as well district authority to do follow up programme.

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How to cite this article:

Jati S. and Sarangi H. (2017): A Critical Analysis of Progress of Inclusive Education in Terms of Direct Services Provided to Children with Special Needs in Odisha. *Annals of Education*, Vol. 3[4]: December, 2017: 41-48.