CHAPTER 1
INTRODUCTION

In our view, it should be seen as unacceptable in the twenty-first century for the lives and experiences of disabled children and their families to be bereft of those features that many others take for granted, features that make an essential contribution to an ordinary and reasonable quality of life.

(Read et.al., 2006, p. 17)

Disability Perspectives and Persons with Disability

Historically, disability has been explained and understood from a variety of perspectives. These views of disability span a continuum from a stigmatized notion of disability to clinical, pathological notion to more recent notions based on social constructionism, social model and rights perspective (Stiker, 1999). For a very long time, society has stigmatized people who are different, including people with disabilities, as ones who should be avoided or rejected (Bedini, 2000). In some instances, people with disabilities have been patronized as animals or children; in others, they have been treated as dangerous or a menace to society (ibid). Alternatively, they have been perceived with pity or sympathy. Fine and Asch (1988, cited in Bedini, 2000) stated that it is assumed that "... the disabled person is a 'victim' " or that "having a disability is synonymous with needing help and social support".

Such negative labeling has resulted in social derogation of persons with disability wherein they are considered as less than equal to the rest of the society (Scheff, 1966; Bedini, 2000). The medical model of disability reinforced such negative labeling by defining disability as a 'problem' that needs to be 'treated' or 'cured'. Even the functional definitions of disability that defined disability and extent of disability in terms of the limitations in the functionality of the individual reflected this historical orientation to disability (Blandy, 1991).

The personal tragedy view of disability that looked at disability or rather, impairment, as a tragedy that needs to be avoided, eradicated or 'normalised' by all possible means, was the most “intrusive, violating and invalidating experiences” for disabled people (Swain & French, 2004). Such negative presumptions were at the root of the social acceptance of the acts of abortion of fetuses with disability (Parents & Asch, 2000; cited in Swain & French, 2004) and compulsory sterilization of people with learning difficulties (Park and Radford, 1999, cited in Swain & French, 2004). At the heart of such treatment of the people with disabilities was the firm belief that disabled people cannot be happy or enjoy an adequate quality of life (Swain and French, 2004).
The Disability People’s Movement or the Disability Rights Movement, which began in 1970s started talking about the attainment of full citizenship for disabled people through the improvement of quality of life, accessibility and right to an independent life (Eisenhauer, 2007). The challenge to ‘Ableism’, i.e. cultural privileging of able-bodied people that led to discrimination, disempowerment and prejudices related to people with disabilities, came with increasing political engagement with the social and cultural construction of disability inherent to the Disability People’s Movement (ibid).

World Health Organisation (WHO) defines the term ‘participation’ as the nature and extent of a person’s involvement in life situations which encompass activities of self-care, mobility, socialization, education, recreation and community life (World Health Organisation, 2002). A person with disability has a right of participation in activities in which people form friendships, develop skills and competencies, express creativity, achieve mental and physical health, and determine meaning and purpose in life.

The social model of disability argued that it is not the actual disability but the way disability is visualised and diagnosed at the societal level that poses the greatest barriers to pursuits for individuals with disabilities. According to this viewpoint, failure of structured social environment in adapting to the needs and aspirations of people with disability leads to the particular meaning of disability rather than the inability of people with disabilities to adjust to the norms and expectations of the society (ibid). Not only what ‘disability’ means, but also the ‘extent’ of disability emanates from the nature of the social and structural environment – the extent to which various kinds or levels of physical functioning are necessary for personal survival and/or satisfaction in an organised community (ibid).

Where the social model of disability focuses on the environmental and structural barriers, the Affirmative Model of Disability talks about the positive and dynamic identity of individuals with disability. It encompasses ‘positive social identities, both individual and collective, for disabled people’ (Swain and French, 2000).

*Whereas the social model is generated by disabled people’s experiences within a disabiling society, the affirmative model is borne of disabled people’s experiences as valid individuals, as determining their own lifestyles, culture, and identity* (Swain and French, 2000, p. 578).

Such a model encourages persons with disability to turn their negative perceptions of themselves into a positive disability identity of which they are proud, a disability identity that can challenge the negative attitudes of the majority society and redistribute power between disabled and non-disabled people (Jankowski, 1997; Ladd, 2003; Widell, 2000). In 1988, the rhetoric of Deaf people perceiving themselves as an ethnolinguistic minority group was first introduced in the Gallaudet revolution (Jankowski, 1997).
The ‘Deaf Culture’ is borne out of beliefs challenging negative attitudes of the majority society and is composed of common language (i.e. a natural sign language), history, arts, mores, social networks and social institutions shared by individuals who are Deaf. They prefer being addressed as ‘Deaf’ with a capital D to denote identification with the Deaf culture (Smith & Rush, 2007, p. 232 as quoted in Whyte & Guiffrida, 2008).

The experience and identification with the Deaf culture gives a person with hearing impairment a stronger group identity, a stronger self-concept and a higher self-esteem (Bat-Chava, 1993, Glickman, 1996) – factors that facilitate empowerment. Empowerment has been defined as a ‘state of mind’ such as feeling worthy and competent, perceiving power and control and also as a ‘process of reallocation of power’ through a modification of social structures (Rappaport, 1987).

Only existence of choices is not enough for empowerment to occur, awareness of these choices and access to a minimum level of resources to make this choice also need to co-exist (ibid). Empowerment of persons with disability as a group is also enhanced by the celebrations of their talents as is seen during Deaf Way I and II as well as Abilympics (Oliva, G., 2002). Deaf Way I and II were a week-long conferences which invited presentations on the issues of the Deaf as well as cultural and arts celebrations. The first Deaf Way was held in the week of July 9-14, 1989 and the second took place from July 13-15, 2002. The name ‘Deaf Way’ denotes a ‘deaf way of life (ibid)’.

The model given by Wallerstein (1992) talks about reversing effect of empowerment in which the empowering changes at the interpersonal and structural level reverse the negative effects of objective social experiences such as living in poverty, having limited decision making power and lacking social support as well as subjective experiences such as learned helplessness, external locus of control and chronic stress. Research studies have often associated recreation with an increased sense of efficacy, socialization and decrease in stress levels (Devine & Wilhite 1999; Mactavish & Iwasaki, 2005; Hutchinson et. al., 2008). Empowerment is a multidimensional, multilevel construct; personal, interpersonal and structural at the same time (Rappaport, 1987) as given in the figure below:
Though there is a strong support for empowerment model, social work practice is yet to adopt it fully while working with people with disabilities (Galambos, 2004). Data from the studies infer that social work interactions with this group focuses more on their disabilities than on their abilities and looks at disability as a problem (Beaulaurier, 2002). Two major aspects of an empowering social work practice is strengths perspective and multidimensional assessment (Galambos, 2004). A model given by Russo (1999) gives useful strategies for effective interventions on the issues of disability. His model emphasises strengths, incorporates individual’s vision in the care plan and suggests development of a human resource, network of supportive individuals.
Children with Disability in India

Though there is no denying of the fact that alternative perspectives have emerged that correct the belief of disability being a tragedy and propose that being disabled can actually lead to an equally satisfying or fulfilling life (Swain & French, 2004), the question remains as to what extent this perspective is adopted and reflected in the social psyche of people, especially in developing countries.

Even today, in India, society casts the persons with disability into a role of a dependent, a social, physical and economic burden. Persons with disability are one of the largest minority groups in India, who have suffered long years of neglect, deprivation, exclusion and oppression (Karna, 2001). Birth of a ‘disabled’ child in the family has a profound effect on the family’s structure, function and emotions (Singh & Ghai, 2009; Pal et al. 2005). While this is a universal phenomenon, the Indian cultural conceptions of a ‘disabled’ child as dependent, immature and incapable of taking decisions makes it more traumatic (Dalal 2002).

The belief that deafness is a curse and a child with hearing impairment a burden is indoctrinated from the time the parents first learn the diagnosis of hearing impairment in their child. The hearing parents who don’t have any previous knowledge of deafness, let alone the Deaf culture, have to rely on the health professionals and educators to develop an understanding of deafness and their role as parents (Yael, 2000).

Most of the health professionals the parents talk to in the initial years after the child is born, have a clinical, medical approach to disability which strengthens their belief that deafness is a deficiency, an abnormality which needs to be ‘overcome’ or at least ‘lessened’ as much as possible.

The pediatrician sends them to the oncologist, who sends them to the audiologist, who measures the hearing loss, and he sends them to the hearing-aid fitter, who sells them at great expense a hearing aid and sends them to the speech pathologist, who tells them that if they work hard enough they can undo the wrong that nature did and that their child can speak and read lips. These hearing parents then transmit this view to their deaf children (Loth & Staff, 1987).

Such beliefs and perceptions form an important part of the larger environmental influences on the development and quality of life of a person with disability.

Apart from family, the other most important socializing agency that shapes the personality and influences the beliefs of a child is school.
Education and Special Schools for the Children with Hearing Impairment

The first deaf school was founded in Paris by Charles Michel de l'Epee (1712-89) in the 1760s. By 1780s it had the number of students had increased to 60 (West, 2008). He realised the importance of sign language and published his own sign alphabet which forms the basis of that used today. His disciple, Roch-Ambroise Sicard (1742-1822) taught with the help of drawings of the objects. He used to write the object's name over the sketch and then rub it out, leaving the name (ibid). In the United States, the credit of spreading the 'deaf renaissance' goes to one of Sicard's students, Laurent Clerc (1785-1869) who was deaf following an accident in early childhood. He has the distinction of being the founder of the first American deaf school in Hartford, Connecticut, in 1817, in association with Thomas Hopkins Gallaudet, a Philadelphia-born preacher (West, 2008). His son Edward Gallaudet (1837-1917) founded the National Deaf and Mute College in Washington in 1864 (ibid).

The major argument, which is still going on, in the field of deaf education is between 'manualists' who believe sign language should be used, and 'oralists' who believe the deaf should be taught to lip-read and speak and that sign language cuts them off from society. Alexander Graham Bell, the pioneer of telephony, was one of the leading proponents of oralism in the later nineteenth century (ibid).

In India also, the educators are divided on this issue. In the past, special schools have been set up and provisions have been made for an integrated education. In 1947, India had a total of 32 such schools for the blind, 30 for the deaf, and three for the mentally retarded (Office of the Chief Commissioner for Persons with Disabilities, 2010). By the year 2000, the number had increased to around 3000 (NCERT, 2006). As per the list published by Ali Yavar Jung National Institute for the Hearing Handicapped (AYJNIHH, 2010), there are 17 special schools for the children with hearing impairment in Mumbai.

Deaf education in India at present has what Pijl and Meijer (1991, cited in NCERT, 2006) refer to as “two tracks”, i.e. parallel but separate policies on segregation and integration. Streamlining and necessary accommodations are made in special schools to follow a curriculum that is almost in line with the general education curriculum. Where necessary, the plus curriculum and the adaptation of instructional methodologies are followed (ibid).
School Recreation and the Development of the Children with Hearing Impairment

How does congenital deafness affect human development? Both profoundly and not at all.

(Mayberry, R. I. 2002. p.101.)

Communication problems faced by the children with hearing impairment often leads to difficulties in developing appropriate social skills and social relationships. Children with hearing impairment have fewer opportunities to engage in positive social interactions and therefore have experiential deficiencies that influence their social development negatively (Antia et. al., 2011). Facilitating peer interactions among children with hearing impairment eases their struggle with self-identity issues, according to Calderon and Greenberg (1999, cited in Jung and Short, 2002).

In a society that believes in oralism and ablism, hard of hearing children generally are deprived of external rewards, because a mode of communication different from the majority reduces possibility of their fulfilling the ‘socially acceptable’ academic and social standards (Schloss, 1984). Thus, these children get reduced opportunities for positive reinforcement (ibid). Therefore, positive reinforcement becomes an effective strategy to develop not only the skills among these children but also a positive social identity (Hughes, 1996).

Antia, Kreimeyer and Eldredge (1994, cited in Antia et. al., 2011) also found that quality of peer interaction, familiarity with peers and activities that promote familiarity with peers facilitate social development of children with hearing impairment. According to Schwartz (1988, quoted in Devine, 2004) social acceptance is characterized by equal status or social position between individuals with and without disabilities. Social acceptance makes social interaction an effortless and enjoyable endeavor, increases a feeling of belongingness to the group and creates equal opportunities for people with and without disability alike (Hewitt, 1991, quoted in Devine, 2004).

Recreational activities such as sports lead to social inclusion of children with hearing impairment as it provides a meaningful and non-threatening playing field where hearing capacity is not the most important requisite for participation (Stewart & Kathleen, 1999). Recreation where there is social acceptance increases the social positioning of a person with disability to that of non-disabled person and leads to reciprocal relationships and social inclusion (Devine, 2004). Therein lies the importance of recreational activities including sports for the children with disability that lead them to identify positively with a larger group, share the responsibilities and experiences, and feel secure and wanted (Bhave, 1985).
Group and social activities provide context which determines the meaning and purpose in life of people and enriches it with friendships, development of skills and competencies, creativity and physical as well as mental health (ibid). It is also an area wherein children with disabilities face barriers to participation compared to their peers; and this difference widens as children become adults (ibid).

The relevance and importance of school recreation becomes more heightened in the view of a relatively sedentary life style the children with hearing impairment live. The only physical activity that most of the children with hearing impairment engage in throughout the day is the physical education classes in their schools (Stewart & Ellis, 1999).

Research studies on the physical fitness and health status of children with hearing impairment have shown mixed results. One parameter on which the studies have consistently shown children with hearing impairment scoring lesser than the hearing children is balance. Since the first study on this aspect by Long (1932, cited in Stewart & Ellis, 1999), many studies have supported the finding that the balance skills of deaf children are significantly lower than those of hearing children (Stewart & Ellis, 1999). Vestibular impairments seem to be a determinant of delayed motor skills development in children with hearing impairment; the children with hearing impairment who do not have vestibular damage show no difference in terms of their motor skills from the hearing children (Lieberman, Volding, & Winnick, 2004).

Schools are often the only place where children with hearing impairment have physical activities including sports (Stewart & Ellis, 1999). School plays an important role in preventing these children to lead a sedentary life and have health problems associated with it (ibid).

Along with balance, another area where they might be lagging behind the hearing children is peripheral vision. Recent research by the University of Sheffield has found that people who are born deaf have better vision than hearing people (FARS News Agency, 2010). The study tested the development of peripheral vision in the people with hearing impairment from childhood to adulthood. The researchers found the in childhood, children with hearing impairment take more time to perceive objects in the periphery of the vision; however adolescents and adults with hearing impairment perform better than the hearing adults on tests of reaction time to light stimuli in their peripheral vision (ibid).

This has implications for practical life – adults with hearing impairment will do better in jobs that can use their capacity to see a wide area of activities and respond quickly to situations, such as sports referees and as in childhood their peripheral vision is not yet so sharp; the parents will have to be aware that these children will take more time to spot the potential dangers such as fast traffic (FARS News Agency, 2010).
However, it is not only the physical functioning but other factors, such as those within the task, within the individual and in the environment, also determine a child’s motor development at each stage (Gallahue, 2000 cited in Lieberman, Volding & Winnick, 2004). Learning of simple as well as complex motor skills is as much a result of opportunities for practice, encouragement and training as it is of functioning of bodily organs (ibid).

These factors are also important for the cognitive development of children with hearing impairment. Case study research on cognitive development of children with hearing impairment (Grimshaw, Adelstein, Bryden and MacKinnon, 1998 and Morford, 2001 – both cited in Mayberry, 2002) show that education makes a lot of difference to the cognitive competencies of children with hearing impairment. The children with hearing impairment who had education scored equally or higher than hearing children on the nonverbal IQ tests (ibid).

Meaningful interactions help children with hearing impairment learn behavioural and cognitive strategies, gain knowledge of self and others and form mental schemas to make sense of the world around them as well as being a part of that world. (Stewart & Ellis, 1999). The data collected from the Gallaudet Research Institute shows that deafness, by itself, does not hamper the ability of a child with hearing impairment to learn and use abstract symbols and symbolic relations like those in Mathematics. However, the same cannot be said about language competency (Allen 1994, cited in Mayberry 2002).

Linguistic deficiency in people with hearing impairment has found to be caused by the restricted access to information and knowledge in learning environments (Yoon & Kim, 2011). Familiarity with a language determines how well words from a given language can be recalled (Mayberry 2002). This language familiarity helps individuals to recall more frequently occurring words than infrequent ones and words from their native language than the other language they might have learnt. Less familiarity of the children with hearing impairment with the language also affects the short term memory of these children related to the words.

To increase the knowledge resource and enhance the learning experience, use of multimedia is an effective strategy which includes pictures, narration, animation and captions (Mayer, 2009 cited in Yoon & Kim, 2011). One agency that plays a pivotal role in a deaf child’s development through provision of knowledge and stimulation to learn is school (Wilson, 2005). In spite of documented evidence of the benefits of schooling however, the percentage of children with hearing impairment that have access to school is surprisingly low, i.e. 20% (ibid).
The school placement options for the children with hearing impairment range from residential schools only for the children with hearing impairment to non-residential special schools to non-residential special classes in a mainstream school, to inclusive classes to residential mainstream schools. Both school systems have pluses and minuses. Those who vote for integration believe that it is in mainstream schools that students with hearing impairment have more chances of social interaction with their hearing classmates and teachers and this helps them to learn the necessary social skills required to survive the outside world. (Lynas, 1999; Powers, 2001). According to Harrison (1988), the children who learn in these schools develop their oral language because of the natural linguistic environment and this helps them to acquire more knowledge.

Though there are academic advantages in mainstream schools, the students with hearing impairment miss the opportunities for social interactions in special schools (Foster, 1989). The ‘integrated’ school might not be inclusive and just the presence of students with hearing loss in mainstream schools does not automatically lead to their social inclusion since they are naturally set apart due to their difficulties when communicating, which in turn result in very limited participation in classroom discussions (Jarvis, 2002).

In terms of social interactions and participation in the classroom, special schools or schools for the children with hearing impairment are seen to be more facilitative than mainstream schools (Jarvis, Sinka & Iantaffi, 2003; Mertens, 1989; Sinka, Iantaffi, & Jarvis, 2002). The ‘we’ feeling and positive self-image – two significant aspects of the Deaf culture – are easily constructed in special schools than the mainstream schools (Johnston, 1997).

The decision to conduct the present study in special schools is methodological rather than epistemological. It does not address the issue of special versus inclusive education for the children with hearing impairment.

The accounts of the persons with hearing impairment have highlighted the connection between positive self-conceptions and the ‘community’ feeling or feeling of belongingness to the peer group (Mactavish & Iwasaki, 2005; Bat-Chava, 2000, De Clerck, 2007). Peer groups have an important role to play during transition from early childhood to middle childhood when children with hearing loss approach middle and high school. Peer groups provide them with the necessary tools and emotional support to successfully navigate life's roadblocks (Bury & Wilson, 2007).

Within the framework of school education, provision of such group and social activities is done through school recreation or co-curricular and extra-curricular programme. It is one of the major areas in the special school for the students to have new experiences, explore and work in groups (Ellis, 2001).
Influences of schools on physical fitness and activity levels of children through such in and out-of-class activities which are organised, supervised and financed by the schools is well documented in the research literature (ibid).

A co-curricular student activities program that is well structured and purposeful also forms linkages to the academic curriculum and learning skills (ibid). Co-ordination among the school personnel and agreement on the objectives of the school recreation or co-curricular programme are pre-requisite for the students to experience growth and learning in a wide array of areas (Darling, Caldwell & Smith, 2005). It presents students a means to showcase their talents, draw attention to their accomplishments and get a sense of community bonding with their school (ibid).

School recreation and co-curricular activities also provide leadership opportunities to all students irrespective of their academic performance and expands the avenues of development outside the narrowly defined academic curriculum (Dewey, 1916; cited in Darling, Caldwell & Smith, 2005).

It is not all positive when it comes to school recreation, however. There is a concept called ‘negative sport behaviour’ which includes the undesirable aspects of conduct while involved in athletics and sports (Taylor & Wilkinson, 2003). Negative sports behaviours are the physical, verbal or nonverbal negative social interactions as conveyed through complaining, disrespectful expression to other players or coach / trainer, or teasing other athletes (ibid).

A study by Flowers and Brown (2002) found competitive performance anxiety among athletes involved in competitions. Some of the environmental factors that lead to the negative effects of school recreation is increased commercialism in the field that puts too much pressure on the children through too many competitions (Roberts, 2007). Besides the overload, students also miss class time and have reduced time for study due to frequent competitions, especially the inter-school competitions (ibid).

In India, the curriculum guidelines given by National Council of Educational Research and Training (NCERT) for special schools give equal emphasis to the co-curricular subjects – Art, Craft, Music, Yoga, Sports, Physical Education and Pre-vocational courses – as to the academic subjects like Mathematics, Social Studies, Science and Languages (NCERT, 2006). The Position Paper of NCERT on special education (2006) identifies health, skill development and socialisation as benefits of co-curricular activities for children with disabilities.

Research on special education has highlighted the need for revision of the curriculum of the special education, especially in areas of subject matter and level of challenge they provide the students
The recent trend worldwide has expanded the definition of curriculum to include not only the academic learning that takes place in the school but also overall student development (*ibid*). This has implications for school performance assessment as well; the schools need to be assessed not only in terms of how many students pass the exams or excel in theoretical subjects; but also in terms of social environment it offers to the students and opportunities for the development of skills.

A review of the literature (Andreas & Schuh, 1999; Barr & Tagg, 1995 as cited in King & Anderson, 2004) has revealed a move-away from a traditional approach to an approach that stresses on innovative but structured design in learning and student development. Kuh, Schuh, & Whitt (1991 as cited in King & Anderson, 2004) define learning from the student development perspective as follows:

> The process in which an individual undergoes a number of changes toward more complex behavior that results from mastering the increasingly demanding challenges of life. These changes toward more complex behavior often culminate in the individual's transforming to a higher developmental position which results in his/her viewing people, events, and things in a fundamentally different way. (pp. 13-14)

Learning in its broadest sense can be equated to process of facing physical and creative challenges through structured activities and growing in all areas, as a result. Mahoney and Stattin (2000, cited in Darling, Caldwell & Smith, 2005) define highly structured activities as those that include –

> “regular participation schedules, rule-guided engagement, direction by one or more adult activity leaders, an emphasis on skill development that is continually increasing in complexity and challenge, activity performance that requires sustained active attention, and clear feedback on performance” (pp. 114-115).

Learning, defined thus, does not happen only in classrooms. It occurs in classrooms, in the library, in the school ground and also in the school auditoriums and classes of co-curricular subjects (King & Anderson, 2004). It is available to all, irrespective of the disability, gender or class the student is in; and all students contribute to each other’s learning (*ibid*).

Student involvement in a variety of creative ways is the main feature of the Co-curricular Activities Programme (CAP) model (*ibid*) for developing learning environments (King & Anderson, 2004). Following assumptions underlie this model:

* Individuals develop in qualitatively different, complex, sequential and cumulative stages.
* Student is the primary actor in this process and he / she determines his / her own development.

* External agencies such as schools can facilitate this process by assisting students in accomplishing self-determined goals.

* Development cannot be compartmentalized; it has to be understood holistically (p.55)

The CAP model based on this epistemological framework guides the learning environments facilitative of student development (ibid).

The assessment model endorsed by NCERT (2006) is based on the ecological model and believes in the all-round development of students with hearing impairment. It focuses on the abilities, strengths and needs of the students rather than the deficits. Students are viewed as active participants and collaborators in the process.

**Curriculum Development**

Curriculum is a prescriptive document, backed by authority, for the course of study in a school or system of schools (Westbury, Hirsch & Cornbleth, 2002). Traditionally, curriculum covered the content that should be at different grade levels, sequence of courses and methods of teaching. More recent trend, however, is to give guidelines in the forms of state or national standards of learning and teaching; outcomes that the schools should aim at without prescribing the specific content or pedagogy (ibid). Curriculum can also be defined as the whole of the experiences students have in the education programme which has goals and objectives based on the theoretical propositions explored and tested through research (Dowd & Battles, 1996).

The scope of curriculum, as given by Elliot Eisner and Elizabeth Vallance (1974, cited in Westbury, Hirsch & Cornbleth, 2002) range from being a tool to bring about changes to ensuring experiences that would lead to self-actualization. The perspectives that govern curriculum development can be child-centered, sociological, futurist or social reconstructive; the focus can be on values or on skills, on behaviour or on knowledge. In reality, rarely it would be exclusively one of the above (ibid).

In whatever sense curricula is understood, the underlying principle is that of defining what schools purposefully do (ibid). However, seen closely, it is much more complex than that. It has cultural influences in defining what is necessary for young people to know or experience at specific ages. One cannot study curricula outside its social, cultural and economic context – at the national as well as local
level (*ibid*). Thus, curriculum is a symbolic representation of both – educational norms set within a specific social and cultural context and the nature and quality of the schooling (*ibid*).

The social acceptance and legitimacy of education given by the school comes from the social perceptions of what the school is doing and social norms about what the school can and should be doing. This does not mean that the influence and power is only one-sided – community influencing what happens at the school. It also highlights the potential of the school to influence the social attitudes about childhood, disability and education. It can bring about change by taking a ground-breaking stand through its most important stakeholders – children.

There are three steps in the development of curriculum: define, develop and evaluate (Broski, 1976, cited in Dowd & Battles, 1996). There are two major features of this process – continual feedback and overlapping of steps (*ibid*).

According to Walter Doyle, (cited in Westbury, Hirsch & Cornbleth, 2002) curricular action occurs at three distinct levels:

1. Institutional, where the influences on the curriculum come from culture and society.

2. Programmatic, wherein the subject content for schools, their core and elective course requirements and subject specifications are decided. The appropriate content within the subjects are also specified at this level.

3. Classroom, where the teachers elaborate the programmatic curriculum and its connection to the real life classroom contexts.

The eight sequential steps given by Dowd and Battles (1996) for curriculum alignment can be adapted to any course or school type:

Step 1: Relate the present course content by relating it to some parameters such as developmental tasks or relevance of the information, skills to the present times.

Step 2: Decide, with consensus from all the stakeholders, a syllabus format. The advantage of a common syllabus format leads to common content coverage and focus areas for all the students and standardizes the operational strategy to meet the course goals.

Step 3: Based on the scope given by the syllabus, sequentialise the material within the subjects.
Step 4: Formulate the objectives for each subject based on the expected knowledge and task performance from the students as well as critical thinking skills. Link the objectives to the sequence of the course in the manner from simplest to most complex.

Step 5: See the match between the objectives and the tools used for teaching – textbooks, technology, and equipment. Develop a ‘course pack’ of the materials.

Step 6: Implement the curriculum.

Step 7: See whether the evaluation matches with the sequencing and objectives of the curriculum. Align the evaluation measures with the curriculum accordingly.

Step 8: Review and evaluate the curriculum. Generally review and evaluation occurs at the conclusion of the course.

Student population is diverse in many ways. The theory of multiple intelligences proposed by Howard Gardner (1982) challenged the assumption that there is a single general ability that determines the intelligence of a child. He initially proposed seven different kinds of abilities that determine the intelligence of a person:

- Verbal ability reflected in tasks such as reading and writing;
- Logical ability such as in reasoning, information processing;
- Musical / Rhythmical;
- Intrapersonal ability indicated through individual work and endeavours;
- Interpersonal revealed through working in and with groups
- Bodily or Kinesthetic ability shown in activities requiring physical or muscle movement and strength; and
- Scientific; i.e. objective thinking (Gardner, 1991).

Gardner later added existential and moral intelligence in the list. One of his strong recommendations was to consider these different kinds of abilities while developing a curriculum and assessing the children in the school (ibid).
A qualitative study that looked at how the curriculum is translated by teachers in teaching of a course (Gose, 2004) found certain significant principles that underlie effective teaching. In the study twenty five renowned school teachers were interviewed. The focus of the interviews was to know about how they plan their teaching of the course based on the curriculum and classroom realities. The data revealed that the teachers who were perceived ‘effective teachers’ by the students inject ‘curriculum animation’ – bring curriculum to life in the classroom. This happens informally and intuitively, though there are five principles which form the basis of the curriculum animation plans. These are: (1) the content of teaching a course is sound; i.e. relevant to the curriculum; (2) it brings enjoyment both to the teacher and the students; (3) it responds to the uniqueness and diversities of the students; (4) it includes variety either in terms of tools used to teach; or activities; or topics explored and elicits active participation of the students; and (5) it is consistent with a personalized educational philosophy of the teacher (ibid).

Though there has been a lot of discussion on curriculum in mainstream schools, not many studies have looked at curriculum in special schools (Kurkova, Scheetz & Stelzer, 2010). Special educators themselves have also not be as active in the discussions on curriculum reforms (Pugach & Warger, 2001).

Whenever there has been talk about reviewing the curriculum in special schools, it is more often than not understood as teaching-learning of the academic subjects. The curriculum planning of co-curricular activities in special schools has not been focused in these forums (Kurkova, Scheetz & Stelzer, 2010).

Though both – the pedagogy and classroom teaching are important aspects of schooling of children with disability, it is equally important to know how best to address the developmental needs of these students and how to help them apply the knowledge and skills gained in the school (Pugach & Warger, 2001). Otherwise, children with disabilities will not be able to maximize their potentials due to watered down curricula and impoverished school environment (ibid). As Pugach and Warger (2001) note, ‘There is no doubt about it: Curriculum matters’.

With the changing perspectives about education and schooling, the relevance of curriculum development and alignment has increased. Schooling is not only looked at as an institution for academic training and mental discipline but also as an important agency that prepares children for life.

**Student Engagement with the School – School Engagement**

Student engagement is a construct that encompasses behavioural, cognitive and feeling dimensions related to students vis-à-vis their school (Lippman & Rivers, 2008). The behavioural aspect includes involvement of a student in learning tasks, participation in school activities and the absence of disruptive
behaviours (Bond, Drew & Seal, 2005; Lippman & Rivers, 2008). The emotional aspects covers the relationship students form with the teachers, friendships with the peers a feeling of belongingness (Thompson et. al. 2006, Lippman & Rivers, 2008). The cognitive aspect of school engagement involves preparedness to hone skills and increase knowledge of the subjects taught in the class (ibid).

Students have stated that school experiences play a direct and primary role in engagement with, or disengagement from school and early school leaving (Newman, Davies & Marder, 2003). A good or is it an effective or a school environment that is conducive school environment leads to school engagement (Lippman & Rivers, 2008). The school environment is determined by factors such as adequate school supports, caring teachers, challenging curriculum, clear and consistent goals and a school community that emphasizes bonding and relationship (ibid).

School engagement is associated with many positive outcomes such as absence of disruptive behaviour and substance abuse among the students, desirable educational outcomes, more school attendance, less stress and better health (Catalano et. al. 2004; Allen & Petrie, 2005; Shears, Edwards & Stanley, 2006; Rice et. al. 2008). Similar results have also been found for students with disabilities (Newman, Davies & Marder, 2003; Kristen, Patriksson & Fridlund, 2003).

Strategies have also been suggested to promote school engagement of students (Allen & Petrie, 2005; Thompson et. al., 2006; Lippman & Rivers, 2008). These include ensuring support from the school personnel in the school, challenging and interesting tasks, adequate material support, pro-autonomy stance of the school, opportunities for working in groups and active learning (ibid). The inhibitive factors include over-critical and judgemental attitude of the teachers, lack of clarity regarding school rules, inconsistent disciplining measures, and perceptions of unperceived unfair treatment (ibid). In case of students with disability, low attendance might not be indicative of low school engagement. Physical and health challenges related to disability and poverty make students miss school even though they are well engaged with their school (Newman, Davies & Marder, 2003).

Apart from these factors, there are many other influences on the child’s thinking, feeling and doing. What are then the other factors and in what ways do they influence a child with disability? To answer this question, for decades the developmental theorists and psychologists have been studying the factors - internal as well as external to an individual - that affect his/her development (Papalia & Olds, 1992).
Theories of Child Development and Recreational Activities

Theories help to get a coherent and rational understanding of the world (Papalia & Olds, 1992). The way a concept is understood determines whether and the way in which it would address the issues related to it. The way disability is understood will determine whether and how it would define and take a stand on the discrimination, stigmatization and marginalization of persons with disability. Similarly, the way child development is understood will determine the identification of the factors influencing child development and the nature of their influence.

For a long time, sociologists, psychologists as well as development scientists were interested in knowing what, why and how of the activities children were engaging in, and what were the effects of the same on their development (*ibid*). Studies conducted with children – with and without disability – supported the proposition that providing structured opportunities and resources for the child’s recreation is beneficial for the development of the child (Kristen, Patriksson & Fridlund, 2003, Darling, Caldwell & Smith, 2005; Habib et al., 2011; Jha et al., 2004; Habib, 2012). Such claims make it important to examine co-curricular activities within a broad framework of childhood development.

One way of classifying the developmental theories is categorizing them into mechanistic worldview and an organismic worldview. The theories that regard a human being as a kind of complex machine and development a sequential, fixed and chainlike sequence of events fall under the mechanistic model (Papalia & Olds, 1992). Behavioral learning theories come under this category. They believe that for the positive change to occur, proper environmental influence is a must and focus on the individual differences in responding to the external environment (*ibid*).

The organismic model focuses not on the whole – human beings in the totality of their internal and external environments. The theorists following this model believe that the whole differs in kind from its parts. The organism is not a passive agent but determines its own acts. Activation of responses and development is not solely dependent on the external forces but also on the internal processes of human beings. Humans develop by constantly restructuring themselves. Interplay of the environment and the human beings determine the new structures within them that leads to development (Lerner, 2002). The human development is characterized by discrete, step-like levels or states. The stage theories of Freud, Erikson, and Piaget fall within the organismic tradition.

A concept closely associated with stage theories is ‘developmental task’. Initially proposed in Erikson’s psychosocial theory, it has been recognized in the other life-span approaches, as well. A developmental task is one that arises predictably and consistently at or about a certain chronological age in the life of the
individual (Havighurst, 1948, 1953). Throughout their lives, the human beings develop by gathering knowledge and carrying out certain tasks based on their age and socio-cultural milieu. Smooth transition to the next developmental stage depends on the successful accomplishment of a certain task, while failure may result in difficulty in later developmental stages and social censure (ibid).

The focus of the current study is on the school recreation or co-curricular programme and how it is perceived by the children and school authorities to benefit development of children with hearing impairment. In order to understand whether and how organized recreation is perceived to influence development in a school setting, one would have to locate organized recreation within frameworks offered by different development theories.

One major category of theories that is applied widely while working with children is Behavioural theories. Behavioural theories focus on what the individual does and says – observable behaviour or responses. Stimuli – events, actions, features of the environment – elicit certain behaviour or responses. This impetus to behave or think in a certain way can be modified to teach certain behaviours to the individuals. Because of the emphasis on the ways in which individuals learn throughout their life span, these theories are also known as learning theories. The behaviour can either be reflexive or it can be consequence to an event or response in expectation of reinforcement- positive or negative (Papalia & Olds, 1992).

School recreation or co-curricular activities leads to learning of not only specific skills and ways to do a particular activity, but also values of team work, hard work, physical fitness, leadership, confidence and discipline through positive as well as negative reinforcements.

Behaviorists believe in:

* stating objectives in very precise terms prior to instruction;

* learning activities aligned to achieve the desired ends. They need to match with what is stated in the desired objectives; and

* assessment to ascertain if each objective has been achieved. Either the objective is or is not achieved (Marlow, 2006).

Where behaviour theories are based on two events that happen sequentially, psychosocial theories, like that given by Erikson (1963) argue that environmental context is equally important as the events don’t
occur in a vacuum. Erikson’s Psychosocial theory (1963, 1968) focuses on the psychosocial stages of development and the influence of each of this stage on the individual’s personality and self-image.

An individual has to perform a unique developmental task at each of these stages and resolve a crisis (Erikson’s preferred term was opportunity) (Erikson, 1968). Children in middle childhood or from 6 years to 12 years of age face and have to resolve the crisis of ‘Industry vs. Inferiority’. This is the period of curiosity and children want to ‘try out’ using various things or making them on their own. Opportunity to do so with proper freedom and encouragement leads to a sense of mastery and competence, and lack of it leads to inferiority complex (ibid). People tend to underestimate the capabilities of children with hearing impairment which leads to internalisation of such negative beliefs and resultant poor self esteem among these children (Beck, 1988; Koester, Brooks, and Karkowski, 1998; Fusick, 2008). Hearing status of the parents also seem to affect the child’s self-esteem negatively; especially if the parents have poor sign language skills (Desselle, 1994 cited in Stewart & Ellis, 1999)

One can easily understand the relevance of this to the provision of school recreation or co-curricular activities. Other than the academic studies, these activities give the children a chance of exploring and ‘try out’ things they want to. Parents of children with hearing impairment sometimes tend to be overprotective (Li and Prevatt, 2010). Parental support is found to be a major determinant of the child’s participation in physical activity. If the parents are physically active, their child is more likely to receive encouragement for engaging in activities that provide exercise and opportunities to learn through play (Lieberman, Volding & Winnick, 2004). Therefore, parental support and positive attitude towards recreation are important for children with hearing impairment to have access to recreational opportunities.

Lack of resources and attitudinal barriers are also the reasons behind the lack of opportunities to explore talents and engage in recreational activities for the children with disability (Devine and Wilhite, 1999; Lashua and Devine, 2002). In such a scenario, one cannot undermine the importance and relevance of the structured recreational or co-curricular activities provided by the special schools.

The psychosocial theory given by Erikson, thus, deliberated the way environment influences whether the individual would resolve the ‘crisis’ at each stage of development. Cognitive learning theories recognize the importance of environmental factors but focus on the influence of these on the intrinsic cognitive processes and the development of human beings through ‘cognitive adaptations’ (Papalia and Olds, 1992). Cognitive theory examines internal cognitive processes and representations such as sensation, reasoning, thinking, and memory.
Jean Piaget regarded cognition the key figure in the development of human beings. The concept ‘cognition’ encompasses processing, organising, transforming and representing events and information mentally and then acting based on these mental frameworks, called ‘schemas’ (Flavell, 1996, p. 200). Piaget claimed that children’s ability to process the information and apply it in their interactions with the world leads to their cognitive development (Watson & Tharp, 2007).

Jean Piaget proposed the cognitive stages in development—sequential periods in the growth or maturing of an individual’s ability to think—to gain knowledge, self-awareness, and awareness of the environment (Mooney, 2006). According to Piaget’s theory, at the age group of 7 to 11 years, children show the beginning of rational activity. It is the stage of concrete operations wherein they develop the understanding of the concept of conservation and are able to do various logical operations and comprehend the conceptions of hierarchical structures. From 11 years to adolescence is the stage of formal operations wherein the children develop ability to deal with abstractions (ibid).

As per Piaget (1954), there is a continuous reciprocal relationship between the environment and the child in which both affect each other. The way a child understands his/her physical as well as social environment, he/she responds. His / her responses and interactions, in turn, affect and alter the environment. The understanding of the environment that a child achieves is stored in his / her cognitive schemas which get modified by the child every time he / she is faced with an experience which does not ‘fit into’ the existing schemas as they are.

School recreation and co-curricular programme play an important role in giving opportunities for the children to explore and learn new things as well as build critical relational networks which are important for student attainment and success (Wilkens and Hehir, 2008; Darling, Caldwell & Smith, 2005). At the same time, the student participation in activities and accomplishments in the competitive and recreational events outside influence school’s recreation and co-curricular programme as is indicated in the information brochures and advertisements of different schools.

Like Piaget’s theory, the Social Cognitive Theory given by Bandura (1977, 1997) is also based on the concept of reciprocal determinism. In this theory, the learner is viewed as thoroughly embedded in the environment within which he or she is learning. The learners cognitive responses, behaviors and environment all work together to create learning. Modeling and imitation are strategies through which children learn and also develop belief that they, too, can accomplish the work modeled – self-efficacy.

In contrast with Erikson's psychosocial theory (1963, 1968) which focuses on the adequate resolution or lack of it of the crisis at the earlier stage, social learning theory focuses primarily on the current behavior
and learning in social contexts. Research in cognitive psychology suggests that mental schemas function not only as processing units but also as selective mechanisms that influence the information individuals attend to, how they structure information, how important it is to them, and what they do with the information.

Four primary strategies through which new things are learnt and information stored are Mastery learning, Imitation, Modeling, and Social Persuasion.

- **Mastery Learning**: Developing competence in learning specific knowledge or skills. Teaching and instruction need to respond to the diversity among student population in order for them to achieve mastery – no one strategy would suffice for all.

- **Modeling and Imitation**: The primary role of modeling is to facilitate mastery learning by providing the learner with a model to imitate. According to Bandura (1977), majority of human behaviour is learnt through modeling. The learner can either take in certain aspects of the model and work on them through his/her unique understanding of the world; or he / she will imitate the model to achieve mastery.

- **Social Persuasion**: Social persuasion, as a strategy includes positive social response in terms of verbal and social praise and encouragement. This leads learners to exert more effort (Lerner, 2002)

The three main strategies for self-regulation, which is another major concept in the social cognitive theory, are goal setting, planning and persistence (Bandura, 1997). The central concept of the cognitive learning theory of Bandura is information processing – performing discrete mental operations on incoming information and then mentally storing the conclusions drawn (Bandura, 2006).

Another prominent social learning theorist is Robert Sears (1965) who applied this theory to socialisation process. He developed a theory of how children internalise the values, attitudes and practices predominant in their culture. His theory proposed that observational learning occurs early in life and, like Bandura, emphasised the role of reciprocal determinism.

One can easily draw links between Social Cognitive theory and school recreation. The students who perform well on a task or activity are the role models in and outside of the practice sessions for that particular activity or talent. Praise and encouragement from the peers as well as teachers enhance the
students’ feeling of self-efficacy. Self-regulation and information processing are also crucial aspects of training of the co-curricular subjects and recreational events.

Constructivist developmental theories regard the drive to learn as an intrinsic aspect of human behaviour. As children perceive their actions as producing effects on the environment, they acquire a sense of efficacy, accompanied by feelings of pleasure. According to Effectance Motivation model proposed by Harter (1981, cited in Hauser-Cram et al; 2001) early experiences with success and positive feedback from caregivers result in an internalized system of self-rewards, standards, and goals. Once this internal system is developed, children become less reliant on positive feedback or reinforcement from the external environment.

Commonly known as the ‘third force’ in the psychology circle, Humanistic psychology maintains that humans are different from all other organisms in that they actively intervene in the course of events to control their destinies and shape the world around them. They take a holistic approach, one that views the human condition in its totality and each person as more than an assembly of physical, social, and psychological components (Schneider, Bugental & Pierson, 2002).

Humanistic psychologists, such as Abraham Maslow (1908–1970) and Carl R. Rogers (1902–1987), were concerned with maximizing the human potential which is facilitated by the self-direction and freedom of choice (Maslow, 1968; Rogers, 1970). Hierarchy of needs is the central concept in the Maslow’s theory. Both – recreation and social bonding – are important needs in this hierarchy proposed by Maslow, without fulfilling which the individual cannot proceed towards self-actualization (ibid).

The objectives of education and therefore, of the curriculum, are heavily influenced by whether the theory underlying it is behaviourism or humanistic. Behaviourism insists on developing measurable parameters of learning prior to instruction, like minimum marks for a child to pass a test. These parameters are fixed and formal. In contrast, humanistic theory would propose objectives such as developing the ethical character of the child, inculcating a sense of responsibility to self and society and opportunities for self realisation for a curriculum that looks at the holistic development of the child (Marlow, 2006).

All these theories have one thing in common – they see development happening in relation between organism and environment—in a transaction or collaboration: People work with and affect their environment and, in turn, it works with and affects them.

Ecological Systems or Systems perspective (Bronfrenbenner, 1979) proposes that the life activities of a person are determined by the interaction of his or her capacities and the demands of the environment.
“The ecological perspective uses ecological concepts from biology as a metaphor with which to describe the reciprocity between persons and their environments...attention is on the goodness of fit between an individual or group and the places in which they live out their lives” (Sands, 2001).

Bronfenbrenner (1979) suggests four levels of ecological components (Microsystem, Mesosystem, Exosystem and Macrosystem) as a useful framework in understanding how individual or family processes and their development are influenced by the four environmental systems in which they function.

Developmental-contextual theory offers a perspective that regards development is relatively actively shaped by the child in the sense that child is not only a respondent but also an agent in constructing his or her own development influenced by the multiple systems in which he or she participates (Brandtstadter, 1998, cited in Houser-Cram et. al; 2001).

The family of the individual with disability is an inter-personal system, intertwined with other systems of varying degrees of remoteness from the family (Karna, 2001). Persons with disability do not live in a social void; all exist in a society with its specific blend of subcultures and where disability is defined as per the prevailing public policy towards the disadvantaged (ibid).

Please discuss in summary how each of these theories influence or inform your research. This summary will help you carry your reader with you.

**Conclusion**

School recreation and all round development of a child with hearing impairment can best be understood using an Eclectic approach which allows selection of aspects from the various theories and models that provide the best fit for the descriptive and analytical task at hand. Students with hearing impairment, who are from hearing families, often have experienced aloneness and isolation resulting from the inability of their family members and peers to communicate effectively with them (Whyte & Guiffrida, 2008). There are socio-emotional risks to a child with hearing impairment such as poor self-esteem, poor social skills and lack of confidence due to lack of communication and interaction (Fusick, 2008, Whyte & Guiffrida, 2008; Beck, 1988; Koester, Brooks, & Karkowski, 1998, cited in Jung and Short, 2002).

Children with hearing impairment develop a highly external locus of control wherein they believe that it is the external environment, and not they, who determine the fulfillment of their physical as well as social needs. This also hinders their identity development process (Fusick, 2008). Harvey (1989) also found that hearing loss is often associated with feelings of helplessness and incompetence, or a lack of self-efficacy.
Understood with the help of social-cognitive theory, it is not a surprise that a child with hearing impairment learns and stores a wide range of self-deprecatory beliefs, feelings and images that they have all too often learnt from significant others. Cognitive strategies such as presenting and reinforcing positive beliefs about their capabilities and talents would help dispel and replace their dysfunctional self-beliefs with more positive ones.

Availability and accessibility of positive role models not only among the community but also among the school personnel and peers will have favourable effect on the deaf person's emotional status (Laszlow, 1994). Provision of an environment in which the child feels safe and comfortable expressing and exploring emotions is another way to ensure child’s healthy development (Sanders, 1993).

Deaf people say that when they are among themselves, their handicap virtually disappears. "We are people with a disability when we are in the hearing world," says Barbara Jean (B. J.) Wood, Commissioner of the Massachusetts Commission for the Deaf and Hard of Hearing. "But when we are together it doesn't exist."

School is a major agency which influences the development of children – not only through teaching academic subjects but also through inculcating value of exercise and giving opportunity to engage in it. These endeavours are worth investing in, as they have long term impact on the stamina and fitness of people with hearing impairment (Stewart & Ellis, 1999).

Another factor in support of a strong school recreation programme is its potential as a socialising context. This function of recreation – a catalyst for the socialisation of a geographically dispersed minority – has social and psychological benefits. Involvement in the extra-curricular and co-curricular activities during school years increases possibility that they would continue to associate with groups that engage in recreation even in later years (Stewart & Ellis, 1999). This leads to a strong social identity. As Jordan (1991, cited in Stewart & Ellis), then president of the Comité International des Sports des Sourds (i.e., the International Deaf Sports Committee) said, "Nowhere in the Deaf community is the sense of Deaf people taking charge of their own lives as strong as it is in Deaf sport".

The experiences of the persons with disability remind us that it is the social conceptions and beliefs about what is ‘normal’ that limits their quality of life rather than the disability. Therefore, irrespective of the role social worker has to play, his / her practice model need to be based on theory in which disability is seen as a social construction within oppressive systems (Chetkow-Yanoov, 1997). The role of the social worker within this framework consists of advocacy and empowering interactions with persons and environments that would lead to the successful mastery of social systems by the persons with disabilities.
The partnership model demands that the social workers identify empowerment goals (processes and outcomes) in partnership with the persons with disabilities as like disability, the concept of empowerment is also socially constructed (Boehm and Staples, 2002).

There is a need for the field of deaf education to hear from people with hearing impairment. It appears that the field has not taken advantage of the cultural knowledge and experience of students with hearing impairment as well as their parents by asking them for their advice (Thumann-Prezioso, 2005). Understanding the perceptions of students with hearing impairment about what and how they want the school to organize recreation or co-curricular programme and the positive or negative outcomes of these activities on their physical, social, emotional and cognitive development would help make the special education enriching and empowering.

The study is guided by values of dignity and full potential for all human beings, including Deaf children. It is believed that by providing an environment that is conducive for the development of recreational opportunities and growth of realization of full potential of children with disability, they would be impacted in a manner that significantly transforms their lives in a manner that they seek to fulfill their rights and lead lives that are meaningful, competent and powerful.