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RESEARCH ARTICLE

A SYSTEMATIC REVIEW OF TEACHERS' PERCEPTIONS TOWARDS EFFECTIVE TEACHING-LEARNING OF STUDENTS WITH INTELLECTUAL DISABILITY

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Abstract

The phrase "intellectual impairment" refers to a person's level of cognitive functioning. By specific children it occurs when a child's cognitive functioning is hampered to the extent that he or she is unable to receive information from his or her environment. After that, successfully absorbing, problem-solving, and adapting to the knowledge is required. The purpose of this study is to provide an overview of children with intellectual disability and their education for conceptual knowledge, define cause, and classify. Intellectual disability is defined as significant deficits in intellectual functioning and adaptive behaviour manifested as conceptual, social, and practical adaptive skills. An intellectual disability is characterized as having an IQ of less than 70 and having problems with adaptive behaviour or daily living abilities (eating, dressing, communicating, and participating in group activities). Intellectually disabled people learn slowly and have trouble grasping abstract concepts. So there is a dire need of appropriate teaching methodologies for effective Teaching-Learning of such students. The features of people with intellectual disability according to their education are also discussed in this study.

Introduction:-

Education of the disabled learners has been a priority area in India since independence. The Education commission (1964-66) also recognized the worth of the child with disability and recommended that the education of the disabled children should be an inseparable part of the general education system. The main objective was to mainstream them for class adjustments and adaptations in general education system. The commission further recommended making efforts for the integrated education of children with disabilities with their normal peers in the local ordinary schools.Intellectual impairment is a social abnormality that affects not only the persons who are affected, but also their family and society as a whole**(Dev & Kumar, 2015)**. Intellectual disability is characterized by a difference in the rate and efficiency with which a person receives, recalls, and applies new information when compared to others. Youngsters with intellectual disability are frequently able to participate in activities with children who do not have disabilities. Because quality of life, health, education, and employment are all fundamental rights, it is critical that children with intellectual disability are treated with kindness and fairness. The emotional and mental requirements of people with intellectual disability are the same as those of the general population **(Shree & Shukla, 2016).**

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Intellectual Disability:

"Intellectual disability" (mental retardation) refers to a particular state of functioning that begins prior to age 18, characterized by significant limitations in both intellectual functioning and adaptive behaviour**AAMR(Retardation, 2002).** The definition of intellectual disability has been revised a number of times during the past few decades as people's understanding of the disorder has changed, and in response to various social, political and professional forces. "Intellectual disability is characterized by considerable limits both in intellectual functioning and in adaptive behaviour as represented in conceptual, social, and practical adaptive skills," according to the **AAMR(Retardation, 2002)**. This disability originates before age 18"**(Klefbeck, 2020),**generally, by intellectually disable children is meant those children who possess less than average intelligence. Until the beginning of 20th century, they were taken as the backward children. Psychologists found in their studies that some children lag behind educationally despite possessing average and more than average intelligence, so they started to distinguish between backward and intellectually disabled. At present, by intellectually disabled children is meant those children who possess very less intelligence than average from the birth itself and who are not able to adjust with the society. They are also called mentally handicapped children. The definition presented by the American Association of Mental Deficiency (AAMD) published in 1959 is recognised the most. In the words of **(Zavaraki & Schneider, 2019)**,**"Mental-retardation refers to sub-average general intellectual functioning which originates during the development period and is associated with impairment in adaptive behaviour".**.

Types of Intellectual Disability:

Different methods classify Intellectual disability differently. There is psychological and educational classification. Psychological classification is based on intelligence quotient, and educational classification relies on the current level of functioning of the intellectually disabled person/child.

Psychological Classification

The following classifications, based on standard scores of intelligence tests, show the categories of the American Association of Intellectual Disability, the Diagnostic and Statistical Manual of Mental Disorders-IV/V, and the International Classification of Diseases-10.

(a)Mild Intellectual Disability affects 85% of a person with intellectual disability population. IQ score ranges from 50-69. Children within this classification can attain academic success at about the sixth-grade level. They can become self-reliant and in some cases, live independently with the community and social support.

(b)Moderate Intellectual Disability affects around 10% of the individuals under the classification of intellectual disability. IQ ranges from 35 to 54 and has satisfactory communication skills. Many of these persons can manage very well in the group homes and the community. Many are employed and can take care of them with minimal supervision.

(c)Severe Intellectual Disability is 3-4% of the population within this classification. IQ scores range from 20 to 40. Communication skills and self-help skills are very minimal, and many individuals require supervision and assistance. Many of these persons reside in group homes with the help.

(d)Profound Intellectual Disability is a minuscule portion of the intellectual disability population, approximately 1-2% of these affected populations. These individuals are with IQ below 25 and require around-the-clock care and support. Their communication skills are very limited, and they need assistance for self-help skills. People with profound intellectual disability usually have neurological disorders as well.

Educational Classification

Educators classify children with Intellectual Disability as educable mentally retarded (EMR), trainable mentally retarded (TMR), and Custodial Mentally Retarded (CMR). These various classifications help in providing an understanding that at which level a child with intellectual disability can function in society, his educational attainment, and his degree of independence.

(a)EducableMentally Retarded are those with IQ ranges from 50 to 69. Their intellectual development, when they become adults, roughly corresponds to typically developing children of age 8 to 12 years. EMR children go through the similar stages as normal children. EMR children may only come to notice in their early childhood years when their play, self-help skills are less developing than children of their similar age. For some EMR children, the problem may not be seen until their school years. EMR Children look like to their non-disable peers in the physical appearance, but their motor ability and coordination is little lower compared to the typically developing peers **(Shree & Shukla, 2016)**. EMR Children are also characterized by a delay in cognitive development that influences the acquisition of both language and academic skills. Attention, memory, and generalization are the three most important cognitive skills which influence the acquisition of both language and academic skills. EMR children are

found lacking in these three skills. However, Most of the time attention problems are confused with working memory problems. These cognitive skills are associated with the academic success and which of this skill is more related to academic achievement need to be sorted out to enhance academic learning.

(b)TrainableMentally Retarted children are with IQ between 25 and 50. This group of child can be trained in daily living skills and functional academics.

(c)CustodialMentally Retarted children are those who have IQ below 25. These children with severe and profound retardation need more assistance for their daily living and leisure activities **(Gautham & Chandra, 2017).**

Review of Related Literature:-

a) Studies related Intellectual Disability in India:

While disability legislation in India has been subjected to intense debate over the last few years, disability and issues around it have not attracted as much attention in research. **(Bacon & Baglieri , 2021)**has drawn attention to this issue by stating that „much of the literature is either in the form of news, reviews, and compilations of articles from across the globe, studies in the form of cases and literature produced by NGOs, or documentation of rehabilitation practices. Moreover, the limited research that addresses disability issues in southern countries, including India is chiefly focused on gathering statistical data on prevalence of disability and assessing the efficacy of rehabilitation programmes**(Dev & Kumar, 2015).** However, since the recent past, scholars have engaged in exploring the experiences of disabled persons. Accordingly, some notable exceptions to the predominant focus on generating quantitative data on disability in the context of India are empirical studies that have focused on the interaction between disability and gender constructs of disability and disabled identity and disabled people in the workforce**(Klefbeck, 2020).** However, such studies are few in number compared to the vast literature available on the experiences of other marginalised groups such as women, scheduled castes and scheduled tribes in various spheres of life, including higher education. Like disability, gender is a pervasive marker of marginalised identity across different social groups. In addition they [disability and gender] are about power dynamics and construe social inequality. These hierarchies of bodily value underwrite political, social, and economic arrangements **(Shree & Shukla, 2016)**. And yet, while interactions between gender and/or caste, race, etc., have been recognised and critically engaged with in the academia, similar engagement with disability is largely absent.

b) Studies related Intellectual Disability in foreign countries:

(Furrer, Valkanover, Eckhart, & Nagel, 2020), concluded that to enhance learning quickly, we tend to bear in mind that these aren't continually a similar techniques that result in sturdy, long-run learning. Once brooding about the way to learn material always is brooding about the things within which we tend to area unit possible to want access to it material. There should be done more work to accumulate higher metacognition by taking note to our successes and failures in estimating what we tend to do and don't grasp, and by victimization testing usually to observe our progress and to take into account what styles of activities represent learning.

(Butler, Miller, Lee, & Pierce, 2001), investigated to address the different problems associated with methods ,|information science, |informatics, science, scientific discipline are necessary to know a number of the instructive aspects of the changes within the learning process. The target of the study was to judge memory and intellectual designs in Elementary and lyceum students diagnosed with learning disability and a focus Deficit disorder and in students while not learning disabilities.

Enrolments of children with disabilities have been increasing in Tanzania regular schools, both in primary and secondary education **(Klefbeck, 2020).** This implies that in recent years children with disabilities including mental retarded children have keep improving in enrollment in both primary and secondary education. This might be due to community awareness, strong political system of the country to support education for disabilities including mental retardation children.

Teacher's perceptions on inclusion of intellectually disabled students:

To fully perceive the results of this study it's elementary to know the idea of a perception. Perceptions may be suggests by that we have a tendency to sense the planet we have a tendency to sleep in, and then it's the premise of our basic human functioning**.** The method within which all people interpret theworld is controlled by our distinctive perceptions**(Zavaraki & Schneider, 2019).** During this analysis, perceptions caninvolve all aspects of however one senses the planet, like personal attitudes, beliefs,behavior and views.When reviewing previous analysis exhausted this space, it's important to envision the importance of researchingeducators' perceptions towards

inclusive education as perceptions have the power to guidebehaviour, attitudes and beliefs. **(Calhoun, 2011)**, highlighted the affiliation between educator's attitudes and therefore the implementation of inclusion;however, they state that there's little or no analysis that exists on educators attitudes and particularlyperceptions towards inclusive education. This study aims to know the perceptions ofeducators towards inclusive education which might assist in informing inclusive academicpractices in South African colleges. Restructuring of thought schooling is important so as for allschools to be able to accommodate each child, no matter their specific learning desires**(Panayiota Stavroussi, Papalexopoulo, & Vavougio, 2010).**Teachers are the chief implementers, real practitioners and fully experienced of educational programs of catering the needs of intellectually disabled students. In inclusive setup schools teachers tried their best to do their jobs although the perceptions of teachers may affects the learning performances, outcomes of intellectually disabled students. To this end, this study tries to attempt to find out teachers' perceptions towards the learning of intellectually disabled students.

(Algahtani, 2017)carried out a study and found that despite the fact that almost all teachers interviewed were willing to make necessary accommodations for students with disabilities, the majority of those teachers felt that students with disabilities should not be educated in general classrooms no matter what the simplicity or severity of the disability, especially students with behavioural disorders and/or mental retardation. However, the majority of the teachers had a positive attitude toward inclusion which could only be successful with enough training and administrative support. On the other hand, **(Dev & Kumar, 2015)**found out that regular school teachers feel that they have nothing much to offer students with mental disabilities in inclusion setting as compared to specialist teachers. In agreement**(Bacon & Baglieri , 2021)**established that some teachers have the conviction that special schools have more to offer and that they can relieve students from the stress of continuous performance pressure of failure and under achievement in regular schools. As such these teachers have negative unsupportive attitudes towards inclusion. **(Panayiota Stavroussi, Papalexopoulo, & Vavougio, 2010)**points out that the majority of teachers feel they have got a difficult enough job without having to think about learners with mental disabilities who are viewed as an extra burden. These teachers are not comfortable with the large numbers, poor working conditions and remuneration; hence their resistance against the inclusion of learners with mental disabilities in ordinary classes. The same arguments are provided by teachers that they cannot promote inclusion while they experience conflicting constraints and expectations, insecurity and a general lack of encouragement.

Methods of Effective Teaching-Learning for students with Intellectual disability:
Students with intellectual impairments (ID, formerly known as mental retardation) benefit from similar instructional strategies as students with different learning obstacles. Learning impairments, attention deficit hyperactivity disorder, and autism are all examples of this.

One method is to break down learning tasks into small chunks. Every new learning activity is introduced one by one. This keeps the co-ed from feeling overwhelmed. After the co-ed has taken one step down, the next step is introduced. This is frequently a progressive, step-by-step learning method. It's a feature of many different learning models. The only difference is the size and range of the arranged paces**(Devi & Sarkar, 2019)**.

A second tactic is to alter the method of instruction. For many audiences, long verbal directions and abstract lectures are inadequate instructional tactics. The general populace learns in a kinaesthetic manner. This indicates that individuals learn best by doing something "hands-on." This is frequently in contrast to pondering things in the abstract. For college students with intellectual disability, an active approach is extremely beneficial. When data is concrete and discovered, they learn the most. There are various techniques to demonstrate the concept of gravity, for example. In the abstract, the lecturers will discuss gravity. They will talk about the attracting force pull. Second, by dropping something, lecturers can demonstrate how gravity works. Third, lecturers will use association exercise to help students physically experience gravity. It's possible that the students will be instructed to leap up (and then down) or drop a pen. The majority of pupils remember additional information from their gravity primary experience. This concrete understanding of gravity is easier to comprehend than abstract ones**(Maturana, Mendes, & Capellini, 2019)**.

Third, people with intellectual disability thrive in learning situations that include visual aids. This could include graphs, charts, and illustrations. These visual aids can also assist pupils in understanding what behaviours are expected of them. Victimization charts, for example, are a fantastic way to track pupils' progress. Charts can also be used to give positive feedback for appropriate, on-task behaviour.

The production of direct and quick feedback is a fourth teaching technique. Students with learning disabilities require fast feedback. This enables kids to establish a link between their actions and the teacher's response**(Devi & Sarkar, 2019)**. It's difficult to establish a connection between cause and impact when input is delayed. As a result, the educational goal may be difficult to comprehend.

Conclusion:-

A person with an intellectual disability should be handled holistically and with all of their needs met. To overcome potential difficulties, they require encouragement and support. Research does not support the argument that using the term intellectual impairment is less stigmatising. Not the affected individual, but society is the source of the problem. The ridicule of the terminology most likely stems from the assumptions and biases that some people hold when it comes to people with intellectual disability**(Shree & Shukla, 2016)**. People with intellectual disability, like those who are ordinarily developing, suffer from loss. Due to secondary loss, communication problems, and difficulty or inability to find meaning in the loss, people with intellectual disability are more likely to experience traumatic sadness symptoms.According to researches, intellectually disabled children are those whose intelligence is so less developed that they face difficulty in reading, writing and adjustment. This study concluded by discussing effective strategies of result-orientation of students' performance and teachers' practices data to enhance those skills and achievements of students in inclusive setup.

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