

**VISION AND MISSION OF PRESCHOOL INTERVENTION PROGRAMMES  
FOR SPECIAL NEEDS CHILDREN IN RIVERS STATE**

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**ABSTRACT:** *Pre-school growth requires environmental stimulation that is indispensable for the realization of the child's inherent potential in the case of a child who has a disability such stimulation is even more important and necessary. This fact is amply demonstrated not only in literature but also in everyday experience. Many researchers have found that training plays significant role in many functions in which maturation of the child is of primary importance. This paper supplies some of the environmental nurture (which are both affective and cognitive) believed to lay the foundation for more formal learning at primary, secondary and higher level of education. It discusses the rationale and the need for intervention programmes for handicapped children. The paper deal specifically with the role of nursery education strategies involving professionals, parents and children in the areas of motor training and timing of intervention. It ended with provision of a number of helpful recommendations*

**KEYWORDS:** Vision and Mission, Preschool Intervention Programmes, Special Needs, Children, Rivers State

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## **INTRODUCTION**

Growth requires stimulation and for this reason pre-school intervention for handicapped children in Rivers State cannot be over emphasized. Environmental stimulation is indispensable for the realization of the child's inherent potential. This is amply demonstrated in the literature. Children (1984) found that training plays a significant role in those functions in which maturation of the central nervous system is of primary importance Bennet et al (1964) observed that enriched experience affects brain weight and biochemical activity. Whites (1996) investigations testify to the plasticity of early visuo motor development. They demonstrate that the growth of visual attentiveness is significantly affected by environmental stimulation. For example infants subjected to certain modifications in rearing develop top-level reaching behaviour in 60% of the time

required by the control group. These and many similar researches indicate that encouragement through friendly and spontaneous communication with teachers could show increasingly superior performance as compared with other children who have not been taught.

This article discusses the need and rationale for intervention projects for handicapped children. It considers the environmental nurture (affective and cognitive) believed to lay the foundation for formal learning. In the Nigerian community and Rivers State in particular, there is still much to learn about the relationship between developmental and environmental variables. This is largely because most teachers have not been prepared to meet the needs of preschool children. But it is now being accepted that developmental processes unfold as a result of the interaction between environment and other factors at the time of the most rapid growth of a function. A mushroom of nursery schools are springing out of need for the development of perceptual abilities. Since deprivation is common strategies need to be planned to remedy the situation.

As earlier noted a growing child needs conducive and stimulating environment in order to accomplish the cognitive, affective and psychomotor domains of learning. A situation where the present condition of learning for the handicapped children is extremely poor and discouraging. Modern facilities and equipment such as textbooks, swings, merry go round and other necessary facilities are not available, also now that information technology is the order of the day, the children need E-library, E-classroom and other facilities for their overall development. The child needs to be exposed to the modern pedagogy of learning intervention programmes that will facilitate their learning should be introduced. This will enable them compete favourably with other handicapped children in other parts of the country.

The above conditions mentioned in this paper and the present required facilities formed the gap between what was on ground and what is expected to be on ground for their qualitative education, this gap is what this paper intends to fill.

### **The Role of Nursery Education**

It can safely be stated that preschool education of course, not a novel institution. However, the conventional nursery school is concerned less with cognitive development than with emotional and social growth. This is because the needs of children are primarily social and emotional. Pre-school children have a number of tasks to accomplish such as solving developmentally early conflicts. They have to be able to separate from home, cope with their dependency needs, give up earlier instinctual gratification, and they must have gone some way towards resolution of their childhood behaviours. They must learn to share to fight and live with their peers.

Conventional nursery schools-whether the goal is explicitly or not-must, beyond the teaching of skills such as handling the pencil, help them to cope with these tasks. Doll play, stories, pretend” activities etc, all assist children in the mastery of early goals and conflicts. Interaction with their peers prepares, children for life in the group during the next phase in

school which is primary school education. In this connection, Horn (1970) states that individuals may be disadvantaged socially, economically, psychologically and linguistically depending on the particular social milieu in which they attempt to function as long as they are unable to realize their potential fully or to enter the mainstream of life in the community. It is not so much that handicapped children lack sensory motor stimulation most of them are flooded with an array of stimuli which they are totally unable to sort out due to the effect of their disabilities. Such children may be defined in the context of health experience as those having restrictions or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being. In other words their disabilities limit or prevent the fulfillment of a role that is normal for that individual their often chaotic environment does not help these children to sequence and structure events and experiences, as a result, they are bewildered and confused.

Presently, very little effort is made to orient handicapped children towards long-range goals and towards mastery of specific tasks. Additionally, the home lacks the ideal support for example, the mother's style of communication does not foster linguistic and conceptual development (Bernstein 2006). This explains why nursery schools should endeavour to provide necessary support. Children are action-rather than verbally oriented and most of them have trouble processing auditory information or expressing more complex feelings and thoughts. Some children are either apathetic or hyperactive and little is done in the home to help those with blindness, deafness, physical disability, emotional handicaps developmental and other forms of impairments for their deficits. According to Pasamanich and Knoblock (1958).... life experiences and the socio-cultural milieu influence biological and physio-logical function. "Not surprisingly this accumulation of deficit is (Deutch, 1965) results in delayed reading readiness and in massive failure in the early elementary grades. The insistent demand for pre-school intervention programmes which prepare handicapped children to cope with the requirements of first grade is a response to their pressing problems. This demand is reinforced by competition in village and urban schools. The pressure by parents academic performance has led to considerable criticism of well-to-do parents and this in turn has resulted in every increasing emphasis on programmes designed to guarantee academic success in schools. Intervention programmes designed to provide supplementary training prior to primary school entrance have been established in many parts of the state. The writers will therefore deal with strategies involving health personnel, parents, children learning approaches and timing of programmes.

### **Strategies involving Health Personnel**

It is important to note that intervention programmes for the handicapped make use of health personnel. Birch (2008) notes that:

.... "recent interest in the effects of socio-cultural factors on educational achievement could lead us to neglect certain bio-social factors which directly influence on the developing child affect his primary characteristics as a learner .... Conditions of ill health may directly affect the development of the nervous system and eventuate either in patterns of clinically

definable malfunctioning in this system or in sub-clinical conditions, in either case, the potentialities of the child as a learner cannot but be impaired.

Although a child may not present a serious health problem on a medical examination at the age of three a number of signs reflecting immaturity or maldevelopment may indicate that the same child may have been “at risk” at a much earlier age. A case in point is malnutrition. In a field of study carried out by Craviato et al (1985) in Guatemala and Mexico, psychological performance capacity to learn and to process environmental information- was most depressed in children exposed to malnutrition is not a crisis phenomenon, it is a condition of life and is very common in Nigeria (Abang 1981) programmes designed to identify health problems in pre-school children and thus to reduce academic failures have been initiated in some communities. For purposes of intervention, however, health problems must be identified very early in the child’s life. Even slight deficits in auditory sensitive at the age of maximal linguistic growth that is to say between 16 and 36 months, will drastically interfere with children’s comprehension and use of language. Amplification at very early ages medication or surgical intervention in the case of conductive hearing losses- may determine whether a child does or does not function in the early academic grades. Understand high frequency losses and they are not easy to identify may cause the pre-school child to be wrongly labeled as withdrawn and are bound to interfere with subsequent reading comprehension. There is need for examinations directed to often subtle aspects of the child’s functioning which affect his potential as learner, and we need close co-ordination between health and educational personnel.

### **Strategies involving Parents**

Wekert and Lamble (1998) say that pre-school programmes for disadvantaged children which do not involve mothers are bound to fail. The problem is not to provide enrichment and opportunities for the children but to restructure mother child interaction patterns “the removal of the children from their homes to more favourable environments even for long periods of the day does not seem to be the answer it is clear from studies that parental practices and attitudes are extremely important in terms of academic functioning. As a result we see a trend away from child-centred intervention toward work with parents. To acquire linguistic and cognitive skills to learn to curb impulsivity and to delay gratification essential ingredients of learning children need a model. The model is the person the child is emotionally tied to that is to say, his mother or some other person who shares his day to day life. Thus, during positive change in the child-development can be affected by improvement in the quality of home and through changes in the people intimately associated with.

### **Strategies involving both Parents and Children**

The underlying philosophy of earlier work in intervention was based on the assumption that taking children out of an impoverished environment and placing them in a enriched and stimulating one would foster emotional and cognitive growth. It was felt that the longer the time children spent in such environment, the greater the returns.

Results unfortunately were somewhat disappointing. Once children left the program they tended to regress (up to a point this was true also for programmes which worked only with

parents) Lally (1990) states that is essential to make changes in the home to help parents cope with the modifications wrought in the child as a result of his experience in an enriched environment.

Practically, all ongoing international programmes have one particular feature in common: experts teach parents how to teach their children. It is the expert who imparts information encourages the parent to encourage task orientation. The National Policy on Education (1981) encourages mainstreaming of the handicapped, however (2004) edition of the policy encourages inclusive education in principle parents should be sensitive to their children's needs. They cannot construe the child's relationship to the world in ways that are fundamentally different from their own. Hence to change a child's reading practices effectively, one must change the parents own experience.

### **Strategies focused on children**

Most intervention projects should revolve round the child himself. Some are based on the assumption that learning difficulties stem from a defect dysfunction or deficit of the organism. Others rest on the conviction that children are destined to fail because for a variety of reasons-they have missed out on some significant early experience strategies are devised to provide what the child has presumably missed during his early development. Depending on the researchers or educators bias, emphasis may be on precept motor training, on language stimulation and conceptual development on specific teaching of techniques considered essential to reading success or on all of them combined. Helpful strategies should be considered.

#### **1. Target motor training**

That development is by and large a consistent process which moves from primitive to more highly differentiated organization has long been accepted (Piaget, 1955, Kephart, 1960) postulate that motor learning is the cornerstone of this development. For pre-school children large motor activities such as jumping, jungle gym and trampoline are both enjoyable and beneficial.

#### **2. Visuo-motor and perceptual training**

Reading which a high level cognitive performance is fundamentally requires an intact perceptual apparatus. Perceptual disorders have thus become equated with reading disabilities and many international strategies aim at preparing children for reading by working on perceptual and in particular on visual perceptual functions.

#### **3. Oral language training**

We have come to understand that mastery of spoken language proceeds mastery of its graphic forms. Most normal children have acquired a complex linguistic code by the time they are between 4 and 5 years old. Difficulties with verbal processing limited vocabulary, paucity of available syntactical options, trouble with relational prepositions, inability to generate linguistic rules (Menyuk , 2006) have all been linked to reading failure such linguistic deficits are particularly glaring in handicapped children but they are also found in normal youngsters. Handicapped children can be placed along a continuum with unstructured approaches of one end and highly structured ones at the other. The word structure as used in this context refers to an approach which imparts a body of linguistic information in a fairly compact form leaving little room for essential but non-cognitive

aspects of experience. This continuum refers not only to formal organization but to content as well.

## CONCLUSION

The development of educational strategies for handicapped children generally is bound to suffer unless practical problems are explored. Long-range can result from intervention programmes which involve training in specific competencies. Parents and children must be involved heavily and on-going evaluation of programmes and preferred to periodic tests. It seems naïve to expect that the simple fact of entering nursery school would change or substantially modify attitudes which have been deeply entrained.

## RECOMMENDATIONS

1. There is urgent need for massive national and international programmes for the handicapped and the deprived children such children may present deficits in areas related not only to the manipulation of numerical adverbial symbols but to learning in general.
2. The development of a trusting relationship between a mother and an indigenous paraprofessional who would visit the home would be based on the latter's availability in terms of the mother's practical everyday needs. This relationship would allow the worker to "model" for the mother ways of handling 8 to 20 month old babies which best promote task orientation and which make for maximal stimulation and growth.
3. Since results of research concerned with early intervention are not as yet fully available and since there are not enough trained people to staff these programmes it would not be ideal to at this point in time to embark on a nation-wide assault on early intervention it is suggested, instead that we use the findings which are just now coming out of existing and newly established projects and embody these features in a new series of operational centres. Such centres would combine service, training and research function in rural and urban areas involving sociologically widely divergent groups. In this way many of the needs of handicapped children in Nigeria could be met.

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