Essay on developmental disabilities

Health & Medicine, Disability

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Introduction

With the increased cases of behavioral, developmental and learning disabilities, it is very important for the parents, childcare providers and medical professional to understand clearly the causes and treatment of these disabilities in order to reduce their effects to those persons affected. This study analyses how developmental disabilities can be dealt with to reduce their effects.

Developmental Disability Diagnosis

These types of disabilities are physical or mental condition or the combination of the two conditions that affect daily functioning of the person. These disabilities originate from the brain and usually occur when the person is 22 years or less though it may vary depending with the nature of disability. Development disabilities affect at least two areas of the person's

daily function such as communication, self care, mobility, cognitive, incapacity to leave alone economically or self direction. These impairments are not directly related to substance abuse, mental illness, sensory impairment or emotional disorders. Some of the most common mental disabilities include Down syndrome, mental retardation, cerebral palsy, autism, epilepsy, fetal alcohol syndrome or effect (Depositario et al., 2010).

Developmental disabilities becomes apparent when the child is as young as one year and the parents may start to notice some differences between their child and the peers of his or her age especially on cognitive or physical development (Lunsky & Balogh, 2010). Parents should discuss the conditions of their child with the pediatricians as early as possible to see what can be done to reduce the consequential effects of developmental disabilities as the child grow up. Most of time early treatment of developmental disabilities reduces its effects to the child though at times it may not change the conditions of the child.

Early intervention

Recognition and treatment of developmental disabilities at an early age will affect the growth process of the disabled child to a greater extent. An intervention that is intensive, timely and well designed may improve life quality and prospects of many disabled children who may be exposed to the risks of cognitive, emotional or social impairment. In fact, early interventions have helped to improve some conditions that were thought to be untreatable, for example autism. Intervention programs that are well implemented can give a new outlook to the future of the disabled child and

even the impacts that developmental disabilities might have on the child's family members. In deed, early intervention can improve the independence of the child; enable him or her to be involved in the affairs of the community and live more fulfilling life. Battelle Development Inventory is a test used to diagnose children with developmental disabilities (Matson, Sipes and Horovitz, 2010). The method tests developmental disabilities in different areas such as communication, motor, adaptive, cognitive and personal-social abilities (Matson et al., 2010). Parents can get this test from a specialist for early intervention or a pediatrician who will help to assess the conditions of their children as early as possible and hence look for the proper intervention method.

Educational Programs

The main goal of education programs for children with developmental disabilities is to help them to attain their potential to the maximum through improved productivity, community integration and independence. In providing these programs, the federal government partners within the private sector and local communities to address all the areas of these disorders such as diagnosis, prevention, therapy, early intervention, education, employment, training, leisure opportunities and community living. Different schools have different approaches in providing services for special education which can be classified into four major groups depending with the level of contact students with learning disabilities have with other normal students. The first approach is the inclusion where students with developmental needs are taught more than 50 percent of their lessons with other students. Specialized services are given in separate rooms depending

on the nature of the learning service (Grenier, 2011). The second approach is mainstreaming where students with special needs are taught in classes without normal students during particular period of time depending with their skills. For instance, students with special needs may attend specialized classes more than half a school day depending with their learning abilities. The third approach is segregation where students with disabilities are completely separated with other non-disabled students. Specialized services may be provided in the same school but different classes where both type of students come together in other activities like playing or dining but not in learning. These services may also be provided in special schools. The last approach is exclusion where children with developmental disabilities are completely excluded from any learning institution. In this situation, the child may be hospitalized or even bound at home.

Strengths and Weaknesses of Special Education Programs

All the strategies mentioned above have their advantages and disadvantages and the appropriateness of any method depends on the conditions of the learner. Inclusion and mainstreaming methods provide a learning environment that is balanced to the students with special needs. The two types of students share most of the learning facilities including education curriculum which ensures that at the end of course they have the same qualifications. In addition, students with special needs interact and live together with other students who contribute positively to their growth and development (Lindsay, 2007). However, these methods may fail to help students with learning disabilities as required since the educator may have little time to cater for their special needs. Secondly, their learning morale

may reduce as they fail to perform as other students in the same class. These problems can be addressed by giving students with learning disabilities more attention or even separating them when necessary. Segregation and exclusion methods ought to be used only when the conditions of the learner are severe and may not be in a position to learn with others.

Transitional Programs

In these programs, young students with disabilities are helped to transit from one level to next for instance from elementary schools to senior schools or from high school to the work place. The organizations offering these services provide students with transitional resources such as internship, transitional inventories, library resources among others that equip them with skills for job training and experiences. The outcomes of these programs include placing disabled students in a position to secure job opportunities, gain employment skills and enable them to explore more careers in search for areas where they can fit.

Conclusion

With increased cases of different types of developmental disabilities, it is important for all the stakeholders to understand the causes, symptoms and treatment of these problems in order to minimize their effects. Education programs that cater for students with special needs also need to be improved to enhance their efficiency. In addition, transitional programs should also be developed to help learners with disabilities to access employment opportunities.

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References

Depositario, T. & Zelleke, T., (2010). Treatment of epilepsy in children with developmental disabilities. *Developmental Disabilities Research Reviews* , 16(3), 239-247.

Grenier, A., (2011). Co-teaching in Physical Education: A Strategy for Inclusive Practice. *Adapted Physical Activity Quarterly* , 28(2), 95-112.

Lindsay, G., (2007). Educational psychology and the effectiveness of inclusive education/mainstreaming. *British Journal of Educational Psychology* , 77(1), 1-24.

Lunsky, Y. & Balogh, R., (2010). Dual Diagnosis: A National Study of Psychiatric Hospitalization Patterns of People with Developmental Disability. *Canadian Journal of Psychiatry* , 55(11), 721-728.

Matson, L., Hess, A., Sipes, M. & Horovitz, M., (2010). Developmental profiles from the Battelle developmental inventory: A comparison of toddlers diagnosed with Down Syndrome, global developmental delay and premature birth. *Developmental Neurorehabilitation* , 13 (4), 234-238.

Rispoli, M., Franco, J., van der Meer, L., Lang, R. & Camargo, S., (2010). The use of speech generating devices in communication interventions for individuals with developmental disabilities: A review of the literature. *Developmental Neurorehabilitation,* 13(4), 276-293.