

POSITION OF NONHANDICAPPED CHILD IN AN INTEGRATED CLASSROOM: INTERACTION AND INFLUENCES

KAYNAŞTIRMA SINIFINDA NORMAL ÇOCUĞUN DURUMU: ETKİLEŞİM VE ETKİLENMELER

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ÖZET: Eğitimciler ve aileler kaynaştırma sınıflarındaki normal çocukların bu ortamlardan olumsuz yönde etkileneceklerini düşünmektedirler. Ancak bu konuda yapılan çalışmalar, entegrasyon uygulamalarından engelli çocuklar kadar normal çocukların da önemli gelişimsel kazançlar elde ettiklerini vurgulamaktadır. Bu yazıda entegrasyon ortamlarında çocuklar arasındaki etkileşim, normal çocuğun engelli akranına tutumu ve entegrasyondan etkilenmesi konuları üzerinde durulacaktır.

Anahtar Kelimeler: *Entegrasyon programları, normal çocuklar etkileşim, tutum, etkilenme.*

ABSTRACT: Educators and families think that normal children in integrated classrooms would be negatively effected in such integrated settings. Studies in this subject, however, emphasize that normal children get developmental gains from applications of integration as well as handicapped children. This article tries to deal with such subjects as the interaction between normal and handicapped children and attitudes of normal children to their handicapped peers in the integrated settings, and the effects of integration applications on normal children.

Key words: *Integration programs, normal children, interaction, attitudes, influences.*

1. INTRODUCTION

Since 1970, there are many discussions for the mainstreaming programs which is evaluated as the most important step after the discovery of special education programs developed for handicapped individuals in this area. Main purpose of these programs is to integrate handicapped individuals for their socialization and participation to the society, who are isolated from the society by special education and special school programs. In addition, they intend

to provide a setting for normal children for their social acceptance of handicapped children.

By integration programs, that are based upon the principal of educating handicapped children with normal children, it is suggested that more progressed and developed class-mates have positive effects on the handicapped children. It is suggested that the relations between these two groups of children provide positive effects not only for the handicapped children but they also provide positive various positive effects on the normal children.

Although the effects and advantages of integration programs on handicapped children has been indicated by many studies, there are a few studies dealing with the their effects on normal children. Of course, normal children are also effected by the integrated setting as the individuals sharing the same settings with the handicapped peers. This study tries to deal with the position of normal children in the integrated settings.

2. INTERACTION BETWEEN NORMAL AND HANDICAPPED CHILDREN

There are many comments on the quality and frequency of the interaction between normal and handicapped children sharing the same classroom. However, first of all it would be useful to examine the factors effecting the interaction between these two groups of children.

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1. Factors effecting the interaction

a. Age: With the integration applications involving younger children, it is easier to accept handicapped children for normal children, and they easily enter into an interaction.

b. Type of handicap and physical appearance: Normal children so not want to enter into an interaction with the handicapped children with a different physical appearance due to their handicaps.

c. Language level: Interaction of a normal child with a handicapped peer is inhibited if the handicapped child's level of expressive language is low or not developed.

d. Attitude of teacher: Negative or positive attitude of teacher toward the handicapped children effects the interaction of normal child with the handicapped peers.

e. Introduction of the handicap to normal children: If the normal children know an understand the handicap and characteristics of handicapped children, then it would be easier to have an interaction between two groups of children.

f. Realization of the integration through a plan: It is needed to plan and execute the integration systematically for a good interaction [1,2].

According to some researchers, the children during the first years of their primary school education develop a schema of "self similarity" or "normality", and use this schema to evaluate others [3]. For Kratzer and Nelson-Le Gall (1990), kindergarten children categorize unfamiliar peers into such social categories as "similar to me" or "non-similar to me" according to their such characteristics as sex and handicaps, the children in the category of "non-similar to me" are less preferred as play-mates and interacted [4]. Esposito and Peach (1983) suggest a "contact model" for the change of attitude. In their study, they observed that the primary school children exhibited more positive

attitudes toward integrated handicapped children than the handicapped children in the separated settings, and advocates that the "contact" between children increases interaction and social acceptance [5]. In fact, it is impossible not to share this opinion; because the interaction and sharing the experiences in the same setting would help the both groups of children to get familiar with the each other. By this way, the normal children can realize that their handicapped peers have not only inadequacies but they have also have adequacies in some areas.

2. Function of normal children for interaction

In the integrated settings, the function of normal children for the interaction between normal and handicapped children may be evaluated as follows:

- providing models for handicapped child by means of developed behavior samples
- being motivating and supporting factors
- Effecting like a treating element [6, 7, 8].

In an integrated setting, normal children provide developmentally more advanced behavioral models for a handicapped child than his/her handicapped peers, and motivate him/her to imitate such behaviors. The normal child serving as a treating factor encourages his/her handicapped peers to play relevant social plays with him/her, and exhibits a function of supporting to use natural language for interaction [6, 7]. Normal child can adjust his/her own behavior as to be imitated by his/her handicapped peers. In a study, it is observed that normal pre-school children can adjust their speech levels according to the language level of their handicapped peers. Thus, for a handicapped children, linguistically more complex setting is formed, as compared to a separated classroom [8].

Within an integrated setting, it may be thought that non-handicapped children may

imitate handicapped children as well as the normal children imitated by handicapped children through reciprocal peer imitation. This is one of the questions mostly thought by the researchers and the families of normal children [8,9,10,11]. However, as indicated by some researchers, normal children may not imitate the behaviors of handicapped children unless such behaviors are rewarded by others, and they prefer to imitate the behaviors of the normal children similar to them. Furthermore, if the imitated behavior is not functional and not approved by other children and teacher, then such behavior would be extinguished in a time [8].

In an integrated setting, the most important function of a normal child is to help typical behaviors of handicapped children to be eliminated (by not approving such behaviors). In addition to this, the other function is to contribute his/her handicapped peers have a behavior repertoire (by means of providing models with relevant behaviors and reinforcing by approving positive behaviors) socially acceptable by the society during their future life [6,12,13].

3. ATTITUDE OF NORMAL CHILD TOWARD HIS/HER HANDICAPPED PEERS

Results of various studies indicate that normal children exhibit less positive attitudes toward handicapped children and refuse them in an integrated setting [6,13,14,15,16,17,18]. Normal children do not refuse their handicapped peers clearly but they generally are indifferent to them. Gottlieb (1975) indicates that normal children in the classroom prefer to interact with the normal children similar to them rather than to interact with the handicapped children [cited 20]. However, there is no certain comment on the attitudes of normal children toward their handicapped peers in the classroom. Matz (1978), Guralnick and Paul Brown (1980)

indicate that although normal children prefer their normal peers for interaction and play, they are sensitive to needs of their handicapped peers, give their verbal messages in form to be understood by their handicapped peers and help for training of some skills [cited 21]. Studies on this subject show that normal children do not socially accept their handicapped peers not due to their lower level of success or delay of their development due to their typical behavior that are socially non-acceptable [14,15,19]. Gottlieb et al. (1980) indicates that handicapped children's lower level of academic success and negative behaviors effect their rejection by normal children [22]. An other study, supporting this suggestion, points out that as the incompetence level of the handicapped children increases, their acceptance level by the normal children also increases [17].

Attitudes of normal children toward their handicapped peers and the attitudes of their teacher toward the handicapped children are mutually effected each other. If the teacher shows a positive attitude, the children are likely to show a positive attitude. On the other hand, the teacher acting as a mediator for a positive interaction between these two groups of children and using specific mixing strategies effects the attitudes of normal children toward their handicapped peers [23,24].

The sex of normal child is also a factor effecting the attitude toward handicapped children. While some studies suggest that girls have more positive attitudes [6,16,25], Bruininks (1974) indicates that normal children exhibit positive attitude towards the handicapped children having the same sex with them [26].

As mentioned earlier, the age is an important factor for development of attitudes as well as being important for interaction. Young normal children show more positive attitudes toward handicapped children [1,2,18]. On the other hand, Woeltz (1984) shows that normal secondary school children have more positive

attitudes toward handicapped children than normal high school children [25].

4. EFFECTS OF INTEGRATED SETTINGS ON NORMAL CHILDREN

It is impossible not to think about the effects of integrated settings on normal children. Odom and McEvoy (1988) and Deklyen and Odom (1989) point out that normal children participated to integrated settings have same level of gains as the normal children participated the regular (unintegrated settings) preschool programs [cited 11].

There are some doubts that the complexity of the environment gets decrease and the normally developing children may be confronted with developmentally irrelevant models for them. Especially the families of normal children are worried if the handicapped children in the same setting with their children may be a bad "model" for their children and prevent the development of their children [9,10]. Odom, Deciyan and Jenkins (1984) placed 16 handicapped children to 4 integrated preschool education classrooms and 16 sex- and age-matched children to a preschool education classrooms for only normal children, to examine the effects of handicapped children on the development of normal children. Both groups of children were evaluated for their developmental level. As a result, it was seen that placement of normal children in an integrated setting did not yield a confusion for their development, and the children were continued to reach their developmental steps at their normal speeds [8]. This results are supported by the results of studies by Odom and McEvoy (1988) and Deklyen and Odom (1989) [cited 11].

When the situation is evaluated with the view of the contribution of integrated setting to the normal children, it is seen that children's knowledge and ability levels in various developmental areas are increased with the experiences of providing behavioral models,

supports and encourages. The responsibility of providing behavioral models for others helps the feeling of self-confidence developed and the new learned knowledge to be reinforced through teaching such knowledge others. Steps are taken towards the independence by "prosocial behaviors" such as helping others, sharing and getting into cooperation with other. In addition, the normal children could better understand the state of "being handicapped" as a result of interacting with and observing their handicapped peers (children starts to understand and think about "being handicapped" as of the age of 4 years [11]). Possibly, the most important effect of the integration programs is their helps for the normal children to understand and accept the fact that the individuals may have different characteristics. These settings are also helps the children to gain the ability to be sensitive to the needs of others. The educators and parents also believe that the integrated settings would help the normal children to gain the ability to be sensitive to needs of others [9,27].

Peck, Carlson and Helmstetler (1992) and Giangreco et.al. (1993) indicate that the normal children participated to an integration program have less prejudice, accept more responsibilities, provide more helps to other (handicapped or normal) children and more sensitive to the needs of others [cited 11]. For the children without any handicap, participating to an integration application helps to realize the awareness of being healthy and to understand the importance of this fact [11]. As a result of this, the children develop higher self-confidence. When it is considered for the prospective goals, it is very important for the children participated to the integration programs at earlier ages to realize the fact that there are different characteristics as well as the characteristics of the children similar to them. Because the children growing with the experiences of integration will tries to evaluate events from a wider perspective and to approach differences and changes with more

tolerance and understanding during their adulthood. The reflection of this perspective and tolerance to the handicapped individuals emerges as an increase in the general level of acceptance and understanding of handicapped persons by the society.

In conclusion, it is impossible to say that the integrated settings have negative effects on normal children; in contrast, such settings provide important developmental contributions for the both groups of children. The duty of adults and educators is provide the settings providing the possibility to be integrated and have positive interactions during earlier years of their life for the children who will live together in the same society in future.

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