

Effects of Teachers' Attitude on Collaboration with Stakeholders towards the Practice of Inclusive Education in Akatsi District of Ghana

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Abstract The objective of the study was to determine the effects of teachers' attitude on inclusive practice in the Volta Region. It was mixed research guided by descriptive survey design. Proportional and the simple random sampling procedures were used to select 20 teachers from four inclusive schools. Views of the participants were solicited using a semi-structured interview guide. Data were analysed using thematic approach. It was observed that, the practice and the success of inclusive education largely depended on teachers' positive attitude. Where teachers were positive in their collaboration with stakeholders there has been increased students home-school communication, effective follow-up services, improved prescription and the use of drugs, parental monitoring and supervision, early identification of disability, improved children's information on health problems, condition and diseases to teachers by parents. However negative teacher attitudes promote indiscipline, low academic performance and low rate of giving health talks to students. It is recommended that teachers should work hand in hand with all stakeholders for comprehensive and effective school management systems to promote successful inclusive education.

Keywords: stakeholder, disability, psychiatrist, multi-agency, SEN

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1. Introduction

The fundamental principle of the inclusive school is that all children should learn together, wherever possible, regardless of any difficulties or differences they may have. Inclusive schools must recognize and respond to the diverse needs of their students, accommodating both different styles and rates of learning and ensuring quality education to all through appropriate curricula, organizational arrangements, teaching strategies, resource use and partnerships with their communities. There should be a continuum of support and services to match the continuum of special needs encountered in every school [1].

In view of the above, the Government of Spain in co-operation with [1] organised a conference which brought together senior education officials, administrators, policy makers and specialists, as well as representatives of the United Nations and the specialized agencies, other international governmental organizations, non-governmental organizations and donor agencies to discuss the objectives of Education for All (EFA) by considering the fundamental policy shifts required to promote inclusive

education, namely enabling schools to serve all children, particularly those with Special Educational needs. The conference adapted the Salamanca Statement on principles, policies and practices in Special Needs Education and a framework for Action of which they agreed and signed. The Salamanca Statement was informed by the principles of inclusion.

The members who signed the Salamanca Statements of 1994 believed and proclaimed that:

1. Every child has a fundamental right to education, and must be given the opportunity to achieve and maintain an acceptable level of learning.
2. Every child has unique characteristics, interest, abilities and learning needs.
3. Education systems should be designed and educational programmes implemented to take into account the wide diversity of these characteristic and needs.
4. Those with special educational needs must have access to regular schools which should accommodate them within child centered pedagogy capable of meeting these needs.
5. Regular schools with this inclusive orientation are the most effective means of combating

discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system [2].

Inclusive Education was therefore adopted in the year 1994 and restated in 2000 at the World Education Forum in Dakar, Senegal [3]. Ghana, like other countries, agreed to the ideology of inclusive practice, which suggests that all children irrespective of their degree of their abilities have equal opportunity to learn in the regular schools. The initiative of inclusion was also supported by the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities [1] which declared participation and equality for all. In the process of educating individuals with disabilities, inclusive education was explained as a collective responsibility in terms of value, accommodating all learners in an integrated system of education, allowing them to become caring and capable citizens in an inclusive and diverse society. Looking at the concept in general, it focuses on supporting all learners, educators and the system to address the full range of learning needs. It aims at increasing the learning and participation of learners and minimising the efforts of barriers to learning and participation. It also implies a radical restructuring of the school in terms of curriculum assessment and pedagogy. Above all, it emphasises overcoming barriers within the system to help all learners achieve their full potentials. For this to be very successful there need to be collaborative efforts by all stakeholders. Collaboration efforts primarily are to assist teachers and other stakeholders in inclusive practice. Literature has it that parents who play active roles in their child's education have great contribution on student performance. Thus, parent's involvement in educational experiences in the home is associated with higher achievement scores and higher grades [4].

[5] Observed that, parental involvement improves sending and replying to home-school communications about student progress, difficulties and dangers in social activities like jumping, throwing, lifting, developing adult learning skills, and being involved in school governance. [6] is of the opinion that, teacher collaboration promotes monitoring making parents keep up with their children's progress on a regular basis. Monitoring shows a child that the parent genuinely is concerned about his well-being

Parental involvement in discussion of the needs of student makes them responsible to provide their needs, monitor children's homework, and influence children's success for achievement [7]. [8] stated that negative teacher attitude toward parental involvement will reduce disciplinary issues thereby increasing waywardness of children. Negative teacher attitude decreases parental monitoring and supervision, therefore, monitoring shows a child that parents genuinely are concerned about their wellbeing [6]. [9] stated that negative teacher attitude towards parental involvement increase failure rate as well as a high dropout resulting in vast pool of unskilled labour. [10] argued that health workers collaborate with the teacher to diagnose eye diseases and health issues of children with disabilities. They work together to determine the cause, degree and the type of visual loss which is

useful in planning for the children. [11] were of the view that collaboration with the teacher promotes doctors involvement in prescription of drugs, measure refraction and prescribe glass. [12] were of the view that, Health workers primarily do take responsibility in working with the school level to promote health and prevent disease through provision of health education.

[10] observed that psychiatrist and teachers working as a team help to give information on children suffering from psychological problems and management strategies. The participants were of the opinion that schools can contribute to behaviour problem when there is management problem. Teachers were with the belief that collaboration leads to monitoring and evaluating to ascertain the situation on the ground with respect to children's issues. With this, parents are also encouraged to volunteer information on the case history and other additional disabilities [10].

[13] said, teachers working hand in hand with the social worker help in management of disability issues, formulate appropriate level of care, progression of care from time of identification and back into the community for persons with disabilities. Negative teacher attitudes do discourage social workers to use their legal advisors, advocates, occupational therapists, and orientation and mobility instructors to assist in screening, leading to failure to suspect cases to be referred [14].

2. Statement of the Problem

[15] indicated that teachers support the concept of inclusive education but remain uncertain about the reality wanting to retain some version of the special education classroom. To him looking at the degree and severity of children with disabilities, not all of them can benefit in inclusive classroom. This raises a question of teachers' attitude. The issue here is, how does the attitude affect the way teachers collaborate with the various stakeholders? [16] revealed that teachers in Akatsi District show negative/positive attitudes towards inclusion. For improvement of inclusive practice, it is important to identify how teachers' attitudes affect the practice. However, the literature is quiet on how teachers' attitudes affect the way they collaborate with various stakeholders. The nagging question here is how does the attitude of teachers affect the ways teachers collaborate with (i) parents (ii) health workers and (iii) social workers?

3. Purpose of the Study

The study was to examine how teachers' attitudes affect the way they collaborate with (i) parents (ii) health workers and (iii) social workers, in inclusive practice.

4. Research Questions

1. How does the attitude of teachers in Akatsi District affect the ways they collaborate with the following in inclusive settings?

- (i) Parents
- (ii) Health workers

(iii) Social workers.

5. Significance of the Study

[15] is of the view that, no inclusive programme could last a moment if the classroom teacher does it alone. Teamwork is prerequisite. The cooperation and collaboration of multi-agency staff such as personnel from education, health, social services, psychology and counseling as well as parents could be brought together to meet the needs of the child.

The study saw the urgent need to focus attention on teaching approaches which enable children with SEN and disabilities to perform effectively in mainstream classrooms. The study contributes to the knowledge base on available teaching approach in guidance on the implementation of Inclusive Education and ways of involving parental privileges, roles and responsibilities. It sought to enable parents to build positive relationships, solve problems, and create the best possible future for their children and families. A study of this nature is imperative for it would bring out the kind of relationship that exists between teachers and other professionals in their bit to embrace the philosophy of inclusion.

The study will go a long way to reveal the cracks in teachers' collaborative efforts and facilitate decisions regarding the steps to take to successfully include all children with disabilities.

It is also expected that the study helped to raise awareness amongst all stakeholders, on matters concerning access of children with disabilities since the researcher will organize seminars after the findings.

6. Methodology

6.1. Research Design

Descriptive survey design was employed for the study. I used descriptive survey because [17] explained that descriptive sample survey is used when the researcher intends to collect information from knowledgeable people to explain a social phenomenon. Also, the design is used to obtain answers from a large group of people. According to [18] descriptive survey design involves the collection of data from a defined population to describe the present condition of the population using variables under the survey. This design has the advantage of producing good responses from a wide range of people. It is suitable for accurate and objective collection of data to describe an existing phenomenon [19].

6.2. Population

The target population for the study was fifty teachers. They were all in schools in Akatsi district that were practicing inclusive education at the time of the study. These were Zuta Basic School, Akatsi Demonstration special school, Wlitye Basic School, and Yaluvi Basic School. The population is presented in Table 1. In Zuta Basic School, there were 15 teachers made up of 10 female and 5 male teachers. In Akatsi Demonstration

Special School, there were 12 teachers made up of 6 female and 6 male teachers. In Wlitye Basic School there were 7 female and 6 male teachers giving a total of 13 teachers, In Yaluvi Basic School, the teachers were 10 made up of 5 females and 5 males. The sum total for male was 22 and female 28 giving a total of 50 teachers.

6.3. Sample and Sampling Procedure

A sample is a representative portion of the population that is selected for investigation [20]. A sample can be viewed as a subject of measurements drawn from a population in which the researcher is interested. Since the research is qualitative in nature, I decided to interview twenty (20) teachers out of the fifty (50) teachers in the inclusive schools. This helped me gain diverse and comprehensive data from respondents and again to have an enough representative sample. The schools were purposively selected because they were the only schools that were practicing inclusive education in the district as at the time the research was conducted. The representation of the selected teachers is shown in Table 1.

Table 1. Distribution of population and sample

Schools	Number respondents	Sample	Percentage
Zuta Basic School	15	6	30
Akatsi Demonstration	12	5	25
Wlitye Basic School	13	5	25
Yaluvi Basic School	10	4	20
Total	50	20	100

Two sampling procedures were used in selecting the sample for the study. These were proportionally stratified random sampling and simple random sampling. Where the proportional stratified sampling was used to determine the sample of each school, the simple random sampling was used to select participant of each school. In doing this, I wrote the names of the staff members on a slip of paper, and put into a container without looking at it. I mixed them well and asked teachers to pick. I recorded the name on a sheet of paper when they are picked and it is thrown back into the container before the next one is picked.

6.4. Research Instrument

The instrument used for the study was interview guide. According to [21] 'interview is a face-to-face encounter between the researcher or his assistant and the respondents to obtain verbal responses to questions' (p.35). An interview guide was designed for teachers in inclusive schools to elicit their views on the phenomena under study. The instrument was self-developed. In developing it I was aided by the main research questions and literature review. There were two sections. Section A dealt with background information of the respondents. Items included gender, age, and teaching experience.

In Section B, there were issues with how teachers attitudes affect the way they collaborate with parents, health workers and social workers. The objective for this was to obtain confidential information which respondents might not be willing to put into the public domain and the

ways they collaborate with the following in inclusive settings (i) parents (ii) health workers and (iii) social workers. I used the semi-structured interview because in the view of [22] this approach consists of questions designed to elicit specific answers on the part of respondents. It is also used to obtain information that can later be compared and contrasted.

Semi-structured interviews are verbal approximation of a questionnaire with explicit research goals [23]. Reference [23] further stated that semi-structured interviews offer the possibility of modifying a line of inquiry as well as following up interesting responses. As a result it helped us modified over time to focus attention on areas of particular importance. We also used a questionnaire for sampling views from teachers. Each questionnaire is divided into sections based on the researchers' questions for the study. Section (A) of the questionnaire for the teachers gave basic information concerning the teachers. This included their educational background, age, gender and year of experience. Section (B) elicited information on effects of positive teacher attitudes on collaboration with the parents, health workers and social workers. Section (C) elicited information on effects of negative teacher attitudes on collaboration with the parents, health workers and social workers. A reliability test was performed using Cranach's Alpha to establish the internal consistency of the items on the questionnaire. During the test, the items which were found to have negative inter-item correlation were re-constructed.

6.5. Data Collection Procedure

The researcher sought permission from the authorities of the District before conducting the study. On arrival in each district, I introduced myself to the District Director of Education and requested for a possible covering letter to the various head teachers for their assistance. Each head teacher was briefed on the objective of the research on attitudes of teachers towards inclusion.

6.6. Procedure for Data Analysis

The data were analysed using charts, figures and thematic approach. After receiving all the information through note taking and tape recording, we read it to each participant. Before transcribing the data for analysis, we played back the tape for participants to confirm the information they had supplied. The recorded data were subsequently transcribed. The data were categorised by identifying and creating themes using issues raised by respondents.

The presentation, analysis and discussions of finding of data collected from the field on how teachers' attitudes affect the practice of inclusion. The analyses were done on how the attitudes of teachers affect the way they collaborate with parents, health workers and social workers.

Table 2 provides a summary on the background information of the respondents.

Background Information

This section of the results is about the demographic data of respondents.

Table 2. Demographic data / background Information.

Variable	Sub-scale	Number	(%)
Gender	Male	8	40
	female	12	60
Age Range	18-30	2	10
	31-35	3	15
	36-40	0	0
	40-45	6	30
	46-50	6	30
	Above 50	3	15
Teaching Experience	Less than 5 years	2	10
	5-10 years	4	20
	11-14 years	8	40
Highest Qualification	15 & above	6	30
	Cert "A"	2	10
	Diploma	5	25
	First Degree	13	65

Source Field Data.

Table 2 shows that (40%) of the teachers were males and (60%) of the teachers were females. This shows that majority of respondents were females. Looking at the age range, majority were within 40-50 years forming (60%) of the respondents while those within the age range of 31-35 were equal to those who were above 50 years forming 15%, respectively. The least number were two respondents with (10%) of the population. This suggests that the findings were largely influenced by teachers in the range of 40 - 50years.

On the issue on how long teachers have been teaching, the majority (40%) were in the range of 11-14 years. Six (30%) had been teaching for 15 years and above. The statistics on the table further give an indication that four (20%) were within 5-10 years and two (10%) below 5 years. It is believed that the longer teachers practice in inclusive schools, the more positively they accept students with disabilities [14]. Finally, Table 2 indicates that, majority of teachers (65%) were first degree holders.

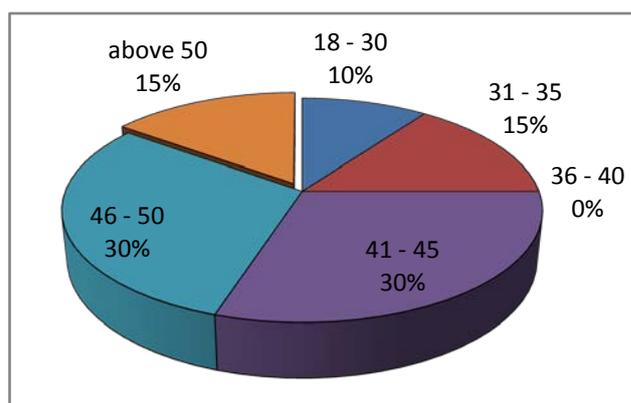


Figure 1. Demographic data...

The demographic data shows the age level of respondents in the pie chart above. Taking a close look at the demographic data, most of the respondents are above 40 years where it is clear that those who gave responses, 30% were within the ages of 41- 45 and another 30% were also with the ages of 46-50. This suggests that more of the respondents whose view influence the findings were from age 41 - 45. Also, those who were 50 years and

above were 15% which represent the same total number and percentage as those respondents whose age were from 31-35 in the variable. This implies that, the sum total of those who were within the ages of 31-35 and above 50 years were equal to those who fell between 41-45 and those from 46 - 50.

Research question 1: How does the attitude of teachers affect the ways they collaborate with the following in inclusive settings? (i) parents (ii) health workers and (iii) social workers.

This question was asked to elicit the effects of teachers' attitudes towards the way they collaborate with parents, health workers, and social workers. This question was investigated through interview guide. The issues identified are presented.

Effects of positive teacher attitude on the way they collaborate with parents of children with Special Educational Needs.

This question sought to find out the various ways teachers love, care and affection, affect the way they involve parents in the practice of inclusive education.

Positive teacher attitude promotes high academic performance of students

The participants within 40-50 years age range, were more of the opinion that parental collaboration has a positive effect on children's achievement. It is the most accurate predictor of a student's success in school than the other categories. In their view, some of the benefits of parental involvement are that: Students achieve more regardless of their socioeconomic status, ethnic/racial background, or parents' educational status. Students have better school attendance and complete homework more consistently. Parents provide reading materials to promote their academic performance.

Citing a case reported on TV3 news on 27/3/2017, where a headmaster on their Speech and Prize Giving day held on 24/3/2017,

Gifty, a respondent said:

One visually impaired child complained that: Madam, I cannot do mathematics. I told him to attend the class and write the Basic Education Certificate Examination (BECE). I involved the parents to assist with buying mathematical set, exercise books, braille frame and stylus as well as employ a teacher to assist him in the learning. After their (B E C E) he was the best in mathematics in 2016 group. He was admitted to Adidome Secondary School and had the best results in his second year second term exams (Transcript of Interview held on 19/1/2017).

This is in agreement with studies conducted by [4]. Which show that parents who play active roles in their child's education have great contribution on student performance. Thus, parent's involvement in educational experiences in the home is associated with higher achievement scores and higher grades.

Parent-Teacher collaboration improves home school communication

The participants claimed that, parents use teachers' knowledge of a particular child's personality or interests as a screening device. They are more willing to communicate a range of feedback about a child if they feel the teacher knows what is special about the child. It also emerged that communication gives the opportunity for

both parties to resolve emergency problems. This is one of the important reasons why getting to know the child and working hand in hand with parents is so critical in developing parent-teacher partnerships especially among children who chronically misbehave in class. A parent-teacher-student communication often puts an end to students' behaviour which plays the school against the home, and parents against the teacher. Explaining a point during data collection,

Yayra, said:

Through collaboration with Parent Teacher Association (PTA), parents provided mobile phones and line phones to the school, which helps him to communicate with parents as well as students (Transcript of Interview held on 19/1/2017).

According to him, he used it to call parents to come for their children when there was a power failure and fire outbreak in his school.

This finding agrees with [5] who says that parental involvement improves sending and replying to home-school communications about student progress, difficulties and dangers in social activities like jumping, throwing, lifting, developing adult learning skills, and being involved in school governance

Positive teacher attitude promotes parental monitoring and supervision in inclusive practice

Participants were of the view that, parents get to monitor their children's friends and their parents. They talked with their children about how they spend time or whether they are making safe choices. Parents set and enforce rules for their children's behaviour by clearly explaining the rules and consequences and following through with appropriate consequences when the rules are broken. To the teachers, parental monitoring makes it less likely for children to skip classes, take alcohol or steal or hurt someone.

Jey, a respondent said:

When I was posted to this school, I was made a class teacher. I found that Peace was absent for two weeks. I made a follow-up, and met Peace and the mother. I discussed with them the importance of monitoring how Peace comes to school. I visited the home again when there was no response. Later I discussed it with the head teacher and he said, when it gets to the third week he will cancel the name. I told myself that would not happen. On my third visit, I met the father. He expressed surprise for hearing all that the head teacher said. Since then he monitors, not only the coming to school early, but supervises homework and makes time for the child to learn at home. (Transcript of Interview held on 20/3/2017).

This is consistent with [6] who was of the opinion that, teacher collaboration promotes monitoring making parents keep up with their children's progress on a regular basis. Monitoring shows a child that the parent genuinely is concerned about his well-being

Positive teacher attitude leads to teaching parents to know their responsibilities

The respondents with teaching experience below 15 years were of the opinion that, positive teachers' attitude leads to teachers teaching parents to know their responsibilities. They explained that when parents are taught how to take active role in monitoring and

supervision, it reinforces and facilitates their children's out of school learning time. Their children's performance then becomes better in school. Collaboration helps teachers teach parents to reinforce school learning at home which shows notable improvement in students' achievement levels. This motivates children's attitudes towards schooling and increases their school attendance.

Tom a respondent said:

A case in point is Wisdom who does not take part in class exercises. I asked why he said, my parents do not give me time, light, exercise books, pen and pencil. I visited his house and discussed with the parents to get them know the need to use these materials at home and school. Another time when I was passing through the area I went to reiterate what we discussed. Not long, Wisdom who uses a piece of paper from their friends, started using all other needed materials including, mathematical set, pencils, pens, school uniforms, books, time allocation for homework, light for students to do their homework, story books, dresses well and always comfortable with classroom activities. (Transcript of Interview held on 19/1/2017)

Parental involvement in discussion of the needs of student makes them responsible to provide their needs, monitor children's homework, and influence children's success for achievement [7].

Positive teacher attitude encourages parents to report information on health problem, condition and diseases to teachers.

It emerged from the data that, parents feel valued and respected therefore they are more involved in their children's learning and development, by sharing information about their children. Parents feel that, their values, practices, traditions, and beliefs are understood and taken into account. They feel comfortable visiting the school setting, talking to, and planning with teachers. They are confident to report information on health problems, to teachers.

Nice said:

Since I am always in contact with parents, they disclose the child's condition as a result of the psychological and emotional challenges that a parent went through during pregnancy to them. The parent disclosed to me, her child found it difficult to speak, always isolate himself from their peers and disclose the presence of epilepsy in the child. I sent the child to a hospital and the doctor detected emotional disorders as additional disability (Transcript of Interview held on 21/1/2017).

The pie chart in Figure 2 describes respondents' view on how positive teacher attitude affect collaboration with parents in inclusive practice. Looking at the pie chart two (2) respondents representing 25% were of the view that positive teacher attitude towards collaboration with parent promotes academic performance in schools. Two of the respondents representing 10% were of the view that positive teacher attitude towards collaboration promote home school communication. Looking at how positive teacher attitude promote parental monitoring and supervision 15% of the respondents settled on that view. Also, 20% of the respondents were of the view that positive teacher attitude on collaboration with parents' helps parents to be more responsible towards their children with special needs. The pie chart shows that 30%

of the respondents were of the view that positive teacher attitude promotes reporting information on health issues.

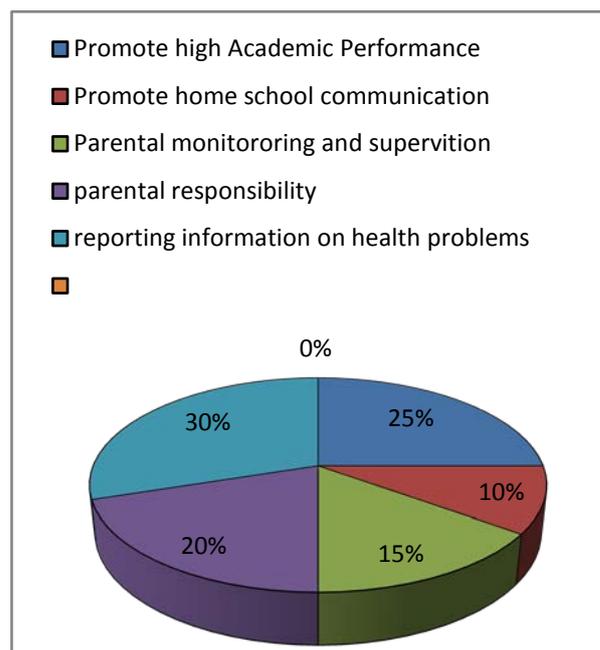


Figure 2. Effects of Positive Teacher Attitudes on Collaboration with Parents

Effects of teachers' negative attitude on the way they collaborate with parents of children with Special Educational Needs.

Teachers' negative attitude promotes indiscipline among students

In the data collected the majority of teachers were of the view that, negative teacher-parents relationship promotes indiscipline leading to misbehaviour. Also the teachers fail to involve parents in their children's education, it places students at the risk of misbehaviour and so encourages dropping out of school. Teachers are of the view that, negative teacher attitudes towards collaboration with parents result in learners walking slowly to their schools. They miss morning periods frequently. While one is still troubled about this state of affairs, one encounters the situation where students leave school to the house but parents do not ask them why and absenteeism is on the increase. Giving an evidence,

Vic a respondent said:

There was a time a parent complained to me about the child coming home before 12noon. I did not know why she complained to me because I do not see the reason why a parent cannot make sure her child come to school always and stay in school. A month later there was a case where the police went to the market to arrest marijuana smokers. That particular student was one of those arrested. They found in his pocket marijuana, claiming he was sent to buy it. Even that day he informed his parents to have gone to school but in the register, he was marked absent" (Transcript of Interview held on 11/1/2017)

This is in line with [8] who stated that negative teacher attitude toward parental involvement will reduce disciplinary issues thereby increasing waywardness of children.

Teachers' negative attitude leads to dumping and neglect of children at school and at home.

The participants were of the view that their failure to collaborate with parents leads to the parents' failure to provide a stable living environment for the children. Consequently, they are denied education and other needs such as provision of food, books, pens, pencils, school uniforms and other valuable items. They deny students study time and space at home. Furthermore, parents find it difficult to regulate their bedtimes, breakfast, clothing, diet and equipping the child with sound moral upbringing. Parents do not take an active role in the governance of their unique child's special needs. Parents are not encouraged to become an unflagging advocate for an education to maximize the child's potential.

Supporting her claim, Janet said:

Some of the children in my school were referred to my school from regular schools in Keta municipality by the peripatetic teacher. Since then I do not know their parents let alone discuss any issues with their parents. Since then neither their parents visited the children nor do they come for them after vacation. When I tried to find out from the children, the answer was, that they do not know (Transcript of Interview held on 11/1/2017).

Teachers' negative attitude reduces parental participation in monitoring and supervision,

It emerged from the data that, negative teacher attitudes eliminate parental supervision which is required to keep children from hurting themselves or others; to keep children away from dangerous objects and situations. Particularly female teachers were of the view that, negative teacher attitudes towards parental involvement limit parental care, participation and supervision for children who require continual supervision and care.

Ama, a respondent said:

I was then not realising the need to visit the parents when Mawutor in my class does not bring any money to school for food, and her home works and assignments are not done. Mawutor begs for exercise books, pencils and pens. I did not understand why. I discussed this with my resource room teacher. He asked me to visit the house, which I did and this is what her mother said, 'I do not think Mawutor can do anything for my time and money to be wasted on her, my sister did not benefit from school after nine years and still at home let alone a visually impaired child'. I explained to her the need to provide the needed help and to make sure she supervises and monitors what goes on in the school and at home which she did and the child improved academically (Transcript of Interview held on 11/1/2017).

Negative teacher attitude decreases parental monitoring and supervision, therefore, monitoring shows a child that parents genuinely were concerned about his wellbeing [6].

Teachers' negative attitude leads to low academic performance and increases failure rate.

Beauty, a respondent said:

I realised that since I was not working hand in hand with the parents of 'T. T'. an intellectually disabled child in my class, 'T.T'. was not encouraged. T.T. had learning helplessness, cognitive, motivational, and emotional deficits in the class. 'T.T'. has poor performance and experienced so much failure in other activities. Her parents do not encourage him therefore he hates to try. He feels she had no control over the learning situation, so he either runs away from learning

or rebelled as a failure. (Transcript of Interview held on 22/3/2017).

Table 3. Shows the thematic approach of the data collected on positive and negative effects of collaboration with health workers in the practice of inclusion

Effects of teachers' positive attitude on the way they collaborate with health workers in the practice of inclusion.	
1	Teachers' positive attitude improves child's conditions as a result of diagnostics and treatment of eye diseases of with SEN.
2	Teachers' positive attitude leads to effective follow-up services.
3	It improves prescription and the use of drugs for children with SEN by health workers.
Effects of teachers' negative attitude on the way they collaborate with health workers.	
1	Teachers' negative attitude discourages health workers in giving health talks to students.
2	Teachers' negative attitude leads to an increase in problem behaviour in schools.
3	Teachers' negative attitude makes it difficult in carrying out follow-up services

Effects of teachers' positive attitude on the way they collaborate with health workers in the practice of inclusion.

This question intended to address the effects of teachers' positive attitudes towards collaboration with health workers.

Teachers' positive attitude improves child's conditions as a result of diagnostics and treatment of eye diseases of with SEN.

The respondents, who were above 40 years, were categorical on the view that a positive teacher attitude towards collaboration with health workers improves the child's health conditions. To them children with disabilities have health problems. Therefore, teachers' collaboration with health workers encourages them to carry out their roles in diagnosing and treating diseases for children with SEN.

Respondent Alfred said:

Due to my friendly relationship with the Doctor, in the pre-entering medical examination of 'Akos' an intellectually disabled child before seeking admission, the Doctor detected glaucoma as additional diseases but the Doctor put measures such as prescription of drugs to prevent further deterioration of her disabilities. (Transcript of Interview held on 22/3/2017)

This is in line with [10] who argued that health workers collaborate with the teacher to diagnose eye diseases and health issues of children with disabilities. They work together to determine the cause, degree and the type of visual loss which is useful in planning for the children.

Teachers' positive attitude leads to effective follow-up services.

Almost all the participants were of the view that teachers' collaboration with health workers strengthens their follow-up services. This is essential to ensure that the child with disability is successful in the treatment and medication as well as in the job place. Follow-up can assist the disabled worker in keeping the job and going ahead with treatment and medication, by identifying any existing or emerging problems and can assist the child by

focusing attention on the disabled student or workers and the treatment and medication or job. The follow-up visit also gives health workers and teachers the opportunity to explore whether the student is interested in undertaking the treatment. If the student is reluctant, the follow-up service provides a good opportunity to find out why.

Respondent J said:

With the issue relating to 'Akos', the Doctor followed – up periodically and when her problem was serious the doctor gave detailed treatment and medication (Transcript of Interview held on 22/3/2017)

It improves prescription and the use of drugs for children with SEN by health workers.

The male teachers argued more on the fact that positive teacher attitude improves prescription and the use of drugs for children than the female teachers. Teachers work with nurses who visit the children at home. These nurses, who are usually based in the health centre, also run hospitals where children's development is monitored regularly to check on their health needs.

Fafali a respondent said:

I contacted the Doctor with Victoria a visually impaired child, directly for drug use by persons with disabilities. I asked the Doctor whether there is the need for referrals before I bring my students he said there was no need to be referred by health professional before I attend to them. What the Doctor did that day was that, he prescribed drugs, measure refraction and prescribed glasses. That day the doctor said, I can contact him / her for information, services and support. (Transcript of Interview held on 19/1/2017).

This is consistent with [11] who were of the view that collaboration with the teacher promotes doctors involvement in prescription of drugs, measure refraction and prescribe glass.

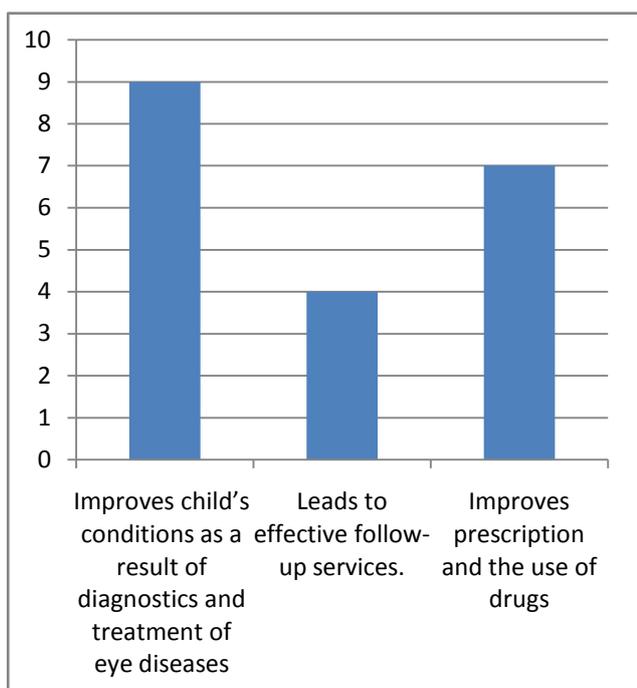


Figure 3. Effects of teachers' positive attitude on the way they collaborate with health workers in the practice of inclusion.

Figure 3 shows the effects of positive teacher attitudes on the way they collaborate with health workers in

inclusive practice. The pictorial figure above suggests that four of the respondent were of the view that positive teacher attitude lead to effective follow-up services. Seven respondents were of the view that positive teacher attitudes improves prescription of drugs for persons with disability. This is in line with [10] who observed that, psychiatrist and teachers working as a team help to give information on children suffering from psychological problems and management strategies. The figure again suggests that nine respondents were of the view that positive teacher attitudes improves child's conditions as a result of diagnoses and improves prescription of drugs. This is consistent with [11] who were of the view that collaboration with the teacher promotes doctors involvement in prescription of drugs, measure refraction and prescribe glass.

Effects of teachers' negative attitude on the way they collaborate with health workers.

Teachers' negative attitude discourages health workers in giving health talks to students.

Giving of health talks is one of the critical issues mentioned in the data collected. The respondents were of the view that health education is the duty of everyone engaged in health and community development activities. If health workers and teachers are not practicing health education in their daily work, they are not doing their job correctly.

Respondent J said:

I released that as I do not work with the health workers, when there was an issue with diabetics, cholera outbreak in the school and students complained to me about stomach ache and vomiting, I took them to hospital. However, my request for health talk on the causes to school failed (Transcript of Interview held on 19/1/2017).

[12] were of the view that, Health workers primarily do take responsibility in working with the school level to promote health and prevent disease through provision of health education. The female respondents were of the opinion that students do not know how they should be protected for example, immunizing against diseases, taking exercises and brushing teeth at home. The female respondents were also of the opinion that children find it difficult to identify the onset of illness and eliminate health problems. This suggests that teachers will have difficulty when talking about preventive measures that lead to early diagnoses and prompt treatment due to the negative attitudes of teachers towards inclusive practice.

Teachers' negative attitude leads to an increase in problem behaviour in schools.

The respondents who were above 40 years of age gave more explanations that the psychiatrist gives reasons why individuals behave abnormally than those below 40 years. To them, negative teacher attitudes lead to uncooperative work attitudes. Therefore teachers have problem managing the success or failure in school leading to problem behaviour at home, school and in the community.

Beauty a respondent said:

I had a child in my class who shows strange and unusual behaviour, express ideas that are far-fetched, attention problem; shows aggression and steals in the classroom and at home. Confused that I was in managing the problem kept the problem increasing. It was when I visited sister schools that I asked and I was

told I should work with the health workers; they will assist (Transcript of Interview held on 22/3/2017).

This suggests that success at school assumes even greater importance if a child's home and community environments are disadvantaged. [10] observed that psychiatrist and teachers working as a team help to give information on children suffering from psychological problems and management strategies. The participants were of the opinion that schools can contribute to behaviour problem when there is management problem.

Teachers' negative attitude makes it difficult in carrying out follow-up services

Follow-up services must be provided by doctors, teachers or an ancillary service provider working under the general supervision of the assessment team. Negative teacher attitudes do discourage health professionals who can independently conduct assessment, screening, helping with the planning of the Individualized Educational Plan, and implementing the follow up services. It emerged from the data that Doctors, are discouraged about the teachers' insensitivity towards the practice of inclusion. To the respondents, the head teacher, when this happens, make doctors postpone follow up services to later dates.

Respondent Ambrose said:

The Doctor told me, "I did not know that the follow-up visit was recommended during our planning meeting. The time was not convenient; I could not specify when to plan the follow-up visit even after one week or month, when I find appropriate time I would go (Transcript of Interview held on 22/3/2017).

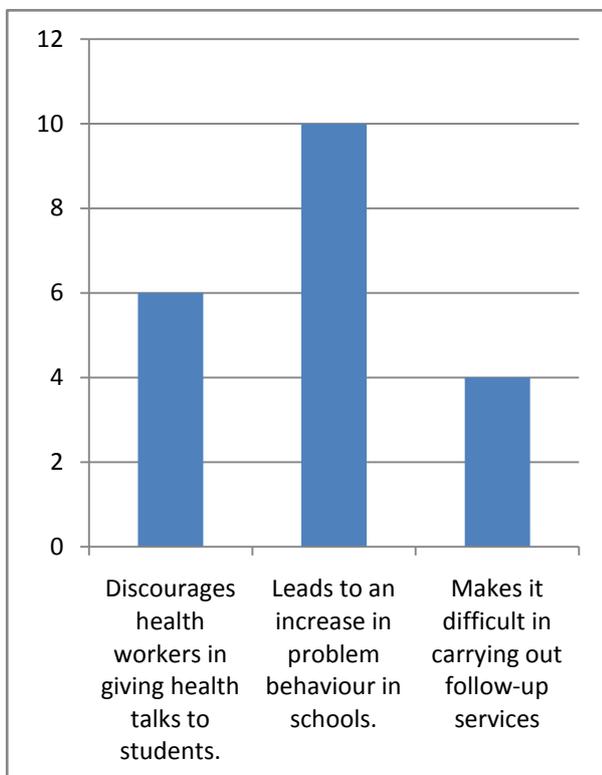


Figure 4. Effects of teachers' negative attitude on the way they collaborate with health workers.

Looking at Figure 4; shows the effects of negative teacher attitude on the way they collaborate with health workers. In the Figure 4; this four respondents were of the

view that negative attitude of teachers makes it difficult in carrying out follow up services on health issues involving individual with SEN. Ten of the respondents were of the view that negative teacher attitudes leads to an increase in behaviour problems in inclusive practice. This implies that more respondent agreed with this position as compared to four respondents rooting for negative teacher attitudes making it difficult in carrying out follow – up services. Also six respondents were of the view that negative teacher attitudes discourage health workers in giving health talks in inclusive schools. This is in line with [12] who were of the view that, Health workers primarily do take responsibility in working with the school level to promote health and prevent disease through provision of health education.

Effects of teachers' positive attitude on the way they collaborate with the social workers.

Teachers and social workers readily accessing information from parents and family members

Female teachers were of the opinion that, their positive attitudes towards collaboration with social workers is helping to access information from parents and family members more than the males. Again, it helps in adopting strategies needed in the execution of its mandate.

Respondent Joy said:

"Akos was brought to the school by the Akatsi District social workers who worked together with parents and give information on areas of resource mobilization, like district common fund, national disabled society, and non-governmental organizations. In addition, he visits the parents of Akos and informs me that she got sick of rubella when she was pregnant with Akos. At that point in time she was learning trade but not legally married so she attempted to abort the pregnancy. At home Akos can draw and paint objects" (Transcript of Interview held on 22/3/2017).

Teachers were with the belief that collaboration leads to monitoring and evaluating to ascertain the situation on the ground with respect to children's issues. With this, parents are also encouraged to volunteer information on the case history and other additional disabilities [10].

Teachers' positive attitude enhances effective case management and counselling

The respondents with 15years' experience and above were more of the view that teachers' likeness of inclusive practice helps them work alongside their clinical and social workers to effectively orchestrate the case management and counselling processes.

Theresa a respondent said:

I identify a child who is intellectually disabled in Tatome in Akatsi. The parents were not willing to send the child to school since I was working with a social worker, I reported the issue to him. The social worker moved in, counsel the parents and the family, today the district assembly supports the child and she is in school (Transcript of Interview held on 22/3/2017).

This is in line with [13] who said, teachers working hand in hand with the social worker help in management of disability issues, formulate appropriate level of care, progression of care from time of identification and back into the community for persons with disabilities.

Effects of teachers' negative attitude on the way they collaborate with social workers in the practice of inclusion

There is difficulty in accessing information from parents and the community.

The participants especially the male, were of the opinion that social workers are not willing to help teachers solicit information about educational and employment opportunities available for students since teachers are not welcoming. The teachers were of the opinion that, as they are not collaborating with the social workers, it is difficult for them to assist them (teachers) to obtain information [9] the case history of the child with disabilities and other related information concerning management, treatment, and action taken to avert the situation from deteriorating are not discussed with them. They also have difficulty having information on the cases of immunization if any, and medical care for the community.

7. Recommendations

Based on the findings and conclusions, the following recommendations are made for possible implementation:

1. There should be effort of Special Education Division of the Ghana Education Service to sensitize teachers on inclusive practice on televisions, their website, the media, organizations of workshops, and in-service training programmes.
2. The Ghana Education Service should initiate action (in-service training) to update teachers on the effects of teachers' positive and/or negative attitudes to children with disabilities on the practice of inclusion.
3. The Ministry of Education should ensure that more Courses are introduced in the curriculum of Colleges of Education to enable prospective teachers develop positive attitudes towards persons with disabilities.
4. Teachers should work hand in hand with all stakeholders for comprehensive and effective school management systems.

8. Conclusion

The study brought to the fore front the issue of multi-sectorial approach in participation or involvement. Regular education teachers alone can hardly develop the potentialities of children with SEN and disabilities. This suggests that the agencies such as health, psychology and counselling, social services and education must collaborate in meeting the children's needs. This support helped classroom teachers' to gain expert knowledge for work. This implies that, team work can be effective if participating bodies or disciplines respect the contribution that each individual make.

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