



**Dualism Between
Schooling and Education :
Bridging the Gap**

Dr. Philip John



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2003-04

CBSE Platinum Jubilee Lecture Series

Chairman's Foreword

The Central Board of Secondary Education, a national institution with international presence, is celebrating its Platinum Jubilee during 2003-2004. As part of the academic activities the CBSE has conducted Platinum Jubilee Conferences at national and regional levels attended by the heads of affiliated schools. Many eminent educationists who have excelled in their respective fields were invited to deliver lectures in these conferences. The basic concept behind organizing these lecture series was to raise the awareness level among all stakeholders about the changing needs of students in school education and to explore new areas for collaborative endeavours between the Board and other institutions working in this field. There is also a felt need that the educational planners must respond to the various emerging challenges adequately and meaningfully. It is hoped that these lecture series have motivated the delegates to understand all the major issues in their right perspective.

To reach out to a wider audience, the CBSE is presenting these lectures in the form of Platinum Jubilee Lecture Series Booklets. Students, teachers, principals and the general public will benefit from the vast repository of knowledge of these learned personalities.

Ashok Ganguly

Dualism Between Schooling And Education : Bridging The Gap



"I have never let my Schooling interfere with my Education"

(Mark Twain)

This lecture was delivered by Dr. Philip John in the Regional Platinum Jubilee Conference on 29th April, 2004 at Kochi.

Goal of Education : Re-appraisal

The implication in Mark Twain's comment is that there is a palpable discrepancy between either the process of Schooling and Education, or between the goals of Schooling and Education. Or both. Any qualitative transformation in the system of Education for our children must aim at bridging this discrepancy. The Central Board of Secondary Education (CBSE) has been in the forefront of pioneering such a transformation; the focus of such transformation should be a re-appraisal of the very Goal of Education. The Goal of Education is to create competent, confident, self-reliant citizens.

Such a re-appraisal, as is being implemented by the CBSE, needs inspiring leadership and the courage to change.

School Performance and Future Success

If it is understood that self-confidence and self-reliance is the core of Educational Goal, then School Performance is not a major parameter of future success. Many school children who seemed hopeless as kids go on to be wildly successful in later life.

Conversely, though, Poor School Performance (PSP) can snuff out children's dreams at too early an age.

It is being increasingly realized, therefore, that schooling and school performance need a re-orientation. Educational policy needs to be given a different perspective. Because in this 21st century, the determinants of future success do not seem to be based on school performance.

As someone said, “when our children grow up, the A grade students work for the B Students. C students run all the businesses... And the D students dedicate buildings and bridges to the nation!” It must be realized, however, that there are valuable skills in these C-grade and D-grade students which are used to make these feats possible, demonstrating again that future success in life is not necessarily bound to school performance.



CGC – The Cochin Experience

The Child Guidance Clinic (CGC) at Cochin is a referral centre for children with 'scholastic backwardness'. In our experience of evaluating about 4300 children who had Learning Problems, we came across an astounding reality - many of these children who could not achieve school success had excellent skills in areas not requiring reading or writing! These, we realized, were the skills that can transform such children into future successes. These very skills, as is our refrain today, are the Real World Skills for the 21st century, they are Life-Lines for future success in children who are branded as 'school failures'.

Our mission today is to propagate this changing perspective of the Quality of Education – to stop looking for 'skill-deficits' and instead look for 'skills' in every school child.

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A major group of poor school performers are emotionally disturbed and need help to optimize their performance.

Discrepancy between potential and performance

Underachieving children in schools account for at least a quarter of the strength of any school. They do not achieve their full potential due to extrinsic causes, or intrinsic reasons.

Extrinsic causes emanate from the home, the school or the very Educational system.

The intrinsic reasons exist within the 'underachieving child' himself. About 5 such reasons are easily identifiable. Physical causes like Hearing or Visual deficits may cause scholastic underperformance. Subnormal Intelligence or Social Functioning may also cause Poor Performance in school. Specific Delays in brain development constitute the major cause for children with good potential ending up as underachievers in schools. These children used to be called Dyslexics. They suffer from poor maturation of their brain cells that handle Reading, Spelling, Writing etc. This is an inborn disorder, and is presently known as Learning Disorder.

Yet another cause for underachievement is also an inborn disorder called Attention Deficit Disorder (ADHD) in which the child's brain is unable to sustain concentration in an ongoing Learning task. Such children may be inattentive, fidgety and restless.

A major group of poor school performers are emotionally disturbed and need help to optimize their performance.

A sensitised teacher can identify all the above causes in the classroom itself.

In summary, the path breaking strategy that we have evolved at CGC, Cochin is to identify the causes in poorly performing children and rectify the causes. This also involves actively looking for skills and strengths

in these children who may otherwise be written off as failures.

This implies the possibility that in every underperforming child in whom we see a discrepancy between potential and performance, it is possible to remediate inadequate Learning strategies. Such Remediation bridges the gap between child's potential and performance.

Teacher as Diagnostician & Therapist

India is evolving into a performance-oriented society with 'pushy' parents and 'pushy' schools. Our surveys show that in spite of efforts, at least 25% of all school children do not achieve their potential. About half of them are afflicted by maladies such as dyslexia that impede the Learning Processes.

Historically, these handicaps were handled by the medical personnel. But the sheer force of numbers makes it difficult for the Health Sector to deal with Educational Problems.

On the other hand, Teachers are the first to notice the children who struggle with their studies. In that context, sensitized and trained teachers can easily be transformed into 'Diagnosticians' to identify Learning Disorders. Teachers can also become 'Therapists' if they are systematically empowered. Such a 'parivarthan' in Teachers can give a new Lease of Life to every underachieving child.

Teachers can also become 'Therapists' if they are systematically empowered.

Empowering the Teacher Community

Empowerment of Teachers begins by sensitizing them to the numerous Learning difficulties faced by school children. They can be taught to diagnose the various Causes described above that result in Poor School Performance.

LEARNING DISORDERS (LD)

- Learning Disorder (LD) is the major cause of Poor School Performance in young children. Present from the beginning, it is a Developmental Disorder. It is not mental retardation or mental illness.
- LD is the inborn difficulty to acquire and use Academic Skills. Academic Skills are skills used for Learning, such as Reading, Reading-comprehension, Writing, Spelling, Mathematics, Language, Motor Co-ordination, Social Skills etc.
- LD children may be 'smart' in everything else. They have Normal or Above Normal Intelligence. Da Vinci, Einstein, Edison, Churchill were all L D.
- Learning Disorders may first appear as behaviour problems : Attention-deficit, Hyperactivity, naughtiness, defiance, aggression, addiction to TV or computer, forging progress reports, Tics, Obsessive disorders, Anxiety, Depression, School phobia etc.

POINTERS TO L D (FOR TEACHERS)

- ☞ Difficulty to read and write — reads slowly word by word, with omission or addition or guessing of words. Misses lines or reads lines again.
- ☞ Does not understand what he himself reads, but comprehends when you read out to him.
- ☞ Listens and Learns quickly. Can answer questions orally, but unable to write the same correctly. Hence discrepancy between what he knows and what is expressed on paper.
- ☞ Slow to write; poor handwriting. Reversal of letters or numbers (b/d, 6/9, 15/51). Glaring mistakes in spellings; incomplete notes and answers.
- ☞ Difficulty with Arithmetic operations or statements. Transposes answers when copying (32481 becomes 34281).
- ☞ Hard to master speech and languages; difficulty to do buttons, thread a needle, draw a straight line or a good circle.
- ☞ Pounded by everyone, poor Self-esteem. Poor Social skills. Poor motivation for studies.
- ☞ Bright and alert in matters not connected to reading or writing — music and dance, sketching and painting, sports and games, motors and machines!

CAVEAT

Many Normal Children display some of these symptoms.

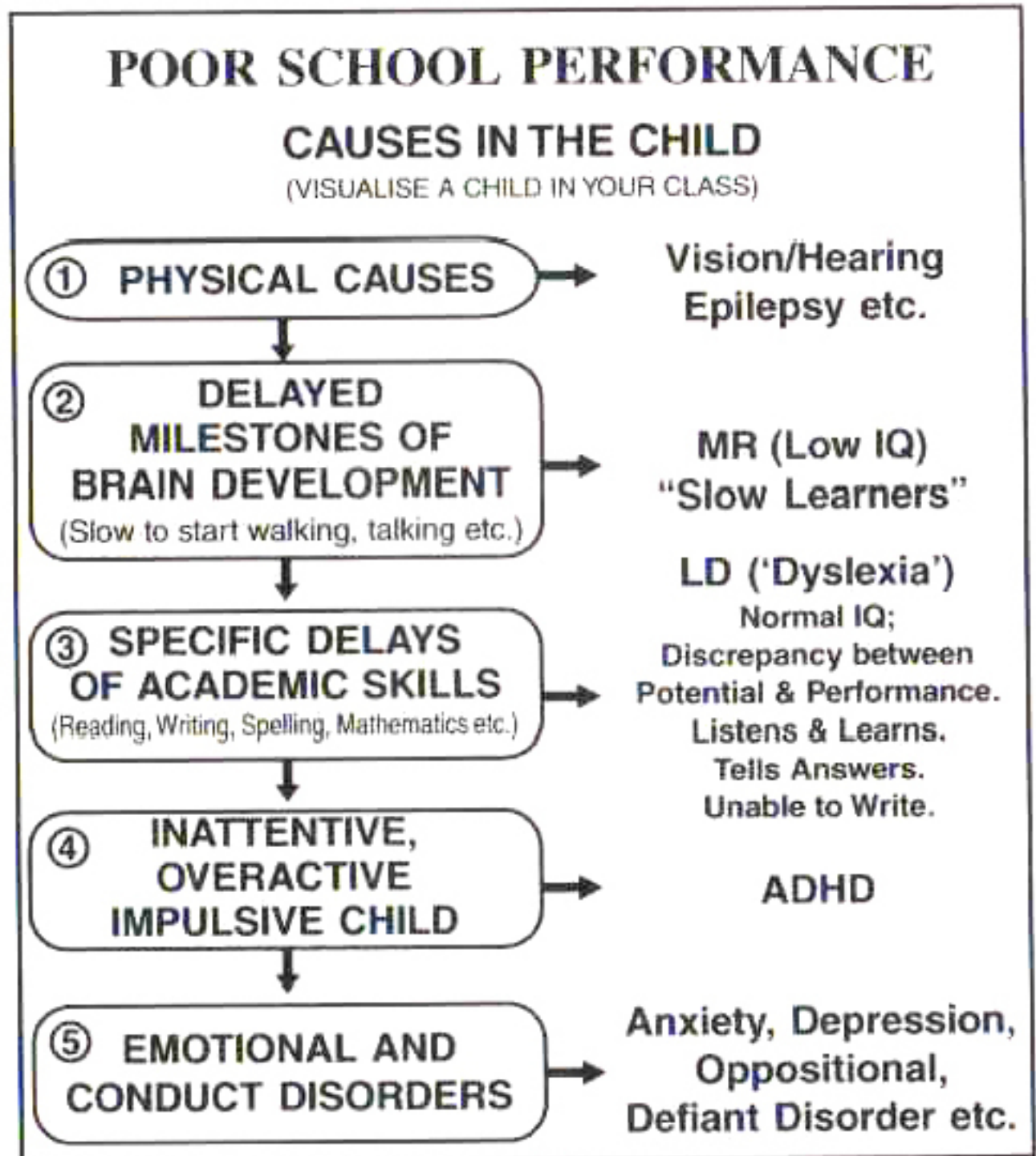
Not all L D children display all pointers.

Severe Problems need multidisciplinary Assessment.

Teachers MUST Ease pressure, Start Remedial Teaching.

Dyolexia is an inborn disorder in otherwise intelligent children.

For instance, if a Teacher becomes aware of five reasons why a young child scores poor marks, she can diagnose the cause for underachievement in 90% of cases. These 'Causes' are set out in the Flow Chart shown below.



The CGC Cochin Initiative has been to sensitize School Teachers systematically to use this Flow Chart, and empowering them to make a diagnosis in the classroom itself. The 'Handbook on Poor School Performance' authored by us was published by the CBSE with this very objective.

Learning Disability

This neurological handicap (Dyslexia) is an inborn disorder in otherwise intelligent children. It is not a simple difficulty to learn nor is it a term to be used for any child who fails at school, or behaves badly. These

Schooling in our current system measures the children's 'Table-Top skills' and 'Paper-Pencil Skills'.

children are neither 'stupid', 'lazy' or 'careless'. In fact, geniuses like Edison, Einstein, Churchill and Tom Cruise are all big league Dyslexics.

Learning Disorders are mostly genetic in origin, affecting boys four times more than girls. Maturational deficits in the brain cells that control learning are the basic causes. This results in difficulties in the acquisition of Academic Skills (School Skills) namely Reading, Reading Comprehension, Writing, Spelling, Arithmetic, Language etc.

'Excellent with his hands'

These children answer questions orally but are unable to write the same correctly in the answer sheets. Their major trouble is with Reading, Writing and Language. They are described as 'smart and intelligent' and 'excellent with hands', but in exams, 'idiot of a son'.

"He would be the smartest lad in the whole school if instruction were entirely oral".

(Teacher)



Disability or Different Ability ?

Schooling in our current system measures the children's 'Table-Top skills' and 'Paper-Pencil skills'. We determine that a child is dull or clever by merely looking at this limited performance. Psychologists use similar Paper-Pencil skills to test IQ and reduce the child's intelligence to a mere number. At Cochin, as we caught on with our work, we were able to systematically identify multiple talents, skills and strengths in a great percentage of these 'disabled children'.

A child may not understand a riddle or a joke but may be brilliant in chess or checkers.

A child with Learning Disability can become a good swimmer though he may stumble with his words. He may not understand a riddle or a joke but may be brilliant in chess or checkers. He may not subtract or divide, but be brilliant with Motors or Machines. Sports or Games, Music or Dance, Sketching or Painting, Architecture or Agriculture may be his forte.

In that context, although this learning disabled child has a 'disability' in school, he may have a 'different ability' in him to use for future success in life.

Intelligence – Changing Perspectives

Intelligence is often considered as the sum total of faculties assessed by using Sit-down Tests or Multiple Choice Questions (MCQ). This may lead to underestimating the brilliance of children who may have skills which cannot be so tested. As was elaborated earlier, Table-top Performance cannot be a parameter of future success in life. Schools pass or fail a child based on 'Sit-down Tests' alone, whereas 'Real World Intelligences' cannot be tested on table-tops. Schools reward 'All-roundedness' , but successful people have brains that are specialized such as in Dyslexics. Such dyslexics thrive only after 'escaping' school.



Sit-down tests represent written Language and Logical-Mathematical Intelligence, and are attributed to the Left Brain. On the other hand, the Right Brain is the seat of skills that do not need Reading or Writing, Language or Logical Thinking. The Right Brain therefore generates scores of vocational opportunities based on such Real World Intelligences. Music or Dance, Acting or Mimicking, Fantasy or Imagination, Crafting or Designing, Drawing or Painting, Sculpture or Architecture, Horticulture or Agriculture, Navigation or Exploration, Cooking or Home-making, Stitching or Sewing, Sports or Games, Motors or Machines,

Gadgets or Robots, Team skills or Leadership skills, Life skills or Management reflect such Intelligences.

Goal of Education Redefined — Discovering Talent

A child in whom the creator has gifted one of these right-brain skills may not even recognize it himself unless given an opportunity. Fortunately, many children zero in on their natural aptitude like a 'housefly to honey'. If that passion in the particular child is cleverly identified by a Teacher, he will not lose his way in school. In fact, in doing so, the teacher is throwing him a Life-line for success in life.

Discovering talents in a school child through deliberate and focused observation by a sensitized Teacher can help the child to develop his special God-given skill, determine a vocation, nurture success in life and grow up to be a useful citizen.

That must become the redefined Goal of Education.

Redefined goals – 'NATIONAL ACTION PLAN'

A National response to the Problem of Poor School Performance (PSP) including Dyslexia is lacking in India. Barriers to this response include lack of awareness among government agencies, policy makers of Education Boards, teachers and parents. These monumental issues cannot be addressed except through a structured 'National Action Plan'. This Action Plan in the Educational sector has to start with Educational Reforms, Teacher Training as well as Staff Development.

Multi-disciplinary Approach

Within the Health Sector, Child Guidance Clinics with a Multi-disciplinary Approach seems to be the answer. Unlike in Adults, children tend to have an overlap of

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Learning Disorders require legislation as Special Educational Needs under the Persons with Disabilities Act.

Developmental, Neurological, Academic and Emotional Disorders – at the same time, in the same child.

In this path-breaking initiative at Cochin, the Team comprises of Clinical and Educational Psychologists, Social Workers, Special Educators, Language Pathologists, Neurologists and Psychiatrists, all under the same roof.

The Setting

This Teamwork in the open setting of a Child Guidance Clinic (CGC) encourages children and their parents to walk in and seek help for Learning Problems, Emotional difficulties or Poor School Performance (PSP) without fear or stigma.

Our Schools also must have access to an authentic 'Resource Centre' with various specialists where they can confidently seek an expert opinion about the child's performance in order to help him.

conclusion : bridging the gap — Strategies for School Services

Learning Disorders (Dyslexia) require legislation as Special Educational Needs (SEN) under the Persons with Disabilities Act (PWD Act). Neither the Indian Parliament nor the Rehabilitation Council of India (RCI) have considered this as a Disability yet, inspite of Expert Committee recommendations, vociferous advocacy by NGOs and the Salamanca Statement (UNESCO – 1994) – thus depriving Dyslexic children of their rightful provisions for rehabilitation.

Central Board of Secondary Education (CBSE) and Special Educational Needs (SEN)

Our country has made significant strides in the areas of Teacher sensitization and Provisions for Dyslexic

Children through the determined efforts of CBSE. This Board has taken pioneering steps by organizing Teacher Training Programmes, by publishing Hand Books for Teachers as well as introducing bold initiatives in Curriculum Alternatives and Examination Provisions.

Development of Grade Appropriate Resource Packages, Teaching Aids, Resource Materials and Low-Cost Resource Rooms (RR) in schools need to be high on the agenda for an Education Board. Creation of a Pool of Remedial Teachers and Resource Room Specialists to work in mainstream schools can be done effectively through legislation strategies.

Advocacy and Networking to create awareness among Teachers, Parents and Children with Special Needs is a priority. Establishment of a Multidisciplinary Resource Centre such as the Child Guidance Clinic (CGC) at least in every district can revolutionize services for children with Special Educational Needs (SEN).

Creation of a Pool of Remedial Teachers and Resource Room specialists to work in mainstream schools can be done effectively through legislation strategies.

Profile

Dr. Philip John



- Graduated in Medicine from Trivandrum Medical College and holds MD in psychiatry from the National Institute of Mental Health and Neuro Sciences (NIMHANS), the premier institution for Neuro Sciences in India. He has had a brilliant academic career, including the first rank in SSLC in the entire state of Kerala in 1967.
- Dr. Philip is a Senior Consultant in Psychiatry in Kerala, India for the past 20 years. He pioneered the shifting of Psychiatry out of mental hospitals into mainstream Medicine, to make it a popular polyclinic-out patient service.
- His thesis was in Child Psychiatry and he was instrumental in setting up the Child Guidance Clinic at Cochin – a national level resource center for Dyslexia, Learning and Behaviour Disorders in Children. He serves as an Expert in this field. The CBSE published for its Schools and Teachers 'The Handbook of Poor School Performance' authored by Dr. Philip John and his team.
- He is frequently interviewed by the Media in India on professional topics and has regularly presented papers in National and International Conferences. An erudite speaker, he is also widely traveled. He has edited a reference book in Psychiatry, and authored chapters on Child Psychiatric Disorders in two Pediatrics reference books published by the Indian Academy of Pediatrics,. He recently co-authored the chapter on 'Depression in the Elderly', edited by Dr.D.Rosenblatt of the Department of Geriatrics, University of Michigan, USA. He has authored

the chapter 'Psychological co-morbidity in LD', in a book edited by Dr. Pratibha Karanth.

- An invited chapter 'Dyslexia in India' was authored by Dr. Philip John and his Team for the 'INTERNATIONAL BOOK OF DYSLEXIA' published by the prestigious publishers John Wiley & Sons, London.
- Dr. Philip John has held senior positions in Professional organizations and is a fellow of the Indian Psychiatric Society and Member of the American Psychiatric Association. He was the President of the Indian Medical Association (IMA) at Cochin for 2 years, Chairman of State AIDS Committee, Founder Trustee of the IMA Blood Bank, Cochin, Founder Trustee of the Society for Organ Retrieval and Transplant (SORT) at Cochin, Expert, Amendment Committee of Disabilities Act, Government of India etc.
- In Clinical practice, his areas of interest are Behaviour and Learning disorders in Children.
- Now he is also the Consultant in Child & Adolescent Psychiatry at the Specialist Medical Centre, Dubai, UAE and is in the process of setting up multidisciplinary services for children in the Middle-East.



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