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UNDERSTANDING DISABILITY THROUGH LIVED EXPERIENCES: DETAILED CASE STUDIES FROM AN INCLUSIVE SCHOOLS IN KASHMIR

Showkat Rashid Wani[1]
Ishrat Mohmad[2]
Humara Khurshid[3]

Abstract

Inclusive education, as envisioned in the National Education Policy (NEP) 2020 and mandated by the Rights of Persons with Disabilities (RPwD) Act 2016, emphasizes equitable participation, individualized support, and barrier-free learning environments for children with disabilities. However, the gap between policy intent and ground realities remains significant, particularly in resource-constrained contexts such as Jammu and Kashmir. This study presents five detailed qualitative case studies of children with diverse disabilities—Spina Bifida, Cerebral Palsy, Autism Spectrum Disorder, Hearing Impairment, and Dyslexia—enrolled in mainstream schools across urban and rural regions. Data were gathered through in-depth interviews, classroom observations, and interactions with teachers, parents, and resource personnel. The cases reveal recurring challenges including infrastructural inaccessibility, limited teacher preparedness, insufficient assistive support, inconsistent classroom accommodations, peer insensitivity, and emotional stress experienced by children and families. Simultaneously, the narratives highlight examples of teacher empathy, peer collaboration, parental resilience, and the transformative potential of resource teachers. Cross-case analysis identifies five major themes shaping inclusive education outcomes: physical accessibility, pedagogical adaptation, emotional wellbeing, peer relationships, and institutional readiness. Findings underscore the need for systematic teacher training in special pedagogy, school-wide sensitization programs, structured Individualized Education Plans (IEPs), accessible infrastructure, and stronger policy implementation mechanisms. The study concludes that meaningful inclusion requires not only enrollment but sustained, coordinated efforts across schools, families, and policy frameworks.

[1,] Associate Professor, Directorate of Distance Education, University of Kashmir
[2,3] Research Scholars, Department of Education, University of Kashmir.

These case studies provide evidence-based insights to inform educational reform, strengthen inclusive practices, and promote the dignity and participation of children with disabilities in mainstream schooling.
Keywords: Disability Studies; NEP 2020; RPwD Act; Spina Bifida; Cerebral Palsy; Autism Spectrum Disorder

Introduction

Inclusive education has emerged as a central pillar of contemporary educational reform in India, reflecting a paradigm shift from segregation to full participation of children with disabilities in mainstream schooling. The National Education Policy (NEP) 2020 reaffirms this commitment by advocating barrier-free access, flexible curricula, differentiated instruction, and the meaningful integration of learners with special needs within regular classrooms. Complementing this vision, the Rights of Persons with Disabilities (RPwD) Act 2016 mandates non-discrimination, reasonable accommodation, and equal opportunities for children with disabilities, positioning inclusion not merely as a pedagogical preference but as a legal and moral imperative.

Yet, despite progressive legislative and policy frameworks, the lived experiences of children with disabilities often diverge from these ideals. Particularly in regions such as Jammu and Kashmir—characterized by geographic constraints, infrastructural limitations, and uneven distribution of educational resources—the implementation of inclusive education remains inconsistent. Schools frequently struggle with inadequate physical accessibility, limited assistive technologies, minimal teacher training in special pedagogy, and insufficient availability of resource personnel. Moreover, social factors such as peer attitudes, stigma, and community perceptions continue to shape the day-to-day experiences of children with disabilities in profound ways.

Understanding these complex realities requires moving beyond broad policy statements and statistical indicators to closely examine the granular, everyday experiences of children navigating inclusive school environments. Case studies serve as a powerful methodological tool in this context, offering nuanced insights into the interactions, emotions,

challenges, and coping strategies that define inclusion as it unfolds in real settings. Through detailed narratives, they illuminate the interplay of structural, pedagogical, and socio-emotional factors that facilitate or hinder effective inclusion.

This paper presents five qualitative case studies of children with diverse disabilities—Spina Bifida, Cerebral Palsy, Autism Spectrum Disorder, Hearing Impairment, and Dyslexia—studying in mainstream schools across urban and rural areas of Kashmir. By exploring their personal journeys, school interactions, family involvement, and the institutional responses of teachers and administrators, the study seeks to understand how inclusion functions in practice. These cases not only reveal systemic gaps but also highlight instances of resilience, empathy, and adaptive pedagogy that contribute to meaningful participation.

Through these narratives, the paper aims to bridge the gap between policy aspirations and ground-level realities, offering evidence-based insights that can inform future reforms, teacher training, school readiness, and the creation of genuinely inclusive learning ecosystems.

Methodology

This study employed a qualitative, case study–based research design to explore the lived experiences of children with disabilities in inclusive schools across different regions of Kashmir. The aim was to generate rich, context-specific insights into how inclusive education unfolds within real classroom settings, and to identify the interplay of personal, pedagogical, and institutional factors shaping these experiences.

Research Design

A multiple case study approach was adopted, enabling in-depth examination of individual learners while also allowing cross-case comparison. Five children with diverse disabilities—Spina Bifida, Cerebral Palsy, Autism Spectrum Disorder (ASD),

Hearing Impairment, and Dyslexia—were purposefully selected to capture a broad spectrum of needs, challenges, and support systems

commonly encountered in inclusive educational environments.

Sampling Strategy

Purposive sampling was used to identify participants who met the following criteria:

- Enrolled in a mainstream (government or private) school
- Diagnosed with a disability recognized under the RPwD Act 2016
- Receiving some form of educational support (formal or informal)
- Accessible to the researcher for multiple interactions

The sample included:

- 1 child from a private inclusive school in Srinagar
- 2 children from urban private schools with partial inclusion
- 2 children from rural government schools with limited inclusion structures

This diversity enabled examination of inclusion across socio-economic and institutional contexts.

Data Collection Methods

Four complementary qualitative methods were employed:

1. In-depth Interviews

Semi-structured interviews were conducted with:

- Each child participant
- Parents or primary caregivers
- Class teachers
- Resource teachers or special educators
- School administrators (where relevant)

Interviews explored academic experiences, emotional well-being, peer interactions, teacher support, infrastructural accessibility, and family engagement.

2. Classroom Observations

Multiple observation sessions were carried out during:

- Regular classroom teaching
- Group activities
- Games periods or outdoor sessions
- Transition times (movement between classes, breaks, etc.)

Observations focused on participation, interaction patterns, accessibility barriers, teacher strategies, and peer responses.

3. Document Review

Where available, the following documents were examined:

- Individualized Education Plans (IEPs)
- School support records
- Assessment reports
- Teacher reflections
- Medical or psychological evaluation reports provided by families

4. Home Visits

Home visits were conducted for three participants to understand:

- The caregiving environment
- Parental expectations and challenges
- Family-school communication patterns
- Accessibility issues related to transportation and daily routines

Data Analysis

Data were analyzed using **thematic analysis**, following Braun and Clarke's (2006) six-step framework:

1. Familiarization with data
2. Generating initial codes
3. Identifying themes
4. Reviewing themes
5. Defining and naming themes
6. Producing the final narrative synthesis

Themes emerged around:

- Physical accessibility
- Pedagogical adaptation
- Peer acceptance and stigma
- Emotional resilience
- Role of parents
- Institutional readiness

These themes informed both individual case narratives and cross-case analysis.

Ethical Considerations

The study adhered to ethical standards required for research involving minors:

- **Informed consent** was obtained from parents/guardians, and assent from children.
- Names of children, schools, and teachers were anonymized to protect confidentiality.
- Participation was voluntary, with the right to withdraw at any time.
- Sensitive information was handled with care, ensuring dignity and respect for all participants.

Limitations

Key limitations include:

- Small sample size, limiting generalizability
- Reliance on self-reported data from children and teachers
- Variation in school environments, making uniform comparisons difficult

Despite these limitations, the depth of qualitative insights offers valuable evidence for understanding inclusive education in the Kashmiri context.

Case Study 1: Experiences of a Child with Cerebral Palsy in an Inclusive Government School

Background of the Child

Aamir, a 10-year-old boy studying in Class 5 in a government middle school in Budgam, has spastic cerebral palsy affecting his lower limbs and fine-motor coordination. He walks with the support of a walker and struggles with writing speed and hand control. His speech is slightly slurred, but he communicates effectively. Aamir lives with his grandparents and mother, who is a single parent working as a tailor.

Despite his disability, Aamir is curious, bright, and passionate about mathematics. His inclusion in school is highly dependent on the school environment, teacher sensitivity, and infrastructural conditions.

Method of Data Collection

- Structured interview with Aamir
- Interviews with two teachers and the school head
- Observation during classroom instruction and recess
- Home visit to understand caregiving context

Case Narrative

1. Classroom Participation and Academic Adjustments

Aamir sits at a modified desk with raised height to accommodate his walker. His class teacher describes him as:
"He learns quickly, but writing is difficult for him. I allow him to answer orally during class tests."
Because of his difficulty in handwriting, Aamir is allowed extra time during exams and occasionally dictates answers to a scribe arranged by school staff.
Aamir says:
"I can solve sums faster than many, but writing them takes me a long time. I wish my hand listened to me the way my mind does."
His mathematics performance is high, but written-language tasks slow him down. He receives individualized worksheets from the resource teacher twice a week, especially for writing practice and muscle strengthening.

2. Peer Support and Social Experience

Aamir shares:
"My friends help me carry my bag, and they wait for me when we go out. But sometimes they run fast in the playground, and I just watch."
Peers generally accept him, but the physical layout of play areas limits his participation. A few students mimic his walking pattern, which hurts him deeply. His best friend often accompanies him outside during recess, choosing indoor games so Aamir can participate.
The school has never conducted disability-awareness sessions, leaving misconceptions unaddressed.

3. Teacher Attitudes and Institutional Gaps

Teachers acknowledge that they try their best but lack training. The headteacher states:
"We want to support him, but we need an assistant or mobility aide. Only one resource teacher covers nine schools."
Infrastructure is minimal—no ramps, narrow corridors, and uneven school grounds make mobility tiring and unsafe for Aamir.

4. Emotional Wellbeing and Self-Perception

Aamir appears cheerful but sometimes expresses frustration:
"I want to run like others. But I am happy that at least I am in school."
His mother reports that he practices walking every morning, motivated to become "more independent."

Analysis and Implications

Aamir's experience highlights:

- The importance of adaptive assessments and alternative modes of writing
- The value of peer support, but also the need for formal sensitization programs
- The necessity of physical accessibility in government schools
- The emotional resilience children develop despite barriers

Case Study 2: Experiences of a Child with Autism Spectrum Disorder (ASD) in a Private Inclusive School

Background of the Child

Sara, an 8-year-old student in Class 3 at a private school in Srinagar, has been diagnosed with high-functioning Autism Spectrum Disorder. She has strong vocabulary, excellent memory, and a remarkable ability to recite long poems. However, she struggles with sensory sensitivity, social communication, group tasks, and sudden routine changes.
Her parents enrolled her in an inclusive school believing structured classrooms would support her learning and reduce social isolation.

Method of Data Collection

- Two interviews with Sara's parents
- Interviews with the class teacher and special educator
- Classroom observation during group activities
- Analysis of her Individualized Education Plan (IEP)

Case Narrative

1. Classroom Learning and Sensory Challenges

Sara excels in reading and vocabulary-based tasks but becomes distressed by loud noises, sudden announcements, or crowded spaces. Her class teacher shares:
"If the class gets noisy, she covers her ears and starts crying. We allow her to go to the resource room to calm down."
Her IEP includes:

- Visual schedules
- Breaks between tasks
- Reduced homework
- Sensory corner visits

Sara says:
"I like when things happen slowly. When everybody talks at once, I feel like my head is full."
Her handwriting is neat, but she dislikes group projects, preferring to work alone.

2. Peer Interactions and Social Difficulties

Sara wants friends but struggles to interpret social cues. She often

takes jokes literally and becomes anxious when classmates change games without informing her.
A boy in her class teased her by saying, "We don't want you on our team." She cried for days believing she was permanently disliked.
However, a small group of girls have become her support circle, patiently explaining tasks and inviting her for quiet games.
The resource teacher has initiated weekly social-skills training sessions for her.

3. Teacher Efforts and Limitations

The class teacher is supportive but says:
"I wish I had clearer training. Sometimes I don't know how to respond when she has a meltdown."
Sara's school is better equipped than many but still lacks:

- A trained shadow teacher
- Sensory-friendly classrooms
- Enough teacher training modules on ASD

4. Emotional Experience and Self-Awareness

Sara is highly self-aware. During an interview, she said:
"I know I am different, but being different is okay. I like my brain."
Her parents worry about the future, especially whether secondary school environments will be equally supportive.
Her emotional resilience is strong, but frequent anxiety episodes indicate the need for regular counseling.

Analysis and Implications

Sara's case underlines:

- The necessity of sensory-friendly learning environments
- Importance of predictable routines and visual supports
- Need for teacher training on ASD and shadow teachers
- Reinforcement of collaborative peer relationships
- Importance of social-skills interventions for long-term adjustment

Case Study 3: Experiences of a Child with Hearing Impairment in a Rural Government School

Background of the Child

Mehreen, a 13-year-old student in Class 8, lives in a remote village in Kupwara. She was diagnosed with moderate bilateral hearing impairment at age five. She uses a hearing aid in one ear, but the device often malfunctions due to battery issues and lack of local repair services. Mehreen communicates through a mix of spoken language and basic sign gestures taught by her mother.

Her school is not formally inclusive—there are no sign-language–trained teachers—yet the headmaster has been supportive and encouraged her enrollment.

Method of Data Collection

- Semi-structured interview with Mehreen
- Interviews with two teachers and the headmaster
- Observation during language and social science classes
- Home visit to understand socioeconomic context

Case Narrative

1. Classroom Experience and Academic Adjustments

Because of her hearing difficulty, Mehreen relies heavily on lip-reading. She sits in the front row in every class. Her English teacher explains:

"She is bright, but she misses half of what we say when the class gets noisy. We slow down when speaking, but we need training."

During observation, Mehreen repeatedly leaned forward to catch words but became anxious when instructions were too fast.

Mehreen says:

"I like studying, but when teachers turn their face to the board, I feel lost."

She completes written work with dedication but struggles with oral assessments. The school allows her extended time for tests and

accepts written responses instead of oral tasks.

2. Peer Interactions and Social Participation

Mehreen has a close friend, Sana, who acts as her informal interpreter. Sana often repeats instructions in simple words or gestures. Mehreen's peers generally include her but sometimes grow impatient during group work because of the effort required to communicate.
A few students mock her speech clarity, causing her to speak less in public. She admits:
"I don't talk much because some girls laugh when I pronounce wrong."
Despite this, she enjoys craft activities and excels in drawing competitions, where communication barriers matter less.

3. Teacher Efforts and Institutional Gaps

Teachers are empathetic but untrained in sign language or special strategies. The headmaster acknowledges systemic limitations:
"We want to support her, but without training, audio logical support, or a resource teacher, we do what we can."
The school lacks:

- Sound-treated classrooms
- Basic hearing-aid maintenance support
- Visual learning aids
- Trained special educators

Her progress largely depends on individual teacher sensitivity and peer goodwill.

4. Emotional Wellbeing and Resilience

Mehreen is introverted but emotionally strong. She says:
"I know I am slow in hearing, but I am not slow in learning."
Her self-confidence is rooted in strong family support, especially from her mother, who reinforces the value of education.

Analysis and Implications

Mehreen's case demonstrates:

- Need for teacher training in sign-supported instruction and basic rehabilitation communication
- Importance of visual and written instructions alongside oral teaching
- Critical requirement of functional, reliable hearing aids and support services
- Peer-sensitization programs to prevent stigma
- Use of multimodal teaching (gestures, pictures, written cues) to enhance learning in rural schools

Case Study 4: Experiences of a Child with Learning Disability (Dyslexia) in an Urban Private School

Background of the Child

Yusuf, a 9-year-old boy in Class 4 of a private school in Srinagar, was diagnosed with dyslexia after his parents noticed persistent reading and spelling difficulties. He reverses letters, struggles with phonological awareness, and reads below grade level. Despite these challenges, Yusuf has exceptional skills in art and spatial reasoning.
The school maintains an inclusive philosophy, but practical implementation is inconsistent.

Method of Data Collection

- Reading assessment and classroom observation
- Interviews with Yusuf, his parents, English teacher, and resource teacher
- Review of his academic records and previous support plans

Case Narrative

1. Reading and Writing Challenges

Yusuf explains his frustration:

"When I look at big words, they dance and jump. I try hard, but they don't stay still."
During reading tasks, he guesses words based on pictures rather than decoding them. His writing shows letter reversals (b/d, p/q),

inconsistent spacing, and phonetic spelling.
The English teacher says:
"He understands concepts but avoids reading aloud because he fears classmates will laugh."
The school has not yet adopted structured literacy programs, so Yusuf's progress depends primarily on the resource teacher.

2. Strengths and Talents

Yusuf is exceptional in art and visual tasks. He constructs complex models using Lego bricks and draws detailed landscapes with surprising accuracy. These strengths support his confidence.
His class teacher notes:
"If learning were all about creativity, Yusuf would be the topper."
Recognizing these strengths is essential for his emotional balance.

3. Peer Experience and Classroom Dynamics

Peers are generally kind, but some occasionally remark, "He reads too slowly," making Yusuf self-conscious. He often hides his notebook to avoid classmates noticing his spelling errors.
Group activities reduce his anxiety, especially tasks involving drawing or map-making. However, competitive reading activities trigger stress.
Yusuf admits:
"I feel scared when it's my turn to read."

4. Teacher Attitudes and School Support

The resource teacher works with him four days a week using multisensory techniques—sand tracing, phonics drills, flashcards, and comprehension building. She says:
"With the right techniques, Yusuf improves quickly, but the classroom pace is too fast for him."
The school lacks:

- Universal screening for learning disabilities
- A structured phonics-based reading program

- Formal accommodations such as reduced-copy work, oral assessments, and alternative evaluations

5. Emotional Wellbeing and Self-Esteem

Yusuf is sensitive and internalizes mistakes. His parents report that he sometimes says:
"Maybe I am not made for studying."
This highlights how academic struggles easily affect self-worth in children with dyslexia.

Analysis and Implications

Yusuf's case emphasizes:

- Urgent need for early screening for dyslexia
- Implementation of multisensory structured literacy programs
- Importance of accommodations such as extra time, reduced written load, and oral evaluations
- Recognition and nurturing of creative strengths
- Teacher training to eliminate stigma and promote supportive pedagogy

Case Study 5: Experiences of a Child with Spina Bifida in an Inclusive School

Background of the Child

Rabia, aged twelve, is enrolled in a private inclusive school in Srinagar. Diagnosed with Spina Bifida, she uses a wheelchair and requires catheter assistance twice daily. Her mother accompanies her to school every afternoon during the lunch break to support her needs—a role she performs with unwavering dedication.

Rabia is academically average, enjoys reading, and expresses a strong desire to participate in school activities. Yet, her participation is hindered by mobility barriers, peer attitudes, and infrastructural limitations. Her case epitomizes the intersection of disability, gender, and geographical constraints.

Method of Data Collection

The findings presented here are drawn from:

- an in-depth interview with Rabia
- conversations with her class teacher and resource teacher
- an interview with her mother
- classroom observations
- reflections from field visits as part of a longitudinal qualitative research project

Data were analyzed thematically to uncover patterns related to academic adaptation, peer relationships, teacher attitudes, parental involvement, and emotional wellbeing.

Case Narrative

1. Daily School Experience

Rabia begins her narrative by stating:
"I look very different from everyone. I cannot walk and roam around in school. I usually read books during games period because I cannot do much."
This simple expression captures the layered nature of her experience—physical limitation, emotional distance, and the silent adaptation she undergoes each day. Rabia's wheelchair restricts her movement across the campus, especially since the school lacks ramps, accessible toilets, and barrier-free entry in several blocks.
The games period becomes symbolic: a time meant for joy, but for Rabia, it becomes a reminder of exclusion. Yet she finds solace in reading, constructing a private world where limitations dissolve momentarily.

2. Academic Participation and Classroom Accommodations

Rabia sits in the front row to ensure easy access and teacher monitoring. Her class teacher acknowledges:

"Rabia is disciplined and sincere, but I often struggle to give her enough attention because the class is large. I wish we had more training to handle such needs."
Despite goodwill, the teacher lacks formal training in special pedagogy, a gap highlighted in NEP 2020, which emphasizes the need

for specialized modules and extended internships in inclusive schools.
Rabia reports that:
"Sometimes the teacher goes fast, and I cannot copy everything. My friend helps me finish the notes." Peer support partially compensates for the absence of individualized lesson pacing. The resource teacher works with her thrice a week, helping her with written assignments, comprehension difficulties, and exam preparation. Rabia describes this relationship warmly:
"My resource teacher listens to me. She tells me that I can do well in studies if I keep trying." This rapport strengthens her academic confidence and reinforces the importance of dedicated resource support in inclusive classrooms.

3. Peer Interactions: Acceptance and Insensitivity

Peers play a pivotal role in shaping the social climate of an inclusive classroom. Rabia's experience reflects both acceptance and hurtful encounters.
She recounts:
"Some girls help me move my wheelchair, but a few ignore me. Once someone called me 'the girl with wheels' and laughed."
Such remarks reflect the subtle yet damaging stigma that children with disabilities face. Although many classmates are kind, isolated incidents leave lasting emotional effects. Rabia admits:
"I feel bad when they talk like that. I wish they understood me better."
Peer insensitivity arises not from malice but from lack of awareness—a gap that peer-sensitization programs could effectively address.
Yet, Rabia has a circle of supportive friends who help her navigate the classroom, pass notebooks, accompany her during lunch, and provide emotional comfort. Their acceptance contributes profoundly to her wellbeing.

4. Emotional Experience and Self-Perception

Rabia's emotional world is sensitive and introspective. When describing herself, she says:
"I am not like other children. I feel left out when they run or play. But I know it is not my fault."

This balanced yet poignant statement reveals both vulnerability and resilience.

Feelings of isolation, especially during outdoor activities and school events, are recurrent. She expresses sadness about missing events held on the playground or upper floors. However, she compensates through academic engagement and creative interests.

Her mother observes:

"Rabia never complains. She has accepted her condition, but I worry that she hides her pain."

This highlights an important dimension: internalized emotional labor, where children mask their struggles to avoid burdening caregivers.

5. The Role of the Mother: Invisible Labour and Emotional Resilience

Rabia's mother is central to her schooling experience. She says:

"My mother comes to school every day during lunch break. She never complains. She says I am never going to be a burden."

This unconditional support is both practically essential and emotionally grounding.

For Rabia's mother, inclusion demands daily sacrifices—time, mobility, and psychological strength. She organizes her life around Rabia's needs and expresses the anxiety that accompanies each school day:

"Every morning I pray that she manages without problems. Her courage gives me courage."

Such parental resilience is rarely acknowledged in policy frameworks, yet it remains indispensable for inclusion, especially in high-need cases like Spina Bifida.

6. Teacher Attitudes and Institutional Gaps

Rabia's class teacher shows empathy but admits to limitations in training. The resource teacher is enthusiastic but overburdened, handling multiple students with varying disabilities. Both highlight the absence of:

- structured training in inclusive pedagogy
- adequate teaching aids
- assistant staff for high-need children
- infrastructural support such as accessible toilets and ramps

These gaps are systemic rather than individual shortcomings.
Rabia's school reflects a common situation in Kashmir: willingness but inadequate capacity.

Analysis of the Case

Rabia's experience illustrates several key dimensions of inclusive education:

1. Inclusion Requires More Than Physical Placement

Although Rabia attends a regular school, structural barriers (stairs, inaccessible washrooms, uneven grounds) restrict her participation. True inclusion demands architectural accessibility and universal design—not merely enrollment.

2. Teacher Preparedness Matters Immensely

The teacher's empathy is not enough without special training. NEP 2020 emphasizes sensitivity training, early identification, and continuous professional development—needs strongly highlighted by Rabia's experience.

3. Peer Sensitization is a Critical Determinant

Positive peer interactions enhance emotional wellbeing, while teasing undermines self-confidence. Structured programs on empathy, disability awareness, and collaborative learning can transform classroom dynamics.

4. Parental Involvement Sustains Inclusion

Rabia's mother plays the role of caregiver, assistant, advocate, and emotional anchor. Inclusion often relies heavily on such invisible labour, which schools must acknowledge and support through flexible schedules and caregiver involvement.

5. Resource Teachers are the Bridge between Policy and Practice

Rabia's progress is significantly attributed to her resource teacher, whose motivation compensates for systemic gaps. Schools need adequate numbers of trained special educators.

Cross-Case Discussion

Analysis of the five case studies reveals a set of recurring themes that shape the lived experience of children with disabilities in mainstream schools in Kashmir. Although the children represent diverse disabilities—Spina Bifida, Cerebral Palsy, Autism Spectrum Disorder, Hearing Impairment, and Dyslexia—their narratives converge around common structural, pedagogical, social, and emotional dimensions. These cross-case patterns highlight both the strengths and limitations of inclusive practices within the current educational ecosystem.

1. Physical Accessibility as a Foundational Barrier

Across cases, the first and most visible barrier to inclusion is inadequate infrastructure:

- Absence of ramps, accessible toilets, and barrier-free entry affected Rabia (Spina Bifida) and Aamir (Cerebral Palsy).
- Noise-filled classrooms and lack of visual supports hindered Mehreen (Hearing Impairment).
- Limited sensory-friendly spaces aggravated anxiety for Sara (ASD).

Despite varying disabilities, none of the schools fully met the infrastructural expectations mandated by RPwD Act 2016, underscoring a systemic implementation gap. Accessibility remains dependent on individual adjustments rather than institutional readiness.

2. Teacher Preparedness and Pedagogical Adaptation

Teachers across all cases demonstrated empathy but lacked formal training in special education. This led to inconsistent accommodations:

- Rabia's teachers struggled with individualized pacing.
- Aamir's teachers relied on oral assessments due to his handwriting difficulty.
- Sara required structured routines and sensory supports that teachers were uncertain how to provide.
- Mehreendepended entirely on teacher speech clarity and positioning.
- Yusuf's teachers lacked exposure to structured literacy approaches for dyslexia.

These cases show that empathy cannot compensate for the absence of training. Teachers often "did their best," but without knowledge of disability-specific strategies, their support remained fragmented and reactive.

3. The Pivotal Role of Resource Teachers

In all cases where resource teachers were involved, they significantly improved educational participation:

- Rabia's academic confidence was rooted in her interactions with her resource teacher.
- Aamir and Yusuf showed progress when guided through multisensory methods.
- Sara benefited from a structured IEP and emotional regulation support.

However, availability was inconsistent—many schools shared a single resource teacher across multiple institutions. This resulted in overburdening and reduced quality of support, indicating the need for stronger staffing norms and workload regulation.

4. Peer Relationships: Inclusion through Social Climate

Peer interactions emerged as one of the most powerful determinants of emotional wellbeing:

Positive patterns

- Supportive classmates helped Rabia maneuver her wheelchair and assisted Aamir with mobility.

- Sara's small peer group provided empathy and stability.
- Yusuf's peers appreciated his artistic strengths.

Negative patterns

- Teasing and mimicry caused lasting emotional hurt (Rabia, Aamir, Mehreen, Yusuf).
- Misunderstanding of autism-specific behaviours contributed to Sara's social anxiety.
- Slow readers and differently abled students were often stigmatized.

These patterns indicate that peer sensitization is either absent or inadequate. Without structured awareness programs, stigma continues to emerge organically in classroom cultures.

5. Emotional Resilience and Hidden Struggles

All five children demonstrated remarkable emotional strength, yet also internalized significant distress:

- Rabia suppressed feelings to avoid burdening her mother.
- Aamir expressed longing to run like others but maintained hope.
- Sara was highly self-aware but suffered from anxiety during sensory overload.
- Mehreen avoided speaking to prevent ridicule.
- Yusuf experienced reduced self-esteem due to reading difficulties.

A recurring theme across cases was the silencing of emotional pain—children seldom expressed distress openly, often attempting to "fit in" despite exclusionary experiences. This highlights a largely unmet need for school-based counseling and socio-emotional support.

6. Centrality of Family Support

Families played an indispensable role in enabling schooling:

- Rabia's mother provided daily physical assistance.
- Aamir's mother and grandparents ensured therapy and motivation.

- Sara's parents maintained consistent routines across home and school.
- Mehreen's mother ensured hearing-aid maintenance in a resource-poor context.
- Yusuf's parents advocated for academic accommodations.

These examples reveal that inclusion in Kashmir is often family-driven rather than institution-driven, making parental commitment a critical but unequalizing factor.

7. Inclusion as a Continuum, Not a Binary

The cases collectively demonstrate that inclusion is not simply about enrolling children with disabilities in mainstream schools. Instead, it represents a continuum of participation, shaped by:

- Accessibility
- Instructional adaptation
- Emotional safety
- Peer acceptance
- Institutional commitment

While some schools displayed encouraging practices, none provided a completely inclusive environment. Inclusion remained partial, functioning more effectively for children with mild-to-moderate needs (Dyslexia, mild Cerebral Palsy) than for those requiring higher levels of support (Spina Bifida, ASD, Hearing Impairment).

8. Policy-Practice Gap

Despite strong policy frameworks (NEP 2020, RPwD Act 2016), implementation barriers were visible in all five cases:

- Lack of IEPs in government schools
- Absence of disability-specific teaching aids
- Irregular availability of resource teachers
- Limited monitoring of accommodations
- Minimal teacher training modules

The cases underscore that policy awareness exists, but policy operationalization remains limited, especially in rural schools.

Synthesis

The cross-case synthesis shows that the success of inclusive education in Kashmir is shaped by:

- Human factors (teacher empathy, parental resilience, peer attitudes)
- Structural factors (infrastructure, staffing, training)
- Cultural factors (stigma, awareness)

Together, these reveal that inclusive education is a multi-layered process requiring systemic reform rather than isolated interventions.

Implications for Practice and Policy

Findings from the five case studies highlight several critical implications for strengthening inclusive education in Kashmir and similar contexts. These recommendations address gaps identified across infrastructural, pedagogical, administrative, and socio-emotional domains.

1. Strengthening Teacher Training and Professional Development

Teacher preparedness emerged as one of the most important determinants of meaningful inclusion. Schools and government bodies should:

- Introduce mandatory modules on special pedagogy in pre-service and in-service teacher training.
- Offer disability-specific workshops covering cerebral palsy, autism, hearing impairment, learning disabilities, and mobility challenges.
- Expand the role of DIETs/SCERT in providing regular training on IEP development, differentiated instruction, and classroom accommodations.
- Promote mentorship programs where trained special educators guide general teachers.

Such training will help teachers shift from intuition-based support to evidence-based inclusive practices.

2. Enhancing Infrastructure and School Accessibility

Accessibility remains a structural barrier for most children with physical, sensory, or mobility challenges. Schools must:

- Construct ramps, accessible toilets, and barrier-free pathways in all blocks.
- Create sensory-friendly classrooms or quiet rooms for children with ASD.
- Install visual aids, sound-absorption materials, and speaker systems to support learners with hearing impairment.
- Ensure emergency evacuation plans that accommodate children with disabilities.

Government schemes such as SAMAGRA Shiksha should allocate dedicated funds for disability-friendly infrastructure.

3. Strengthening Resource Teacher Deployment

Resource teachers play a central role in bridging policy and practice. To improve support:

- Reduce the student-to-resource-teacher ratio, especially in rural clusters.
- Ensure regular availability of resource teachers in each school.
- Equip resource rooms with assistive devices (communication boards, multisensory materials, phonics kits).
- Encourage collaboration between resource teachers and class teachers to co-develop IEPs.
- Regular monitoring can prevent uneven access and ensure accountability.

4. Prioritizing Emotional and Psychological Support

Children in all five cases experienced anxiety, distress, or emotional isolation. Schools should:

- Appoint school counselors or partner with trained psychologists.
- Conduct weekly socio-emotional learning (SEL) sessions focusing on empathy, self-regulation, and peer acceptance.

- Provide individual and group counseling for children with disabilities.
- Establish safe reporting mechanisms for bullying and teasing.

Mental health support must be seen as an integral component of inclusive education.

5. Peer Sensitization and School Culture Reform

Peers significantly influence inclusion. To foster an inclusive school climate:

- Conduct regular disability-awareness programs.
- Implement buddy systems pairing students with and without disabilities.
- Integrate cooperative learning models where group work promotes shared responsibility.
- Use school assemblies, art activities, and storytelling to normalize disability as part of human diversity.

Building an empathetic peer culture reduces stigma and encourages acceptance.

6. Strengthening Home–School Collaboration

Families compensate for institutional gaps. Schools should:

- Involve parents actively in IEP planning and progress reviews.
- Provide training on home-based support strategies.
- Maintain consistent communication to track daily needs and challenges.
- Recognize parental labour—especially for high-support-needs children—and offer flexibility in procedures.

Inclusive education thrives when school and family form a collaborative partnership.

7. Policy Monitoring and Implementation

To close the policy–practice gap:

- Strengthen implementation oversight of RPwD Act standards in all schools.

- Ensure equitable distribution of special educators across districts.
- Introduce disability audits at school and district levels.
- Encourage research and documentation of inclusion practices to inform future reforms. Effective monitoring ensures that inclusion moves beyond rhetoric into measurable reality.

Conclusion

The five case studies presented in this study provide a rich, ground-level understanding of how inclusive education operates within mainstream schools in Kashmir. While the children differ in their disabilities, backgrounds, and school environments, their shared experiences reveal a consistent pattern: inclusion is often upheld by individual goodwill—of teachers, families, or peers rather than systemic readiness.

Despite progressive policies such as NEP 2020 and the RPwD Act 2016, significant gaps persist in infrastructure, teacher training, resource availability, and school culture. These gaps manifest in restricted participation, inconsistent accommodations, emotional distress, and reliance on parental labour. Yet, the cases also highlight resilience, empathy, and commitment—qualities that illuminate the transformative potential of inclusive education when supported appropriately.

True inclusion requires more than physical placement in mainstream schools; it demands regular professional training, accessible environments, supportive peer cultures, strong home–school partnerships, and continuous policy implementation. When these components align, schools become not only academic institutions but nurturing spaces where every child—irrespective of disability—can learn, grow, and participate with dignity.

In conclusion, inclusive education in Kashmir stands at a critical junction. The foundations have been laid through policy frameworks, but the journey toward full participation requires sustained, coordinated, and compassionate effort. These case studies serve as evidence and inspiration, urging policymakers, educators, and communities to commit to building an educational ecosystem where inclusion is not the exception, but the norm.

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