# Abstract: A New Model of Inclusive Education in Cameroon

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The present model of inclusive education of visually impaired students in Cameroon emphasises *social* inclusion. After spending two to four years learning braille in a resource room whose curriculum has not been conformed to Cameroon’s National Curriculum, students are totally immersed in mainstream classes. They are socially present, but they cannot participate fully in class activities, because they lack the necessary skills and tools for true *academic* inclusion. Visually impaired students need:

* Concept development in early childhood, so they can participate in the everyday world
* Mobility training, so they can navigate safely in school and at home
* Functional literacy—the ability to read, write and take notes fast enough to keep up with sighted peers
* Type exams and other work, obviating the need to translate work from braille to print

Equipment (textbooks, handframes, typewriters etc)

These skills must be acquired in the resource room, because the regular school day does not afford opportunities to acquire them. The challenge is how to provide these skills, while simultaneously ensuring that visually impaired students participate in regular classes.

The following model can address both needs.

1. An early childhood program will teach concept development through practical experiences.
2. Resource and classroom teachers will cooperate to provide a gradual framework of inclusion, with the criterion that students will join a given regular class as soon as they demonstrate the skills to function independently there.
3. Primary Years 1-3: intensive braille reading, writing and maths, with integration in two to three subjects by the third year.
4. Years 4-6: advanced resource room training in note taking, English composition, typing and elementary computer access, with full integration by year 6.
5. Resource teachers' skills will be upgraded accordingly.
6. A full-time staff of transcribers will b formally trained inbraille transcription and use of braille translation software.
7. The residential resource model will be retained, to provide centralised optometric and other rehabilitation services, because these services cannot be uniformly provided throughout the service area.