

CONDUCTIVE
★ COLLEGE ★

JOURNAL

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NICE – Centre for Movement Disorders

Transforming the lives of children and adults with incurable movement disorders.

Registered charity number: 295873.

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For experienced conductors

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10 January

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7 February

Developing your management style to enable success

7 March

Revisiting the group as the social basis for learning

18 April

Re-evaluating the daily routine as tool for learning

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For newly qualified conductors or those with less than 5 years experience

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13 October

Communicating and utilising outcomes; recording change and progress

10 November

What next? Reviewing the CPD plan and developing expertise

For more information email tkinnersley@conductive-education.org.uk

★ EDITORIAL ★

Dr. Theresa Kinnersley

This academic year serves to mark the 35th Anniversary of the Foundation for Conductive Education, the Charity name of NICE Centre for Movement Disorders, and the 5th Edition of the Conductive College Journal.

Whilst 2022 continues to be a year of turmoil, through it all conductors strive to make a positive difference to the lives of children and their parents, adults and families.

In this Edition, we gain insight from conductors as they reflect on their own learning journeys. Marking the 35 year Anniversary, we begin with a personal record by Dr Melanie Brown, written in 2018, in which she documents her journey from Budapest to Birmingham as one of the first cohort of Petö-trained British Conductor- Teachers. From a different perspective, Annamaria Berger-Jones uses her EdD experience to document and reference articles 'hidden' from non-Hungarian speakers with a view to enabling access to the 'beginnings' of CE through a previously inaccessible lens.

Brittany Jennings and Lucy Barraclough both adapt their MA assignments to reflect upon the role of the conductor within a practice based context; Brittany takes time to reflect upon the transformative nature of conductive practice, and the potential of the conductor to impact learning, whilst Lucy examines communication skills and reflects upon conductors' experiences of using AAC with primary school-aged children.

Fiona Holroyd revisits an UG assignment written as a second year, in which the group as a tool for teaching is explored, whilst Reka Simandi also reflects upon her UG dissertation in which she used an Action Research data collection method to enhance the online experience of families attending a P&C service.

For myself, reflecting upon the Conductive College training and CPD developments over the year, presentations by myself and colleagues at the 11th World Congress on CE as well as discussions with conductors at the PCA workshop this month, it is heartening to see that conductors are reviewing history, reflecting on the theory and questioning practice in both professional and personal ways that serve to support and enable the development of CE as a profession.

If we truly believe that CE is a transformative pedagogy, and that we ourselves can effect change, then surely we need to continue discussing, sharing and writing about what we are doing, and the impact of this upon our practice, our teams and ourselves.

If CE is to continue to consider itself a 'Profession' then we all need to add to the body of knowledge upon which our practice is informed..... so Thank You for reading BUT please share with colleagues and others, and consider how you too will continue to develop your knowledge and practice over the coming 12 months.

Dr Theresa Kinnersley
November 2022

★ REFLECTIONS ON A JOURNEY ★

A UNIQUE JOURNEY

Birmingham – Budapest – Birmingham

Dr Melanie Brown

Introduction

In 1986 The Foundation for Conductive Education was established as a charity in the UK for the sole purpose of bringing Conductive Education services and training to the UK, for the benefit of children and adults with motor disorders.

The charity was the brain child of Dr Andrew Sutton, a psychologist from the University of Birmingham specialising in Eastern European Studies. Andrew worked with Dr Hári to set up an agreement to train UK teachers as conductors on the four year course at the Petö Institute. Interest in CE had grown hugely following a documentary screened on the BBC on 1st April 1986 called “Standing up for Joe”. This documentary, coupled with Andrew Sutton, parents who formed a group called Rapid Action for Conductive Education (RACE) and the Petö Institute, made the rest of this journey possible. Since that time thousands of families have accessed CE in the UK thanks to these people.

My Background

My journey started in 1987 when I was Head of Physical Education in a Special School near Birmingham, UK. I instinctively knew that I needed more training to understand the needs of my pupils and began looking for possible opportunities to develop my own professional skills.

At this time I had no idea what was available or indeed possible and one day came across an advert in the Birmingham Evening Newspaper for ‘teachers’ to go to Hungary to study something called ‘Conductive Education’. I applied for this, knowing very little about Conductive Education and in the days before Google or the internet!

It was a lengthy interview process over a period of 2 days. The main reason for this was that none of us knew what Conductive Education was and what training in this field would involve. The weekend was interesting and we met with some families who had taken their children to the Petö Institute. They were very excited about this system and all of us were keen to be accepted onto the training course. This was the start of the Foundation for Conductive Education’s journey to bring CE to the UK and make it available for families here. I was very naïve about the impact this role would have on me, my colleagues, our families, and now looking back the world of CE. However I was lucky enough to be accepted and along with 7 others (later 9 others) gave up our jobs, homes, left our family and friends and travelled to Budapest to start a new chapter in our lives.

In October 1987 we attended an International Course on CE alongside other professionals from the UK. I still remember how jealous they were at the end, knowing that we were soon to enrol to train to be conductors. It has to be understood that at this time CE was not well known in the UK. Ester Cotton had set up some

short training courses but these were few and far between, and did not qualify anyone to become a conductor. The provision of CE in the UK, via Ester Cotton, was very controversial at this time, and the creation of the Foundation for Conductive Education and the full training of conductors added to this 'dispute'.

Early Memories

In January 1988 I started my 'official' conductor training. The journey started at Heathrow Airport, with the press, cameras and 10 British children and their families who came with us for the first six months. It was a media circus the likes of which I started to become used to. I think at that point I started to realise that this was no 'ordinary' training course and how right was!!

I believe we were all shocked when we first saw the Petö Institute and the long flight of steps! In the UK this would have been ramped and made 'disabled' friendly. We witnessed young children climbing the stairs to go to school, and families arriving early to give the child the time to do this. I also recall seeing children sitting on small stools holding huge apples in their hands and eating away quite happily! These were not scenes I would have seen in the UK Special Schools. There was an air of optimism at the institute, a 'buzz' of happiness and movement. My first impressions never left me. The first memory I always still tell is of Dr Hári talking to us and telling us "if someone doesn't learn it's your fault"! It was only many many years later that I realised the true impact and freedom of this statement, and the power of pedagogy.

So the start of our training had a huge impact. To be honest it rocked my world, in that all that I thought I knew was challenged. The whole concept of 'disability' blown apart and I had to 'unlearn' more than I learnt in my first two years or so of my conductor training. It challenged me professionally and personally and I was knocked down and rebuilt over a period of four years. There were times when

I could not understand what was happening to me as a teacher, why I felt so challenged but I went with it. There were times when I was so confused I couldn't challenge what I was learning. Looking back, these years were the making of me as a professional; the time when I started to see humanity in a different way, started to understand what human beings are capable of with the right support and teaching, but I would not be telling the truth if I said it was all easy! As a group of UK teachers we were all challenged in different ways and each journey was very individual. 10 of us started the training and only 5 qualified at the end. It is almost impossible to share group experiences as each one of us had a different starting point and a different personal journey. Suffice to say that we all 'changed' in very many different ways.

Living in Budapest

I also faced other challenges culturally. At the time of arriving in Budapest there was very little English spoken. I knew no Hungarian! Even shopping for food was an exploration. In my first few months there I 'found' a dog on the streets. I adopted her (later to be called Zsuzsika) and needed to feed her. I couldn't find anything in the shops which resembled dog food so I studiously looked in my dictionary and found 'kutya' (dog) and 'hús' (meat). I caused uproar in the local butcher asking for 'kutya hús' - the butcher through sign language told me they had 'pig', 'cow' and 'chicken' but no dog! I did resolve this in the end and my dog lived happily with me in both Hungary and the UK for 14 years.

My language problems were also more serious than that. A great deal of our working week was in group practice. We had lectures on a Friday and the rest of the week was taken with 32 hours of practice. My first group leader was Anikó Salga. She was lovely and tried so hard to communicate with us but the children of course didn't understand any English. I was working with a young boy with athetosis who was saying something to me. I had already started the

process of trying to learn some Hungarian and could say 'nem értem' "I don't understand". This little boy kept saying the same thing to me, I kept saying 'nem értem' and eventually with a huge deep breath he started crying and had an 'accident'. He had been asking me to have a potty and thought I couldn't understand him because of his speech problem not because I was stupid and didn't understand Hungarian. From that day on I vowed to learn Hungarian. I found an amazing teacher who spoke no English and had the patience of a saint - Zsuzsá Rác - who became a very good friend and in her memory I am proud to say that I remain fluent in Hungarian 30 years later.

Life in Budapest was not always easy, but over the years I made so many special friends there, and it is true to say that a part of me never left in 1991. A critical part of my learning process was to explore and embrace Hungarian culture, to understand the roots of this system socially and to try and work out what was Hungarian and what was CE. I don't know if I have ever truly distinguished the two things!

My Conductor Training

So, what did I learn? It is hard to know where to start. I guess, in those days especially, the majority of learning was in practice. I copied, sometimes badly, I followed other conductors and gradually started to learn how to facilitate in a way which helped me truly understand how the children could learn. We had many lecturers, all of whom have left a mark on me. Julia Horvath, Kati Schaeffer, Márta Kokuti, Eva Beck, Dr Balogh and Klári Tarczayi to name but a few. We also had the enormous privilege of weekly lectures by Dr Hári who frequently stood on the table to demonstrate what she was teaching us! Her knowledge and inspiration was tremendous and memories of her have remained with me since those days. What did strike me was that the conductive pedagogy lectures were not 'theoretical' in an academic sense but related directly to understanding

the practice. All our lectures were translated - many by Kati Rác who knew the answers to most questions if we didn't! I always say that I learnt CE through the process of osmosis - by absorbing the passion, motivation and belief the conductors had in the children and adults, and following this as best I could.

During our practical training we needed to try and understand 'why' we were being asked to work in specific ways. This was made extremely hard due to the language barrier meaning that our understanding was at a very basic level and yet we yearned for higher level explanation. This was not anyone's fault but made our training course very challenging. I would frequently ask why but could not then fully understand the explanation! Yet another reason for learning Hungarian! The children we took to Budapest however learnt Hungarian far quicker than we did as adults!

The causal link between theory and practice and practice and theory has continued to shape the way I think to this day and formed a very early part of my learning experience in CE. Looking back this was not just because of the language barrier but because of the way conductors think and the extensive benefit of how conductors use their skills of observation to illicit change in a person.

In my third year of training I worked in the adults department at the Pető Institute and loved it. So, having originally gone to Hungary to work with children I changed my direction at that time and continued to specialise in adult work.

Back in Birmingham

Each year of our training we spent January - June in Hungary and July to December in the UK at our newly formed Birmingham Institute of Conductive Education, headed up by Mike Lambert. Many of these early days were spent in the very capable hands of Julia Horváth, Márta Kókuti, Erzsébet Bertoti,

Szankó Agi, Aniko Sálga, Ildikó Kozma as well as a host of other conductors who all helped us on our journey to setting up in the UK.

We now had to translate the work back into English and try and carve a way of delivering which would be acceptable within the UK culture. This process continued way past the end of my training period.

This period was met with huge scepticism and controversy between Conductive Education, special education and therapists. It was a hard time because as a student conductor I was having to try and explain CE, explain how it worked, what it was based on, and why it was different. The myths around the work were many and the press interest massive, placing enormous pressure on us all – Hungarian conductors as well as us as students.

One of the main lessons we brought back from the Institute and especially from Dr Hári was the need to bring the ‘whole’ system of CE to the UK and not just small parts. Dr Hári saw this as including the training of conductors as well as services across the whole life span. The Foundation for Conductive Education finally ventured into training in 1997.

Setting up Conductor Training in the UK

The first decade of delivering CE in Birmingham was taken up with us developing services, learning more about the system and understanding how this could both challenge and ‘fit into’ the UK system. However it was also time for us to find a university who would accept CE as a subject for a new degree. The University of Wolverhampton, via Jayne Titchener (who remains a trustee in Birmingham) saw the potential in running such a course, and so in 1997 the first students enrolled on the BA Hons Conductive Education in the UK. These included students from Norway and Canada as well as UK students.

To try and set up a course which would meet UK regulations whilst remaining true to CE was not an easy task. The main reason being that CE sat across a number of university faculties – education, health and psychology being the main ones. Content for the course was completely based on our 4 years training course in Hungary but had to be ‘fitted in’ to 3 years – the maximum time allowed for a BA Hons course in the UK. To balance this our students undertook practice over and above their lecture requirements making this a course which required a huge commitment from the student. That has remained true to this very day.

The year 2000 saw the first 7 UK trained conductors qualify and go off to work across the world. The course has always remained small due to demand and availability of practice bases for students to learn from experienced conductors; however since its inception over 100 conductors have qualified in the UK.

Over the last 20 years the course has not required significant changes and the original roots, and teaching, remain very evident. However we have been able to intertwine new knowledge of neurology, neuroplasticity, pedagogy and motor learning, but these have just added a modern understanding to the work that was actually being carried out 40 years ago. CE is and has remained ‘ahead’ of its time; however it has become easier to justify this way of thinking using modern day understanding.

The Wider UK Context

The qualification of UK conductors back in 1991 served to ‘split’ the UK world. Prior to our training there was a group of professionals, led by Ester Cotton, who were using CE in their everyday work. Unfortunately they had not had the benefit of full conductor training and the introduction of ‘qualified conductors’ started to cause a debate over ‘what is CE’ and who can deliver it. For over a decade this caused tension between CE centres across the UK. The move of Hungarian

conductors to the UK to work at CE centres also meant that more and more centres were opening up. Many of these were started by parents of children who had gone to Hungary and wanted to make CE available at a local level back home.

Over the years there have been a number of UK based associations to bring together everyone working in CE. It started with the Conductive Education Association (CEA); later the UK Federation for CE; The Conductors Association (for qualified conductors) and the Conductive Education Professional Education group (CEPEG). Currently in 2022, these have merged to become the Professional Body for Conductors in the UK - The Professional Conductors Association (PCA).

What has CE meant to me as a professional?

CE has always had a difficult professional journey in the UK and whilst this has vastly improved over the years, CE still 'challenges' current thinking. One part of the reason for this is perceived as a lack of 'scientific' evidence of the benefit. Research has always been a stumbling block, and this remains true today however it has also often been the 'excuse' for not having to consider why CE is different, or why parents and families may choose this system.

If I think back to my journey as a professional I also struggled with this area. Where was the evidence that I should be working in this way? Why was it so different? Why were conductors getting the results they did with both the children and adults?

This part of my journey took much longer for me to understand. Looking back with hindsight I can now see that the one main jump I had to make in my thinking was from the 'deficit' model to a model of 'potential'. In reality this meant that I was no longer required to see what the children and adults couldn't do, or what skills they needed to learn, but I had to trust that they would guide me through their

abilities. I remember Dr Hári explaining to us that the child would guide us in our teaching! There is no developmental scale which can reflect an individual journey, no set timescale for learning and the role of the conductor reflects this. This is of course true pedagogy - the relationship between the conductor and the person - the meeting of two people who can work seamlessly together. In our training we start our new students in the same way I started - a belief in the child or adult; a belief that change is possible; a belief that achievement is not set by boundaries or limitations.

I clearly remember, during my training, feeling that as a conductor I was giving hope to people, hope that they could and would learn a range of qualities to support them in life.

I started articulating this back in the UK to be frequently met with scorn from professionals who suggested I was 'giving false hope'. It was seen as my role to help people accept their limitations and perhaps even suggesting that I knew what these were. For more than a decade I stopped saying that I gave hope until one day I realised that 'hope' is neither true nor false! Hope drives a person neurologically into a new world, one of challenge and one of achievement.

This lesson has influenced how I now teach our new students and remains one of the strong messages within UK conductor training. Interestingly this positivity has now become more vogue in the UK and across the world, and is now embedded in the field of popular psychology.

The personality and creativity of the conductor was also a lesson for me during my training. The need to find ways of teaching to ensure learning was unique; responsibility for learning was with the teacher not the pupil and it certainly wasn't hindered by the disability. As a conductor I needed to learn how to view the world through the eyes of the people I was working with. This again was a different way of thinking than in the UK, where I was taught to try and see the person behind the disability.

As a conductor I learnt how to help that person develop in their world, rather than try and 'fit them into' my world by taking account of their limitations through their disability. I am not suggesting that in the UK everyone viewed disability in this way, but as a teacher it was a lesson I needed to learn.

I also learned the power of the methodology including developing my own personal interest into the concept of rhythmical intention. This led to me completing my PhD in the use of rhythmical intention with people with Parkinson's. Rhythmical intention is one area of CE which is not replicated by any other therapy or education I am aware of. It is to me the one truly unique facet of CE methodology, and one which encapsulates how CE works at a higher neurological level than I had previously experienced. Within the UK training areas such as observation, facilitation of learning, group work, rhythmical intention, task series, setting of aims and daily routine are still the mainstays of the curriculum.

Current National Picture

We now have over 100 qualified conductors working in the UK, many trained in Hungary and the rest in the UK. We have a healthy combination of Hungarian and UK staff, and this enhances our knowledge base. Despite different training courses all conductors still have many things in common, the most important being the skill and ability to observe potential in a person.

I love the fact that I can go anywhere in the world to work alongside qualified conductors and we instinctively know what the other person is thinking. I believe this is unique in a profession and shows the strength of the system of CE.

Our BA Hons course continues, now with Birmingham City University, and there are many experienced conductors working as Practice Tutors for students across the UK. We also have an accredited Conductor Assistant Course which recognises the value of different roles within the conductive environment.

Since 2016 we also have an MA in Conductive Education enabling conductors to develop in their own field. This recognises the value of an academic structure to embed CE in our higher educational system in the UK. It places CE alongside other professions and shows how far it has come in the journey of recognition.

Conclusion

I have been privileged to be a part of such a unique journey. An incredible journey, spanning over 30 years, exploring humanity and potential. There is no doubt that my conductor training changed me as a person and as a professional. It gave me an insight into people with disabilities I would not have found in the UK at that time. Yes, the system has developed over time, but the fundamental principles I learnt in Hungary in the late 1980s remain as true today as they did then. It is these which are being passed down from one generation of conductor to the next. Training courses may change in relation to structure but underneath this I believe is the cornerstone of CE - practice based learning focussed on how the children and adults we work with can learn and develop in a world with only arbitrary limitations set by others. CE still challenges perceptions and has to a large extent remained 'outside' of the UK system but that has also protected it for the future generations.

Dr Melanie R Brown

CEO / Senior Conductor NICE | May 2018

★ CONDUCTIVE EDUCATION ★

A TRANSFORMATIVE LEARNING APPROACH TO CONDUCTIVE EDUCATION

Philosophy vs Methodology

Annamaria Berger-Jones

Opening Statements

This article argues that in conductive education (CE) practice is prioritised over theory. In order to evidence this, I offer an overview of some of the available literature and evaluate their focus. The main objective is to synthesise what is known about the four philosophical building blocks in CE. My desire is to showcase their relevance and a pressing need to contextualise these firmly in contemporary terms.

What is CE?

CE is a structured and layered pedagogical system where an active approach is applied to enable people with damage to their central nervous system to achieve and succeed in life (PCA, 2009a; Hári et al, 1991). CE promotes the educational and the social inclusion of those living with a disability empowering the individual and their families (Emerson & Holroyd, 2019). This resonates with the Special Educational Needs and Disabilities Code of Practice, which has a strong focus on improving outcomes for children, young people and their families (DfE, 2015).

CE was developed in Hungary in the late 1940's (Fredrickson & Cline, 2009; Russell, 1994a), by Dr András Pető, who left minimal published records behind. Based on his observations, experiences and intuitions Pető continued to

improve his system until his death (Forrai, 2019; Maguire & Sutton, 2013). Subsequently, Pető's focus was on developing the practice of CE rather than writing it down (Sutton, 1986). This legacy of prioritising practice over theorisation seems to have stayed in CE. I believe, this could partly explain why CE is often explained as treatment option rather than a pedagogical approach. Hári (1997) said that CE is about much more than improving movements alone and evaluated that the systems' other benefits have not been articulated yet.

This yet, is still waiting to happen. Furthermore, Sutton (2016) critically claimed that there is not much academic interest in CE and conductive services do little about this. Oravec (2017: 102) made a similar point: CE "still has not got a coherent academic wing". In addition, Sutton (2018) boldly asserted that CE has no knowledge base and it has not managed to achieve coherence.

Yet, Túri (2020) claimed that CE's survival is due to its effectiveness, which Pető proved in practice. From this perspective showing improvements in physical function would be sufficient – taking away the need to articulate the transformative pedagogical nature of CE. Túri (2020) claimed that there is a continued need to measure outcomes however, she did acknowledge that a testing system is not able to gauge all improvements a child might make. I fear that this viewpoint ignores important changes in a person's mindset regarding their abilities

and dismisses the importance of relationships. When actually, CE is (w)holistic – putting the learner in the centre of the environment; increasing motivated participation from those, who are traditionally viewed as passive and unable (Russell, 1994b). This is resonant with a ‘strength-based approach’ in social work – putting individuals at the core, strengthening relationships with the wider community and building social capital (DoH, 2017).

The Literature

CE literature spans over seven decades. Until the mid-late ‘60s CE was not available outside of Hungary; and it was not until the late ‘80s and early ‘90s that this pedagogic method spread across the Globe¹. Most publications have been written in Hungarian or in English. In the literature search I included the following sources:

Primary sources – key texts, which are widely utilised by conductors and those deemed as ‘essential reading’ in CE courses. Secondary sources – online platforms from trustworthy origins. Websites: PCA, European Conductors’ Association (ECA), Pető András Faculty (PAK) and NICE – Centre for Movement Disorders. The latter are the two main and recognised training providers and awarding bodies for the Qualified Conductor Status (QCS).

Primary source authors were identified based on their contribution to CE: Pető, Hári, Cotton, Sutton and Brown. Unfortunately for the profession, Pető left very little written heritage behind. His words can only be read through others who knew him or studied his work. Forrai is one of those voices; she indicated (2021, 2020) that Pető absolutely believed in CE as a pedagogical approach therefore he saw no need to develop a framework to explain it. Hári, who was one of Pető’s original students and his successor, published extensively. Cotton, a physiotherapist, introduced CE to the UK in the ‘60s. Cotton’s positionality would have influenced her interpretation of CE, giving the motoric improvements the highest importance.

Sutton, an educational psychologist was responsible for the newly sparked interest in CE in the late ‘80s. By far he has made the biggest impact in terms of publishing in the UK. Brown is a practicing conductor, a respected and influential figure in CE.

In the BA (Hons) CE curriculum, the philosophy of CE is taught with four components: orthofunction, belief in potential, intelligent love, the human principle (HP). Sutton (1986) wrote about some fundamental elements: differentiation, emotional context, expectation, the learner being led to find their own solution. The UK’s Professional Conductors’ Association (PCA, 2009a) listed the following as some key principles in CE: everyone can learn, the need for intention, social interaction, motivation, feeling of success. All of these aspects are part of the four philosophical building blocks.

Reviewing some of the literature

I posit that the dominant discourse in CE is about the practice (methodology) rather than the theory (philosophy). Sutton (1986) highlighted early on that most of the attention has been directed at studying the methodological specifics of CE. I will argue that this has changed very little over the decades. Some primary source books such as Hári (1998)² or Brown and Mikula-Tóth (1997) do not offer a philosophical exploration but present as manuals.

I can further confirm the gap in the available literature in terms of theoretical interest after carrying out an extensive search on the two current CE online libraries. Interestingly, the literature also highlighted how Hungary and the UK have different priorities and interests. PAK Hári Mária Library has mostly practical guides – focusing on specific methods used within CE, consultations and issues around behaviour. On the other hand, E-Conduction³ mainly has condition specific publications, explorations of transference to other countries and the effectiveness of CE. Furthermore, PAK’s seven research clusters (standardised

1 - CE is also available in: Austria, Australia, Belgium, Canada, China, France, Germany, Israel, New Zealand, Norway, Poland and Sweden, USA.

2 - The content of this book was a collection of Pet’s lectures and practical demonstration.

This extended and updated edition was published in 1998 in Hungarian, not aware of it ever having been translated into English.

3 - This offers materials collected by Sutton and Maguire (a retired librarian from NICE).

4 - Originally written in 1988.

measures; historical; arts based; training; social integration; language and communication; health, sports and lifestyle) albeit wide ranging, I would claim, highlight the low research interest in the philosophy of CE. Conversely, in the 'Code of Practice for Conductors' (PCA, 2009b) people with a neurological disorder are being referred to as 'service users' even though this same document positions CE as a pedagogy. This is problematic, I would assign the wording 'service users' to therapeutic professionals – I believe this signal to some potential issues surrounding professional identity.

It must be acknowledged that some effort has been made to articulate philosophical aspects of CE however, I fear that without employing theoretical frameworks, these complex concepts cannot be comprehensively explained therefore understood. For example, Hári et al (1991) explained how the word 'conduction' refers to the active nature of teaching/learning in CE. The pedagogic nature of CE and elements of the philosophy are implicitly present in their publication but the attention is still on the practical components of CE. Ákos and Ákos (1991) offer a short section in their book on the 'theoretical aspects of the Petö system' – explaining how brain function can be improved through CE. Importantly, the role of motivation is emphasised, an element of CE I believe to be of paramount importance.

A book by Hári (2008) focused on introducing theorists/medical/habilitation ideas in a systematic way with the purpose of showing an insight into other disciplines/methods. Her objective was not to situate CE within/against any of these fields but to share context. Sutton (1986) shared that according to Hári, CE fundamentally derived from Petö's work alone; drawing on other theories/theorists are only helpful in explaining CE to 'outsiders'. Additionally, Hári (2014) explored how CE challenges views / perceptions on disabilities; she also emphasised conductors' unquestionable belief in human potential. Hári's (2014)⁴ publication alludes to CE's transformative nature, assuming a shared

understanding of this, dismissing the need to offer clarity. The 'Grundtvig Project' carried out in 2012 by the ECA, aimed to create a more standardised training in CE; there is a section on core theories and philosophy in its handbook. There are some key statements confirming the need to have a succinct theoretical framework: "core theories are essential to provide CE with a unique identity" (Gegenwarth et al, 2012: 2) and "CE is a complex system that is to remain constantly in flux" (Gegenwarth et al, 2012: 23). A short description is given for each theorist's main ideas without a direct explanation of their link to CE or how they might be applied. More recently, in a post-pandemic reality based on their digital experiences, MacDonald and Parker (2020) concluded that CE is not constrained by physical presence, which to them showed the system's 'holistic power'. The authors claimed that by delivering CE in a different way, they now have a "renewed ... belief" in the system (MacDonald & Parker, 2020: 17).

Practical aspects of online delivery are discussed in great detail, but yet again, a shared understanding of aspects of the underlying philosophy are assumed and only alluded to. In my contribution in the same issue, I problematised theory and practice alongside each other – highlighting that potential is not only limitless but it knows no boundaries (Berger-Jones, 2020).

CE's Four Philosophical Building Blocks

The scope of this paper restricts the depth of exploration of these complex concepts; only a limited engagement can be offered here. It is important to note that some aspects of CE philosophy, which are present in practice are not actually documented in writing.

There is a shared understanding and respect of the importance of the CE philosophy amongst conductors, which is passed down from generation to generation. However, there is a lack of concrete written definition

or explanation – strongly indicating the necessity to be succinct with a message in order to convey a compelling narrative.

Orthofunction is positioned as the main aim of CE (PCA, 2009a; Hári & Ákos, 1988; Sutton, 1986). Perhaps as such, it is the most discussed out of the four building blocks yet widely misunderstood (Maguire & Sutton, 2004). *Orthofunction* as a concept tends to be discussed alongside *dysfunction* – presenting as two halves of a binary, which I feel is a useful way to understand this concept. *Dysfunction*, as in a ‘disorder of function’ (Hári et al, 1991), which can lead to feelings of failure due to not being able to satisfy “demands generally fulfilled at a given time of life” (Hári & Ákos, 1988: 140), leaving a person with low confidence and lack of motivation. On the other hand, *orthofunction* describes the ability to function effectively despite a *dysfunction*, referring to intended, purposeful and conscious activity (Hári et al, 1991).

In contrast to common misconceptions and critique⁵, *orthofunction* is not about the ‘normalisation’ of the disabled, rather *Orthofunction* refers to the acquisition of the general ability to adapt and to problem-solve, as well as develop self-respect and confidence in one’s own abilities (Russell, 1994b; Hári & Ákos, 1988). By its essence it is active and is concerned with learning (Maguire & Sutton, 2004). In my understanding, *orthofunction* is a process rather than CE’s end product and should be positioned as such.

The *belief* in potential is one of the most felt and observed aspects of CE practice, yet it is only implicitly present in the literature. As an active pedagogical approach to overcoming difficulties, CE makes learning accessible to all (Read, 1990) enabling people to achieve (PCA, 2009a). Conductors foster a strong belief in individuals’ potential to learn regardless of their age, diagnosed condition or abilities (Hári, 2014; Medveczky, 2006; Hári, 1997). Conductors have high expectations of their learners and through scaffolding and differentiation, facilitate people

to experience success (Hári, 2014; Brown, 2006; Cotton, 1994). Human beings thrive if someone shows conviction in their abilities – the Pygmalion or Teacher Expectancy Effect, confirm that teachers’ expectations directly and positively impact on their students’ level of performance (Szumski & Karwowski, 2019; Howard et al, 2015).

Intelligent love helps to explain the importance of the relationship between conductors and their learners. This concept and the belief in potential, to me, are interconnected and actually are part of the Human Principle (HP). There is only one explanation in the literature about intelligent love: “sentimental love tends to prolong disability, whereas an intelligent love constantly opens up avenues to ability” (House, 1968: 111).

During his visit to the Petö Institute, House noted that conductors really love the children, furthermore he highlighted how happy, alert and motivated all the children were whilst learning in an “enabling environment” (House, 1968: 112). This resonates with Hári’s (2014) account of conductors adding something of themselves to the process of CE and are fully dedicated to their participants’ learning. More recently in the field of early years Page (2018) problematised the importance of ‘Professional Love’ in enabling children to develop secure attachments in order to learn, grow, trust and have resilience. This echoes the underlying concept of intelligent love in CE.

Human Principle

In a published paper (Berger-Jones, 2021), I evidenced that the HP is under-researched. I found that the HP is not defined nor explicitly contextualised in writing, yet it is portrayed as a fundamental part of the philosophy without which, CE would not exist. The HP has three elements, the conductor, the person with the disability and the environment (Berger-Jones, 2021). Exploring the relationships – intra-actions and entanglements – through a post-qualitative lens between the three elements of the HP holds the key to understanding the transformative and empowering nature of CE. I posit that the HP is about nurturing potential in the person, normally

5 - For example: Michael Oliver wrote a damning article in 1989.

Closing Remarks

overlooked by society viewed through the medical model of disability. The medical or deficit model, views disability as a tragedy therefore focuses on curing the 'problem' and deems difference negatively (Cameron & Lingwood, 2020; Bartlett & Burton, 2016; Swain & French, 2000). On the other hand, the social model of disability rejects ideas of 'normality' and demands society to remove barriers, disabling those with impairments (Armstrong et al, 2010; Fredrickson & Cline, 2009) and empowering nature of CE. I posit that the HP is about nurturing potential in the person, normally overlooked by society viewed through the medical model of disability.

The medical or deficit model, views disability as a tragedy therefore focuses on curing the 'problem' and deems difference negatively (Cameron & Lingwood, 2020; Bartlett & Burton, 2016; Swain & French, 2000). On the other hand, the social model of disability rejects ideas of 'normality' and demands society to remove barriers, disabling those with impairments (Armstrong et al, 2010; Fredrickson & Cline, 2009).

The philosophy of CE has stood the test of time, it is as relevant today as it was in the 1940s. However, without a robust theoretical framework, the practice of CE is rendered to a simple toolkit delivered mechanically. The profession deserves, and perhaps for its survival, desperately needs a clear articulation and contextualisation of its philosophical building blocks.

Annamaria Berger-Jones

Senior Lecturer NICE Conductive College
(EdD student with BCU)

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★ CE TAKES PLACE WITHIN A SOCIAL CONTEXT ★

Theories of social learning can enhance our understanding of the purpose of the group and the role of the conductor in creating change and development.

Brittany Turnbull

Introduction

Receiving a diagnosis of a neurological condition, while initially devastating, may ultimately lead to a transformative learning experience. Mezirow (1997) describes the process of transformative learning as a change in frame of reference due to critical reflection of one's assumptions, beliefs, or worldviews. Adults have built a dense network of experiences, values, and perspectives with which they view the world. The diagnosis of a neurological condition may present as a disorienting dilemma causing the person to reassess their worldview over time and make meaning of their experiences resulting from the diagnosis (Baumgartner, 2011). This process of transformative learning can be messy, emotional, and not linear as they adjust their perspective and navigate a new reality.

Conductive education is a unique learning method created by psychologist, Dr. András Pető, who merged elements of education and rehabilitation together into his practice. The conductive education method originated in Hungary, and spread worldwide, available in private or non-profit settings. Conductive education is offered for people diagnosed with a neurological motor condition such as a stroke, acquired brain injury, Parkinson's, or Multiple Sclerosis (MS). Practitioners of conductive education, called conductors, educate people with neurological motor conditions about their

diagnosis, their movement, and their potential for growth and new learning. Participants attend group classes to participate in movement-based learning to relearn tasks such as walking, changing position, dressing, etc. Conductive education combines motor learning principles with educational psychology to promote the regaining of lost function due to a neurological condition (O'Shea, Jones & Lightfoot, 2020). Conductive practice "favours a social model of disability which focuses on the environment as a promoter or inhibitor of learning, or affirmation model where impairments are perceived as a core part of a person's being and of their experience" (Blackburn & Ward, 2020, p.4). While conductive education is often described in terms of rehabilitation or compared to therapeutic approaches for people with disabilities, it sits firmly in the educational field, recognizing participants as learners rather than patients. Conductive education allows participants to regain function, independence, and have greater control over their lives. This may result in a transformative learning experience as they reflect on how these changes affect their identity and the way in which they view their disability.

Conductors can use a transformative theoretical lens to inform their work when planning their sessions and educating participants of their programs. As a practicing conductor, I see the opportunity to implement transformative learning theory into conductive practice to create a richer learning environment that

allows participants to gain new movement experiences, reflect on these experiences, and participate in discourse that can empower them and give them greater autonomy. In my practice, participants have shared negative stories such as a healthcare professional telling one participant that their life is over after receiving a Parkinson's diagnosis, or that things are only going to get worse and that there is no using in fighting after receiving a diagnosis of MS. These exchanges could naturally cause a negative shift in their perspectives and limit their potential for learning and growth. Conversely, conductors practice with a spirit of education and treat the participant as a learner, not a patient. Conductive education uses a learner-centred, holistic approach that aims to empower people and expand their possibilities. When engaging participants in motor learning, conductors can use a transformative theoretical lens to engage participants in critical reflection to develop their confidence, knowledge, and autonomy, and potentially transform their view of themselves and their disability in a positive way. This lens can have implications for other professionals working with people with disabilities to consider their role in educating people about their disability and enhance professionals' practice to help people live well with their diagnosis.

Transformative Learning Experiences of People with Disabilities

Transformative learning can occur when a person is diagnosed with a neurological condition, and this process of transformation may continue throughout their lifetime as they navigate changes to their lifestyle, relationships, and autonomy. Mezirow (1997) describes the processes of transformative learning as a change in one's 'Frame of Reference' because of their experiences and perspectives. When individuals experience a disorienting dilemma, they must reassess their beliefs, values,

and identity to fit with their new reality.

Reflection on their experiences can lead to perspective transformation. Taylor (2008) recognizes that this process is not always linear and that "perspective transformation often occurs either through a series of cumulative transformed meaning schemes or as a result of an acute personal or social crisis" (Taylor, 2008 p.6). Taylor goes on to describe how these experiences can create a stressful environment, which may cause individuals to question all aspects of their lives. In a case study of a community based cardiac rehabilitation/education program, Coady (2013), reinforces the concept that transformative learning is not limited to one occurrence, but can be an ongoing process.

As individuals journey through life, they may experience new challenges and experiences they must place within their frame of reference. An individual who suffered a stroke for example, may experience a disorienting dilemma when they realize their mobility has been affected due to their stroke, and that they may need assistance in relearning how to walk or move around. They may go through another moment of transformation as they realize the impact that limited mobility has on their ability to work, drive, or engage in social experiences. As this individual goes through their life post-stroke, they will engage in new experiences, and must reframe their lives with this new perspective. It is important for professionals to consider that transformation can be positive or negative and to have an understanding of the role they play in the learning process.

They must have an understanding of the factors that affect learning, and how they can create a positive learning environment to support people living with a neurological condition. Emotion plays a crucial role in learning and affects one's beliefs and expectations about themselves and their identity. Emotion can help or hinder learning, as belief in oneself can become a self-fulfilling prophecy. The provision of a safe and supported learning environment can support

emotional readiness and help individuals to express their emotions in a way that will support their learning. Coady (2013) positions that individuals must be emotionally ready for change and open to critical reflection to allow them to reassess their realities and be open to learning that can transform their lives in a positive way.

In order for transformative learning to take place, learners must critically reflect on their experiences, and this reflection often occurs through dialogue or social contexts. Mezirow (1997) asserts that transformative learning involves becoming more critical of assumptions, recognizing one's perspectives and frames of reference, and engaging in discourse to collectively pose questions and solve problems. Individuals must engage and confront their experiences to make meaning from them. Dirkx (1998) suggests, "knowledge is not viewed as something 'out there' to be taken in by the learners. Rather, it arises within the social acts of trying to make sense of novel experiences in the day-to-dayness of our lives" (Dirkx, 1998 p.9). Both Dirkx and Mezirow recognize the need to analyze, question, and create meaning from experience.

This is often achieved through a social context, as Baumgartner (2011) discovered in reviewing various studies on learning about one's chronic illness. Baumgartner found that social interaction and discussion was a necessary part of the transformative learning process for many individuals in learning about their condition. Similarly, Coady (2013) found that social activities provided a powerful transformative experience for participants, as they were able to share experiences and engage in conversations about empowerment and societal transformation. Cozolino & Sprokay (2006, p.11) write that "the brain is a social organ innately designed to learn through shared experience". In their work, Cozolino and Sprokay (2006) reference neuroscience research that suggests social interaction is required for neuroplasticity to occur. This adds to the arguments of Coady (2013) and Baumgartner (2011) to consider the impact that social activity has on learning

and creating new neural pathways.

A neurobiological perspective of transformative learning sets a framework for professionals working with people with neurological conditions. Taylor (2008) outlines five elements of a neurobiological approach that are necessary for a transformative learning experience:

A neurobiological approach suggests that transformative learning (1) requires discomfort prior to discovery; (2) is rooted in students experiences, needs, and interests; (3) is strengthened by emotive, sensory, and kinesthetic experiences; (4) appreciates differences in learning between males and females, and (5) demands that educators acquire an understanding of a unique discourse and knowledge base of neurobiological systems (Taylor, 2008, p.8)

Diagnosis of a neurological condition can cause individuals to experience discomfort and result in a change to their perspectives and identities as they face the loss of skill and function. Conductive education can provide the means to discovery in providing a learner-centred, holistic approach that considers participants psychological, educational, and physiological needs (O'Shea, Jones & Lightfoot, 2020). The holistic approach of conductive education considers the importance of emotion in the learning process and provides movement-based learning in a classroom environment to allow participants to consider new ways of knowing, doing, and being.

The Conductive Education Classroom as a Transformative Learning Environment

The conductive education classroom is an ideal environment for people with neurological motor conditions to experience a positive transformative learning environment. Cozolino and Sprokay (2006) suggest five principles for learning and neuroplasticity to occur in educational settings:

- A safe and trusting relationship with an attuned other
- Maintenance of a moderate level of arousal
- Activation of both thinking and feeling
- A language of self-reflection
- Co-construction of narrative that reflects a positive and optimistic self (Cozolino and Sprokay, 2006 p.12)

This aligns with the claims by Mezirow (1997), Dirx (1998), and Taylor (2008) on the importance of a supported learning environment where one can engage in critical self-reflection and participate in collaborative discourse to transform one's views and frames of reference. The methods and principles of conductive education can support transformation through the creation of a positive group-learning environment, participant-led goal setting, as well with experiential learning opportunities provided through the series of tasks and movements participants practice to regain function.

The conductor is an educator with enhanced knowledge of neurological conditions and learning theories. Integral to their role, is the relationships they build with their participants to create a safe and supportive learning environment. Literature on conductive education speaks at length about the interpersonal relationship between the conductor and the participant.

They act as educators, facilitators, and motivators (O'Shea, Jones & Lightfoot, 2020). Conductors recognize the importance of a strong, trusting relationship with their participants in order to give them the confidence to take ownership over their learning and to help them realize their continued potential for growth. In a transformative learning environment, "adults are understood to be active, engaged participants in the learning process, co-creating or constructing what it is they are learning as they learn (Dirx, 1998, p.8). This recognizes the importance of a reciprocal learning environment in any setting that involves adult learning.

Adults can be both co-creators and co-learners, giving them greater control over what and how they learn. In conductive education, participants and conductors are equally engaged in the learning process and work together to reach their goals.

When individuals first join a conductive education program, they engage in an individual assessment with the conductor where they identify goals and together with the conductor, they discover areas of development for future growth. This sets the stage for them to play an active role in the learning process (Brown & Mikula-Toth, 1997). At the assessment, the conductor will identify which group setting will align best with the participant's goals so that the participant can benefit from a supported group environment consisting of people with a shared identity. Mezirow (1997) reasons that educators must not only recognize the learner's goals, but also take responsibility in helping to achieve them.

Conductors use instrumental teaching strategies to guide the group through different movements and activities to provide movement experience. To further learning, they then engage the participants in discussion to help them reflect on their experience and direct future action and goals. Individual and group reflection can help further opportunities for knowledge creation. To maximize learning, conductors should implement an ongoing cycle of learner-led goal setting and self-reflection. This may mean expanding upon current practices to ensure the participant is directly involved in goal setting, reflecting on experience, and directing future learning. Taylor (2008) suggests the use of reflective journaling, group discussion, and critical questioning as ways to deepen learner's potential for growth and development.

Critical reflection is a skill that is rooted in experience and nurtured with continued practice. Creating space for conversation, problem posing, and critical questioning allows participants to make meaning from their experiences and guide their own learning. This requires a shift from

instrumental ways of teaching to move toward more socially constructed and communicative ways of learning. Providing a holistic approach in which the conductor considers the psychological, educational, and physiological ways of learning are implicit to conductive practice. To complement this, conductors can engage participants in critical reflection and discourse to challenge their perspectives and set them on the path for new growth and transformation.

Motor learning and skill development occurs in conductive education through repetition of a series of tasks or movements. Participants will practice movement tasks in lying, sitting, and standing positions. These tasks help to teach skills such as initiation of movement, balance, weight bearing, and transference of weight. The task series is a carefully constructed sequence of movements that take participants through different positions and activities to help them gain control over their movements and to improve their motor planning and functioning in daily life (Bourke-Taylor, O'Shea & Gaebler-Spira, 2007). Conductive education scaffolds the learner's current level of ability by altering the tasks, environment, and the facilitation provided to allow the individual to achieve success and demonstrate the potential for future growth (O'Shea, Jones & Lightfoot, 2020). Tasks are differentiated for each individual within the group to provide an appropriate level of challenge, creating a high state of attention and motivation. According to Cozolino and Sprokay (2006), achieving a moderate level of arousal increases the potential for neuroplasticity to take place.

Delivery of the task series uses a declarative learning process, referred to as rhythmical intention. When participants engage in a task such as walking, the task is broken down into steps and participants visualize, prepare for, and declare the movement they wish to achieve. When walking with a walker for example, a spoken rhythm can help to break down and sequence the movement of the walker, transference of weight, and the stepping action. This sequencing promotes skill acquisition and motor planning

by linking speech and thought processes to physical movement. "Declarative learning results in knowledge that be consciously recalled. This type of learning requires awareness, attention and reflection" (O'Shea, Jones, & Lightfoot, 2020). This process uses a neurobiological approach to learning, linking the cognitive to the physical. By integrating the physiological experience with intellectual and emotional challenges, conductors can encourage critical thinking (Cozolino & Sprokay, 2006). Conductive education provides an experiential learning opportunity that allows participants to identify goals, engage in experience related to their goals, and then reflect upon that experience to help direct future learning. Coady (2013) highlights the importance of experiential learning and suggests that for an experience to be transformative, it must be active and achieved through interaction with others. For conductive education to provide a transformative learning experience, participants must be able to engage in experience that is both reflective and interactive.

The group is an essential part of conductive education and can be a powerful tool for transformative learning. Effective group learning can decentralize the role of the conductor as educator and establish peer support, discussion, and learning. The group within conductive education can be a motivation tool, a method for group members to support one another, work collaboratively, and share in success (Brown & Mikula-Toth, 1997). On a deeper level, the group has the potential to become a means for discourse and transformative learning. "Education that fosters critically reflective thought, imaginative problem posing, and discourse is learner-centred, participatory, and interactive, and it involves group deliberation and group problem solving" (Mezirow, 1997, p.10). This requires a careful construction of instrumental learning, problem solving, and group discussion. The conductor can promote discovery learning by encouraging participants to engage in movements using problem-solving strategies. They can then create space for group

conversations around challenges, movement strategies, and successes. Participants can engage in emotive, sensory, and kinesthetic experiences both individually and as a group to promote neurobiological learning (Taylor 2008). For example, leading a group of stroke participants through a movement such as standing up can have positive emotional and motivational effects. It can also allow participants to learn from one another. Discussing movement experiences can aid in sensory and kinesthetic learning as participants share successful movement strategies. The sharing of successes and challenges can prompt deeper discussion, aid in problem solving, and create a feeling of a shared identity. Working collaboratively towards a similar goal within a group that has shared identity can have positive psychological, educational, and physiological effects. As Coady (2013) suggests, “identifying with the experiences of others enables people to make meaning of their experience, which provides a motive to engage in learning” (Coady 2013, p.325). While each person’s learning experience may differ, group learning offers a space for people with shared identities to come together, share knowledge and experience, and support one another in their learning journey.

Implications for Future Practice

The conductive education method provides a supportive and reflective learning environment where people with neurological motor conditions can improve their confidence, knowledge, and mobility. Diagnoses may serve as a catalyst for transformative learning, as individuals experience a disorienting dilemma that exposes the gaps in their existing knowledge (Coady, 2013). Conductive education settings can provide an environment for individuals to fill in these gaps as they learn about themselves and discover new ways of knowing, being, and doing. Using a transformative theoretical lens, conductors can build on their practice and perhaps better position conductive practice within the field of education. As O’Shea, Jones, and Lightfoot (2020) contend,

“there is still a general tendency to view CE as just a means to teach walking, quite missing its central educational objective of transforming the whole cognitive and personality development of people with motor disorders” (O’Shea, Jones, and Lightfoot, 2020, p.9). It is possible to frame conductive education as a holistic pedagogy that utilizes neurobiological approach to transformative learning theory to enable people with neurological conditions to live well with their diagnosis. By expanding upon opportunities for critical reflection and dialogue within conductive practice, program participants will have increased opportunities to transform their frames of reference and challenge their assumptions.

Transformative learning theory can have implications for other professionals who work with people with neurological conditions. Using a transformative educational lens, health care professionals can help people with neurological conditions live well with their diagnosis. This will require practices that reflect a spirit of education and promote reciprocal learning, critical reflection, and ongoing discussion and support. Practitioners must promote active, participatory practices that engage individuals with neurological conditions to feel empowered and have greater autonomy over their lives, their health, and their futures. Taylor (2008) cautions that those who wish to provide a transformative learning experience must do so from a critical perspective, constantly engage in their own self-reflection, and have a deep awareness of how their frames of reference influence their practice. Professionals must challenge their own perspectives, beliefs, and worldviews in order to transform their practice and in turn create spaces for transformative learning experiences for those with whom they work.

Brittany Turnbull

Program Instructor, Community Programs and After Stroke (March of Dimes, Canada)

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★ AAC AND THE CONDUCTOR ★

Understanding Conductor's knowledge and use of AAC within the group context.

Lucy Barraclough

Introduction

Aims

This study aims to explore how Conductors address and meet the communication needs of children (5-11) in schools, following the pedagogical approach of Conductive Education (CE). The study considers how the daily routine in CE is utilised to teach effective and varied communication skills and how Conductors plan and prepare the environment to create opportunities for spontaneous communication.

Communication

Barker (2013) states that communication is all around us, everywhere we look, we just need to be able to make sense of it. To be able to make sense of communication, it must be presented through an approach children understand which may be via various Augmentative and Alternative Communication (AAC) methods.

Most children are exposed to communication countless times a day, whether that be through everyday signs, observing others, body language or people talking to them (Barker, 2013). The first steps towards being able to communicate is the developing ability to listen, understand and retain what is being communicated (Barker, 2013). The ability to functionally communicate is crucial in forming relationships, looking after ones physical needs, education and in getting a job (Beukelman and Mirenda, 2012).

With typically developing children, communication seems to develop easily and is considered a natural process that is not given much thought until challenges arise (Kersner and Wright, 2015). Kersner and Wright (2015) give a broad overview of general speech and language development in typically developing children. However, in the case of atypically developing children, this process does not always happen, leading to communication difficulties becoming apparent

Communication Difficulties Faced by Children with Movement Disorders

Speech and communication difficulties are frequently called invisible difficulties as communication challenges faced by the child are not always apparent until communicative interactions occur (ICAN, 2022). For many children with movement disorders, their oral motor skills are affected leading to problems with speech such as: the ability to pronounce sounds and words, the fluency of speech and the regulation of their breathing to allow them to speak in longer sentences or to make loud and quiet sounds. In a review of literature summarising data in relation to children with Cerebral Palsy (CP), Novak et al. (2012) found that as many as 25% of children with CP have some form of speech and communication. This figure highlights that many children with cerebral palsy need some form of speech and

language intervention in order to improve their oral motor skills and if needed to determine AAC methods which would benefit the child.

Kersner and Wright (2015) identify three key components of communication: the desire to communicate information to someone, the skills to be able to express these desires and finally someone to listen to you. For children with communication difficulties who have physical motor disorders, they have the desire, initially anyway, to communicate and someone to listen to them, however, they may lack the physical skills to convey what they want to say. This is when other methods of communication are needed to augment speech where required, or to use alongside verbal speech where they need to clarify what they are saying (Bishop, 2017).

Marshall and Goldbert (2008) conducted a study of parents views of their child's ability to use AAC and the impact that it has on family life, finding that for some parents, their child's lack of verbal speech was a greater disability to them than their physical disability. Narain and Maes (2020) continue this theme, emphasising that communication difficulties impact upon everyone who is closely involved with the individual, therefore it is crucial that appropriate AAC methods are implemented as soon as possible, thus having a positive impact upon the whole family.

Augmentative and Alternative Communication (AAC)

AAC methods can be explained as any means by which someone expresses themselves, other than through verbal speech (Narain and Maes, 2020). Within the umbrella of AAC, there are two main categories: aided (low-technological and high-technological methods) and unaided.

Unaided AAC is a means of communicating whereby the individual uses their body (Moorcroft et al., 2019), e.g. signing, gesticulations and facial expressions (PCA, 2021). A major advantage of unaided AAC is that it does not rely on any external resources and therefore can be used

immediately (Gevarter et al., 2013). However, for children with CP, their physical difficulties can hinder their ability to use unaided AAC methods such as Makaton as they may not have fine motor skills to use their hands in such a precise way. A disadvantage of unaided AAC is that it relies on the ability of others to understand the methods such as signing, which can lead to frustrations for both communication partners (Miller, 2020).

Aided AAC

Low-tech AAC methods are typically in the form of printed resources including communication books. identify that. The major advantage of low-tech AAC methods is that they can be used in different positions, particularly when the individual is in situations such as during self-care activities where the use a high-tech device would be more difficult (Clarke et al., 2016).

High-tech AAC methods typically involve the use of electronic devices which generate speech using symbols or words for the individual to use. High-tech AAC devices are ever-expanding and may include adaptations of devices to enable those with restricted motor control to access them (Elsahar, et al., 2019). The DfE review of the SEND Code of Practice 2015 found that there is a huge lack of consistency in provision for individuals with SEND, with it being more of a 'postcode lottery' than a 'child-centred' approach (DfE, 2022).

AAC within CE; The Human Principle

The Human Principle (HP) is a key part of CE philosophy. The unbreakable link between the child, the Conductor and the learning conditions for the acquisition of knowledge and skills is vital in successful learning (Berger-Jones, 2020). It is the job of the Conductor to create the optimal environment based on their ingrained belief that the child 'can' learn (Berger-Jones, 2020). Through this belief system, the Conductor is able to create the environment with tasks and activities that both challenge the child but are also accomplishable, enabling development of the child's personality. Campbell (2020) conducted a study looking into whether the use

of Makaton signing could aid the development of the human principle in CE by increasing the child's ability to learn. The study found that 85% of Conductors asked used Makaton within their CE setting, therefore suggesting that it can be a way to aid the development of the relationship between the Conductor and child, in turn strengthening the development of the learning environment (Campbell, 2020).

Similarly Cornelius (2018) investigated the use of Pragmatic Organisation Dynamic Display (PODD), a low-tech AAC method as a facilitator to learning within CE settings. She found that the use of PODD can aid the learning and development of those using it, increasing their confidence and their desire to communicate (Cornelius, 2018). However feedback from conductors indicated that use of PODD negatively impacted the flow of the session while others altered the daily routine to allow extra time, which in turn reduced time for other physical activities (Cornelius, 2018). Khan (2019), studying aphasia in adults within CE settings, identified the importance of the role of the group in creating and providing opportunities for communication as well developing the relationship between Conductor and participants, again enabling development of personality. The group motivates people to communicate and seeing others doing also increases the individual's confidence to try (Khan, 2018).

Research Design

This research took a phenomenological approach within an interpretivist paradigm. Flick (2018) suggests that in the broadest sense, qualitative data is research aiming to discover the experiences of a person or group of people. The idea is to gain a thorough understanding of these experiences, through extensive interaction with the people being studied (Duesbery and Twyman, 2020). For this research, qualitative data was sought through focus groups and the use of diary reflection notes. In qualitative research, the

researcher looks to interpret the data, with a view to expand their understanding of people's beliefs, thoughts and feelings about a certain topic or societal issue (Flick, 2018). As my aim was to gain a deeper understanding of Conductors' insights and experiences of how they address and meet the communication needs of children they work with, I was confident that qualitative research was the most suitable method for this study.

Chisila and Kawulich (2012) suggest that the paradigm of interpretivism and a phenomenological approach aims to gain a greater understanding of the belief systems, feelings, thoughts and experiences of a group of people. My passion for improving the communicative ability of the children I work with underpins the basis of this study, therefore, my own beliefs about how Conductors address and meet these communication needs could have an influence on how I interpret the findings of the research. As the researcher studying a topic in which they are involved in I am an 'insider researcher'.

Data Collection Method: Focus group

The focus group was comprised of five Conductors, four from the same setting and one from a different setting. The small sample size restricts the meaning that can be applied to the data, however creates an understanding of views that may serve to validate further study in this topic.

At the beginning of the online focus group, ground rules were set, asking all participants to respect each other's confidentiality and anonymity. The focus group lasted for approximately one hour. A variety of prompts were chosen to elicit different thoughts and feelings. A 'warm up' question was used at the beginning just to set the scene and to help the participants feel more comfortable within the group situation. The prompts used within the focus group included a two-word phrase, a picture, a quote and a scenario, which were shared on Microsoft Teams, allowing all participants to view them. The prompts were used to engage the participants and to provoke thoughts and feeling

based around the topic of how, as Conductors, they address and meet the communication needs of the children they work with.

Diary reflection points

To substantiate my research, I diarised my reflections from practice. In total, I completed seven reflections covering different days and times within a period of four weeks. This enabled me to reflect on experiences of different parts of the daily routine and when working with different children, thinking about how I support children with communication difficulties within the conductive framework.

Being an Insider Researcher

Costley et al (2010) say it is vital that an insider researcher is sensitive to colleagues and ensures that they are fully informed about all aspects of the research. They emphasise that if the insider researcher can minimise the ethical risk to the participants, there can be great benefits; the insider researcher has a good understanding of the topic and access to participants in order to expand on the knowledge and to use the findings to inform future practice.

Ethical considerations of research project

Successful research is based on sound ethical underpinnings which ensure that participants taking part are protected from any form of harm and are assured of what will happen throughout the process (Bryan and Burstow, 2017). The ethical considerations of this study were planned in accordance with the British Educational Research Association (BERA, 2018) guidelines as well as Birmingham City University's (BCU) guidelines and GDPR guidance.

Data Analysis

The findings of this study emerged through the use of thematic data analysis of the focus group transcript and diary reflection notes. Guest et al. (2012) identify that thematic data analysis is, in the simplest form, looking for general ideas that are repeatedly found throughout a source of data.

These themes can be extensive, covering multiple ideas that link to it or it can be a theme whereby it stands alone or has a small number of subthemes (Guest et al., 2012). After transcribing my focus group, I went through the transcript, firstly looking for insights from the Conductors around key phrases that were in my research questions. These were: 'effective and varied communication', 'plan and prepare' and 'spontaneous communication'. I colour coded parts of the transcript that I thought linked to these three phrases or linked to synonyms of them. After looking through the insights based around the three phrases, some initial themes began to emerge. In line with Guest et al's (2012) suggestion, I revisited the transcript multiple times, making new links between the data each time and in turn developing new themes and subthemes.

Discussion of the Findings

RQ1

How is the daily routine utilised to teach effective and varied communication skills?

Conductors spoke about the challenge of trying to implement aided AAC methods in to the Conductive programmes of the daily routine however, the study found that, the fact that the children are in challenging physical positions during these programmes meant that this was not practical. This paves the way for Conductors to utilise the Conductive programmes to challenge children's communication skills, teaching them to use various AAC methods whilst in all sorts of physical positions. Conductors also spoke about how they teach children the physical skills needed to use various AAC methods through the careful planning of the task series. Through this, Conductors equip children with the skills they need to competently communicate in all areas of life and not to become reliant on one AAC method, e.g. when in the bathroom or in bed, reliance on one method may mean they are left effectively 'voiceless'.

Within the focus group, Conductors spoke about well-known key communication strategies employed to teach children to use various AAC methods effectively e.g. 'modelling'. Always having the individual's needs at the forefront of their minds, rather than employing the same method for everyone Conductors talked about many unaided AAC methods they use with the children, particularly during the Conductive programmes. The use of unaided AAC methods further develops the relationship between the Conductor and the child as they are relying more on really looking at the child to communicate rather than looking at the aided AAC method the child is using to see what they are saying. However, it is important to point out that although unaided AAC methods were recognised by Conductors when talking about communicating with children on a one-to-one basis, it was not really spoken about within the focus group in terms of the child communicating with others within the group. Within my diary reflections, I observed children using unaided AAC methods because I was focusing on the children's communication using my reflection points however, I would not have picked up on this if I had not have been looking for it. Both the Conductors responses and my own reflection notes, suggests that Conductors are not 'seeing' the application of unaided AAC methods being used by the children within the group setting even though it is happening. This indicates that Conductors could benefit from time to remove themselves from the group and observe the communication that is happening within it. This would allow them to enhance their knowledge of the child's communication skills and challenge this further through their planning of the daily routine and task series.

Within the focus group, Conductors reflected that the teaching of effective and varied communication skills within the daily routine takes time. This drew upon another challenge faced by Conductors about how to balance allowing children enough time to communicate fully whilst not disrupting the flow of the

task series within the daily routine.

One of the most important points that emerged from the study however related to the Conductor's ability to utilise the daily routine to teach effective and varied communication skills is a learning journey. This takes time and practice and is not a skill that Conductors come straight out of Conductor training knowing. This relies on hands-on experience and problem-solving by the Conductor. As an experienced conductor, even within the short time that I diarised my reflections, I could see a change in my own skills. This highlights the need for Conductors to continually reflect on the impact of their practice, so that they can continue improving the learning environment and so facilitate development of the child's communication skills.

RQ2

How do Conductors plan and prepare the environment to create opportunities for spontaneous communication?

The study reinforced the need for the relationship with the child, in order for the child to believe in their ability to communicate, with the Conductor who wants to understand them. Kersner and Wright (2015) identified that the desire to communicate and having someone to listen to you are two of the three key components of communication. This demonstrates that the relationship between the Conductor and child is key in the promotion of spontaneous communication. The third of these components relates to the skills required to express one's self.

Although Conductors plan where to place children or who to put them next to, to encourage social interaction, this is only one part of the solution. For children to spontaneously communicate, they need to be taught the communications skills in order to do this. Conductors plan every moment of the daily routine and the study found that the unstructured parts of the daily routine such as toileting time or the time when children are together before a Conductive programme begins are times when spontaneous communication

was observed. Although Conductors mentioned these times when spontaneous communication was observed, none of them spoke about the fact that these are times when they would expect the children to spontaneously communicate. The narrative of the focus group suggested that the Conductors were highlighting that they do not see much spontaneous communication happening within the conductive programmes but not why this is. The lack of acknowledgment that the observed spontaneous communication happened during times that were planned for the application of communication skills suggests that Conductors did not see it in this way. Although it was not specifically said, the fact that Conductors appeared to be surprised that the children using AAC did not spontaneously communicate during the Conductive programme implies that as Conductors we may have unfair expectations of AAC users. Verbal children would not be allowed or expected to start spontaneously communicating in the middle of a Conductive programme or lesson so why should children who use AAC be allowed or expected to? If we expect or allow this of children who use AAC, then we are not teaching them the social communication skills needed within general society.

Within my diary reflections I noted the difference in the number of spontaneous interactions that were happening within the group when the daily routine was more relaxed and less structured compared to a typical daily routine that is highly structured. This poses the question of whether a highly structured daily routine stifles opportunities for children to apply the communication skills they have learnt during the task series in order to spontaneously communicate rather than aiding it.

Conclusion

The study found that the learning environment is crucial in enabling children to learn effective and varied communication skills and in the creation of opportunities for them to spontaneously communicate. Most importantly, the key themes that emerged from this study reflect the

philosophy of the HP in CE and cannot be spoken about in isolation. Due to the small scale of the study and limited representation of Conductors from around the UK, there are points which arose which would benefit from further research:

- Whether the use of AAC methods within CE affects the fluency of the daily routine
- Whether a highly structured daily routine stifles opportunities for children to apply the communication skills they have learnt during the task series in order to spontaneously communicate, rather than aiding it
- Widen the research 'reach' by including conductors from other settings, including those in multi-professional teams

Perhaps the most important outcome of this study is the personal growth I have seen in myself from my experience as an insider researcher. I have learnt to reflect more on my practice and to open my eyes to really 'seeing' the communication that is happening within the group at all times, something which I did not pay attention to before this study. The use of diary reflections within the study has enabled me to already start to make changes to my practice and I am now more confident in modelling AAC methods to the children. It was reflected on within the study about how, as Conductors we can improve our skills in order to improve the learning opportunities we give to the children, therefore I will be looking to access professional development opportunities in this area to further enhance my skills.

Lucy Barraclough

Conductor NICE (Early Intervention)

This article is an edited version of her MA dissertation submission.

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★ ACTION RESEARCH ★

ACTION RESEARCH INTO THE IMPROVEMENT OF MOTIVATION IN A REMOTE PARENT AND CHILD CONDUCTIVE EDUCATION GROUP:

Dissertation Research Findings

Reka Simandi

Introduction

Earlier this year, I qualified as a conductor. My practice placement throughout my study was STEPS Conductive Education Centre in Leicestershire, and I have continued to work there since graduating. STEPS mainly provides parent and child Conductive Education (CE) sessions for children under five but also runs one session a week for school-age children. At STEPS we are particularly proud of how well we support the parents/carers and families of the children who attend our sessions.

In my third year of study, I undertook a research project. At this point in my learning journey, I had undertaken just over one semester of face-to-face practice before the COVID-19 pandemic forced us to take our services fully online for eighteen months. I felt that I had still learnt and developed some valuable skills through leading and facilitating in remote sessions and that we continued to support the families well, however by the time I was in third year we were running one face-to-face session and one remote session per day. For these reasons, I decided that I wanted my dissertation research to relate in some way to the delivery of remote CE. As this means of delivering CE had only become widespread during the pandemic, I anticipated that there would be a significant gap in existing literature, making it harder to position my 'problem' within

an academic sphere. The problem I identified was that parents/carers were not as motivated to work with their children in remote sessions as they were when sessions were face-to-face. Therefore, my research focus revolved around my exploration of the impact of online CE. I took a pragmatic approach to the study, and chose a methodology and data collection method that supported my learning style; Action Research. The title of my study became "Action Research into the Improvement of Motivation in a Remote Parent and Child Conductive Education Group".

I believed this was an important topic to research as, in remote parent and child CE sessions, the parent/carer acts as the only facilitator to their child who is physically present in the same room. Therefore, the parent's/carer's motivation became perhaps even more important than that of the child, and because of the remote nature of the relationship appeared more challenging.

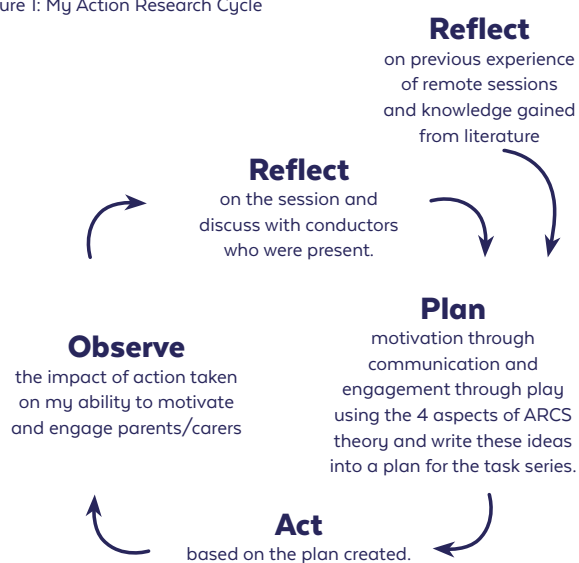
Method

As I sought to gain practical skills and directly apply them to the identified practical problem, the research method I chose to use was action research. To carry out action research, one plans the action they are going to take, acts, then reflects on the impact of their action before "re-planning" and repeating the process. My research questions were:

1. What is the role of communication in the motivation of parents/carers in my remote practice?
2. How can play be utilised online more effectively to increase parents'/carers' engagement in remote Conductive Education sessions?

I sought to answer these questions by applying Keller's (1983) ARCS theory to planning and leading remote sessions. I used this theory to help me reflect on the impact of my online leading skills; in particular my ability to motivate and maintain the engagement of parents/carers. Keller's theory proposes four steps for motivating and maintaining the motivation of learners: attention, relevance, confidence, and satisfaction. For each research question, I planned ideas for how to maintain attention, establish relevance and so on, for example, using parents/carers names when giving feedback and encouragement in order to try to keep their attention. I then transferred these ideas onto my task series alongside specific tasks to ensure that I would remember what to say and when. For three sessions where I led the same group, I reflected on and "re-planned" my motivational strategies (see figure 1).

Figure 1: My Action Research Cycle



The most significant findings of the research are categorised by the research question and which of the four stages of the ARCS model they relate to.

RQ1

What is the role of communication in the motivation of parents/carers in my remote practice?

Attention

Significantly, using parents'/carers' names when giving feedback and encouragement made it much easier for me to attract and maintain their attention. This was perhaps because it reinforced that I was considering them as well as their child, and them individually as well as the group as a whole. When I used this technique, parents/carers took a more active role in completing tasks with their children, which made it easier for me to keep the group together. Furthermore, receiving positive feedback directly – rather than only through their children – increased how much they engaged with the session and how much effort they made to motivate their children. Additionally, adding a new task to the task series that the group had not done before also helped me keep parents/carers attention, at least for the duration of the new task. This was likely due to the fact that they needed additional information about how to help their child do the task. Therefore, they were more attentive while I demonstrated facilitation with a demonstration doll.

Relevance

As conductors, we know that the child must have a purpose in order to act. However, I had not previously considered that, if parents/carers are to take an active role in aiding their children's learning, I should be giving them a purpose as well. Therefore, when planning the relevance aspect of my motivation, I tried to think about what parents/carers may want their child to learn to do. Then, during the research sessions, I stated the transferrable skills that several of the tasks were teaching, and later added the potential

applications of these skills. I hoped that this would make parents/carers want to help their child participate in the task in order that they learn the skills and apply them elsewhere. For example, reaching out and taking bells from the parent/carer teaches the child reach and grasp skills as well as the maintenance of their grip on objects. This can then be applied to self-care activities such as using a spoon, toothbrush, or hairbrush. Parents and carers seemed to be more interested in helping their children learn when I explained the purpose of the task.

Confidence

During our remote sessions, we had started asking the parent/carer for feedback for their child additional to what the conductor leading the session provided. I noticed that when we asked parents/carers if they had “anything to add?” they rarely did. We were all consistently using the question “anything to add?” so I decided to start using more specific language in order to help parents/carers reflect positively on their child’s achievements during the session. Instead I asked “what was your favourite thing your child did today?” Suddenly, every parent/carer in the group had at least one piece of positive feedback to give to their child. I think this had a significant impact on parents’/carers’ motivation as it made them think about what they had enabled their child to achieve that day. Therefore it may have given them more confidence in their ability to help their child learn. It also provided me as the leader with additional insight into the children’s progress when the parents/carers shared their observations. We now use this question in face-to-face sessions and it works there too.

Another method I used to attempt to increase confidence was reminding parents/carers of their children’s aims. I started to do this at the moments where they could be achieved and communicated explicitly which aspect of facilitation they should reduce or remove in order that the child could try to achieve the aim themselves. This put a stop to the common occurrence of the parent/carer helping their child to carry out the very movement that I wanted the

child to attempt independently. Furthermore, it showed them more of their child’s potential as they were able to see how much the child can do without help. This made it easier to motivate parents/carers to try to facilitate their child’s learning rather than achieving their aim for them as I was providing specific instructions on how to enable their child to work at the level of potential.

Satisfaction

Something that probably seriously reduced the motivation of parents/carers during lockdown was that sessions were no longer together in a “physical” group. Therefore, they were lacking the natural conversations and support of others that would normally occur in a face-to-face session. To try to create the “group” feeling while we were apart, I facilitated social interaction between parents/carers by using the “gaps” in the session to talk about how different members of the group were facilitating their child. This made it easier to motivate them as well as to keep the virtual group together because I could draw a parent’s/carer’s attention to the group on-screen by praising another for their creative and interesting facilitation methods or use of household items as equipment.

RQ2

How can play be utilised online more effectively to increase parents’/carers’ engagement in remote Conductive Education sessions?

Attention

Turning tasks into games or presenting them as games or competitions was something I had used in the past to engage school-aged children in their online sessions. However, during my research I found that this also had a positive impact on the engagement of parents/carers. The first of these games that I tried in the research group was for the task where children ‘log roll’ continuously. I stated that they should move away from the screen and race to see who could roll to it the fastest. All parents/carers in the group had to engage to move either the screen or their child and most then also had to facilitate their child’s rolling in order for them to participate in the

race. They all seemed to enjoy themselves and it reinforced the importance of their role in enabling their child to play. I then continued presenting more tasks as games encouraging play between parent/carer and child in subsequent sessions.

Relevance

I built on my creation of play by stating applications of the skills learnt through the play that takes place in sessions and found that this explicit stating of the task's purpose further increased engagement. However, what was even more effective was stating the importance of playing with parents/carers in children's learning. This was potentially because it showed the parents/carers that they have an important role in their child's development, and it is a role that they alone are suited to. This encouraged everyone to engage their children in play.

Confidence

More often than in face-to-face sessions, children in remote sessions may end up doing tasks in an alternate position or doing something else completely. During my research sessions, I started to consciously use humour to reassure parents/carers when this was the case, whilst acknowledging that the child is still learning through their activity. This made me feel that the atmosphere in the remote session became more relaxed. The impact of this appeared to be that parents/carers felt under less pressure and were able to laugh about what their children were doing. This seemed to motivate them to work to reengage their children rather than giving up.

Satisfaction

In my opinion, the most important finding in this section was the impact of giving parents/carers the opportunity to choose a game to play with their child at the end of the task series. I told them to do whatever their child's favourite way of playing with them was. Everyone chose something to do and engaged their child in play. This facilitated interaction because parents/carers were interested in what others in the group had chosen to do. Furthermore, observing what activities they chose to do could help with

making play in remote sessions more engaging and appropriate for the group by creating tasks and activities that I know they enjoy.

Conclusion

I feel that the findings from my research provide useful motivational techniques for remote sessions whilst many could also be applied in face-to-face CE sessions. Slightly adjusting the way I communicated had a profound impact on my ability to motivate parents/carers and using play online to successfully increase their engagement reinforced that play is not just for children. All parents/carers reacted positively to being included in my motivation which demonstrated the importance of recognising parents/carers roles in their child's learning. Carrying out the research confirmed the importance of looking back at theory when one has a practical problem and, additionally, the importance of planning because theory gave me ideas of what to do but I would have forgotten to do it if I had not planned it onto my task series. I am applying what I learnt from my research to our current face-to-face service as most techniques found are transferrable. Carrying out the research massively improved my relationships with parents/carers and increased my confidence in forming professional relationships, I had always found this easy to do with children but used to find it quite unnerving talking to parents.

Reka Simandi

Conductor at STEPS CE centre Shephed UK

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★ CE TAKES PLACE WITHIN A SOCIAL CONTEXT ★

THEORIES OF SOCIAL LEARNING CAN ENHANCE OUR UNDERSTANDING OF THE PURPOSE OF THE GROUP AND THE ROLE OF THE CONDUCTOR IN CREATING CHANGE AND DEVELOPMENT

Fiona Holroyd

Introduction

“Human life is a fantastic adventure. Our ability to move from what we do not know to what we know and from what we know to what we do not know is truly fascinating and filled with hope: we can move, we are able to take one step further” (Strandberg 2007, pg.16)

How is it possible to achieve this adventure with a person who has a motor disorder such as cerebral palsy? They can do it alone. They may fail many times before they experience success, if they experience it at all. Or a person can experience this adventure guided by interactions and relationships with others. Relationships built on trust, belief, security, expectations, support, guidance, help and encouragement.

Petö, Feuerstein and Vygotsky all based their work on the premise that teaching and learning is based on human relationships and the need to teach others how to learn (Sharron 1994, Sutton 1990). We need human interaction, not just the direct response to an environmental stimulus, in order to learn and therefore be able to adapt to our environment. By examining Vygotsky’s zone of proximal development (ZPD) and Feuerstein’s mediated learning experience (MLE) theories alongside Conductive Education (CE), we are able to reinforce how learning within a social environment is

fundamental in transforming the learning potential of children with a motor disorder.

Feuerstein and the Theory of Mediated Learning Experiences

Unlike Piaget (Feuerstein et al. 1999), Feuerstein believed that learning cannot happen only through the response of a person to a direct environmental stimulus, but human interaction is the essential factor influencing the cognitive development of a person. Feuerstein gives a broad definition of his MLE as “an interaction of an organism with its environment through a human mediator” (Feuerstein et al. 1999, pg. 3). A MLE is a process of learning how to learn within a social context.

In a MLE the person leading the interaction will guide and shape the intention of the learner so the interaction will result in the flexibility and modifications essential for adaptability within our environment (Feuerstein, 2009). This definition highlights three essential characteristics in a MLE “intent, meaning, and transcendence” (Sharron 1994, pg. 44). These will be discussed below, alongside the role of the conductor in CE. A MLE draws the learner beyond their own experiences enhancing the development of further learning. Kozulin and Presseisen (1995) highlight the similarity of this way of teaching to that of Vygotsky’s ZPD.

Vygotsky and the Zone of Proximal Development

The ZPD can be described as the difference between what a learner can do on his own, without help, and what the same learner can do when helped by, or working with, more experienced people (Lave and Wenger, 2005). Support given to the learner in the initial performances of the task is reduced and removed as the learner learns to do the task themselves. Vygotsky believed organised teaching within the ZPD would stimulate a developmental process, which would not have occurred without the instruction, making it possible to apply the learnt knowledge elsewhere (Härkönen 2003). Instruction, a social interaction, is essential (Vygotsky 1981) and a necessary tool in the development of a child's thinking and process of learning.

Daniels (2005, pg. 7) suggests that Vygotsky's ZPD provides the "setting in which the social and the individual are brought together". Petö similarly realised in order for a child to learn, develop and integrate into society, motor skills have to be developed alongside cognitive, social and emotional skills. Humans are social creatures and Petö felt that learning had to encompass a social aspect (Biro, 2006), hence the importance placed on group learning in CE.

Petö and Conductive Pedagogy

Petö created CE through his desire to teach children with motor disorders how to learn. His objective (Sutton, 1990) was to break through the cycles of dysfunctional development through deliberate and structured educational intervention. Human learning is multifaceted (Härkönen, 2003), likewise CE is a complex approach to learning. The primary aim of CE (Gegenwarth 2012, pg.18) is the development of the whole personality, promoting an active way of life, self-realisation and the development of the ability to solve problems in order to adapt to new situations. This is orthofunction. The similarities between Feuerstein's MLE, Vygotsky's

ZPD and CE become obvious when we look at the social context in which learning takes place within CE and the role of the conductor and the conductive group in that process.

The Conductor

The role of the conductor is pivotal in the learning experience. The conductor creates the appropriate conditions for learning, creates a stimulating, positive and relaxed learning environment and leads the complex conductive programme (Gegenwarth 2012, pg.18). She guides the child to a solution of the task and is constantly observing those solutions in order to plan further development (Hari, 1970). In order to achieve this, her personality must convey to the child that she believes in his ability to learn. Through her total respect of the child's personality she enables an "intensive social interaction" to occur (Tatlow 2005 pg. 169).

The Conductor, a Mediator of the Learning Experience

Virtually every situation has the potential for a mediated learning experience (Sharron, 1994). Learners need to be helped to place these experiences in the context of the real world, or they will have many difficulties using them when they are needed in real life situations – as well as difficulties in learning them in the first place. This is a key part of the conductive programme; it is no good being able to just sit on just one type of stool or not recognise the shape of a circle because it is blue rather than yellow. Let us examine the aforementioned three characteristics of a good MLE (intent, transcendence, and meaning) in light of the role of the conductor:

Intent (Feuerstein et al. 1999) refers to the intention of the mediator to focus the attention of the learner on some particular thing or task. The intention is not only to focus the learner's attention but to also share the intention with the learner. This sharing builds up a relationship between the two people and gives the intention a behavioural, emotional and cognitive element. In CE, intention in this context, is to focus the learner on the goal of the task and is the

conductor's determination to motivate and get the right response from the learner. For example, the conductor wants the child to reach out with straight arms to grasp Mr Happy, a soft, round, bright, yellow ball. The conductor will use her voice in an encouraging, motivating tone ("stretch your arms, reach for Mr Happy, you're nearly there, stretch a bit more"). She will use positive body language (a big smile on her face, wide eyes) and gesture (get down to the child's level, facilitate the child, make Mr Happy animated by talking, dancing or singing) to ensure learning takes place.

Transcendence widens the interaction beyond the primary goal (Feuerstein et al. 1999). Mediation allows the individual to acquire a skill and this is the primary goal of the interaction. Transcendence is the intention to make that person feel competent and is beyond the goal of just acquiring the skill. For Kozulin and Presseisen (1995) transcendence involves moving beyond the current task and developing the potential to apply it elsewhere in slightly different ways. In CE the conductor combines both to create the willingness in the learner to expand both his cognitive and emotional behaviour (Sutton, 1990), leading towards orthofunction. The conductor's optimism and focus on praise for effort (rather than on results) transfers to the child who feels good about himself, is curious and tries even harder (Brown, 2005). A conductor can feel his sense of achievement, it is written all over his face.

Meaning (Feuerstein et al. 1999) gives energy and intensity to the learning experience. It keeps the learner involved in the interaction so he is much more interested in participating. The conductor's knowledge of the child and what motivates him is fundamental in giving the task a meaning. Learning to stretch his arms out to the side and bring them back together can mean "I can give Mummy a big hug" or "I can put my coat on myself". Tasks involving isolation of limbs can mean "If I can keep one leg still whilst moving the other one, I can kick the football to my brother". If the child understands how he can use the skill in another way that is meaningful to him, he will try his utmost to achieve it. The role of the conductor

is to make these links purposeful and then both the child and the conductor's goals are met.

Conductors create opportunities to extend learning beyond the original task thus enabling learning to be spontaneous: how else can we use Mr Happy within the conductive programme? Children can reach, grasp, and move him from hand to hand. They can squeeze him between their hands, their knees, or roll him to a friend. They can roll him under their feet, push, bounce, throw, catch and kick him in all positions. They can roll over towards him or turn around on the plinth towards him. The conductor therefore builds a structure within which the child is given skills enabling him to think, make sense and adapt to the world around him, further developing his learning potential.

The Conductor, Working within the ZPD

By definition, working within the ZPD means collaboration is needed in order to develop potential (Tatlow 2005 pg.129). In CE this collaboration is between the conductor and the child. It is the conductor's role to create the ZPD and the best conditions in which a child can learn, making the most of his potential and strengths.

The conductor will observe and, through earning trust and respect, will learn from the child. She learns about the child's personality. This young child with spastic quadriplegia, with a visual impairment, is inquisitive and motivated by bright coloured objects. Mr Happy is perfect! The conductor knows what the child can do independently; her actual level of development. The child is able to stand holding on to two ladder-back chairs and transfer her weight. This is the starting point of working within the child's ZPD. Knowing the child's personality, ability and what motivates her, the conductor will set aims and plan her teaching accordingly. The conductor creates ZPD through involving the child in new activities/tasks taking place in the initial stages of developing a skill (Daniels 2001, Härkönen 2003); for example if the conductor's aim for the child is for her to be able to turn around 360 degrees, reaching between pieces of furniture, each time

the child turns she discovers Mr Happy sitting on a chair or in between the rungs of a ladder; her motivation. The child listens to the conductor's verbal guidance, learns from her facilitation and is able to perform the task better together with the conductor than on her own. Similarly, the conductor can sense how proud the child is of achieving this success. Her glance says "Look at me!" and the smile beams across her face.

Observation and reflection allow the conductor to watch for development and adjust facilitation, aims and differentiation of tasks to facilitate progression (Cottam & Sutton 1986). This two-way process of learning defines the ZPD for a learner (Tatlow, 2005). Through guidance the child develops an independent understanding of the task (Vygotsky, 1981). Transitioning through the ZPD her learning opportunities are extended, leading to her adaptability of applying the same learning to different situations i.e. orthofunction.

Although each child is an individual they share commonalities with other children. The conductor is responsible for creating the conductive group in which the children are "bound together emotionally" (Sutton 2014 pg.2) to each other and their conductor, and together work on their "joint endeavour". Feuerstein, Vygotsky and Petö believed the power of teaching through social interaction could change the process of a child's development. Feuerstein's social tool is a MLE; Vygotsky's is the ZPD; Petö's is the group.

The Conductive Group

The group can include conductors, children, adults and parents and is constructed to allow children to demonstrate their abilities rather than their problems. The group provides (Brown 2005 pg. 25): A positive atmosphere, a learning environment in which children are taught skills they didn't know they could achieve, facilitating development of the individual's personality, confidence and identity within the group. A motivating force. Group dynamics, shared experiences and working together activate interest and motivate a child (Tatlow 2005).
The group watching the child push down the

plinth urge her on "push, push". Peer expectations encourage her. The conductor praises her for having straight arms and the group share in her success by cheering. The group enables the child to show her level of achievement. Her goal, achievement and success are all shared.

Learning within a social unit. Through group activities the child acquires communication skills, cooperative skills, initiative, self-esteem, friendship and a feeling of responsibility (Tatlow 2005 pg.131). In CE the groups are heterogeneous. A child can see what is possible by looking at someone else and learns from them. The child with hemiplegia is inspired by seeing her friend with diplegia using both hands to pick up and throw a big ball. Vygotsky wrote a "child gains competence from the room" (Strandberg 2007 pg.16). In CE, competence is created by Feuerstein's mediator, the conductor, within the group and learning environment. But what if learning doesn't happen? The conductor needs to observe, reflect and focus on the child's engagement as a learner (Carpenter 2011). She can: look at the child's position within the group; at the facilitator; at the environment. Change her rhythm or tone. Change the activity to stimulate the child's curiosity and encourage them to persist. Ensure aims are appropriate and within the ZPD.

Conclusion

CE is a complex approach to learning, developing the whole person – social, emotional, cognitive and motor development. Through the conductor and the group learning takes place in a social context and social learning theories such as Feuerstein's MLE and Vygotsky's ZPD play a major role in understanding this process. Being a multifaceted approach, CE integrates not only social learning theories but cognitive and behaviourist theories as well. It is through the observational skills of the conductor that learning theories are skilfully combined and what is possible for each learner is uncovered.

A child is shown what they are capable of, learning experiences are supported through the conductor and the group, and their potential extended by moving the boundaries of what they believe is possible again. Learning within a conductive environment is never static, is always ahead of development and is a truly social experience.

It is Strandberg's (2007) "conductive" adventure.

Fiona Holroyd

Lecturer with the Conductive College and Conductor at STEPS CE Centre UK

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