

Annex 2. Allocation of Categories of Students with Disabilities, Learning Difficulties and Disadvantages (included in the resources definition) to Cross-National-Categories A, B and C

Bosnia Herzegovina

Cross-National Category A

1. Mild mental retardation

Children and youth with mild mental retardation are those who with expert assistance of special educator can be educated and trained for work in general and special conditions, and whose IQs is from 50 to 70.

2. Moderate mental retardation

Children and youth with moderate mental retardation are those who have difficulties in adaptive behaviour and who can be trained to do some of the simple jobs within the work process. Those children can, with the expert support, be included in local community and have IQs from 35 to 49.

3. Severe mental retardation

Children and youth with severe mental retardation are those who, with the expert support, can be trained to perform the basic hygiene skills, basic independency as well as basic socialisation. IQs from 20 to 34.

4. Profound mental retardation

Children and youth with profound mental retardation are those who need permanent care and protection in family or in special institutions. IQ is 19 or less.

5. Autism

Autism is a biological impairment of the brain that affects communication and social skills. It embeds wide spectrum of difficulties that can be graded from mild to profound.

6. Motor difficulties and chronic diseases

Children with motor difficulties are children with impairments and deformations as well as with functional or motor disabilities. These children, therefore, need protection and training for life and work in special conditions. Difficulties are present because of impairments in locomotive apparatus, central and peripheral neural system, as well as impairments resulted from chronic diseases of other systems.

7. Blindness and low vision

Blindness is condition when better eye with the maximal possible correction has visual sharpness 0.05 and less or central vision on the better eye with maximal possible correction 0.25 with narrowed field of vision from 20 degrees or less. Children with low vision are those who on a better eye with correction have visual sharpness 0.4 (40%) and less, as well as children who on a better eye with correction have visual sharpness more then 0.4 (40%) but who might experience worsening of the vision status.

8. Deafness and hearing impairments

Deaf children and youth are those who have hearing loss of 80 decibel and more and who without hearing aids cannot perceive oral speech. Hard of hearing are children who have hearing loss between 25 and 80 decibel, and who cannot completely or partially perceive oral speech.

9. Combined difficulties

Children and youth with combined difficulties are those who have more than one difficulty such as mental retardation, hearing impairments, visual impairments, speech and language difficulties etc.

10. Down's syndrome

11. Speech and language difficulties

Children with speech and language difficulties are those whose speech communication is impaired that much that it negatively affects psycho-physical development or rehabilitation procedure aimed at treating the difficulty and insurance of normal development, because of irreparable organic and functional changes in central and peripheral neural-muscular system.

Cross-National Category B

12. Learning difficulties

Learning difficulties are caused by organic factors or psychosis of diverse etiologies, according to medical, psychological, defectological and social expertise.

13. Attention Deficit Hyperactivity Disorder (ADHD) (Not within resources definition) Attention deficit which can be accompanied by hyperactivity is developmental impairment of self-control. ADHD imply child's behaviour which excels with by fluctuation, rapid changes of interests, and changes of activities in very short time period.

Cross-National Category C

14. Difficulties caused by socio-economic, cultural deprivation and/or caused by linguistic factors (Not within resources definition) Learning difficulties caused by socio-economic, cultural deprivation and/or caused by linguistic factors embed the children who have learning difficulties caused by: poverty, different cultural background and/or language barriers in comparison with other children (national minorities)

Bulgaria

Cross-National Category A

1. Students with mental retardation

Children and students with slow or incomplete development of intellectual abilities, connected with disorders of all basic abilities needed for common intelligence, e.g. cognitive, speech, language, motor and social. This may be combined with other physical or psychological disorders.

2. Students with hearing impairments

Children and students with hearing loss over 30 dB, which hampers discrimination of sounds, processing of linguistic information and development of speech, language and communication abilities. This causes different social consequences for the individual - in learning, socialisation, communication, re-adaptation, re-integration, etc.

3. Students with visual impairments

Children and students with disabilities in visual activities, which they face during completion of visual tasks in certain conditions from the point of view of other people. This causes different social consequences for the child – in learning, socialisation, communication with other people, need of re-adaptation, re-integration, etc.

4. Students with speech-language disorders

Children and students with serious speech, language and communication disorders, such as stuttering, developmental dyslexia, specific language disorders, articulation disorders, voice disorders and others, e.g. disorders of all processes, connected with understanding and production of spoken and written language and verbal and non-verbal communication, which makes for difficulties in learning and education.

5. Students with physical impairments

Children and students with different disorders of the loco-motor system, such as cerebral palsy, etc. They reflect on the physics of body with different consequences. They may vary from mild without serious consequences, to severe with physical impairments which need re-adaptation, re-socialisation, re-integration, etc.

6. Students with multiple disorders

Children and students with multiple disorders, for example blind-deaf, blind with physical impairments and others. The disorders may be severe and cause different social consequences for the child - in learning, socialisation, and communication with other people, need of re-adaptation and re-integration, etc.

7. Students with autism

Children and students with a type of generalised development disorder defined by the presence of abnormal and/or impaired development which can be seen in the abnormal type of functioning of the following three areas: social relations, communication, and behaviour, which are limited and stereotypical.

Cross-National Category B

8. Students with learning difficulties

Children and students with difficulties in psychic processes which causes difficulties with understanding and use of spoken and written language. They have difficulties with thinking, speech, reading, writing, and mathematical operations. The problem may cause critical disparity between the child's potential and his progress.

9. Students with psychological disorders

Children and students with hyperkinetic disorders, which are characterised by an early beginning; a combination of hyperactive behaviour with emphasized inadvertence and a lack of firm participation in solving tasks; generalization of those characteristics in different situations in time.

Children and students with behaviour disorders, which are characterised by a repetitive and stable model of unsocial, aggressive, or provocative behaviour .

Children and students with emotional and behaviour disorders, which are characterised by a combination of aggressive, unsocial, and provocative behaviour with evident symptoms of depression, anxiety, and other emotional disorders.

Cross-National Category C

10. Students with other difficulties due to social reasons

Children and students with educational skill disorders, emotional and behaviour problems due to bilingualism, immigrant families, problematic family environment, institutionalization, etc.

Croatia

Cross-National Category A

1. Visual impairment

Visual impairment includes blindness and amblyopia. A blindness is considered when a visual acuity of 0.10 (10%) is obtained by using corrective glass and also when using corrective glass up to 0.25 (25%) is necessary for central sight at better eye, but the eye field is reduced for 20 degree and less. The education in Braille alphabet is necessary when the visual remain at better eye is 0.05 (5%) with corrective glass or regardless visual acuity and reading disability of letters and characters Jeager size 8 in a short distance. The amblyopia means the visual acuity at better eye with corrective glass of 0.4 (40%) and less.

2. Hearing impairment

Hearing impairment includes deafness and hearing loss. The deafness is considered as a loss of 81 decibels and more and a person without hearing apparatus cannot completely recognize voices. The hearing loss is considered a hearing impairment from 25 to 80 decibels at ear with better hearing and when the verbal speaking is partially or almost completely developed

4. Physical disability

For physical disabilities as impairment, deformations, functional or motoric difficulties there is need to provide protection and enabling appropriate life and work conditions. The causes of this condition are: a) impairments of loco-motor system, b) impairments of central nervous system, c) impairments of peripheral nervous system, and d) impairments as a result of chronic diseases of other systems.

5. Mental retardation

Mental retardation is a state with difficulties regarding inclusion to social life, in a relation with interrupted or uncompleted intellectual development defined by means of medical, psychological, defectological and social expertise. Intellectual level examined by instruments is approximate to Wechsler type of 0 to 69 if an outstanding emotional lability is not defined. The mental retardation levels are: a) minor mental retardation, IQ within 50 to 69, b) mild mental retardation, IQ within 35 to 49, c) rather severe mental retardation, IQ within 20 to 34, d) severe mental retardation demanding continuous care and protection. Depending on ability grade, the most elemental habits could be reached by applying an appropriate rehabilitation, IQ within 0 to 20.

6. Organic conditioned behaviour dysfunctions

Behavioural disorders by organic factors or progressive psychopathological condition

Behaviour dysfunctions conditioned by an organic factor or by progressive psychopathological condition based on medical, psychological, pedagogic and social expertise should be enabled for life and work within appropriate conditions and for implementing appropriate socio-protective forms.

7. Autism

Autism is a condition of emotional, intelligence, psycho-motorical, verbal and social communication disability. The basic characteristic of autism is a self-retirement, voice-speaking communication dysfunction and aimless activity and perseveration.

8. Other visual impairment

All other visual impairment which is not blindness and amblyopia.

11. Health problems

Health dysfunctions difficulties category includes students suffering epilepsy, heart and blood vessel disease, gastrointestinal disease, uric disease, respiratory disease, endocrine disease, psychiatric disease, elective mutism and chronic diseases that are reason of longer medical treatment.

Cross-National Category B**3. Dysfunctions of speaking and voice communication (speech and language disabilities)**

Dysfunctions of speaking and voice communication (voice, speaking, language, reading, writing) are those where exist regarding speaking communication or where the speaking communication does not exist because of non-renewable organic and functional changes in central and peripheral neuromuscular system, so it is necessary to provide conditions for training and protection..

9. Specific learning difficulties/Other dysfunctions of speaking and voice communication

Other dysfunctions of speaking and voice communication like alkalis, stammer etc. Specific learning difficulties regarding: reading (dyslexia, alexsia), writing (disgraphia, agraphia) and calculating (discalculia, acalculia)

10. Reduced cognitive function/Remedial Education

Reduced cognitive function category includes students having lower learning score, learning difficulties or student that teachers additionally work with attending remedial teaching.

12. Behaviour problems

It includes students who violate younger and weaker students (knowledge of professional development school department), blackmail and extort, physically or verbal aggressive, frequently lie, steal, destroy things, interfere with lesson, students who do not respect adults, who are self-aggressive, who have harmful friendships and go out after 11 p.m. (forbidden for children under age of 16), or students whose behaviour or unfair absence was the reason for getting reproof.

13. Hyperactivity and attention deficit (not in the resources definition)

It includes students whose concentration is somewhat difficult or they are not focused on their tasks.

14. Addictions (not in the resources definition)

The category of addictions includes students who consume alcohol, drugs and tobacco.

Cross-National Category C**15. Other difficulties/disadvantages (not in the resources definition)**

Other disadvantages include social deprivation and emotional difficulties.

16. Institutional accommodations (not in the resources definition)

It includes students who live in students' house during their education, students who live in children's centres for social reason, students who live in trustee family and students who live in correctional institution.

17. Family problems

This category includes students from families that are characterised by dysfunctional relations which significantly influence the living conditions of students. (not in the resources definition)

18. Language dysfunctions (Second language)

This category includes bilingual students, national minority students, students with insufficient knowledge of Croatian language, Romany students.

Estonia***Cross-National Category A*****1. Students with intellectual disability**

Students with intellectual disability are students whose learning ability is limited and who need simplified curriculum or curriculum for students with moderate and severe intellectual disability.

4. Students with mental health problems

Students with mental health problems are students who have cognitive or emotional or psychiatric disorders or autistic spectrum disorders and need special methodology and additional support staff in a learning process.

5. Students with multiple disabilities

Students with multiple disabilities are students who have severe hearing and visual impairment, also students with moderate visual, hearing, speech and physical impairment, who have limited learning ability due to moderate, severe or profound intellectual disability.

6. Students with hearing impairment

Students with hearing impairment are students who due to their hearing loss have inability to hear or distinguish among different sounds and therefore will have problems in speech and language development to an extent that needs specialist support, special methodology, extended study-time or individual approach.

7. Students with visual impairment

Students who have a loss of vision that constitutes a significant limitation of visual capability or visual functions to an extent that they need special teaching methodology, adapted study materials, extended study-time or an individualised approach in teaching.

8. Students with speech impairment

Students who have an impaired ability to produce speech sounds or who have problems with voice quality to an extent that needs special methodology, extended study-time or an individualised approach.

9. Students with physical disabilities

Students with limitations due to their skeleto-muscular system necessitating physical aids, special methodologies, an individualised approach or an especially adapted physical environment.

11. Students with chronic and progressive diseases

Students with chronic and progressive diseases are students who suffer from chronic and progressive diseases or who due to long term illness have not been able to attend regular school, need medical monitoring or special support to fulfil curriculum requirements.

*Cross-National Category B***2. Students with learning difficulties**

Students who in spite of support and consultations from subject and class teachers are not able to fulfill curriculum requirements.

3. Students with specific learning difficulties

Students who experience deficits in any area of information processing that can manifest in a variety of specific learning difficulties - deficits in reading, difficulties with written expression or difficulties in learning math concepts.

10. Students with behavioural difficulties

Students who have serious social, emotional or behavioural problems and need special conditions, special methodology and additional support staff to achieve study results according to their abilities.

12. Students with temporary learning difficulties

Students whose difficulties can be overcome with the help of support services (corrective teaching, individual learning plan, speech therapy, adapted study materials). Part-time remedial teaching.

15. Gifted students (not applicable)

Students who have very good learning or academic results and who need adapted study materials and individual learning in order to develop their general or specific intellectual and academic abilities.

*Cross-National Category C***13. Students with accommodation difficulties**

Students who due to health problems or change of domicile need adapted study methods, study materials or specialist support in order to restore study results according to their abilities.

14. Immigrant students

Persons who have lived in Estonia less than 3 years and whose level of knowledge of the state language hinders acquisition of study material according to his/her abilities and who therefore needs additional support with adapted study materials, methodology and additional language studies.

Kosovo (UNMIK – PISG)*Cross-National Category A***1. Intellectual impairment**

Persons with intellectual impairments are those who have the intellectual level evidently under the average level beside their group ages, have difficulties in learning and social adaptation in different levels. Retard definition of mental-lags/ intellectual impairment. Mental light retardation level IQ from 70 to 55/50. Mental retardation middle-moderated level IQ from 55/50 to 40/35. Mental hard retardation level IQ from 40/35 to 25/20. Mental retardation very hard level of IQ under 25/20.

Mental retardation refers to substantial intellectual delay that requires environmental or personal supports to live independently. Mental retardation is manifested by below-average intellectual functioning in two or more life areas (work, education, daily living, etc.) and is present before the age of 18.

Intellectual impairment refers to substantial limitations in present functioning. It is characterised by:

- significantly sub-average intellectual functioning, existing concurrently with
- related limitations in two or more of the following applicable adaptive skill areas:
 - communication
 - self-care
 - home living
 - social skills
 - community use
 - self-direction
 - health and safety
 - functional academics
 - leisure
 - work
 - which manifest before age 18.

It is important to remember that there is as much diversity of characteristics, abilities and needs among people with intellectual impairment as there is within the general population.

2. Hearing impairment

Hearing impairment implies continuous reduction in voice hearing that obstruct the verbal communication. Hearing impaired persons are classified into half deaf and deaf persons. 1. In the half deaf category are those persons whose the verge of best ear 25-80dB have developed fully speaking or partly. According to the level of impairment we have classified in this way a) hearing light impaired persons 20-40 dB b) hearing mid impaired persons 40-60 dB c) persons with hard hearing impairments 60-80dB. d) Deaf persons are considered hearing impairment that is up to 80 dB.

Deaf refers to a profound degree of hearing loss that prevents understanding speech through the ear. Hearing impaired or hearing loss are generic terms used by some individuals to indicate any degree of hearing loss-from mild to profound. These terms include people who are hard of hearing and deaf. However, some individuals completely disfavor the term hearing impaired. Others prefer to use deaf or hard of hearing. Hard of hearing refers to a mild to moderate hearing loss that may or may not be corrected with amplification.

3. Visual impairment

1. Partly visual indicate few kinds of visual problems by which result in the need for special education.
2. "Weak visual impairment refers to the hard visual impairment, not necessary limited looking in a distance. Weak visual impairment is used for all visual persons who are not able to read the newspaper in a normal distance of sight even with glasses or eyeglasses. When they read they use the visual combination and other senses, although it is appropriate with brighten or the size of letters and sometimes use the Braille.
3. According to the "Law" 'blind' indicate that person has a lower visual than 6/60 in the best eye or a very limited visual field (20 grades in the wider point).
4. Students completely blind learn through Braille or other media- non visual. Normal visual 6/60, weak visual impairment <6/18 to > 3/60, very weak visual impairment (blind) <3/60 visual field <20 grade blind according to law.

Blind describes a condition in which a person has loss of vision for ordinary life purposes. Visually impaired is the generic term used by some individuals to refer to all degrees of vision loss.

4. Physical impairment

Physical impairment include congenital impairment (born) or gained of muscles, nerves, bones or skin which reduce remove or difficulties in carrying out daily activities such as: movement, personal care, clothes, food, cleaning etc.

Physical impairment as a musculoskeletal (involving the joints, limbs and associated muscles) and/or neurological (involving the central nervous system, *i.e.* brain, spinal cord or peripheral nerves) condition which affects the ability to move or to coordinate the control movement.

5. Multiple impairments

A multiple impaired person has a combination of two or more impairments. Multiple impairment persons are considered as persons with hard impairment.

6. Autism

Autism is a development disorder that characterises qualitative impairment of reciprocal social qualitative interactions, nonverbal communication, verbal imagination and limited number of activities and interest. Autism is showed prior to age 3.

Autism is a mental disorder originating in infancy that is characterised by absorption in self-centred subjective mental activity, especially when accompanied by marked withdrawal from reality, inability to interact socially, repetitive behaviour, and language dysfunction.

Cross-National Category B

7. Emotional disorders

This is a condition exhibiting one or more of the following characteristics over a long period of time and to marked degree that adversely affects a child's educational performance:

- (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
- (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
- (C) Inappropriate types of behaviour or feelings under normal circumstances.
- (D) A general pervasive mood of unhappiness or depression.
- (E) A tendency to develop physical symptoms or fears associated with personal or school problems.

Latvia

Cross-National Category A

1. Disabilities of mental development (mental retardation)

Mild mental retardation IQs 50-69; moderate - IQs 35-49; severe - IQs 24-34; profound - IQ 23 and less; and other conditions with corresponding IQs.

3. Visual impairments

(21015111/21)Acuity of vision with correction in the best eye is in the limits of 0-0.2; taking into consideration conditions of other functions of vision (visual angle 20 grades acuity of vision in proximity and necessity to use specially designed vision correction materials); other forms of pathological processes and their dynamics.

4. Hearing impairments

(21015211/21) Sensory neurological and conductive hearing impairments (levels 2-5), deaf and hard of hearing; children with cochlear implants and mild hearing disabilities.

5. Physical disabilities

(21015311/21) Congenital or acquired physical deformities and affections of support and movement system of the body; neurological patients with physical disabilities

7. Mental health disorders

(21015711/21) Mental disabilities, behavioural and emotional problems due to brain ailment or damage; mental illnesses, temper disorders; disorders connected to stress; pervasive developmental disabilities; severe cases of epilepsy.

8. Chronic health problems (somatic illnesses)

(21015411/21) Illnesses of digestive organs, diabetes (type 1), students with tuberculosis (TB) (all kinds of the disease); children who have been in contact with patient of active TB; students with non-specific lung diseases - asthma, chronic bronchitis, situations after lung operations, recurrent pneumonia, allergies like hay-fever.

Cross-National Category B**2. Learning disabilities**

(21015611/21) Specific learning difficulties - reading disabilities, writing difficulties, difficulties in calculating skills, mild cognitive disabilities

6. Speech and language disabilities

(21015501/21) Insufficient development of speech and language system (levels 1-2), phonetic phonematic disabilities; specific reading, writing disabilities; specific speech articulation disabilities; disabilities of expressive language.

10. Pedagogical correction/ Remedial Teaching

(2101) Students who due to different reasons (health problems, truancy, insufficient learning etc.) have not acquired the education standards.

Cross-National Category C**9. Disadvantaged background**

(Residential schools) (21011111/21) Pupils from disadvantaged background – poor families, abusive homes, orphans, children who have no parents' custody.

Lithuania***Cross-National Category A*****1. Intellectual disorders**

A mental capability deviation which generates behavioural, emotional and socialization disorders. (IQ below 70, measured by WISC-III test adapted to Lithuania).

5. Hearing disorders

A mild hearing disorder is considered to be equal to 26-40 dB of hearing loss. There are various levels of hearing loss. Hearing is assessed and evaluated by a medical doctor.

6. Visual disorders

Visual disorders – low vision is considered to be when a person's visual acuity with maximum of possible optical correction is equal or less than 0.3 or his/her visual field is equal or less than 60 degrees. There are levels of visual loss from a low vision till practical blindness. Vision is assessed by a medical doctor.

7. Movement disorders

Physical disorders. Physical conditions are assessed and evaluated by a medical doctor. These disorders might be inborn or caused by illness or physical trauma. Not always a student with such a disorder needs additional resources in educational system.

8. Somatic and neurological disorders

Chronic somatic and neurological disorders. Disorders of a heart and blood supply system, breathing, digesting, epilepsy etc.

9. Complex disorders

These are combinations of two or more disorders that belong to other groups of disorders. For example, intellectual disorder and visual impairment.

Cross-National Category B**2. Specific learning difficulties**

Specific cognitive disorders (*e.g.* attention, memory, visual or auditory perception disorders) caused by a minor brain dysfunction but definitely not by intellectual disorder, social disadvantages, visual or hearing impairment. In this case a student might be highly intelligent but nevertheless experiencing problems in reading, writing or mathematics.

3. Emotional, behaviour and socialisation disorders

Attention deficit hyperactivity disorder, hypo activity (extreme slowness), behaviour disorder, various disorders of emotional health (phobias, anxiety, aggressiveness etc).

4. Speech and other communication disorders

A deviance appears in speech, language and communication of a student to compare to common or usually used speech and communication. But this disorder is not caused by intellectual, visual or hearing disorders.

Cross-National Category C**10. Other disorders**

All disorders that are not covered by the former 9 groups (*e.g.* developmental disorders caused by a psychological and pedagogical neglecting of a child).

Students who belong to this group usually have a lot of special educational needs therefore additional resources are needed.

Malta

Cross-National Category A

1. Intellectual Disability

Mild to profound and includes: Auditory short-term memory, brain damage, Brain Encephalitis, Cognitive Delay/Impairment, Developmental & general delay in cognitive functioning, Down Syndrome, Fragile-X-Syndrome, Global Intellectual Impairment, Hyperkinetic Syndrome, Idiopathic Hypercalcaemia, Learning Difficulties, Mental retardation, Microcephalus, Phenylketonuria/PKU/GDD, Severe Hyper Kinetic Conduct Disorder, Significant Literacy Difficulties, Slow learner, Trisomy 21, West Syndrome.

4. Communication Difficulty

Aspergers Syndrome, Autistic Disorder, Communication Problems, Motor and Linguistic Difficulties, Pervasive Developmental Disorder, Phonological Speech Disorder, Speech/language Delay.

5. Sensory Difficulties

Charge Syndrome, Congenital Insensitivity to Pain, Duane's Syndrome, Hearing Impairment, Prosthetic Eye, and Visual Impairment.

6. Physical Disability

Achondroplasia, Albinism, Arthrogryposis, Autoimmune Enteropathy, Central Hypoventilation Syndrome, Cerebral Dysfunction, Cerebral Palsy, Complex Congenital Heart Disease, Crouzon's Syndrome, Dopa Responsive Dystonia, Dopamine Responsive Hypotonia, Dopsa N. Dystonia, Duchenne Muscular Dystrophy, Dwarfism, Dystonia, Epilepsy, Epileptic Dyslexia, Epileptic Fits, Gastric Problems, Gait Disorder, Hemiplegia, Hirsctuprung Disease, HMSM, Hydrocephalus, Hypersensitive to Nuts, Hyperthyroidism, Hypochondroplasia, Hypoplastic Cerebellum, Hypoxic Ischemia Spastic, Infantile Hydrocephal, Krabbe Syndrome, L. Dopa, Leucodystrophy, Lumbosacral Myelemeningocoele, Metatrophic Dysplasia, Nasal Encephalocoele, Nephrotic Syndrome, Obstetrical Brachial Plexus Palsy, Osteogenesis Imperfecta, Optic Nerve Hypoplasia & Abnormal Spinal Curve, Optiz Syndrome, Perthe's Disease, Pierre Robin Syndrome, R. Femur Deficiency, Recurrent Iron Convulsions, Russel Silver Syndrome, Sacral Agensis, Segawa Dystonia, Spastic Diplegia, Spina Bifida, Spinal Tumor, Tufting Enteropathy, Vater Syndrome, VP Shunt with Hydrocephalus, Worster Drough Syndrome.

7. Multiple Disability

Acrocallosal Syndrome, Aicardi-Goutieres Syndrome, Alagille Syndrome Disorder, Angelman Syndrome, Cornelia de Lange Syndrome, Cri du chat, Dandy Walker Syndrome, Global Developmental Delay, Idiopathic Congenital Nystagmus, Lennox Gastaut Syndrome, Myalgic Encephaloyelitis (Chronic Fatigue Syndrome), Moebius Syndrome, Multiple Disabilities, Neurofibro-matosis, Noonam Syndrome, Prader-Willi Syndrome, Rett Syndrome, Rommer-Mueller-Sybert Syndrome, Spastic Condition because of Tuberos Sclerosis, Tuberos Sclerosis Complex (TSC), Tourette Syndrome, Williams Syndrome.

Cross-National Category B

2. Specific Learning Difficulty

Dyslexia, Dyspraxia

3. Emotional and Behavioural Difficulty

Aggressive Behaviour Problems, Anxiety at school, Attention Deficit Disorder, Attention Deficit Hyperactivity Disorder, Behavioural problems, Emotional and Behavioural Difficulties (EBD),

Emotional Disturbance, Hyperactive, Immature Behaviour, Not Coping, Oppositional Defiant Disorder (ODD), Psychological Problems, School Phobia, Socio-emotional & Cognitive Development, Trauma.

Moldova

NOT PROVIDED

Montenegro

Cross-National Category A

1. Children with physical disabilities

Children with permanent physical disabilities, locomotor disorders, hard muscular disorders, cerebral palsy, etc.

- a) Light invalid children
- b) Moderate invalid children
- c) Hard invalid children
- d) Severe invalid children

2. Children with intellectual disabilities

Children with delay in intellectual development (basically or secondary origin). Due to that they have difficulties in general maturity and capabilities for learning and adopting of every day skills.

- a) Children with light disorders in mental development
- b) Children with moderate disorders in mental development
- c) Children with hard disorders in mental development
- d) Children with severe disorders in mental development

3. Children with visual impairments

Children with visual impairments are blind children and children with visual disorders.

- a) Weak sight children
- b) Moderate sight children
- c) Hard sight children
- d) Blind children
- e) Blind children with residual sight.

4. Children with hearing impairments

- a) Children with a minor loss of hearing
- b) Children with limited loss of hearing
- c) Children with more severe loss of hearing
- d) Children with a severe loss of hearing
- e) Children with most severe loss of hearing
- f) Children with a complete loss of hearing

5. Children with speech difficulties

Children with speech difficulties are children with light difficulties in verbal expressions, using of speech functions, which are not hearing consequences. Difficulties have manifestations in speech understanding, verbal expressions, etc.

- a) Children with light speech problems
- b) Children with moderate speech problems
- c) Children with hard speech problems
- d) Children with hardest speech problems

6. Children with hard chronically diseases

Areas of difficulties: cardiologic, endocrinology (diabetes mellitus etc.) gastroenterological, aerologic, rheumatologic, auto (lupus etc.), nefrological, pulmological (asthma, etc.) hematological (anemia, leukemia, malign tumors etc.) dermatovenerological, psychiatrist (psychosis, autism, etc.) neurological (epilepsy etc.).

7. Children with combined difficulties

Children with combined difficulties are those children who have a combination of two or more disabilities or disorders described in other categories. These students follow the curriculum according to their primary difficulty.

8. Children with long-term diseases

Chronically ill children are those children who have a disease which lasts longer than three months, of different origin.

Cross-National Category B**9. Children with behavioural problems**

Children with dissocial behaviours which are intensive, permanent and continued. They generate unsuccessful social integration. Dissocial behaviour could be with internal or external reasons, and manifest in: aggression, self-aggression, drug and alcohol addiction, etc.

10. Children with emotional problems

Children with anxious disorders, separation problems from early childhood, phobias, fears, etc.

11. Children with learning difficulties

Children with learning difficulties which are connected with attention, cognition, memory, concentration, development of social skills, problems in reading, writing, calculating (dyslexia, dyscalculia, disgrafia etc.). Basically they are not related with sensor, physically, intellectual or emotional.

Cross-National Category C**12. Social disadvantages**

Groups: Roma, institutionalised orphans, abused children, language barriers.

Romania

NOT PROVIDED

Serbia***Cross-National Category A*****1. Bodily invalid children**

They are divided into three subgroups:

- children with severe and permanent disorders or damage to the locomotor system, and with serious and permanent bodily deformity;
- children with severe muscular diseases and damage (cerebral palsy, muscular dystrophy, multiple sclerosis);
- children with severe forms of chronic diseases and permanently impaired health;

2. Blind students

A child is considered to be blind:

- if he/she has no sense of light,
- if his/her better eye has a remnant of vision of 0.05 with the help of a corrective lens;
- if his/her functional ability to see is so reduced that it prevents education by means of eyesight;

A child has impaired eyesight if his/her sharpness of vision in the better eye is less than 0.4 with the help of a corrective lens.

3. Deaf students

A deaf child

- is one whose hearing impairment is over 90 decibels and who cannot hear speech even with the help of a hearing aid; depending on the age at which the child became deaf and the degree of speech development, there exist four subgroups:
 - a child who developed speech ability before losing his/her hearing and still speaks well at the moment of classification;
 - a child who developed speech ability before hearing impairment set in, but has partially forgotten his/her speech due to a lack of practice;
 - a child who became deaf before developing his/her speech and has partially developed speech owing to special practice;
 - a child who became deaf before developing his/her speech and did not develop it afterwards, thus becoming deaf and mute;

4. Mentally retarded children

Children with cognitive problems. Mentally retarded children may be divided into four subgroups.

- slight/mild mental retardation (IQ does not exceed 70, can be professionally trained and enabled for work under special conditions);
- moderate mental retardation (IQ does not exceed 50, capable of being educated under special conditions; can be trained to perform simple work and to adapt to the basic requirements of the environment he/she lives in);
- serious/severe mental retardation (IQ does not exceed 35, able to develop elementary hygienic habits and to serve him/herself and to perform very simple work);
- severe/profound mental retardation (IQ below 20, very limited mental ability and activity).

5. Pupils at hospital/home treatment

Pupils are at longer hospital/home treatment

9. Autism

Children having problems in the development of social skills and communication as well as problems in cognitive development.

Cross-National Category B**6. Writing difficulties**

Serious problems with writing, pupil cannot properly write letters and words, dysgraphia.

7. Reading difficulties

Pupils cannot read words, sentences, texts (dyslexia).

8. Hyperkinetic syndrome

Intensive motoric activities, inability to keep attention or stay at one place.

Cross-National Category C

10. Difficulties caused by linguistic and cultural deprivation and socio-economic factors

Roma pupils and other minorities. Children who are socially and economically deprived.

Slovenia

Cross-National Category A

1. Children with a mild mental disability

a) Children with a mild mental disability:

the child exhibits lower learning abilities. In adapted learning conditions they can achieve basic academic knowledge, which, however, does not guarantee the acquisition of the minimal knowledge standards required by the educational programmes. If appropriately educated, they can be trained to carry out less demanding vocational work and lead an independent social life.

2. Children with a moderate, severe and profound mental disability

b) Children with a moderate mental disability:

the child exhibits differently developed individual abilities. As far as academic learning is concerned, they can acquire basic reading, writing and arithmetic skills, while in other areas (movement, visual art, music) they can achieve more. They are capable of participating in simple conversation and can understand instructions. They are also able to use substitute communication and can communicate their needs and wishes. In managing their own life, they can successfully carry out simple tasks but need guidance and different levels of support throughout their life. They can be trained to carry out simple practical tasks but can only exceptionally become trained to lead a completely independent life.

c) Children with a severe mental disability:

the child can be trained to carry out the simplest of tasks. In managing their own life they frequently need the assistance of others. They understand simple messages and can respond to them. They are able to orient themselves within the narrower environment but need assistance. Children with a severe mental development disorder may exhibit difficulties in movement, other disorders and illnesses.

d) Children with profound mental disability:

the child can be trained to participate only in individual activities. They need constant care, protection, assistance and guidance. They are limited in movement; there are additional severe disorders, illnesses and diseases. The understanding and following of instructions is very limited.

3. Children with visual impairments and blind

Blind and visually impaired children are children with an impaired sight, eye or visual field.

A) Visually impaired child

A visually impaired child exhibits acuity values from 0.30 to 0.10, or acuity less than 0.10 to 0.05, or a narrowed visual field of 20 degrees or less around the fixation point regardless of acuity.

With regard to visual impairment we distinguish:

a) Moderately visually impaired children: the child has 10% – 30% sight and learns on the basis of methods for visually impaired children. The speed of work can equal the speed of seeing children. Some visually impaired children can see on the board. They need special knowledge about the use of aids.

b) Severely visually impaired children: the child has 5% – 9.9% sight and uses residual sight. They need textbooks in enlarged print. Adjustments depend on the individual characteristics of the impairment. Appropriate lighting is of utmost importance. They exhibit difficulties in handling small objects and in the observation of remote phenomena and objects. In everyday life they can be independent if sufficiently careful and in possession of specific skills. In school they learn on the basis of methods for visually impaired children but are slower.

B) Blind child

A blind child exhibits an acuity of less than 0.05 to 0.02, or a narrowed visual field around the fixation point from 5 to 10 degrees regardless of the acuity, or an acuity of less than 0.02 to the perception of light and a narrowed visual field around the fixation point up to 5 degrees regardless of acuity or acuity of 0 (amaurosis).

With regard to blindness we distinguish:

a) Blind children with some residual sight: the child has 2% – 4.9% sight and can use sight to recognise small objects at the distance of 1-2 m. Besides developing other sense organs, they must systematically develop their residual sight. They need ongoing special training for managing their everyday life, adapted learning aids and aids for blind persons. In order to be able to move around and work they need appropriate lighting, contrasts etc. In school, they learn on the basis of the combined method; mainly in Braille, with the help of different magnifiers also visually.

b) Blind children with the minimum residual sight (light projection – 1.9% sight): the child sees shadows, contours of large objects (projection), objects in the size of fingers can be recognised at the distance of up to 1 m (ca 1.9% sight). In everyday life they learn and acquire skills in the same way as completely blind persons. They need ongoing special training, adapted learning aids and aids for blind persons so as to orient themselves and also for everyday life. They write in Braille. The blind child with the minimum residual sight, identified at the upper limit defining this group, can read greatly enlarged letters. Next to developing other sense organs, they must systematically develop their residual sight.

c) Completely blind children (amaurosis): the child must use other sense organs in everyday life as well as for academic work. They are limited in their exploration of the environment and in actively participating in it. If properly treated, they can on average become equal to their seeing peers in the formation of abstract concepts and in other aspects of development. They need constant special training for coping with their everyday life, adapted teaching aids and aids for blind persons in order to orient themselves and for everyday life. They write in Braille.

4. Children with hearing impairments and deaf

Deaf and hearing impaired children exhibit impairments which include the ear, its structure and functions connected with it.

A) Hearing impaired child

A hearing impaired child exhibits on average a loss of hearing at the frequencies of 500, 1 000 and 2 000 Hertz (Hz), less than 91 decibels (dB) and has serious problems listening to speech and with speech communication. Hard-of-hearingness means the narrowing of the hearing field which partially interferes with the communication based on speech.

With regard to hard-of-hearingness we distinguish:

a) Children with a mild loss of hearing (26–40 dB): the child suffers from a profound or severe hearing loss in one ear and a mild loss or no loss in the other ear. They can also suffer from a mild hearing loss in

both ears. Communication and listening to speech is affected. Other kinds of listening impairments might also be present. The child's orientation is affected.

b) Children with a moderate hearing loss (41–55 dB): the child suffers from a moderate hearing loss in both ears, complete hearing loss in one ear and a mild loss or no loss at all in the other ear, or a profound hearing loss in one ear and moderate, mild or no loss in the other ear. Communication and listening to speech might be affected, or there may be other kinds of listening disabilities. Behavioural disorders and disabilities connected with knowledge acquisition can also be present. The child is impaired in orientation and physical autonomy.

c) Children with a severe hearing loss (56–70 dB): the child suffers from a severe hearing loss in both ears or a profound hearing loss in one ear and a severe hearing loss in the other ear. Their communication is affected, as well as the understanding of speech and listening to speech. A simultaneous behavioural disorder, disabilities in knowledge acquisition and in the adaptation of one's behaviour to the circumstances can also be present. The child with a severe hearing loss is impaired in orientation, inclusion in the society and in physical autonomy.

d) Children with a profound hearing loss (71–90 dB): the child suffers from a complete hearing loss in one ear and a severe hearing loss in the other ear or from a profound hearing loss in both ears. Communication, especially the understanding of and listening to speech, is affected. Frequently there are also behavioural disorders, disabilities in adapting one's behaviour to the circumstances and in knowledge acquisition. The child is impaired in orientation, physical autonomy and in inclusion in the society.

B) Deaf child

A deaf child suffers from the most profound hearing loss, where the amplification of sound is of no avail. The average hearing loss at the frequencies of 500, 1 000 and 2 000 Hertz (Hz) amounts to 91 decibels (dB) and more.

With regard to deafness we distinguish:

a) Children with the most profound hearing loss (91 decibels or more): the child with the most profound hearing loss is not capable of hearing and understanding speech even when amplified. They cannot fully internalize speech even with a hearing aid. The impairment in communication, the understanding of and listening to speech are all present as well as other listening disabilities. Frequently there are concurrent behavioural disorders, disabilities connected with the orientation in time and space, in the adaptation of one's behaviour to the circumstances and in the acquisition of knowledge. The child is impaired in orientation, physical autonomy and inclusion in the society.

b) Children with a complete hearing loss: the child with a complete hearing loss can differentiate neither between two sound levels nor between two frequencies, and is further not capable of hearing or understanding speech even when it is amplified. They cannot internalise speech even with a hearing aid. Communication, the understanding of and listening to speech as well as other listening impairments are present. Frequently there are concurrent behavioural disorders, disabilities connected with the orientation in time and space, in the adaptation of one's behaviour to the circumstances and in the acquisition of knowledge. The child is impaired in orientation, physical autonomy and inclusion in the society.

5. Children with speech and language disorders

Children with speech and language disorders exhibit disorders in learning and comprehension as well as in speech production, which are not the consequences of a hearing loss. The disorders can be observed in the comprehension of speech and in speech and language production, and they range from mild

retardation to underdevelopment. Specific disorders in the area of comprehension, structuring, processing and articulation can also be observed in the disharmony between their verbal and non-verbal abilities. Secondary disorders in speech and language communication can be seen in the area of reading, writing and learning in general. The functional reading and writing knowledge can be affected, spanning from mild retardation to functional illiteracy.

With regard to speech and language disorders we distinguish:

a) Children with mild speech and language disorders: the child's speech and language communication deviates from the average of the children of the same chronological age in one of the areas: articulation, structure or semantics. They are capable of using a demanding multi-modal substitute and supplementary communication.

b) Children with moderate speech and language disorders: the disorders in the area of speech and language communication prevent the child from successfully communicating with the environment. The delay in speech and language development can be observed in all areas: articulation, morphology, semantics and syntax. They are able to use the multi-modal substitute and supplementary communication. Written communication is limited.

c) Children with severe speech and language disorders: child's communication is very limited, it depends on the persons from the narrower environment. They need constant guidance and various levels of assistance. They are capable of using simple substitute and supplementary communication, which enables them to communicate with persons from the narrower environment.

d) Children with profound speech and language disorders: the child responds only to situations and communicates mostly with body language. The use of substitute and supplementary communication is restricted to repeated situations and for satisfying one's most basic needs. Concrete objects are used for communication.

6. Children with physical disabilities

Children who are impaired in their movements have either innate or acquired impairments, a damaged movement system, or have suffered damages in the central or peripheral nervous system. The impairment can be observed in the form of functional and movement disorders.

With regard to movement impairment we distinguish:

a) Children with mildly impaired movement: the child exhibits disorders in movement which cause a mild functional disorder, can walk autonomously also outside premises, but can experience difficulties in running or when walking for a longer period of time on an uneven terrain. They are independent in the execution of all tasks, with the exception of those which require good manual skills. They do not depend on aids and need only minor adaptations. For academic work they do not require any physical assistance but for certain tasks they might need some aids (special writing utensils, tools, table or chair).

b) Children with moderate movement impairments: the child exhibits disorders in movement that might cause a moderate functional impairment. Otherwise they can walk autonomously within premises or shorter distances. The use of aids might be required (special shoes, orthosis, crutches). They have difficulties walking on an uneven terrain and on stairs, where they tend to be slower and need supervision or the possibility to hold on to something or somebody. For medium or long distances they use a specially adapted bicycle or transport wheelchair, or a manually steered wheelchair. They might need the assistance or supervision of another person. The fine manual motor skills can be moderately impaired. In executing daily chores they need the supervision or support while for more demanding tasks they need adaptations or aids. The sphincter control can also be impaired, which is managed either by the child

alone or with the help of supervision. In academic work they sometimes need the physical assistance of another person.

c) Children with severe movement impairments: the child exhibits disorders in movement which cause a severe functional disorder, otherwise they can walk autonomously short distances although walking short distances without aids is not functional. They can use ortosis and crutches part of the day. For the major part of moving within premises or outside they need a manually steered wheelchair. Outside they might also use an adapted bicycle or the assistance of another person. Walking on stairs is not possible. Fine motor skills are impaired and they obstruct good manual functions. For daily tasks they need constant partial assistance of another person. The possible disorders in sphincter control require pressing the bladder or self-catheterisation. For the majority of academic work they need physical assistance.

7. Children with long term illness Children with long term illness are children with long-lasting or chronic disorders and diseases which hinder them in their academic work. A chronic disease is any kind of disease which cannot be cured within three months. Chronic diseases are among other: cardiological, endocrinological, gastroenterological, allergological, rheumatological, nephrological, pulmological, oncological, haematological, dermatological diseases, psychiatric and neurological diseases (for example epilepsy), autoimmune and eating disorders.

8. Children with deficits in individual areas of learning (Pupils with severe specific learning disability)

Children with deficits in individual areas of learning are children where delays in development are observed due to known or unknown disorders in the functioning of the central nervous system. The disorders are connected with attention, memory, thinking, coordination, communication, the development of social skills and emotional maturation, whereby expressed difficulties can be observed in connection with reading, writing, spelling and arithmetic.

The deficits in specific learning areas can persist throughout a person's life and can affect one's learning and behaviour. The children can be identified as children with deficits in specific areas of learning only when the difficulties observed in the present schooling have not been possible to eliminate in spite of the adaptations in the methods and forms of work or by inclusion in additional lessons or other forms of individual and group support offered by the school as stipulated in the third paragraph of Article 12 and 14 of the Primary School Act, and when in spite of all the support in individual subject or subjects the child did not achieve the minimum knowledge standards. The disorders are primarily not connected with visual, hearing or motor disorders, disorders in mental development, emotional disorders or unsuitable environmental factors, which, however, can occur at the same time.

12. Children with boundary intelligence¹¹

Besides the eight different groups of children with special needs (according to The Placement of Children with Special Needs Act) there are two additional ones: pupils with learning difficulties and gifted and talented (according to The Elementary School Act).

Cross-National Category B

9. Children with behavioural or emotional disorders

Children with behavioural or emotional disorders are those with dissocial behaviour which is intense, repeated, of permanent nature and is reflected in unsuccessful social integration. The child's dissocial behaviour can be externally or internally driven and is characterised by symptoms such as aggressive or

¹¹ As of March 2006 this category has not been used anymore

autoaggressive behaviour, alcohol and drug abuse, destruction of foreign property, run away from home, emotional disorders.

The child can be identified as having behavioural and personality disorders only in cases when the treatment of the school counselling service and other professionals, social group and family has not led to the reduction of the described difficulties.

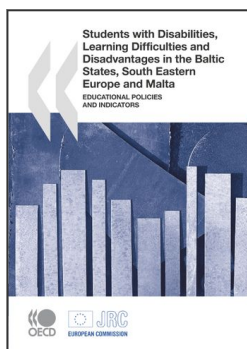
In spite of the fact that some of the behavioural states and patterns can be observed already in early childhood, the diagnosis for personality disorders should not be given until the child's personality development has been finished.

10. Pupils with learning difficulties

According to The Elementary School Act teachers have to adjust forms of teaching, organise supplement lessons and other forms of individual or group help for pupils with learning difficulties. Recently a national document was released (“Conception of work with pupils with learning difficulties in elementary school”) about recognizing pupils with learning difficulties and providing possible means of help in school for them.

11. Gifted and talented (not applicable)

According to The Elementary School Act gifted and talented pupils are recognised as children with special needs. To provide suitable means of help for them we have a national document which regulates this field.



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