

BENCHMARKING IN DISABILITY MANAGEMENT AT TERTIARY LEVEL

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ABSTRACT: *The purpose of this paper is to find the extent of Special Needs Students' (SNS) awareness of disability provision in an institution because this lack of awareness is affecting their education drastically consequently, leading to frustration, de-motivation, and trauma. An empirical study was carried out in a private higher institution of Malaysia, by identifying ten SNS to be observed and subsequently they were interviewed. For reliability and validity of the data the literature review, observation, interviews, and content analysis were carried out to develop a framework to find the extent of the disability provision in an institution. This framework is a prelude to a comprehensive one in the future for the use of a variety of stakeholders including heads of tertiary institutions, NGOs involved in tertiary education, disability teachers and students with disabilities.*

Keywords: Benchmarking, Disability, Special Needs, Tertiary Education

INTRODUCTION

The authors were influenced by some motivated and hardworking special needs students (SNS) who were found to receive an education like mainstream students. On the contrary, some of them were found absolutely unaware of the institution environment around them and provisions available. This unawareness and ignorance about these opportunities affected their education drastically. This unawareness is a source of many problems such as frustration and de-motivation and warrants immediate attention. These concerns of unawareness, access, and accommodation have also been highlighted by many researchers including researchers [1,2], subsequently, the concern that disability provision in Malaysia is at an early stage of development implies a comparison (benchmarking). This is because if something is sub-standard there has to be a standard as well, against which to judge [3].

The main objective of this empirical study was to identify the extent of SNS' learning challenges, strategies used by them; supports and services provision and develop Disability Management Benchmark Framework. To achieve this objective, the interaction of observations (fieldwork) with disability management literature, interviews, and document analysis were carried out to develop a framework for SNS that conceptualized and codified benchmarks in the Malaysian context at the tertiary level.

It is worth mentioning, the existing disability frameworks or structures are not appropriate for this research because there is no agreement between disability researchers and there is a lack of a generic disability management model due to the range of diverse and specific requirements of the SNS researchers. Researchers [4] devised a specific framework based upon physical, academic and social access. Obviously, these aspects do not cover all the areas of disability management. This suggests that further research is required to draw insights and develop a more comprehensive framework to facilitate the education of SNS at the tertiary level.

Review of Literature

According to the section of legislation and policy in the area of Disability Education Act and Welfare Act, the SNS are entitled to avail of appropriate education and support

services. The implementation of Legislature is a very early stage. Subsequently, awareness of SNS' difficulties is weak because assessment to establish if special educational needs exist remains poor. Undoubtedly, SNS has the same rights to education as their peers without SNS. Moreover, both the above acts i.e. The Education Act (1998) and Welfare Act (2000) aim to ensure that young people with disabilities are entitled to avail of appropriate education and support services.

There are academic researches highlighting very specific factors affecting education at the tertiary level. For example, American postsecondary institutions report focuses on only mental illnesses drawing information from the American Disabilities Act (ADA) of 1990 and 2008 amendments [5]. Another example is of DEMOS Project of Manchester Metropolitan University which was proposed in 2002 that focuses on modification of examination and assessment arrangements for disabled students. This inclusive approach and facility release the frustration of SNS and provide more equitable and effective education. These specific, sporadic and diverse approaches do not seem to solve the issues related to SNS in totality. Certainly, there is a gap in disability management provision and this needs attention.

The above lukewarm trend towards SNS is clear due to limited researches available in the literature of this discipline. Researchers [4] presented a very brief framework that can be taken as a base for further researches to draw insights and develop a more comprehensive framework to facilitate SNS' education. In this regard researcher [6] comprehensive TESOL Quality Audit to improve second language learning has been adapted to facilitate the education of SNS at the tertiary level. The overview of the framework is presented below.

The scarcity of research and development leading towards good policies and practices is obvious in Malaysia; "Transition services are required by law for students with disabilities in many developed countries. In Malaysia, however, there is still no specific legislation mandating that school-to-work transition, planning, and services be provided to students with disabilities [7]"

This account clearly suggests that SNS' provision needs to have a systematic approach i.e. starting from legislation

highlighting rights and protection of the disabled people. Secondly, the authors are voicing the implementation of the school-to-work transition. This also indicates that specific policies and practices are weak and are at an early stage in Malaysia too. The majority of the researchers are promoting disability move in piecemeal and their emphasis remains on the provision of transition planning and services with a focus to improve transition services.

Similarly, the researcher in [8] supports the above views by showing the concern that the government has implemented a few strategies for the vulnerable groups in society. His specific focus considered a lifelong learning program. Researcher [9] carried out a substantial study on a group of five public universities and highlighted various barriers and hazards obstructing access for disabled students. Researcher [10] mentioned about the challenges faced by specifically visual impairment among university students. Moreover, there are many voluntary organizations (ten) and NGOs working for SNS in general. For instance, Beautiful Gate [11] is quite active to hold workshops and discussions to highlight disability issues.

In this connection, Malaysia Education Blueprint which was proposed in 2013 [12] does acknowledge profoundly weaknesses in the provision of SNS' supports and services comprehensively from preschool to postsecondary. To address this issue it has taken into account five dimensions: early identification, intervention and health support, inclusive curriculum flexibility, relevance and quality, teachers and other specialists, infrastructure, finances, contents, public awareness and involvement. This approach promotes catering for the additional needs of these students, hence allowing them to benefit equally from the Malaysian education system. UNESCO estimated that on average, 10% of the population in developing countries has special needs. In Malaysia, only 1% of the population has been identified as having special educational needs. The document generously shows the intentions based upon the above five dimensions such as, collaborate with the Ministry of Health to improve inclusion program, flexible curriculum, training of teachers, review state of these facilities and lack of awareness (rights-based of disability). Malaysia Education Blueprint [12] planned well disability management and suggested implementation using a three-wave approach. This approach seems to use best practices (the Deming's management cycle) in managing a project. For example, the Plan-Do-Study-Act (PDSA) cycle [13]. To elaborate further, wave 1 focuses on the implementation of 'quick win' improvements. Wave 2 introduces strategic change and finally, wave 3 evaluates outcomes and improves by replacing successful practices. Similarly, the above cycle states: to plan ahead for a change, execute it, study the results and act to improve the process (continuous improvement) [14]. Malaysia generously displays inclusive

strategy for special attention students based upon Salamanca statement and framework for action on special needs education which was proposed in 1994 and Article 28 of Malaysia's persons with Disabilities Act [11] emphasizing special needs children be given the necessary support to facilitate their 'full and equal participation in education'.

In the above mentioned diverse researches, one can draw useful lessons that are mainly focused on children by using the tag line 'No Child Left Behind'. For instance, the National Council on Disability which was proposed in 2004 promotes evidence-based practices to help people make well-informed decisions about programs and projects. Obviously, there are comparatively more researches in children. In the diversity of SNS there are a lot of similarities as well that need more attention for inclusion in the studies of the tertiary level. In this particular example, lessons can be drawn from these levels to enhance validity and reliability.

To summarize, the review of literature informs that the developed countries have proper legislation for the SNS and these policies and practices have been implemented in a hierarchical manner i.e. (following top-down approach) from top to bottom and bottom to top. Malaysia is on the way to improving its disability management continuously. The following account throws light on some of the frequently used benchmarks used sporadically by different countries. To identify these benchmarks, the benchmarking approach followed by the researcher [6] has been utilized.

He defines Benchmarking as 'A process of comparing TESOL performance of selected school(s) against TESOL good practice derived from literature and research codified in quality characteristics and quality standards. The application of such is designed to support the improvement of the English language learning of students whose first language is not English.' This definition suggests that benchmarking is a process of establishing a standard against which to measure the present performance of an institution in order to identify and possibly achieve improvement in disability management provision.

The Special Needs Benchmark Framework-The Generic Four Benchmarks

The interaction of observations and literature review identified four generic benchmarks. The identification and documentation of these benchmarks will help the government, voluntary organizations, non-government organizations (NGOs), and institutions (primary to tertiary) especially private higher education institutions. These cyclic benchmarks are awareness and importance, identification and recognition, teacher and student involvement and management of supports and services. The account follows:

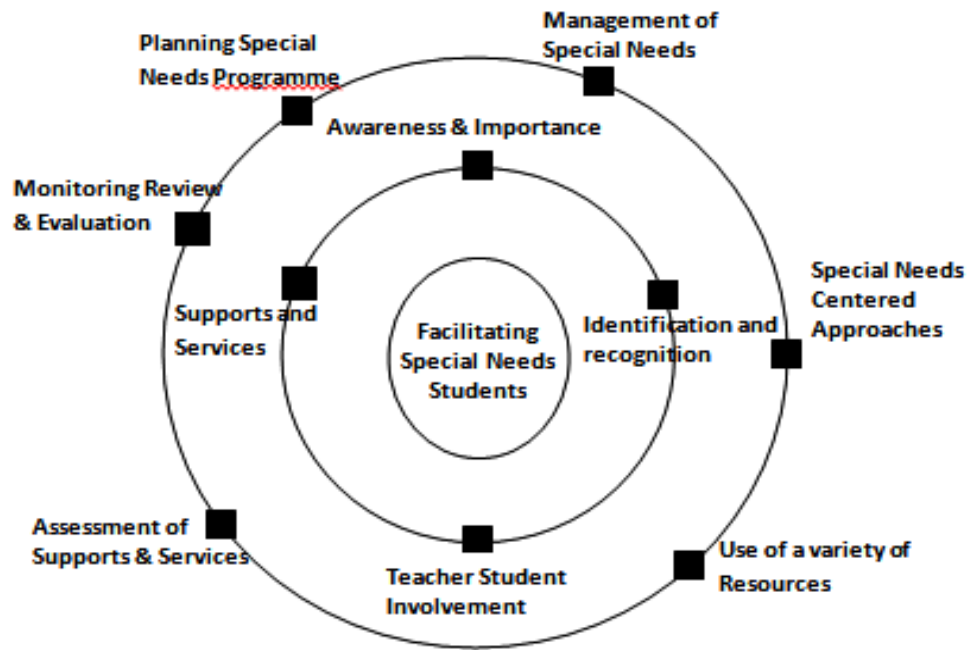


Figure 1: An Overview of Jawaid’s Special Needs Benchmark Framework (Jawaid, 2014)

The innermost tier of the benchmarks has been adapted from the researcher’s Model [6] to assess the gaps in the provision of disability management at the tertiary level. The adapted cyclic benchmarks are awareness and importance, identification of disability, the involvement of teacher and student and supports and services. Briefly, the first principle suggests that the institution should ensure that all the stakeholders have awareness and familiarity with the difficulties of the students of their school. Secondly, teachers need to identify SNS’ specific difficulties and overall achievements. They should scaffold their education with appropriate supports and services. The third principle requires that the facility provided involves both the teacher and students actively in a variety of activities facilitating their education. The last principle demands from the management and teachers the provision of a range of support opportunities and services, for example, by maximizing them appropriately. This brief four benchmark framework is explained below.

Awareness and Importance

Briefly, the first benchmark is awareness and importance. It starts from the government down to the common people. For a good institution, the management is fully aware of SNS conditions, has ethos (vision and mission). It promotes awareness and access and ensures all the stakeholders are aware. It has a disability policy document to implement this benchmark. Moreover, it has a proper system of facilitating SNS’ education (e.g. planning, management, SN centered, resources, assessment, and evaluation). It also has a well-established disability center and staff.

Davis (2004) reacts to unawareness and argues that during the 1990’s academic stated that views of disabled children and young people about their education, health, and social services were not known. He also adds, “while there is a general lack of research in this area, some recent research

findings were sourced and reported here on the educational experience of young people with disabilities, widespread evidence of negative experiences”.

Identification and Recognition

Identification and recognition demand that good management identifies the disabilities at the time of registration and later using a variety of strategies. It recognizes (praise and acknowledgment) the disability and devises the Standard Operating Procedures (SOPs). It ensures the implementation of SOPs and appoints dedicated disability officer (s) (to own the core responsibilities). National Disability Authority (NDA) highlighted this benchmark and identified access related difficulties. The authority provides an extent that includes physical, academic, social and information access at a tertiary level similar to the experiences of the second level.

Lecturer and Student Involvement

The third benchmark, ‘lecturer and student involvement’ emphasizes the involvement of the lecturer whole-heartedly in the service and support of the SNS. He shows a high degree of empathy, sympathy, and commitment and adopts a variety of roles. He uses a variety of learning and teaching strategies and closely monitors the students’ performance. He also reports about mental illnesses (thinking, feeling, relating, functional and behavior). National Disability Authority (NDA) recommended the training to involve mainstream teachers and counselors. DEMOS Project of Manchester Metropolitan University [15] also emphasizes this benchmark and states teacher’s proactive involvement provides access and accommodation to SNS.

Management of Supports and Services

The fourth benchmark, ‘management of supports and services’ asks the management to provide quality services, supports, and resources/gadgets/devices. It endeavors to improve/update the above and arranges training for

mainstream lecturers and counselors. This benchmark disseminates disability provision policy and practice and ensures continuous improvement. It also provides the opportunity to cooperate and coordinate with National Council for Special Education (outside agencies). Foundation of Tertiary Institution of Northern Metropolis (FOTIM) project (2009-2009-2011) stressed that all universities in the United Kingdom are required by law to provide services to students with disabilities, which are delivered at all universities for all types of disabilities.

Methodology

The intention of the research was to evaluate real learning problems faced by the special needs students and disability management provision in an institution. This was mainly done by the interaction of observations of these students' actions and literature review. Subsequently, the Disability Management Benchmark Framework was formulated to identify the actual situation in an institution. For this qualitative research, the data was collected from ten diverse SNS international students. All of them were degree students and were boarding in the hostel around the university premises. All the students were willing to participate in the interview session. Their main aim was to get an international degree. The approach followed is explained further.

Early on in the research, the researcher conveniently identified the students with learning difficulties and observed them informally from October 2013 to June 2014. This phase was concerned essentially to identify the SNS' learning challenges, strategies used, supports and services provision and develop a disability management benchmark framework. The development of the framework was an iterative process (a process of arriving at a decision by repeating rounds of analyses) of collecting, coding and analyzing good practices found in the literature and fieldwork. The constant comparative analysis process (benchmarking) was a process very much in the grounded theory tradition [17]. For instance, the researchers state that joint collection, coding, and analysis of data are the underlying operation. The generation of theory, coupled with the notion of theory as a process, requires that all three operations be done together as much as possible [17].

After the university working hours and during the breaks the students being observed were interviewed to discuss their actions and intentions as well as the learning challenges, strategies used and support received. To obtain the real information and perspectives on the above aspects, the interviews using a semi-structured interview schedule were carried out. To get the real picture face to face interviews were carried out. The interview schedule was piloted with one (the most confident and interactive) of the ten students to assess the interview schedule is fit-for-purpose.

To validate and enhance the framework, in addition to the observations, interviews and informal discussions at times, the data was collected through content analysis of the institution documents such as disability management plans, supports, and services policy and practice. This content analysis assisted in the process of triangulation-cross-checking and corroborating other data.

As the researcher had a respectable concern for the validation of the framework, a routine of triangulation was followed to cross-check the validity of the research data. Consequently, the outcome of this study was the Disability Management Benchmark Framework. As the diagram shows that essentially ten cyclic benchmarks were identified but four benchmarks were carefully developed for this research project and the same four benchmarks were applied to analyze the data collected from all the above-mentioned tools.

Findings

This study focused on identifying educational challenges faced by SNS, strategies used and supports and services availability. The study sought to get a better understanding of the factors affecting the education of SNS at the tertiary level (post-secondary). It was revealed that there was a wide range of educational challenges amongst SNS involving different degrees of conditions particularly with walking, hearing and seeing. The main problems revealed were impairment of legs, ears, eyes, dyslexia and mental disorder. The information has been drawn from the SNS of a private institution.

To reiterate, the Special Needs Students (SNS) were watched for nine months. The close observations revealed many interesting features; this not only substantiated the literature but also the interview responses. Fake names have been used to maintain confidentiality, e.g., Cinderella, Assertive-boy, Silver-heart, etc. To explore students' problems, the author had to involve himself to probe in repeatedly. For instance, many SNS had the problem of farsightedness but they never indicated it. The interview responses informed about one explicit theme, SNS' self-determination to succeed and desire to achieve their educational goals.

Cinderella

Catherine (20-year-old) met an accident and her full leg was amputated. The person who caused the accident ran away. The doctors provided prosthetic but it was very uncomfortable for her, hence she preferred crutches. In the beginning, she was observed as very excited and highly motivated, pro-active and attended classes regularly. Unfortunately, she was unaware of the supports and services available. Gradually attendance went down and consequently, she started avoiding the classes. She reported that she rolled down the stairs a couple of times and got her normal leg hurt. This made her unable to climb the stairs and she got frightened. She lost the motivation to attend the classes. She sought friends' help to complete her coursework. Her results were very poor but she managed to pass and got her degree.

Assertive-boy

The student had a crippled leg (shortening of the leg due to the wrong injection given by a doctor). He was very confident, vocal and was also unaware of the facilities available in the institution. His attendance was poor right from the beginning of his joining the institution. It was mainly due to the inability to climb the stairs. He was very helpful and used to go out of the way to fight for the rights of the students but he himself was unaware of his own

environment and rights. He also got poor results but managed to get the degree.

Silver-heart

The student had ear impairment. He was very sober and came to know about his rights very late (at the end of the final term). He was found very confident, determined never complained about his disability. He remained contented and pleasant throughout his stay in the institution. He studied hard despite having this physical condition. Finally, he got a grade.

Gentleman

The student had a sight problem. He could not read a book due to difficulty in recognizing the letters. He could move on his own with some blurry vision. He was very happy, pleasant, contented and patient. He never complained. He enjoyed his stay but could not get good grades.

Tough-boy

The student was dyslexic and he was very emotional and needed too much of attention. He had my curious nature, egoistic and energetic. He could not concentrate for long in a classroom session. He quickly went into his own world and used to explain his ideas about politics and society. To-date, his teachers' did not discover his dyslexia problem. It was identified four months ago. He was found to be very ambitious and totally unaware of his disease.

Fantasy-boy

The student had a slight mental disorder and his elder brother was an A-plus student. He was on medication, very curious and blaming everyone. Sometimes he needed to be sent to a psychiatric hospital. He went through too many ups and downs during his stay but got his degree. He used to create problems due to his mental disorder. His attendance was very poor. However, he was very much aware of his rights.

Silent-boys

These four students had the condition of farsightedness but they never informed the lecturer. They were checked periodically by asking whether they can read the whiteboard. They never complained that they could not see the board. They never sat in the front row to see the whiteboard properly. They knew the problem but did not inform anyone. Finally, the lecturer's close support, involvement, and insistence surfaced their problem.

Results and Discussion

Observations and interviews complemented the responses to a great deal. The following results are drawn using the same four benchmarks as an analytical tool.

Awareness and Importance

The observations for a good nine months showed that these specific students were seen motivated, interested and punctual. Gradually, motivation and attendance reduced and their results dropped. Consequently, they reflected frustration and de-motivation because they were absolutely unaware of the supports and services available and their rights. This decrease is also depicted by the graph along with their awareness and determination levels. Three SNS were affected by a harsh teacher, careless doctor, and ill-disciplined human behavior. However, a small majority was not affected by the absence or presence of facilities.

The majority of the students were found, firstly unaware of the supports and services available. Secondly, they were unaware of their rights. The SNS was neither aware of their rights nor facilities available. During an emergency, who to consult for help (where is support service center? and how to contact relevant people). They did not have the mindset as 'rights first'. The lecturers too were unaware of the disability supports and services available. Moreover, the majority of the lecturers avoided extending help to SNS wholeheartedly. The interview responses show that they used sympathy and empathy sparingly. The institution apparently kept this discipline on a low profile because it was not part of strategic planning. That means the extent of implementation of the other three benchmarks was weak.

Identification and Recognition

It was observed that if an SNS was in possession of a device or equipment, he was considered as SNS. Otherwise without evident use of devices SNS were considered normal. This clearly suggests that the identification of SNS and recognition of SNS needed improvement. Many students also informed and praised their primary and secondary schools for providing care. They showed a lot of respect and praise for the teachers and institutions. For instance, the assertive boy proclaimed that the teachers were told by the management 'no beating and no stairs'. This statement was religiously followed. This practice helped him get good grades, e.g. B plus during his education in his home country. This also highlights the importance of the identification of SNS at the time of registration.

Lecturer and Student Involvement

A great majority of the students reported restricted and controlled help by the teachers. For example, 40% of teachers showed sympathy and supported them. 20% showed lukewarm enthusiasm to help them and 30% were not affected by the problems and treated them at parity with the mainstream normal students. Invariably all the students commended all-out help of their friends to cope with their difficulties. It was reported that some friends went very early for classes to accompany the SNS. This voluntary help is outstanding and worth recognizing to motivate the other students.

Some students showed exceptional will power and determination as strong strategies to remain unaffected by their problems and they coped very well. This also suggests these SNS did not need lecturers' help because they seemed too independent. The observation and detailed interview informed that these students ignored the source and cause of the problem and remained determined. Only two students (with ear problems) out of ten remained unaffected and subsequently their education. However, they had concerns initially but then ignored the persons who were the cause of their problem.

Two students were successful in executing their strategies and others could not cope well and their education was affected a great deal. Their friends and some teachers' help were commendable. This suggests that the main help came from friends but all the teachers (who should be real caretakers) were not praised. First, the teachers were unaware of the students' problems and second, they did not

help substantially. Consequently, teachers' recognition and contribution were not highlighted by the SNS.

The interview responses informed that the lecturers appeared to be unaware of the environment, students and their difficulties. Their help and support rendered to these students by the lecturers were negligible. They needed to know their students' challenges by involving themselves. For instance, a dyslexic student who looks normal was not taken as SNS.

Management of Supports and Services

The institution had some supports and services for SNS. This included one classroom on the ground floor exclusively allocated for SNS to address access issues, the establishment of one clinic and an emergency van (available 24 hours a day). It was observed that the institution lacked SNS Support Centre and the disability officer was not designated. Moreover, the procedures for seeking information for help were not explicit. Certainly, there was a need for improvement in disability management provision.

Overall, the main effect of the problems is disappointment and demoralization at times. A great majority of the students' education was affected drastically. They happened to be good students and they scored good marks but lack of dissemination and awareness affected their education leading to great frustration. Only two students' results remained unaffected and they scored good grades respectively.

CONCLUSIONS AND RECOMMENDATIONS

This small scale study over a period of nine months with ten respondents provided useful information about SNS's learning challenges, strategies used, state of supports and services provided. The benchmarking approach helped to develop a disability management benchmark framework. The learning challenges faced by SNS were due to shortening of one leg (difficulty in walking and accessing 1st, 2nd and 3rd floors), amputation of leg (using just one leg supported by crutches), farsightedness (could not see the whiteboard writing), short-sightedness (could see things especially alphabet from very close distance), dyslexic (could not read and write appropriately), ear impairment (could not hear in noisy classroom due to frequency overlaps) and mental disorder. Unfortunately, the causes of these problems were a harsh teacher, careless doctor, and reckless driver.

The main strategies used by SNS were borrowing notes from the mainstream students. Invariably all the students commended all-out help of their friends to cope with their difficulties. This voluntary help was outstanding and worth recognizing to motivate the other students. It was reported that some friends went very early for classes to accompany the SNS. The institution had adequate but uninformed supports and services for SNS. This included one classroom on the ground floor exclusively allocated for SNS to address access issues, the establishment of one clinic and an emergency van (available 24 hours a day). However, the presence of SNS Support Centre, disability officer and policies and procedures for seeking information for help were not explicit.

In addition, the application of the framework helped to show the extent of gaps. This also facilitated to recommend improvement strategies for better performance of students, teachers and the institution as well as other similar institutions. The observations, interviews, and review of the relevant literature validated the four benchmarks. The benchmarking framework was used as an analytical tool. This highlighted the extent of gaps (quality deficiencies). These deficiencies are namely: awareness and importance, identification of disability, the involvement of teachers and students and supports and services.

Briefly, the first benchmark asks to ensure all the stakeholders have awareness and familiarity with the difficulties of the students of their institution. Secondly, teachers need to identify SNS's specific difficulties and overall achievements. They should scaffold their education with appropriate supports and services. The third benchmark requires that the facility provided involves both the lecturer and students actively in a variety of activities to facilitate their learning. The benchmark demands from the management and teachers the provision of a range of support opportunities and services to maximize SNS help.

The study was of a small scale that could not cover all the ten benchmarks. Hence it is recommended that a large scale be carried out to generalize the results. Since this age is of improvement and transformation, it is recommended the generic cyclic benchmark framework may be considered for implementation by tertiary institutions as it can conveniently act as a user-friendlier point of reference to manage disability. Finally, our lecturers need the training to show support sympathy, empathy, and involvement for SNS.

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