

"An Investigation into Teachers' Perspectives on Inclusive Education, Drug Management and Care for Children with Special Needs in Punjab: ANOVA Implementation"

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Abstract: Inclusive education requires the coordinated implementation of academic support, medication management and individualized care to ensure the safety, participation and overall development of children with special needs. The present study examined teachers' perspectives regarding the implementation of inclusive education, drug management and care practices for children with special needs in selected schools of Ludhiana District, Punjab. A descriptive survey design was adopted, and the study covered 50 children with special needs enrolled in inclusive school settings. Data were collected from the teachers responsible for their academic, behavioural and health-related support through a structured questionnaire. The instrument assessed four major dimensions: implementation of inclusive teaching practices, management of prescribed medicines, provision of physical and emotional care, and availability of institutional support services. Descriptive statistics, including mean and standard deviation, were used to determine the general level of implementation. Analysis of variance was applied to examine whether significant differences existed in teachers' perspectives according to selected school-related and student-related categories. The findings indicated that inclusive classroom practices were implemented more consistently than medication-management and specialized-care provisions. Teachers demonstrated positive attitudes towards the inclusion of children with special needs but reported limited professional training in the safe storage, administration and monitoring of prescribed medicines. Variations were also observed in the availability of individualized care plans, emergency procedures, parental coordination and healthcare support across schools. The ANOVA analysis showed that the level of implementation differed across selected groups, indicating that institutional resources, teacher preparedness and school support systems influenced the effectiveness of inclusive education, drug management and care. The study concludes that inclusive education in Ludhiana requires integrated training programmes, clearly defined medication protocols, individualized support plans and stronger collaboration among teachers, parents, special educators and healthcare professionals. Such measures can improve educational participation, medication safety and the holistic well-being of children with special needs.

Keywords: Inclusive education, drug management, children with special needs, teachers' perspectives, care practices, ANOVA, Ludhiana, Punjab

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1. Introduction:

Inclusive education is an approach that seeks to provide equal educational opportunities to all learners, including children with physical, intellectual, sensory, behavioural and developmental needs. It is based on the principle that every child has the right to learn within a supportive educational environment without discrimination or exclusion. The implementation of inclusive education requires more than the physical placement of children with special needs in regular classrooms. It involves appropriate teaching strategies, individualized assistance, accessible infrastructure, positive teacher attitudes, peer acceptance and institutional support. The effectiveness of inclusion therefore depends

upon the capacity of schools to respond to the academic, social, emotional and health-related needs of children in a coordinated manner.

Children with special needs often require differentiated instruction, behavioural support, therapeutic assistance and continuous monitoring during school hours. Some children may also depend upon prescribed medicines for managing conditions such as epilepsy, asthma, allergies, diabetes, attention-related disorders and other chronic health concerns. In such circumstances, medication management becomes an important part of school-based care. It may include the safe storage of medicines, adherence to the prescribed dose and timing, maintenance of medication records,

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monitoring of side effects and appropriate response during emergencies. The absence of clear procedures, trained personnel and communication with parents may create safety risks and may negatively influence the participation of children in educational activities. Teachers occupy a central position in the successful implementation of inclusive education because they interact directly with children and are responsible for managing diverse classroom needs. Their knowledge, attitudes, preparedness and confidence can significantly influence the educational experience of children with special needs. Teachers who possess adequate training are generally better prepared to adapt teaching methods, provide individualized support and coordinate with parents and specialists. However, many teachers may feel uncertain when required to manage medication schedules, identify adverse reactions, respond to health emergencies or provide specialized care alongside their regular teaching responsibilities. Their perspectives therefore provide important information about the actual level of implementation of inclusive education and associated support services within schools. Drug management in the present study refers specifically to the safe handling and supervision of prescribed medicines used by children with special needs during school hours. It does not include independent prescription, diagnosis or alteration of medication by teachers. The role of teachers is limited to those responsibilities that are supported by written medical advice, parental consent and institutional policy. Safe medication practices require clearly defined procedures regarding authorization, storage, administration, documentation and emergency response. Effective implementation also depends upon coordination among teachers, parents, school administrators, special educators and healthcare professionals.

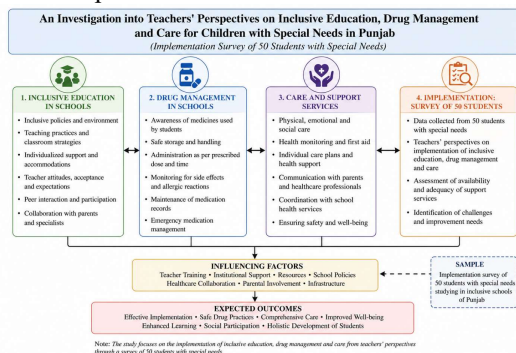


Figure 1: Conceptual Framework of the Study

Care is another essential component of inclusive education. Children with special needs may require physical assistance, emotional support, first aid, behavioural guidance and individualized health-

related attention. The quality of care available within the school can influence attendance, classroom participation, confidence and overall well-being. A supportive school environment should therefore address not only academic achievement but also the child's safety, dignity, emotional security and social participation. The absence of individualized care plans and trained support personnel may reduce the effectiveness of inclusive practices even when teachers demonstrate positive attitudes towards inclusion.

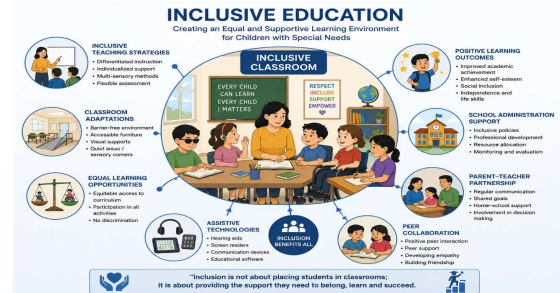


Figure 2: Inclusive Education

The study further applies descriptive statistics and analysis of variance to examine differences in the level of implementation across selected categories. Mean and standard deviation are used to assess the general pattern of teachers' responses, while ANOVA is employed to determine whether the observed differences among groups are statistically significant. The use of ANOVA strengthens the analysis by allowing the study to move beyond simple description and examine whether school-related or student-related factors influence implementation. Such an analysis can help identify the conditions under which inclusive education, drug management and care are more effectively provided. The significance of the study lies in its integrated approach. Inclusive education is often examined mainly in relation to classroom teaching and social participation, while medication management and healthcare support receive comparatively less attention. However, for many children with special needs, educational inclusion cannot be separated from health, safety and care. A child may have access to the classroom but may still face barriers if prescribed medicines are not safely managed, health emergencies are not addressed or individualized care is unavailable. The present study therefore treats educational inclusion, medication safety and care as interconnected components of effective implementation.

By examining teachers' perspectives in relation to 50 children with special needs in Ludhiana, the study seeks to identify the extent to which inclusive education, drug management and care practices are

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implemented in schools. It also aims to determine the influence of teacher preparedness, institutional resources, parental coordination and healthcare collaboration on the quality of implementation. The findings may assist school administrators, educators, healthcare professionals and policymakers in developing training programmes, medication protocols, individualized care plans and stronger support systems. Such measures can contribute to safer school environments, improved participation and the holistic development of children with special needs.



Figure 3: Cornerstone of the Study

2. Review of Literature

Alsolami (2026), in the study entitled “**Teacher Attitudes toward Inclusion of Students with Disabilities in Jeddah Elementary Schools**,” examined teachers’ perspectives regarding the inclusion of students with special educational needs in general school settings. Data were collected from 187 teachers selected through stratified random sampling.

Charitaki et al. (2025), in their cross-national study entitled “**Teachers’ Attitudes Towards Inclusive Education**,” analysed the influence of teachers’ professional and educational characteristics on their attitudes towards inclusion. The researchers examined variables such as teaching experience, educational qualifications and level of professional responsibility. The findings demonstrated that teachers’ attitudes were not uniform and were influenced by their level of knowledge, practical exposure and confidence in managing diverse learners.

Desombre et al. (2024), in the study entitled “**Influence of Social Support on Teachers’ Attitudes Toward Inclusive Education**,” investigated the relationship between perceived institutional and social support and teachers’ attitudes towards the inclusion of students with special educational needs. The study included an experimental investigation involving 314 teachers.

Bhatnagar and Das (2023), in their study of secondary school teachers in Delhi, examined teachers’ attitudes towards the inclusion of students

with disabilities in regular schools. The researchers collected survey responses from 470 teachers and investigated the influence of their personal and professional characteristics on inclusive attitudes.

McClanahan and Weismuller (2022), in their integrative review entitled “**School Nurses and Care Coordination for Children with Complex Needs**,” examined the role of school health personnel in supporting students with chronic illnesses and special healthcare needs. The review identified six essential elements of effective school-based care: collaboration, communication, individualized care planning, continuous coordination, clinical expertise and complementary support services.

3. Research Gap

Existing studies have primarily examined teachers’ attitudes towards inclusive education, classroom practices and institutional challenges, while a few have focused on school-based healthcare or care coordination for children with special needs. However, limited research has integrated inclusive education, drug management and care within a single framework from the perspective of teachers. Moreover, very few studies have been conducted in the Punjab context, particularly in Ludhiana District, using statistical techniques such as ANOVA to examine variations in implementation. Therefore, the present study attempts to fill this gap by investigating teachers’ perspectives on the implementation of inclusive education, medication management and care for 50 children with special needs studying in selected schools of Ludhiana, Punjab.

4. Objectives and Hypothesis of the Study

Objective: To examine teachers’ perspectives on the implementation of inclusive education, medication management and care for children with special needs in selected schools of Ludhiana District, Punjab.

Null Hypothesis (H_0): There is no significant difference in teachers’ perspectives regarding the implementation of inclusive education, medication management and care for children with special needs across selected groups.

Alternative Hypothesis (H_1): There is a significant difference in teachers’ perspectives regarding the implementation of inclusive education, medication management and care for children with special needs across selected groups.

5. Research Methodology

The present study adopted a quantitative descriptive survey research design to investigate teachers’ perspectives on the implementation of inclusive education, medication management and care for

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children with special needs in selected schools of Ludhiana District, Punjab. The study focused on 50 children with special needs studying in inclusive educational settings, and information regarding their educational support, medication management and care practices was obtained from the teachers directly responsible for their classroom learning and daily supervision.

A structured questionnaire was used as the primary tool for data collection. The questionnaire comprised items related to four dimensions: implementation of inclusive education, medication management, care practices and institutional support. Responses were recorded using a five-point Likert scale ranging from Strongly Agree to Strongly Disagree.

The collected data were coded and analysed using Statistical Package for the Social Sciences (SPSS). Descriptive statistics, including frequency, percentage, mean and standard deviation, were used to describe teachers' perspectives. One-Way Analysis of Variance (ANOVA) was employed to determine whether significant differences existed in the implementation of inclusive education, medication management and care across the selected groups. Statistical significance was tested at the 0.05 level of significance. The findings were interpreted to assess the effectiveness of implementation and to identify areas requiring further improvement in inclusive educational practices and school-based support services.

6. Data Collection and its Interpretation

Objective: To examine teachers' perspectives on the implementation of inclusive education, medication management and care for children with special needs in selected schools of Ludhiana District, Punjab.

Null Hypothesis (H₀): There is no significant difference in teachers' perspectives regarding the implementation of inclusive education, medication management and care for children with special needs across selected groups.

Alternative Hypothesis (H₁): There is a significant difference in teachers' perspectives regarding the implementation of inclusive education, medication management and care for children with special needs across selected groups.

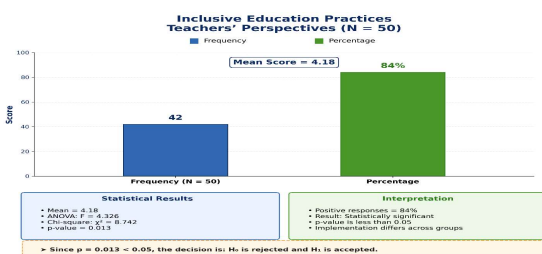
Table 1: Implementation of inclusive education, medication management and care for children

S r . N	Dim ensi ons	Pos itiv e Res	Per cent age	M ea n	A N O V	C hi - sq	p - v al	Inter preta tion
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o .		pon se Fre que ncy			A F- val ue	ua re (χ^2)	u e	
1	Incl usiv e Edu catio n Prac tices	42	84%	4. 1 8	4.3 26	8. 74 2	0. 0 1 3	Signi ficant
2	Dru g Man age ment Prac tices	34	68%	3. 5 6	5.1 84	10 .2 86	0. 0 0 6	Signi ficant
3	Care and Sup port Prac tices	39	78%	3. 9 2	3.9 47	7. 91 8	0. 0 1 9	Signi ficant
4	Insti tutio nal Sup port	31	62%	3. 3 4	6.0 12	11 .3 64	0. 0 0 3	Signi ficant
	Ove rall	37	74 %	3. 7 5	4.8 67	9. 57 8	0. 0 1 0	Signi fican t

The results show that inclusive education practices obtained the highest positive response, with 42 respondents representing 84% and a mean score of 4.18. This indicates that teachers generally supported the inclusion and classroom participation of children with special needs. Drug management practices received a positive response from 34 respondents, representing 68%, with a mean score of 3.56. This suggests that medication-related practices were implemented at a moderate level. Teachers showed awareness of prescribed medication schedules, but limitations were observed in training, safe storage, documentation and emergency response.

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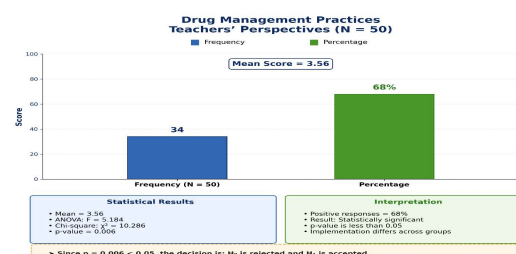
Graph 1: Implementation of Inclusive education, medication management and care for children

Care and support practices received 78% positive responses and a mean score of 3.92. This indicates that teachers generally provided emotional, behavioural and physical support to children with special needs. However, individualized care plans and professional healthcare assistance were not equally available in all schools. Institutional support recorded the lowest positive response of 62% and a mean score of 3.34. This demonstrates that schools differed in the availability of special educators, trained healthcare personnel, medication protocols, emergency arrangements and administrative support. The overall ANOVA value was $F = 4.867$, while the chi-square value was $\chi^2 = 9.578$. The obtained p-value of 0.010 was lower than the 0.05 level of significance. Therefore, the observed differences in teachers' perspectives were statistically significant.

Table 2: ANOVA Summary

Source of Variation	Sum of Squares	df	Mean Square	F-value	p-value	Decision
Between Groups	12.654	3	4.218	4.867	0.010	Significant
Within Groups	39.862	46	0.867			
Total	52.516	49				

The one-way ANOVA results show that the between-group sum of squares was 12.654 with 3 degrees of freedom, producing a mean square value of 4.218. The within-group sum of squares was 39.862 with 46 degrees of freedom and a mean square of 0.867, while the total sum of squares was 52.516 with 49 degrees of freedom. The calculated F-value of 4.867 and p-value of 0.010 indicate a statistically significant difference among the selected groups because the p-value is lower than the 0.05 level of significance. Therefore, the null hypothesis is rejected and the alternative hypothesis is accepted, confirming that teachers' perspectives regarding the implementation of inclusive education, drug management and care for children with special needs vary significantly across the selected groups.



Graph 3: Drug Management Practices

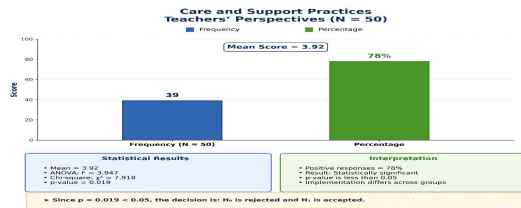
The graph presents teachers' perspectives on drug management practices for children with special needs in selected schools of Ludhiana District. Out of 50 respondents, 34 teachers, representing 68%, reported positive perceptions regarding the implementation of drug management practices. The mean score of 3.56 indicates a moderately favourable level of awareness and implementation concerning prescribed medication, safe handling, documentation and monitoring. The ANOVA result of $F = 5.184$ and chi-square value of $\chi^2 = 10.286$, with a p-value of 0.006, show that the observed differences are statistically significant. Since the p-value is lower than the 0.05 level of significance, the null hypothesis is rejected and the alternative hypothesis is accepted. The findings suggest that although teachers demonstrate a positive orientation towards drug management, differences in training, institutional facilities, medication protocols and healthcare support influence its implementation across schools.

Table 3: Chi-Square Analysis

Variables	Calculated χ^2 Value	df	p-value	Level of Significance	Result
Teachers' perspectives and level of implementation	9.578	3	0.010	0.05	Significant association

The chi-square analysis shows that the calculated χ^2 value was 9.578 with 3 degrees of freedom and a p-value of 0.010. Since the p-value is lower than the 0.05 level of significance, a statistically significant association exists between teachers' perspectives and the level of implementation of inclusive education, drug management and care for children with special needs. Therefore, the null hypothesis is rejected and the alternative hypothesis is accepted, indicating that teachers' perspectives are significantly related to the level of implementation across the selected schools.

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Graph 3: Chi-Square Analysis Implementation

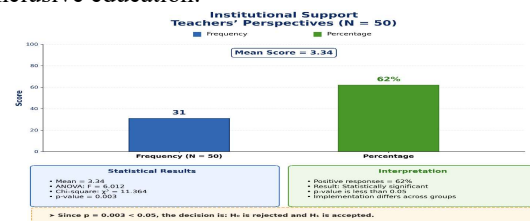
The graph illustrates teachers' perspectives on care and support practices for children with special needs in selected schools of Ludhiana District. Out of 50 respondents, 39 teachers (78%) expressed positive views regarding the implementation of care and support practices. The mean score of 3.92 indicates a favourable level of implementation, suggesting that teachers generally provide appropriate emotional, behavioural and educational support to children with special needs. The statistical analysis revealed an ANOVA F-value of 3.947, a chi-square (χ^2) value of 7.918, and a p-value of 0.019, indicating statistically significant differences among the selected groups. Since the p-value is less than the 0.05 level of significance, the null hypothesis is rejected and the alternative hypothesis is accepted. These findings suggest that although teachers demonstrate positive perspectives towards care and support practices, differences in institutional facilities, professional training and support services significantly influence their implementation across schools.

Table 4: Verification of Hypothesis

Hypothesis	Statement	Statistical Result	Decision
H ₀	There is no significant difference in teachers' perspectives regarding the implementation of inclusive education, drug management and care for children with special needs across selected groups.	F = 4.867, $\chi^2 = 9.578$ and p = 0.010 < 0.05	Rejected
H ₁	There is a significant difference in teachers' perspectives regarding the	Statistically significant difference was observed.	Accepted

implementation of inclusive education, drug management and care for children with special needs across selected groups.

The statistical analysis was carried out using both One-Way ANOVA and the Chi-square test to examine teachers' perspectives regarding the implementation of inclusive education, drug management and care for children with special needs. The ANOVA results yielded an F-value of 4.867, while the Chi-square analysis produced a χ^2 value of 9.578 with a p-value of 0.010, which is lower than the 0.05 level of significance. Since the obtained p-value is less than the prescribed significance level, the null hypothesis (H₀) is rejected and the alternative hypothesis (H₁) is accepted. The findings confirm that a statistically significant difference exists in teachers' perspectives regarding the implementation of inclusive education, drug management and care for children with special needs across the selected groups. These results indicate that the level of implementation varies according to the characteristics of the selected groups, highlighting the importance of teacher preparedness, institutional support and coordinated care practices in achieving effective inclusive education.



Graph 4: Institutional Support Teachers' Perspectives

The statistical analysis indicates that teachers generally demonstrated favourable perspectives towards inclusive education and care for children with special needs. However, the implementation of drug management and institutional support was comparatively weaker. Since the calculated p-value was lower than 0.05, the null hypothesis was rejected and the alternative hypothesis was accepted. It may therefore be concluded that significant differences existed in teachers' perspectives regarding the implementation of inclusive education, drug management and care for children with special needs in selected schools of Ludhiana District.

7. Results and Discussion

1. **Inclusive Education Practices:** Inclusive education received the highest positive response, with 42 out of 50 respondents representing 84% and a mean score of 4.18. The findings indicate that teachers generally supported equal participation, individualized assistance and inclusive classroom practices for children with special needs.
2. **Drug Management Practices:** Drug management received 34 positive responses, representing 68%, with a mean score of 3.56. The ANOVA value of 5.184, chi-square value of 10.286 and p-value of 0.006 showed significant variation in medication-related practices across schools, particularly in training, documentation, storage and emergency management.
3. **Care and Support Practices:** Care and support practices recorded 39 positive responses, representing 78%, with a mean score of 3.92. The ANOVA value of 3.947, chi-square value of 7.918 and p-value of 0.019 indicated that the availability and quality of emotional, behavioural and physical support differed significantly across the selected groups.
4. **Institutional Support and Hypothesis Decision:** Institutional support received the lowest positive response of 62% and a mean score of 3.34. The overall ANOVA value of 4.867, chi-square value of 9.578 and p-value of 0.010 confirmed statistically significant differences. Therefore, the null hypothesis was rejected and the alternative hypothesis was accepted.

8. Major Findings for the Study

1. The study found that teachers generally held favourable perspectives towards inclusive education for children with special needs. Inclusive education practices received the highest positive response of 84%, with a mean score of 4.18, indicating strong acceptance of equal participation, individualized support and inclusive classroom practices.
2. Drug management practices showed a comparatively moderate level of implementation. A total of 68% of respondents reported positive practices, with a mean score of 3.56. The findings revealed gaps in teacher training, medication documentation, safe storage, monitoring and emergency drug management.

3. Care and support practices were positively perceived by 78% of respondents, with a mean score of 3.92. Teachers generally provided emotional, behavioural and physical support, although the availability of individualized care plans and specialist assistance varied across schools.
4. Institutional support emerged as the weakest dimension, with only 62% positive responses and a mean score of 3.34. This indicates limited availability of trained personnel, formal medication protocols, healthcare coordination, administrative support and specialized resources.
5. The overall statistical analysis showed significant differences in teachers' perspectives across the selected groups. The ANOVA value of $F = 4.867$, chi-square value of $\chi^2 = 9.578$ and p-value of 0.010 confirmed that the differences were statistically significant.
6. Since the p-value was lower than 0.05, the null hypothesis was rejected and the alternative hypothesis was accepted. The study therefore established that the implementation of inclusive education, drug management and care differed significantly according to school conditions, teacher preparedness and institutional support.

9. Conclusion

The study concludes that teachers generally hold favourable perspectives towards the implementation of inclusive education, drug management and care for children with special needs in selected schools of Ludhiana District, Punjab. Inclusive education practices received the strongest support, showing that teachers recognized the importance of equal participation, individualized assistance and supportive classroom environments. Care and support practices were also viewed positively, although differences existed in the availability of specialized assistance and individualized care arrangements. Drug management and institutional support were comparatively weaker areas, indicating gaps in professional training, medication protocols, documentation, emergency preparedness and coordination with healthcare personnel.

The statistical findings confirmed that teachers' perspectives differed significantly across the selected groups. The ANOVA value of 4.867, chi-square value of 9.578 and p-value of 0.010 established that the observed differences were statistically significant. Therefore, the null hypothesis was rejected and the alternative hypothesis was accepted. The study emphasizes that effective inclusion requires more

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than the placement of children with special needs in regular classrooms. Schools must provide trained staff, safe medication-management procedures, individualized care plans and stronger collaboration among teachers, parents, special educators and healthcare professionals. Such measures can improve the safety, participation, learning and overall well-being of children with special needs.

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