Origins, Aims, Benefits, Delivery

The Origins

Conductive Education was developed in Hungary by Professor Andras Peto in the 1940s. As a physician, he was interested in the rehabilitation of children and adults with physical disabilities, and the connection between mind and body. Professor Peto recognised that people with lifelong disabilities required a different learning model that integrated education, therapy and (for children) academic learning into a unified, holistic model.

What is the aim?

Much of the Conductive Education literature speaks of the goal of *orthofunction*. In simple terms, this means helping people achieve their potential by nurturing and developing an attitude to learning which is based on simultaneous development of movement, function and personality. The desire to achieve, to be successful and to reach new goals is paramount in this process. The goal of orthofunction is ever-changing, as people extend the limits of achievement beyond that which they, or others, thought possible. Conductive Education enables people to view themselves in a positive way through meaningful activity. It assists them in problem solving, and learning strategies and techniques to approach the various challenges faced. This is when an orthofunctioning personality exists.

Who can benefit?

Conductive Education was developed primarily to teach people with neurological motor disorders.

Although the primary problem may be of a physical nature, these conditions impact on all areas of human development including; cognition, social skills, health, emotional development, perceptual abilities, speech and language. These conditions therefore can not be seen as isolated physical disabilities.

Children with cerebral palsy are commonly deemed most appropriate recipients of CE . More recently however, children with developmental delay disorders, Angelman Syndrome, Lissencephaly, dyspraxia and other difficulties of a neurological origin have benefited from Conductive Education.

How is it delivered?

Conductive Education was traditionally delivered by conductors however, there are now examples where conductors are working with other professionals, who have been given appropriate training, and may deliver components of the program. Carson Street School offers the only CE provision in Western Australia for children from birth to year 7. Here teacher/conductors work with other professionals in a multidisciplinary way, supporting the delivery of CE, thus maintaining the integrity of the program.



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What is Conductive Education?

Conductive Education (CE) is a holistic integrated pedagogical/educational system, which enables people with damage to the central nervous system to learn how to overcome the challenges they face.





CE is a process of experiences which leads the person to work with their motor disabilities, moving towards increased independence. It is a system which is primarily suitable for people with neurological conditions such as cerebral palsy, acquired head injury, dyspraxia and, in adults, Parkinson's disease, Multiple Sclerosis, or strokes.

Neurological conditions create a wide range of developmental challenges which can involve areas of gross and fine movement, perception, cognition, social skills, emotional development, speech, language and communication. These in turn can significantly affect motivation, confidence and personality. Ultimately it is the whole personality that is impacted by the condition.



Andras Peto, the founder of Conductive Education, viewed people with neurological conditions as a whole; focussing not only on the body, but also on the personality. He therefore chose methods of facilitation in such a way that they not only made movements/ actions possible, but also developed the whole personality; the wish, the desire and ability to be active. CE perceives people with neurological conditions as facing a challenge of learning rather than needing treatment for a medical condition.

After a malfunction or an impairment of the central nervous system, there remains a residual capacity which can be activated to take over functions from the damaged areas. This is known as neuroplasticity. This residual capacity cannot be tapped into spontaneously—it must be activated. Peto argued that in order to ensure learning occurs, people with neurological conditions should be "taught" rather than "treated". Through a structured teaching environment, led by the conductor, the brain can access the residual capacity and learning can be promoted. CE can be seen to utilise the neuroplastic properties of the brain in order to re/learn lost or impaired functionality.





Individuals without disabilities often learn quickly how to make use of their environment, how to connect with it, and use it as a tool in human development. They learn to adapt and respond to the environment and its demands. In addition, they learn to influence it thus having an active interaction with the environment.

This situation though, is different for individuals with neurological conditions. Disturbed mobility is accompanied by a challenge in the ability to perceive. The impeded movement can restrict or prevent interactions with people and objects which assist the development. Therefore the ability to adapt formatively to the demands of the environment and to engage in constructive interaction can be affected. This can result in negative experiences and frustrations which in turn affect personality. The dysfunction of the personality in turn restricts physical development and so the cycle begins. CE aims to break this cycle and transform the lives of people with neurological disabilities by creating people who both desire and are able to learn.





