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Assessing the Impact of Special Education Programs on Behavioral Issues in Children with Developmental Delays in Punjab, Pakistan

Ms Hadia Waseem

M.Phil Special Education, UMT

Ms Wajiha Saleem

Speech Therapist, Department of Special Education

Ms Nasira Bilal

Lecturer Orientation and Mobility, Govt. Training College for the Teachers of Blind Lahore

ABSTRACT

This research explores the effects of special education on behavioral problems among children with developmental delay in Punjab, Pakistan. The study contributes to a better understanding of the influence of attending Type VI school on major behavioral components, including aggression, hyperactivity, and social problems. One hundred children who were 5-12 years old and had a diagnosis of developmental delay participated in special education programs. Information on the participants was obtained with data derived through interviews and observations that involved teachers and parents or guardians. The results indicate significant decreases of aggressive behavior, hyperactivity and social withdrawal particularly among integrated programs, which stressed both academic and social support. Greater gains in behavior were also associated with receiving programs of longer duration. Parent involvement was one of the key aspects where children displayed more behavioral improvements when their parents were closely involved in their educative period. Furthermore, behavior management knowledge among teachers was found to be associated with improved behavioral results. These findings underscore the success of dyadic special education programs for children with developmental delays in addressing behavior problems. The study highlights the importance of increasing inclusion, training for teachers and involvement from parents to extend the benefits of special education programs in the area.

Keywords Special Education, Developmental Delays, Behavioral Issues, Integration, Parental Involvement, Teacher Training.

Introduction

Children's developmental delay is when a child does not reach the expected physical and mental milestones at the usual time for most children in society. These delays can be related to motor skills, speech and language, social skills, cognitive functioning, etc. The detrimental effects of these delays can be long-reaching – both academically, behaviorally, in emotional regulation and in social behaviors for children. Many of these kids suffer from developmental delays that are associated with challenges including aggression, hyperactivity, social withdrawal and difficulty expressing emotion impairments that can undermine social engagement and learning.

Behavioral problems in young children with developmental delays have become a concern for caregivers, teachers, and clinicians. These concerns can result in school problems, strained family life and low self esteem among children. In their absence, young children with developmental

delays are more likely to have continuous mental health problems like anxiety and depression that carry over into adulthood (Perry & Weinstein, 2019). Early intervention, by way of special educational programs, is crucial in combating these issues by offering structured assistance and one on one strategies to encourage developmental growth.

Special education is specifically for children with differing learning backgrounds, including those with developmental delays. The ultimate aim of special education programs is to not only bolster academic performance, but also provide children with techniques that will enable them to more positively respond and function within their environment. These programs use a variety of teaching methods, from behavior modification and structured learning environments to individualized education plans (IEPs), tailored to the needs of the individual child. Such Special education programs tries to diminish the problematic behavior of students like impulsivity, aggression, social isolation by giving universal preventive or at small group structured treatments. The evidence has demonstrated that students who receive well-designed special education are more likely to demonstrate positive academic and behavioral outcomes, though the effect may not be consistent across all programs (MacFarlane et al., 2017).

The context of special education in Punjab, Pakistan is distinctive. There are special schools, but most struggle, with overcrowded classrooms (sometimes of 50 students or more), teachers not prepared for the work, or a lack of resources. In addition, there is a stigma attached to developmental delays that may hinder families from being willing to obtain appropriate educational interventions. Although there is a need for special education facilities, there is little empirical data regarding the effect of such programs on behavioral development of children with developmental delays in this country. Additionally, many children with developmental delays are mainstreamed into regular classrooms without adequate support, which can result in academic and behavioral challenges.

This research addresses the problem of a knowledge gap about how well special education for children with developmental delays in Punjab, Pakistan may reduce behavioral issues. Although there is some evidence that special education can reduce issues, such as aggression and hyperactivity, or social withdrawal, there is no information about the reduction rate in this setting. The fact that such number information have never been systematically collected and assessed in Punjab makes this issue even more pressing. Furthermore, reducing the number of issues in question is particularly important in the context of children with developmental delays. These children are at risk of social isolation, low achievement in school, and lifelong problems. Therefore, filling the knowledge gap on the effectiveness of special education in question in Punjab is particularly important for the furthering of educational practices and for the reduction of behavioral issues among children with developmental delays in the appropriate setting. This study appears particularly significant in the context of Punjab, Pakistan, because assessing special education in a context with specific educational problems could be particularly useful. Punjab, as the most populated province in a very populous country, has a large number of children who could benefit from special education. However, the school system is overloaded, and cultural factors often interfere with the provision of services. By assessing the local problems associated with children with developmental delays in this region, this research aims to fill the knowledge gap on how well in question special education can reduce topics behavioral issues.

The purpose of this study is two-fold to explore the effect of special education on the behavior problems among children with developmental delays in Punjab; and second, to compare various

instructional methods in a special set up. Here we will consider how different classes of special education programs such as those with behavior modification or academic skill intervention impact the social/behavioral functioning of children with delays in development. By exploring the effects of these programs, this study seeks to contribute to an overall understanding of how special education influences behavioral development.

In order to address these aims, we will investigate the following questions (1) What are the intervention effects on child behaviors and second-order characteristics (e.g., antisocial, asocial) in children with developmental delays served in special education programs? This issue is important to resolve when addressing the question of if attendance (participation in) of special education actually helps to reduce negative behaviors such as aggression, insensitivity, and withdrawal. And thirdly, what is the effect of program type, duration and intensity on behavioural outcomes? It will be important to assess the extent to which different program designs and durations are associated with behavior change in order to inform recommendations for best educational practices.

The premise of the study is that special education programmes have a strong probability to decrease problem behaviours among children with developmental delays in Punjab, Pakistan. Consistent with past investigation, we expect that children who receive well-structured special education instruction will demonstrate improvements in problematic behavior outcomes, characterized by decrease in aggression/impulsivity and social problems. We further anticipate program quality of the program (as determined by intensity and duration) will regulate magnitude of these improvements.

This study will combine both qualitative and quantitative analyses in order to investigate the effects of special education on problem behaviors among children. The information will be collected from special education institutions in Punjab, and will be used to evaluate the behavior changes that occurred before and after joining the program. Child behaviour will be rated by standardised instruments; social functioning and scholastic achievement of children will be recorded. Furthermore, interviews with teachers, parents and program coordinators will offer valuable information regarding the difficulties as well as the success of these programs. The results will be examined using statistical methods to discover if meaningful behavioral benefits are associated with attending special education services.

Finally, this study seeks to offer some empirically-based recommendations on improvement of special education practices in Punjab, Pakistan. Through an enhanced understanding of the effects of special education programming on the behavioral outcomes of children with developmental delays, the current study may inform educational efforts and policies aimed to better address these children's needs.

Literature Review

A theoretical framework The study of developmental delay and behavioral behavior the theoretical framework. Developmental delays are frequently addressed with respect to cognitive, social and emotional development. Piaget's theory of cognitive development provides a framework for learning about why children with developmental disabilities have difficulty in mastering milestones of thought either at a slower rate or in a limited fashion (Piaget, 1952). Cognitive development, according to Piaget, occurs in stages and when a child fails to reach these levels on time it can affect problem-solving abilities, language and peer interaction.

A second important frame of reference informed by Vygotsky's socio-cultural theory with its emphasis on the role of social interaction in cognitive change (Vygotsky, 1978). Children with developmental disabilities frequently experience social obstacles such as lack of understanding for social cues that may apply more stressful conditions, which can express itself in undesirable behaviors. This theory emphasizes the role of the social environment in buffering or exacerbating developmental delays. Peer interaction and special education programs can contribute to cognitive and behavioral advancements.

Additionally, ToM is a pivotal issue in coping with behavioral problems of children suffering from developmental disabilities. It is the capacity to recognize that others have minds, beliefs and feelings that might differ from one's own (Baron-Cohen 1995). Theory of mind is frequently a challenge for children with developmental delays causing them to experience social interaction and behavioral regulation problems. Its absence often contributes to behaviors such as aggression, frustration or withdrawal.

The Role of Special Education in Behavioral and Cognitive Development

Special education is a key strategy to meet the needs of developmentally delayed children. At the core, the purpose of special education is not only to remediate academic outcomes but more importantly to manage behavior due to developmental delays. Children who receive specialized, structured education are more likely to develop cognitive and behavioral skills compared to children with developmental delays who do not receive such support (MacFarlane, 2017). 9 Specialized Programs Special education programs encompass a series of intervention strategies designed to either eliminate or reduce the effects of specific learning and behavior problems for kids with special needs.

Behavioural intervention in special education usually makes use of the technique called positive reinforcement where good behaviour is reinforced and offending behaviours such as aggression or impulsiveness are decreased. These methods are consistent with Skinner's (1953) operant conditioning theory that behavior can be influenced through reward or punishment. In this situation, children with DD can be trained to exhibit new behaviors and they also will become able to control the pre-existing ones if they are given proper support and guidance.

Moreover, special education can be more personalized to an individual's learning process. IEPs To Use Individualized Education Plan are used to help teachers create experiences specifically tailored to the child's needs to ensure both cognitive and behavioral development. IEPs consider the unique strengths and weaknesses of the child, while attempting to target areas for improvement by supporting and developing on their strengths (Sharma, 2019).

The need for an integrated approach in special education has been reported by research. This approach is equal parts social and emotional as it is academically-oriented. Special education services that involve therapeutic strategies (e.g., speech/language therapy, occupational therapy) are central in the treatment of behavior problems through developing communication skills, fine/gross motor control and regulation of affect (Thompson, 2018). By bringing therapy to the school, students may be able to master skills they are having difficulty with due to developmental delay sooner and fewer behavior issues.

Review of Relevant Literature Special Education and Behavioral Challenges

Global Perspective

There are a variety of international studies that have examined the efficacy of special education programs in generating change regarding challenging behaviour in children with developmental

disabilities. A study by Hughes et al. (2018) examined the effects of special education interventions in children with ASD, one of most frequent developmental delays. You might have a class with some kids that get this kind of support, and for them they could still use the help in keeping disrupting behavior such as tantrums and aggression low, even though they have had the academic part well addressed with their Australian curriculum or NSW syllabus-based education. Participating children not only had better academic outcomes, but also displayed stronger social behavior and emotional regulation skills.

Foley et al.,(1989) In a related study, 足exposed quail chicks to CO₂ (10 mmol/L) for 5 hours. (2020) demonstrated that special education programmes which included social skills training and behavioural therapy resulted in substantial enhancement of children's interaction with peer and emotion regulation. These results are consistent with those of Smith et al. (2019) who studied the effect of behavior modification programs on reducing externalizing behaviors such as aggression and impulsivity in children with developmental disabilities. They argue that if children exhibit more stable self-regulation in a structured learning context, researchers can help them foster these skills earlier and be better off socially and academically.

Another important worldwide study by Guralnick (2017) emphasized the ameliorative effects of early intervention in special education. The study also highlighted the importance of early behavioral and academic support for children who experience developmental delays, which has been linked to better long-term behavior and cognitive skills. Together, these studies show that early, individualized interventions in special education are significant for reversing behavioral and cognitive developments in developmental delays of children.

Regional Studies

There are few studies of special education programs for children with developmental delay in Pakistan. There are some studies nevertheless, which might provide an understanding of the problems that are faced by children with developmental delays in the country. Zaidi and Mehmood (2019) studied the access to and quality of special education in Punjab, Pakistan. They discovered that while some were well-supported, others had underqualified staff and insufficient resources for dealing with children who did not develop as expected. Furthermore, they found that a large proportion of children with behavioural problems were not in special education placements or were included in regular lessons without appropriate support to improve their behaviour.

Khan (2017) investigated the effects of special educational programmes on children with learning disabilities in Punjab. The research found that children who were in the specialized programs did benefit from them, with increased behavior and social gains, but the improvements were greatest among those participating in programs which focused on both academic support and behavior management techniques. This research showed a requirement for further research to examine long-term glycosuria rates in the programs through behavioral outcomes.

Gaps in Existing Literature

Research from multiple countries has informed about the effect of special education on behavioral outcomes among children with developmental delays; however, little research has been conducted in local, regional or national contexts particularly for the Punjab province in Pakistan. This type of research is tightly connected to Western contexts, and basically targeted towards particular forms of a disability such as autism. More research has to be conducted in

South Asia, more specifically in the province of Punjab, to get better understanding of the specific problems children face like culture and how they perceive disability, lack of educational facilities. Moreover, there are few studies investigating the effectiveness of types of special education program in relation to negative behavioral results for Jordan and the ME. The majority of studies are above all concerned with the children's academic achievements, but very few papers concentrate on behavioral child development. Also, More studies are required to investigate the role of special education techniques in minimizing behavioral issues among children with developmental delays in Punjab.

Key Concepts

Developmental Delays

What are developmental delays? Developmental delays are when your child does not reach its developmental milestones in one or more areas, such as motor skills (sitting up by itself, walking), speech and language, cognitive skills (such as counting numbers), and social-emotional. A variety of causes can contribute to developmental delays, such as genetic disorders, exposure to toxins during the prenatal period or absence of early stimulation that they need for optimal growth and development (Sharma, 2019). Rates for various types of DD vary according to region and type, but approximately 1 in 6 children worldwide have a developmental delay (CDC, 2018). Intellectual disability, autism spectrum disorders, and speech and language disorders are the most frequent developmental delays.

Behavioral Issues

Educational delays in children frequently manifest with behaviour problems which hinder these children's opportunity to learn and interact. These symptoms may manifest as hyperactivity, aggression, impaired impulse control, social isolation and problems regulating emotions (Perry & Weinstein, 2019). Such behavioural problems make the child's adaptation within society more complex and can result in problems at school or at home. It is paramount that these behaviour problems are detected and managed with the help of special education services, toward promoting the child's development in general.

Special Education Programs

Special education programs are for students who have special needs, such as learning challenges or physical disabilities. Structure, approach, and support within these programs differ considerably. Academic achievement is the emphasis in some programs, whilst with others it's behaviour interventions, social skills training and/or therapy (gun et al, 2011). Good special education programs commonly have personalized teaching (Individualized Instruction), personalized behavioral and therapeutic programming. Best practices in special education stress the importance of early intervention, personal attention, and a comprehensive model that supports the academic, behavioral, and emotional needs of children (Guralnick, 2017).

Results

The sample included 100 children with developmental delays, aged between 5 and 12 years, with an almost equal gender distribution. The children were diagnosed with various developmental delays, including autism spectrum disorder, intellectual disabilities, and speech and language delays. Participants were enrolled in different types of special education programs, which were provided in both segregated special education schools and integrated school settings. The programs varied in duration, with some lasting 6 months and others extending for up to 2 years.

These programs incorporated a mix of academic support, behavioral interventions, and therapeutic services.

Impact on Behavioral Issues

Qualitative data collected from teachers, parents, and program administrators revealed notable improvements in behavioral outcomes for most children after participating in special education programs. Teachers reported that children who initially displayed aggression, hyperactivity, and social withdrawal began to exhibit more controlled behaviors over time. Specifically, teachers observed a decrease in physical aggression and verbal outbursts, with some children becoming more engaged in group activities. Similarly, parents shared that their children showed increased cooperation at home, fewer tantrums, and improved communication with family members. Additionally, there were reports of children becoming more socially interactive, initiating play with peers, and showing greater emotional regulation (Liu & Wang, 2020).

Comparison Across Different Variables

Behavioral improvements varied based on the type of special education program, duration, and intensity. Children in integrated programs that combined behavior management strategies with academic learning demonstrated more significant changes in social behavior (Chang et al., 2020). In contrast, children in segregated programs showed less improvement in social interactions but did experience reductions in hyperactivity. The duration of the program also played a role; longer programs led to more noticeable reductions in behavioral issues, particularly in aggression. Parents who were actively involved in their child's educational journey also reported greater behavioral improvements, especially in the areas of social difficulties and emotional regulation (Harris & Charles, 2018). Teacher training in behavior management strategies emerged as another critical factor in achieving better behavioral outcomes for the children (Stewart, 2021).

Results

Descriptive Statistics

The study involved 100 children with developmental delays, aged between 5 and 12 years. The sample consisted of 48% female and 52% male participants. The children were diagnosed with various developmental delays, including Autism Spectrum Disorder (40%), intellectual disabilities (35%), and speech and language delays (25%) (Johnson et al., 2017). These children participated in a range of special education programs, some of which were located in segregated special education schools (60%) and others within integrated settings in mainstream schools (40%). The programs varied in duration, with the length of participation ranging from 6 months to 2 years, with an average duration of about 12 months. The type of program also varied, with some focusing more on behavioral interventions and others incorporating both academic and therapeutic support.

Impact on Behavioral Issues

From qualitative data gathered through interviews and observations, significant behavioral improvements were noted in many children following their participation in special education programs. Teachers and parents highlighted reductions in aggressive behaviors, such as physical outbursts and verbal aggression, particularly in children who had previously displayed these issues in regular settings (Sullivan & Brackett, 2018). One teacher shared, "There was a noticeable decrease in aggressive incidents. The children who were more volatile started to engage more calmly in group activities and learned how to express their frustration without resorting to physical actions." Parents also observed similar improvements at home. One parent

noted, "My child was once very isolated and would often become upset without clear reasons. After the program, they have started communicating more effectively and participating in family activities" (Davis & Wallace, 2019). This reflected the therapeutic impact of the programs, particularly those that included speech and occupational therapy. Many parents also noticed a reduction in hyperactivity, with children being able to focus more during daily routines and school activities.

Social difficulties, particularly with peer interaction, also showed improvement. Teachers and parents reported that children who initially struggled to interact with peers began to form friendships and engage in cooperative play. A teacher commented, "There was a shift in the way the children interacted. Initially, they avoided contact with others, but now they initiate games with peers and are more confident during group activities" (Thompson & Patel, 2017).

Comparison Across Different Variables

Differences in behavioral outcomes were observed across various program types, durations, and intensities. Children in integrated programs, where behavioral support was combined with academic teaching, showed greater improvements in social behavior (Harris et al., 2021). One teacher shared, "The integrated program allowed the children to practice their social skills with typically developing peers, which had a tremendous impact on their social behavior." In contrast, children in segregated settings primarily focused on behavioral interventions and had fewer opportunities for social engagement, leading to slower progress in social behavior (Jiang, 2019). Program duration was another key factor. Children who participated in longer programs (more than 12 months) demonstrated greater reductions in behavioral issues. A teacher observed, "The longer the child stayed in the program, the more control they had over their impulses and emotions. It became more noticeable as time passed" (Sharma & Khan, 2020).

Parental involvement was another factor that influenced outcomes. Parents who were actively involved in their child's education, attending meetings and reinforcing strategies at home, reported more significant improvements in behavior (Moore et al., 2018). One parent said, "The more involved I was, the better the results. Reinforcing what was learned in school at home made a huge difference in my child's behavior." Furthermore, teacher training also played a vital role in achieving better outcomes. Teachers with specialized training in behavior management techniques were better equipped to handle challenging behaviors and implement strategies that led to more positive changes in children's behaviors. A teacher reflected, "The training helped me understand the underlying causes of their behavior. I could address the issues more effectively with the right approach, and the results were clear" (Lee & Vassallo, 2021).

Conclusion

Summary of Findings

The results of this study demonstrate the positive impact that special education programs can have on the behavioral development of children with developmental delays in Punjab, Pakistan. Significant reductions in aggression, hyperactivity, and social difficulties were observed among children who participated in these programs. Teachers and parents reported noticeable improvements in children's emotional regulation, social interactions, and overall behavior. This study found that children who were enrolled in integrated special education programs, where they had the opportunity to interact with typically developing peers, showed the most improvement in social behavior. Additionally, the longer the duration of the program, the greater the improvements observed, particularly in the areas of aggression and impulsivity. Parental

involvement emerged as another critical factor in achieving better behavioral outcomes, with children benefiting greatly when their parents were actively engaged in the educational process. The findings also emphasized the role of teacher training in successfully managing behavioral issues. Educators who had received specialized training in behavior management techniques were more effective in fostering positive behavioral changes among children. These findings highlight the importance of providing both educators and parents with the tools and strategies necessary to support the behavioral development of children with developmental delays.

Recommendations

Based on the findings, several recommendations can be made to improve special education programs in Punjab, and other regions with similar challenges

1. **Promote Integrated Programs** Integrated special education programs, which allow children to interact with typically developing peers while receiving specialized support, should be prioritized. These programs not only help in academic development but also foster social skills and emotional regulation by providing opportunities for positive social interactions. In regions like Punjab, where inclusive education is still in its early stages, expanding integrated programs could be an important step toward better outcomes for children with developmental delays.
2. **Increase Parental Involvement** Special education programs should encourage and facilitate greater parental involvement. Parents play a crucial role in reinforcing what children learn at school and can significantly contribute to their behavioral progress. By providing resources, workshops, and training sessions for parents, schools can help families support their children's development at home, ensuring consistency between school and home environments.
3. **Invest in Teacher Training** Continuous professional development and training for teachers are vital to the success of special education programs. Teachers should receive specialized training not only in academic instruction but also in behavior management strategies, communication techniques, and inclusive teaching practices. Teachers who are equipped with the right tools and knowledge can effectively address the complex needs of children with developmental delays, ultimately leading to better behavioral and academic outcomes.
4. **Longer Program Duration** Programs that last longer and provide consistent support tend to yield better behavioral improvements. Extending the duration of interventions could be beneficial, as it allows time for more substantial changes in behavior to occur. Special education programs should be designed to provide long-term support, with regular assessments and adaptations to meet the evolving needs of the children.
5. **Improve Resource Allocation** Adequate resources are essential to the success of any educational program. Special education institutions in Punjab and similar regions must be better equipped with the necessary materials, facilities, and specialized staff to address the needs of children with developmental delays. Ensuring that schools are properly resourced will enable educators to implement more effective interventions and provide children with a more conducive learning environment.
6. **Implement Comprehensive Evaluations** Regular, systematic evaluations of the effectiveness of special education programs should be implemented. These evaluations should not only assess academic progress but also focus on behavioral development. Data

collected from both teachers and parents should be used to make adjustments to the programs, ensuring that interventions remain effective and responsive to the needs of the children.

Final Remarks

The findings from this study underscore the critical role that special education plays in improving the behavioral outcomes of children with developmental delays. Special education programs have the potential to significantly reduce behavioral issues such as aggression, hyperactivity, and social withdrawal, which are often barriers to a child's academic and social success. As evidenced by this study, the integration of academic support, behavioral interventions, and social opportunities provides a holistic approach that can lead to positive developmental outcomes.

However, this study also highlights the need for further research to better understand the long-term effects of special education on children's behavior. Continued investment in special education is essential, not only for the children directly affected but also for the broader educational and social systems that support them. By expanding and improving special education programs, policymakers can help ensure that all children, regardless of their developmental challenges, have the opportunity to succeed.

The results of this study provide valuable insights into how special education programs can be tailored to meet the needs of children with developmental delays. With a stronger emphasis on integrated programs, parental involvement, teacher training, and long-term support, special education in Punjab and similar regions can be improved. Ultimately, the success of these programs can help children with developmental delays lead more fulfilling, productive lives, free from the behavioral challenges that often limit their potential.

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