

JAPAN

Country Report On the Current Status of Education for Children with Multiple Disabilities in Japan

**Tetsuo Gokami
Research Director, Department of Policy and Planning
National Institute of Special Education (NISE)**

1. The Japanese educational system

The modern school system in Japan has its origins in the promulgation of the Education Order of 1872.

With the enactment of the Fundamental Law of Education and the School Education Law in 1947, the current 6-3-3-4 school system of six-year elementary schools, three-year middle schools, three-year high schools, and four-year universities was inaugurated with the goal of realizing the principle of equal opportunity in education.

Current upper secondary schools started in 1948, offering both full-time and part-time courses, to which a correspondence course was added in 1961.

The new university system was set up in 1949. In the following year, the junior college system was established provisionally, and later permanently following the amendment of the School Education Law in 1964.

Technical colleges were established in 1962 to provide lower secondary school graduates with a five-year system of consistent education. At the outset, these colleges were limited to courses in engineering and mercantile marine studies, but following an amendment to the School Education Law in 1991, they are now able to offer courses in other fields, as well as non-degree courses for graduates.

Students with disabilities are provided with an appropriate education at schools for the blind, schools for the deaf and schools for children with other disabilities, or in special classes

and resource rooms so the children can attend regular elementary and lower secondary schools. These schools and classes provide education that is adapted to the needs of the student in accordance with the type and extent of the disability.

Other educational institutions include kindergartens for pre-school-age children, and higher vocational schools and other miscellaneous schools which provide vocational and technical courses as well as courses that address practical needs.

Amendments to the School Education Law and other legislation in June 1998 have enabled the establishment of unified lower and upper secondary schools since FY1999.

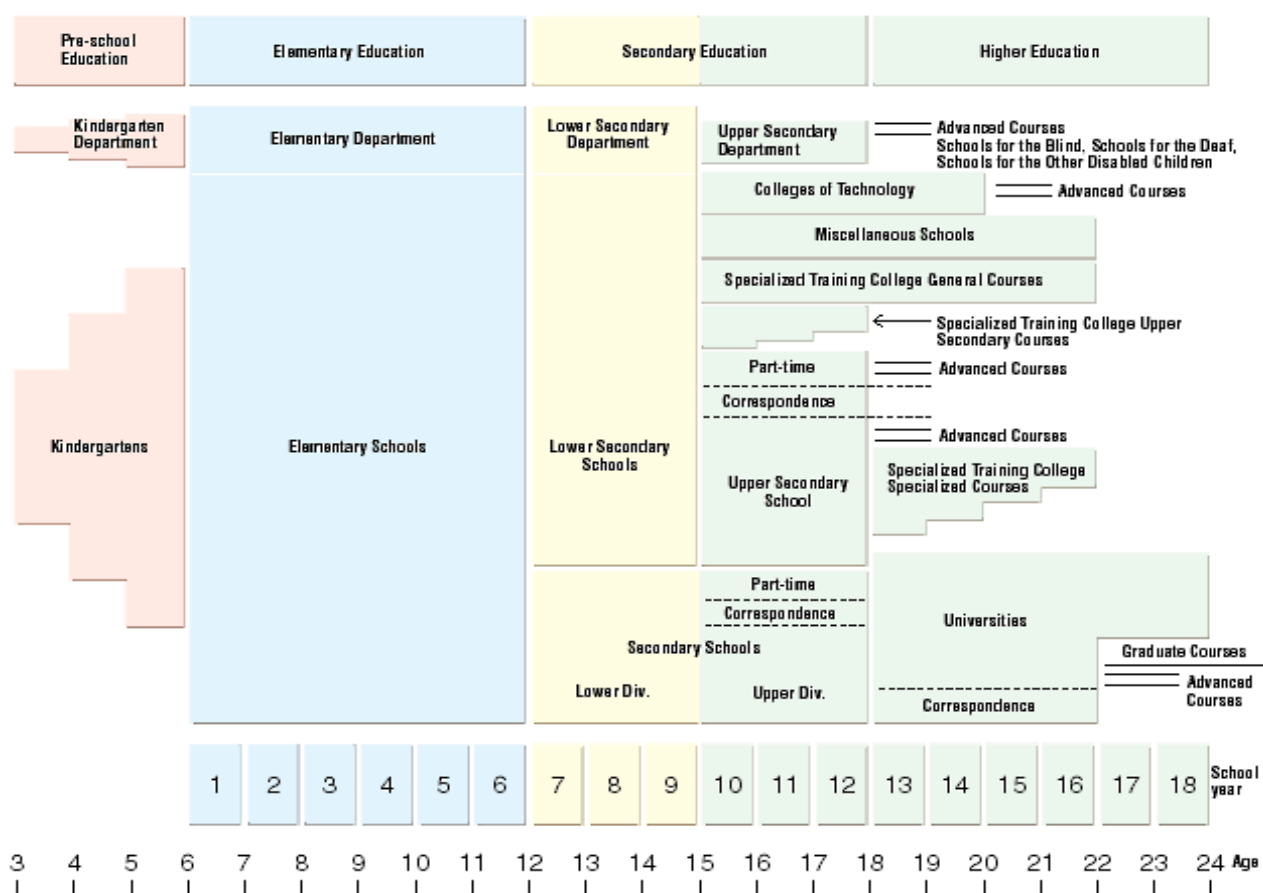


FIGURE 1 Organization of the School System in Japan (Ministry of Ministry of Education, Science, Sports and Culture)

2. The current situation of special education in Japan

Chart 1 gives the number of schools, classes, students and teachers according to the 2003 school basic survey by the Ministry of Education, Culture, Sports, Science and Technology

(MEXT). Charts 2 and 3 show the number of children with disabilities who are enrolled in ordinary elementary schools and lower secondary schools, and the number of classes for the blind, the deaf and those with other disabilities, along with the number of classes for students with multiple disabilities. Recent years have seen growth in the percentage of students who are educated at schools for the blind, for the deaf, for those with other disabilities, and in special classes or resource rooms. These account for 0.965 percent of all students of compulsory education age in FY1993 and 1.477 percent in FY2002. Figure 2 shows the percentage of schools for the blind, schools for the deaf and schools catering to other disabilities that have classes for children with multiple disabilities. The figure suggests that with the steady increase in the number of classes for children with multiple disabilities, schools for the blind, for the deaf and for those with other disabilities have been obliged to respond to the needs of children with a severe disability or multiple disabilities.

Chart 1: Number of Schools, Classes, Students and Teachers (2003)

	Schools	Enrollment	Teachers (Full-time)
Kindergarten	14,174	1,760,494	108,822
Elementary school	23,633	7,226,910	413,890
Lower secondary school	11,134	3,748,319	252,050
Upper secondary school	5,450	3,809,827	258,537
Secondary school	16	4,736	382
School for the blind	71	3,882	3,401
School for the deaf	106	6,705	4,915
Schools for other disabilities	818	85,886	52,778
Technical college	63	57,875	4,474
Junior college	525	250,062	13,534
University	702	2,803,980	156,155
Specialized training college	3,439	786,091	39,764
Miscellaneous schools	1,955	189,583	11,736
Total	62,086	20,734,350	1,320,438

Chart 2: Number of Children with Disabilities Enrolled in Ordinary Schools (Elementary and Lower Secondary Schools)

Year	Total	Intellectual Disabilities	Physically Disabilities	Health Impairments	Low Vision	Hearing Impairments	Speech Handicaps	Emotional Disturbance
2002 (Elementary)	55,963	34,963	2,444	1,194	164	762	1,103	15,333
(Lower Secondary)	25,864	18,212	687	499	52	347	63	6,004
2003 (Elementary)	59,419	36,406	2,594	1,205	183	803	1,151	17,077
(Lower Secondary)	26,514	18,489	747	455	54	342	48	6,379

Chart 3: Number of Children with disabilities who attend resource rooms in elementary and lower secondary schools

Year	Total	Speech disordered	Emotionally disturbed	Low vision	Hearing-Impaired	Physically Disabled	Health impaired
2002 (Elementary)	30,838	26,329	3,016	164	1,325	2	2
(Lower Secondary)	929	124	504	9	285	1	6
2003 (Elementary)	32,722	27,599	3,619	150	1,348	0	6
(Lower Secondary)	930	119	565	12	233	1	0

Chart 4: Number of Classes and Children with Multiple disabilities in Schools for the Blind, the Deaf and for Children with Other Disabilities

Year		Kindergarten Department	Elementary Department	Lower Secondary Department	Upper Secondary Department	Total
2002	Classes	90	5,195	3,262	3,523	12,073
	Children	219	13,855	8,321	9,479	31,874
2003	Classes	88	5,362	3,268	3,645	12,363
	Children	227	14,311	8,297	9,867	32,702

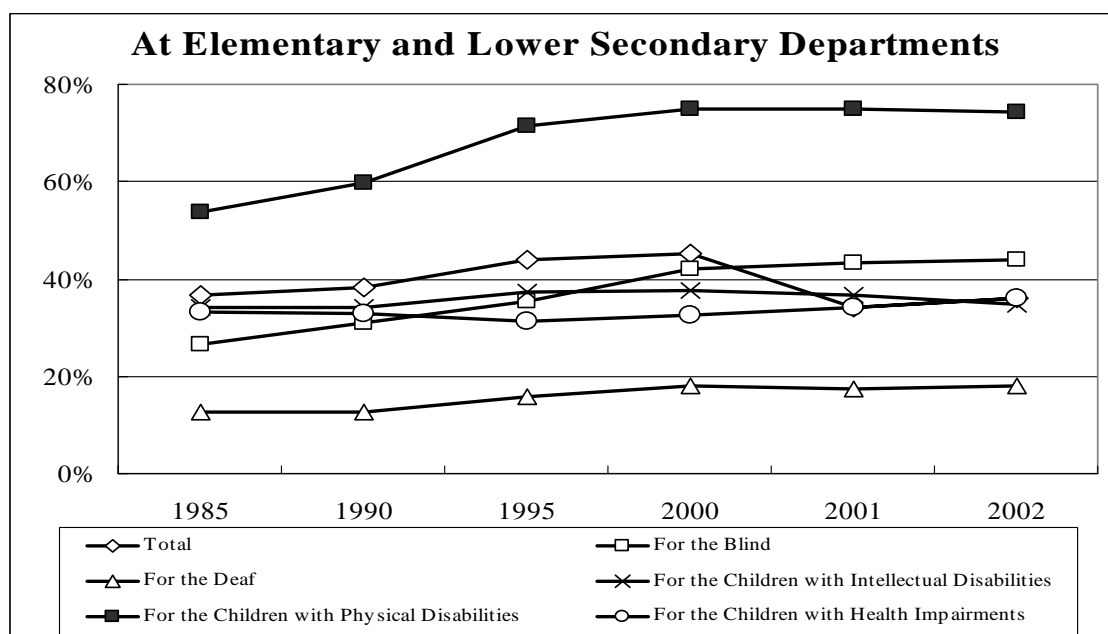


Figure 2-1: Percentage of Classes for Children with Multiple Disabilities at Elementary and Lower Secondary Departments of Schools for the Blind, the Deaf and Children with Other Disabilities (National , Local and Private)

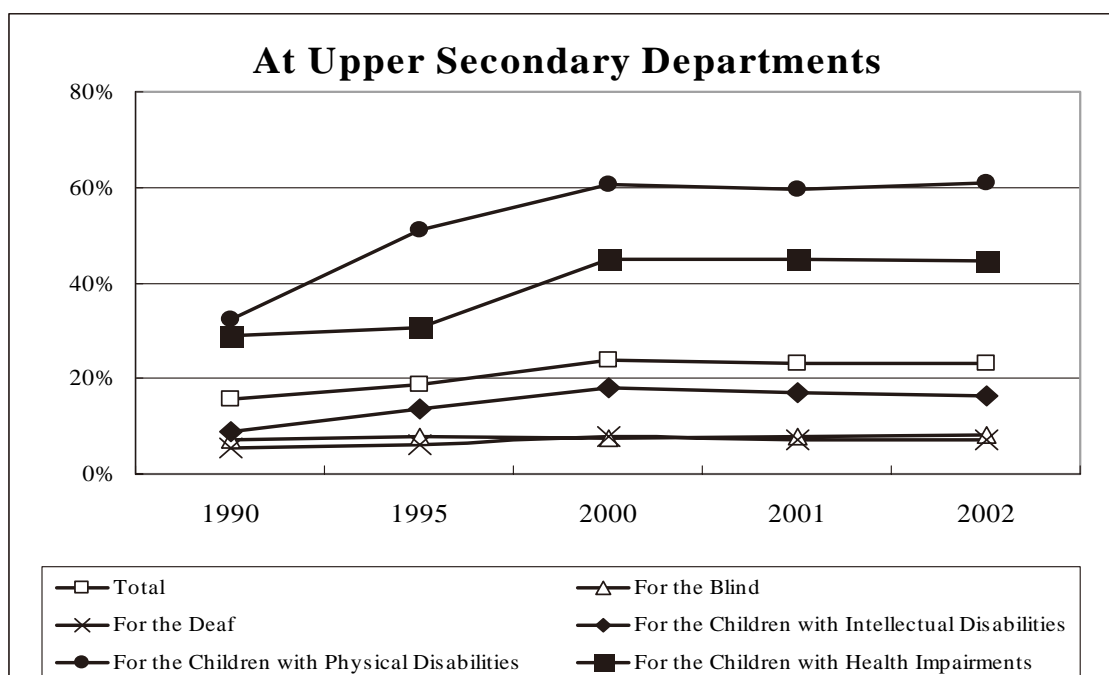


Figure 2-2: Percentage of Classes for Children with Multiple Disabilities at Upper Secondary Departments of Schools for the Blind, the Deaf and Children with Other Disabilities (National, Local and Private)

3. The history of education for children with multiple disabilities in Japan

It was education for the deafblind in the United States in the mid 19th century – the most notably Dr. S.G. Howe's attempts to educate the blind and deaf girl Laura Bridgman – that set the stage for the subsequent development of a system for the education of children with multiple disabilities. Prior to that, J.M.G. Itard, best known for his *The Wild Boy of Aveyron*, and Seguin had tried educational approaches that provide a profound inspiration for today's education for children with multiple disabilities.

Systematic approaches for the education of children with multiple disabilities in Japan, likewise, can be traced back to education for the deafblind. To be exact, it all started when, soon after education for the blind and the deaf became compulsory, Yamanashi Prefectural School for the Blind started to educate the deafblind in 1948 by enrolling two deafblind children who had been alienated from school education. Subsequently, the year 1952 saw the establishment of the Study Group on Education for the Deafblind, which made a considerable contribution to the development of teaching methods for children with multiple disabilities. Meanwhile, "special classes (classes for children with multiple disabilities)" were established at schools for the blind and schools for the deaf to start educating intellectually disabled blind children and intellectually disabled hearing-impaired children.

Only a very limited number of these children, though, received such education.

In 1956, the Special Measures Law on the Development of Public Schools for the Handicapped was enacted, making education for children with other disabilities compulsory. This led to a surge in the number of such schools. In the meantime, practice in education for children with multiple disabilities was carried on at schools for the blind, schools for the deaf and schools for physically disabled children.

From 1961 onward, the then Ministry of Education, Science, Sports and Culture (now MEXT) designated experimental schools to educate children with multiple disabilities, thereby encouraging practical research in that area. As the number of classes for children with multiple disabilities increased at schools for the blind, for the deaf and for those with other disabilities, in an increasing number instances, children with multiple disabilities were enrolling in special classes at elementary and lower secondary schools.

During the ten years leading up to 1974, a working party for the study of education for children with multiple disabilities was established under the National Convention for Study of Education for the Deaf (now the All Japan Convention for Study of Education for the Deaf) and the All Japan Convention for Study of Education for the Blind, advancing research efforts in educational content and methods.

In response to the social need to provide opportunities to receive education to children with severe disabilities, whose school enrollment had been either postponed or exempted, and who didn't simply fall under the concept of "children with multiple disabilities," in 1969 the Tokyo Metropolitan Government and two prefectural governments initiated home/hospital bounded education, whereby they sent teachers to homes or other locations with students whose disabilities made attending school difficult. In 1974, all other prefectural governments followed suit.

It was due to this social momentum that the Council of Collaborators for Special Education Research released a report in March 1969 on the "Shape of Basic Measures for Special Education," in which they discussed the "expansion of education for children with multiple disabilities." In line with this, a new area of "nursing care, training (Yougo/kunren)" was added to the school curricula of the elementary, lower secondary and upper secondary departments of schools for special education, and "studies of living (Seikatsuka)" to the subjects for the elementary department of schools for the intellectually disabled, in an attempt to teach children with multiple disabilities in accord with the realities they face.

In June 1971, the Central Council for Education proposed in its report on “the Basic Measures for the Integrated Expansion and Improvement of School Education in the Future” that “the national government should play a more active role in the expansion and improvement of institutions for special education, e.g., by establishing facilities for children with multiple severe disabilities.” Accordingly, the Department of Research in Education for Children with Multiple Disabilities was established at NISE, which opened in October of the same year.

This was followed by the establishment of the National Kurihama School for Children with Disabilities, which was designed to practice education for children with multiple disabilities in collaboration with NISE. Until it was placed under the University of Tsukuba in March 2004, the school was a major locomotive for the development of education for children with multiple disabilities.

In March 1975, a report on “School Education for Children with a Severe Disability or Multiple Disabilities” was published, which defined the scope of children with a severe disability or multiple disabilities as follows: (1) those who have more than one of the disabilities provided in Article 22-3, Enforcement Ordinance of the School Education Law; (2) those who, due to marked mental retardation, find it extremely difficult to communicate with others and adapt themselves to their environment; and (3) those who exhibit frequent problem behavior such as hyperactive tendencies and who need permanent nursing care.

After school education for children with other disabilities became compulsory in 1979, children with multiple disabilities – whose school attendance had often been postponed or exempted – were systematically afforded opportunities to receive schooling, opportunities that would continue to expand.

Of about 16 million children of compulsory education age in 1979, 3,367 (0.02%) had their school attendance either postponed or exempted. Since then, the Japanese school authorities involved in education for children with a severe disability or multiple disabilities have striven to reduce that ratio to 0.02%. In other words, compulsory education for the handicapped has been promoted in a bid to enroll all students of compulsory education age.

4. The current status of education services for children with multiple disabilities

Since compulsory education was imposed on schools for the handicapped in order to

accomplish the principle of “100% enrollment,” schools for the blind, for the deaf and for the other disabilities were obliged to accept children with serious and/or multiple disabilities. As a consequence, the children at these schools tend to have a more severe disability or multiple disabilities.

Education for children with multiple disabilities may take the following forms:

1. Joining with children with a single disability at schools for the blind, schools for the deaf and schools for children with other disabilities;
2. A special (multiple disabilities) class; and
3. Dispatch of teachers to the home or other location.

School education is guaranteed to children at child welfare and medical institutions (for the intellectually disabled, the deaf and blind, the physically disabled, those with health impairments, the severely retarded), and takes the following forms:

1. An annex school for children with other disabilities exclusively for the children at the institution;
2. A branch school or branch class of a school for children with other disabilities established within the institution; and
3. Teachers dispatched from a school for children with other disabilities to teach at the institution.

Special education takes place at different institutions for children with different types of disabilities. Severely disabled children may avail themselves of schools for the blind, for the deaf, for the intellectually disabled, for the physically disabled and for children with health impairments. Which of these schools children with multiple disabilities should attend is determined by their chief disability. However, such disabilities are often intricately intertwined, so this determination is not necessarily an easy one. Mildly disabled children may be admitted to special classes for the low vision, hearing-impaired, those with speech disorders, emotional disorders, physical handicaps or health impairments. Resource rooms are also available for children to attend regularly. In each case, exchanges and collaborative learning experiences are actively pursued with local elementary and lower secondary schools in ordinary school classes.

There has been discussion in recent years about the care of children whose disabilities are extremely serious (children with ultra-severe disabilities) and about medical care as part of school programs. Currently, there is a proactive study being done on the education of children who need constant medical care, comprising a model school for practical research designated to discuss education for children with ultra-severe disabilities and medical care

that may be provided as part of educational programs, among other themes.

Up to this point, the system has fulfilled the national minimum. There is now an initiative to address the needs of children with mild developmental disorders who are currently in ordinary classes.

5. Content and methodology of education for children with multiple disabilities

Such symptoms as dyskinesia, sensory disturbances, intellectual disabilities and behavior disorders are intricately intertwined in children with multiple disabilities, and not a few also have a disease, epilepsy for instance, which requires attention to mental and physical movement.

No matter how varied their disabilities, children with multiple disabilities share a basic human behavioral pattern in common with ordinary children: continuing to learn as long as they live. Thus, our basic approach should begin with recognizing and accepting the whole self of the children before you as they really are. Educating children with multiple disabilities requires a most detailed understanding of their living environment, educational background and learning progress, development history and the assessment of several functions. The last thing they need is simplistic guidance that focuses on some conspicuous "problem behavior." Nor is it desirable to depend too much on the limited set of teaching theories and skills currently available.

What is important in guiding children with multiple disabilities is to assess the realities of their disabilities and the state of their development from many different angles and apply flexible approaches. It is also necessary to create a system for flexible yet consistent guidance, while closely communicating with their families, medical and welfare service providers, and other institutions.

1) Matters for assessment

To deepen understanding of children with multiple disabilities, it is necessary to gather the following data:

a. Early developmental history: detailed accounts of the health and living environment of the mother during the prenatal period, the circumstances of the child's birth (method, conditions, time required for delivery, birth weight, presence of neonatal jaundice, whether an incubator was used, the first cry, etc.), and the developmental conditions during early infancy.

b-1. Case history and status of disabilities: data that is relevant to the current state of the

disorders, such as when the disease was first manifested and for how long, name of the disease, progress of the disease, degree of the disorder and the presence of epilepsy.

b-2. Treatment and counseling history: institutions consulted, duration and content of treatment and schooling, results of medical examinations and the course of the medical diagnosis.

c. History of guidance and training: hospitals, consultation offices, etc. from which parents sought guidance, advice, etc. for their children's disorders.

d. Daily living conditions: an accurate picture of the rhythm of their lives can be gained by closely observing the rhythms of sleep, diet, excretions, bathing, human relationships, communication, etc.

e. Interviews with caregivers on problems they might have in daily life, such as family background, should be referred to according to the nature of the disorders.

f. Data on inherent sensation, bodily movement, posture, etc.

2) Developments in education for children with multiple disabilities associated with sensory disturbance

According to our "Report on the National Survey-The Educational Situation of Deafblind Students in Japan (2000)," all types of schools for the handicapped – including schools for the blind, for the deaf, for the intellectually disabled, for the physically disabled and for children with poor health – accommodate children with multiple disabilities associated with dual vision and hearing disorders. The number of children fulfilling the survey definition - combination of visual impairment (eyesight of less than 0.3 or not measurable) and hearing impairment (average auditory power of 30 dB or over) - was 338. It is assumed that education for children with multiple disabilities associated with sensory disturbance involves difficulties unique to this type of disorder. Sensory faculties play a pivotal role in many different aspects of human behavior, in particular, grasping the surrounding circumstances, communication, and orientation and mobility in space. Simultaneous impairment of both vision and hearing leads to many restrictions, and, if these restrictions are extreme, an intense solitary state may ensue.

Assessment of the sensory faculties is indispensable for gaining an accurate picture of sensory disturbance, but it is not very easy to examine and assess these when multiple disabilities are present. Many children with multiple disabilities associated with sensory disturbance have difficulty becoming aware of their own disorder and describing their symptoms, so it is hard to assess the condition of the disorder of their faculty function-wise. For instance, children with multiple disabilities typically give unclear responses in a hearing test, and it is often hard to assess their hearing during infancy. It is thus essential to assess

their hearing and make wearing a hearing-aid a habit by positioning assessment as part of daily educational activity in a long-term relationship, as opposed to making instant assessments through sporadic examinations.

In establishing a relationship with and communicating with children with sensory disturbance, it is not always easy to establish a mutually coordinated “interaction.” A practical perspective is needed here, whereby behavior and expressions are carefully read, interpreted, and the child’s involvement invited in the educator’s responses.

As has been mentioned, the scope of education for children with multiple disabilities associated with sensory disturbance is extraordinarily broad – from approaches at the initial developmental level to communication-based course instructions and learning to orientate and move the self in space, all of which are unique to the blind and deaf.

6. Support for the education of children with multiple disabilities and their parents

1) Guidance for school attendance

Each municipal government provides school attendance guidance through a School Attendance Guidance Committee comprised of specialists in the subject. Although different municipalities take different approaches to the development of manpower and the material conditions for school attendance, all try to put themselves in the shoes of the parents in their school attendance guidance. For children with a severe disability or multiple disabilities, however, complex and diverse symptoms can make it difficult to make the right determination.

2) After graduation

The percentage of students who go on to the upper secondary department is on the increase, reaching 88.7% in 2000, around the time visiting education started for the upper secondary department.

Not many statistics are available on what children with severe or multiple disabilities do after they graduate. Chart 5 shows the paths taken by graduates from the upper secondary department of schools for the blind, the deaf and other disabilities (regular course), according to a survey in 2002 by the then Ministry of Education, Science, Sports and Culture. Of graduates from schools for children with other disabilities, 55.9% were admitted

to a social welfare facility or medical institution and 15% were placed in the “other” category. Supposedly, many have severe or multiple disabilities, and the remainder are home-bound.

Chart 5 Paths of Graduates from Upper Secondary Department (Regular Course), Schools for the Blind, the Deaf, and Children with Other Disabilities (National, Local and Private)

(Graduates in March 1999)

Schools	Graduates (A)	To Higher Education		To Education/Training Institutions, etc.		Finding Jobs		To Social Welfare Facilities and Medical Institutions*		Other	
		n (B)	B/A %	n (C)	C/A %	n (D)	D/A %	n (E)	E/A %	n (F)	F/A %
Schools for the Blind	388	164	48.5	13	3.8	45	13.3	68	20.1	48	14.2
Schools for the Deaf	519	235	45.3	69	13.3	152	29.3	46	8.9	17	3.3
Schools for Children with Other Disabilities	10,860	138	1.3	384	3.5	2,205	20.3	6,438	59.3	1,695	14.1
Total**	11,717	537	4.6	466	4.0	2,402	20.5	6,552	55.9	1,760	15.0

*Social welfare facilities and medical institutions: social welfare facilities, homes for the physically disabled, hospitals, clinics, etc.

**Figures are rounded. Percentages may not total 100%

(Ministry of Ministry of Education, Science, Sports and Culture)

Although the burden for parents has eased somewhat thanks to admission to these facilities, post-school life for students with multiple disabilities continues to be a major challenge we must resolve. Normalization is making progress in Japan, and various programs are being tried. However, response to students with a severe disability or multiple disabilities still lags. Furthermore, although support for life in the community has begun for these people, it is only in its infancy. After the ICF (International Classification of Functioning, Disability and Health), etc. raised the issue of what to do for the independence of those with a serious disability, the question has captured a growing amount of public attention, but it still needs a serious look.

7. Cooperation with relevant organizations

Mutual cooperation with other concerned organizations is key to education for children with multiple disabilities. While seeking cooperation from those in specialist fields outside of

education, such as public health, welfare, healthcare, etc., in the area where the children reside, it is necessary to form a framework for mutual cooperation.

In response to growing interest in the actual circumstances in each district, medical science, etc., organizational efforts have been mounted for the prevention of disorders, their early discovery and early diagnosis. It is also necessary to further improve healthcare, welfare and educational services throughout a child's entire life by focusing on: 1. treatment of disease; 2. school attendance and career; and 3. delivery of the physical disability certificate, assistive devices, etc.

To meet the diverse needs of children with multiple disabilities, well-thought-out, concrete cooperation is necessary in all the areas where children with multiple disabilities have a stake. This is all the more important as the severity of the disability increases.