

GENERAL DISCUSSION

The 26th Asia-Pacific International Seminar on Education for Individuals with Special Needs

1. General Presentation

The theme for this five-year term is “Advancement of Education to Meet the Special Needs of Individuals – Toward Realization of Principle of Equity and Social Cohesion”. The sub-theme for this year is “Collaboration Based on Partnership among Related Fields (Education, Healthcare, Medical Care, Welfare, etc) for appropriate service provision to individuals. The study visit to Regional Activity Home, DONTOKOI MINAMI on Dec.4th preceded the seminar which was held in Yokohama, Japan, from Dec.5th to 7th.

The delegates from 14 Asia-Pacific countries participated in the seminar; namely, Australia, Bangladesh, China, India, Indonesia, Japan, Malaysia, Nepal, New Zealand, Pakistan, The Philippines, Korea, Sri Lanka, and Thailand,

Key note speech delivered by Mr. Nishimaki of the National Institute of Special Education, Japan, gave an overview of historical, demographical, political and philosophical background of education for persons with disabilities. The key concept of welfare and education in Japan is “Cohesive Society” and the trend of service provision “from National Minimum to Local Optimum” was described . A successful local model of Konan City was presented in the Japanese country report.

The country reports by the delegates gave overviews of the educational systems of their countries highlighting some statistics, and issues regarding partnerships as well as suggested indigenous measures both at governmental and nongovernmental levels for improving the existing models of collaboration.

2. What are yielded from the Q&A and discussion sessions?

- * “ Having many specialists” does not necessarily mean assurance of quality support. “too many” if uncoordinated. The important thing is that if they can make good networking, coordinating and utilizing existing resources in the community, in order to pursue QOL of individuals with disabilities and their families.
- * Not only school perspective but community perspective is very important, and teachers can be the pivot persons for collaboration among “medicine”, “welfare” and “education.”
- * There are different levels of collaboration - from community level to national government; unstructured one to structured one. Communication and cooperation are essential elements in every level.
- * Welfare should be based on human rights not charity. Disability policy should be addressed in comprehensive legal framework.
- * Identification of child needs, solution or resources needs collaboration of various fields, and

each of them provide different angles to complete pictures.

* Outcome based indicators have to be developed. Commitments to partners are important.

* Documentation and dissemination of good collaborative practice are needed.

* Structure of service provision through collaboration can be developed utilizing available resources and specific conditions in each country. “Inclusion” is important principle to achieve, but each country can follow own way to achieve it.

“Collaboration mandated by fragmentation of resources” vs. “intentional collaboration”, “designed collaboration” vs. “non-designed collaboration”

3. Framework for General Discussion and Summary (Implication from the Seminar)

- 1) What were the similar experiences?
- 2) What were new experiences in individual countries?
- 3) What were best practices – from which we can learn?
- 4) Suggestions for future
 - (1) Indicators
 - (2) Others
- 5) Common Vision, Common Understanding
Collaborative modality for future

<Proceedings of the General Discussion>

Chair: Ms. Yunying Chen (China)

Ms. Adele Peart-Baillie (New Zealand)

1) What were the similar experiences?

* Funding mechanisms for collaborative practices

-Funding through community organizations

-How do we mobilize communities?

* Collaboration between government and other agencies

-Private sectors?

* Many/most countries’ education is not always with the ministry of education- leads to segregation of those with disabilities, fragmentation of support is a problem for both general and disabled.

* Funding insufficient, so it is necessary to supplement this by other agencies. Government should be the leader, however.

* In many countries many education systems are not as responsive as they could be. Governments’ responsibility to advocate/ensure the rights of the disabled are met. (“international legislation” for all?)

* Family is the fundamental organization & community which should take responsibility.

2) What were best practices – from which we can learn?

<India>

- Decentralization for building plans, finding what was required from the local community.
- Provision for disabled included in provisions for all children
- Private community and other organizations need to be mobilized for funding educational initiatives for children with special needs
- A bottom up approach
- Teacher training- 5 days minimum/mandatory for all/strong support
- Ratification need to be followed and implemented
- Numbers of structure are already in place. Utilizing the services of these existing services first would be a better idea than building new ones and duplication of efforts. So funding should be utilized appropriately.

<Bangladesh>

- We are not serving sufficiently with those with disabilities.
- Children's voice is important/ parents involvement is very important. More disabled people should be present at this forum.

<Pakistan>

- China, India & Korea gave very interesting reports. How does this decentralization work? Elected bodies at local level work in communities and report to state authorities. Decision makers for all children (in terms of education) monitored and managed at the local level.

<Philippines >

- Private sector/NGO- support the government
- Dissemination of information campaign is very important. Awareness programs work.
- Communication strategy- invitational to the community to engage.
- Curriculum issues –difficult to find time to adapt

<China>

- Countries are shifting from central to decentralized, or decentralized to centralized. Should be the system that the country wants according to their circumstances. Centralization and decentralization should be balanced.
- Framework required- centralized policy with local management, school/community based service provision.

<Nepal>

- School implement planning-all stakeholders involved in the planning. Funds are provided by the government based on that plan.

<Korea>

- Disability awareness –to raise the issues around why inclusive education is the important

policy and philosophy. Promoting inclusive education.

<Sri Lanka>

- First person is the child. In order to share and utilize resources, decentralization is needed.

<Indonesia>

- Inclusive education is one option- Special schools are in the cities, and strategies for rural areas may be different from those for the cities.

<Malaysia>

- Special Needs Advisor Council- national level
A good way to collaborate with other agencies/parents/NGOs

3) What are some indicators as suggestions for future?

- Teacher factor (Inclusive education)
- Curriculum
- A system approach
 - Both process and outcome are important
 - Inputs will vary with each country
- Are the children with disabilities enjoying rights to education?
 - Not just enrolling
 - Are they participating?
- School performance
 - coping mechanism of parents
 - child learning
 - Socio-economic status
- Promote compulsory education
 - Quality of learning
 - Quality of teachers
 - Quality of community – a welcoming community
- Transition to adult life
- Understanding what child needs to learn, not what they are supposed to teach
- World education indicators
 - UNESCO approach to have special needs indicators included