

Access to Education For Handicapped Children in Thailand

By

Johanne Hanko

Submitted to

Faculty of Graduate Studies and Research

McGill University, Montreal

**In partial fulfillment of the requirements
for the degree of Master of Arts in
Administration and Policy Studies in education**

February 1992

(c) Johanne Hanko 1992

ABSTRACT

Thailand is one of the South East Asian countries undergoing major economical and social changes. On the verge of becoming industrialized, it has a literacy rate of 91% which is well above international standards. Yet, handicapped people have very limited educational opportunities. Less than 4 % of handicapped children in Thailand have access to education.

The purpose of this study is to determine specific needs of special education by comparing findings from agencies visited such as schools, foundations, government and non government organizations, with government policies.

The educational system is studied and special education policies described. A look at implemented laws shows that the government recognizes its responsibility towards the handicapped; it is also pointed out that the major causes for handicaps are generally due to avoidable situations. Finally, special government projects are highlighted and suggestions are submitted for future developments.

RESUME

La Thaïlande est un des pays du Sud Est Asiatique connaissant des changements majeurs autant économiques que sociaux. Sur le point de devenir industrialise, le taux d'alphabétisme est de 91% ce qui est bien au dessus des standards internationaux. Néanmoins, les facilités d'éducation pour les personnes handicapées restent très limitées. Moins de 4 % des enfants handicapés en Thaïlande ont access à l'éducation.

Le but de cette étude est de déterminer les besoins spécifiques pour l'éducation spécialisée en comparant les données relevées aupres des organismes visités, telles les écoles, fondations, organizations gouvernementales et non-gouvernementales, avec les politiques légales.

Le systeme éducatif est étudié et les politiques concernant l'éducation spécialisée décrites. Un regard sur les lois démontre que le gouvernement reconnait ses responsabilités vis-a-vis des handicapés; il ressort également que les causes majeures de handicaps sont généralement dues a des situations pouvant être évitées. Enfin, des projets gouvernementaux sont soulignés et des suggestions soumises pour les évolutions futures.

ACKNOWLEDGMENTS

It is with great honor and gratitude that I acknowledge the people who have helped me in my research.

Professor Norman Henchey, my thesis supervisor, who gave me support and understanding when I needed it. With his patience he has taught me to structure my thoughts and improve my writing skills. Always available to answer my questions, he always encouraged me to go on.

Mrs Mary Lynn Keenan, secretary of the Department, who insured communications between Canada and Thailand. She always made sure that everything was done on time.

The people of Thailand who have directly contributed to this study by allowing me an interview. They have given me their time and have accepted to collaborate in the collect of necessary data for my research.

My husband, for encouraging me especially in those moments when the obstacles seemed impossible to overcome, and for always believing in me.

TABLE OF CONTENTS

Abstract	.....	1
Resume	.....	11
Aknowledgement	.....	111
Table of content	.....	1V
Foreword	.....	VI

Chapter I - INTRODUCTION

Introduction	.....	1
Purpose of the study	.....	5
Rationale	.....	5
Methodology	.....	6
Review of literature	.....	8

Chapter II - EDUCATION IN THAILAND

Historical Development	.....	13
Policy implementation	.....	17
Present system & structure	.....	18
Pre-school education	.....	19
Primary Education	.....	20
Secondary Education	.....	24
Higher education	.....	26
Teacher education	.....	27
Non-formal education	.....	28
Special education	.....	29
Government Budget	.....	31

Chapter III - LAWS AND REGULATIONS FOR SPECIAL EDUCATION

Historical development	34
Responsibilities	35
Causes for disabilities	38
Government policies	41
Special education	43
Teacher Training	47
Higher education	48
Available facilities	49

Chapter IV - AGENCIES AND SERVICES 54

Chapter V - CONCLUSIONS 93

Appendix

Act of legislation for primary education	106
Interview questionnaire	108
Administrative structure	112
Special education organization chart.....	115

Bibliography	116
---------------------------	------------

FOREWORD

After teaching in Canada for ten years, of which six years were in music for special education, I have decided to move to Thailand. However, holding a Bachelor's Degree in Music education, I was interested in the educational system of Thailand, in particular the field of special education.

For my school board in Quebec, I was responsible for establishing a music program for special education pupils. I am hoping to do the same in Thailand. I therefore decided to learn how the Thai education system works, and to understand the policies and programs regarding special education.

The purpose of this thesis is to examine policies and practice of special education in Thailand.

CHAPTER I.

INTRODUCTION

Thailand is recognized as one of the countries of South East Asia undergoing major economic and social changes. Economically, Thailand is becoming more and more industrialized. Other countries from Europe, America and also Japan are bringing their technology requiring specialized manpower. This encourages students to pursue their studies to a higher level. There is, however, a percentage of youngsters who in most African and Asian nations are not allowed the opportunity of education; they are the disabled children (who cannot lead an active life because of health, psychological or physical problems). Even in countries like Thailand where government authorities recognize the child's rights, little is done for the disabled; it is known that special services are costly in any country, and most governments have limited funds.

A special study made by UNESCO, concerning the education of children and young people with disabilities (Hegarty, 1990), shows there is an alarmingly high percentage of the population that is disabled, especially in developing countries. An estimated 500 million people in the world are disabled as a consequence of mental, physical or sensory impairment.

International reports estimate that more than one child out of ten is born or becomes impaired (with diminished physical or mental capability). If no attention is given, this will impede the development of the child. Contrary to the developed countries where special attention is given to children with disabilities, the developing countries where most of the children live get little if any special care to prevent the occurrence of the impairment, or alleviate its damaging consequence. In fact, approximately 80% of the estimated 200 million disabled children in the world are living in developing countries; very few receive good health care and education, and less than two percent receive special services of any kind.

Thailand has proven its concern for the disabled. Laws have been passed to ensure accessibility to education for the disabled population. "Children and young people with disabilities need education no less than their peers" (Hegarty, 1990 p.1).

According to a study from the Bangkok newspaper The Nation of May 21, 1989, there are approximately 2.5 million disabled people in Thailand.

A study made by the National Education Commission in 1988, with the cooperation of Dr. Padoong Arrayavinyoo from Srinakharinwirot University, shows that 3.51% of handicapped children (who have a physical or mental disability) are getting education. Mr. Kamol Ditakamol, director of the special education division, states that this percentage is now estimated close to 10% in the year 1991.

Under the National Educational Scheme of 1977, it is clear that "the state shall endeavor to make education accessible to the poor, the physically, mentally, and socially handicapped as well as the educationally disadvantaged" (section 2, article 15) (Ministry of Education, 1977 p.4) and that "special education is provided for those who have special character traits, or who are physically, intellectually or mentally abnormal. It may be given in special institutions or in ordinary school as appropriate" (section 3, article 38) (Ministry of Education, 1977 p.11).

On the contrary, in The Nation newspaper dated February 3rd, 1989, an article clearly states that the law in Thailand exempts the government from having to look after the mentally handicapped. It is officially recognized that there are not enough facilities in Thailand to allow handicapped children to get an education. Rich people have access to private special schools while for the others it is a matter of "luck". The mildly handicapped are slowly integrated into regular schools by the Ministry of Education. Also, according to the Elementary Compulsory Education Act of A.D. 2523 (1980), it is clearly mentioned in Article 8, Section 3, that at the parents' request, the district educational committee and subdistrict educational committee have the authority to exempt from attending school any child that has physical and/or mental disability. There is also a special note which says that if the disabled child was freed from the disabled status, the two committees must annul this exemption. (See copy of the Law's English translation in Appendix A).

The fact is that the government recognizes its responsibility towards handicapped children, yet allows these children to be exempted for compulsory education. Also, facilities to accommodate these children are not provided.

Purpose of the study

The purpose is to study the educational system in Thailand, to understand government policies concerning special education, to look at the present situation in special education schools, and to compare findings from agencies which were visited (schools, foundations, government and non government organizations), with the government policies, in order to define the specific needs.

Rationale

Thailand has proven to be an example of success among developing countries. It has been making persistent efforts to achieve universal primary education and to reduce the illiterate population to a minimum; it has shown satisfactory progress to this goal. In fact, the primary school enrollment ratio for the year 1988 was at 92.73%.

Special attention must now be given in order to give the handicapped population the opportunity to receive an education. This study should allow basic understanding of the educational system and the laws and policies related to special education.

Information is scattered among different documents, and regrouping them into one will show a clearer picture of the present situation, help evaluate the situation, and establish

specific strengths, weaknesses and needs. This is done by comparing theory and reality. Through visits to private, semi-private and government-owned facilities, it is possible to define the type of education handicapped children are receiving, the quantity of schools available in Thailand, and to see what are their needs.

To the best of my knowledge, no document has been written to include opinions, facts and expectations from both government and private institutions. This study should allow a better understanding of each concerned party, and help in future discussions in order to improve the present special education situation.

Methodology

A needs assessment approach will be used in this study. According to Polit & Hungler (1987 p.163) the aim of needs assessment is to determine if the objectives of a program are meeting the requirements of the individuals who are to benefit from it.

From the list of schools given by the Ministry of Education, and through foundations, schools were chosen; the foundations are usually responsible for three to six schools around

Thailand, most of which are approved by the government. Also, by meeting with the foundation and visiting one of its schools, it was possible to understand their basic organization, and to see the main differences between the schools under the foundation. Visited schools or foundations offered a special education or mainstreaming program for handicapped school-age children.

The method used was a literature review on government laws, educational programs and facilities concerning special education, and a survey where data ^{were} ~~was~~ collected from people of selected institutions whose needs for helping handicapped children were being assessed. The sample size was between eight to ten agencies.

The instrument used for this research was a structured interview, based on a questionnaire developed by the investigator (see Appendix B). These questions report the physical facilities (number of children, classes, teachers), special services (therapists, social workers, psychologists etc.), teachers' qualification, government laws, programs and financing.

This study limits itself to disabled children between the ages of four and fifteen, in the following categories: blind, low vision, deaf, hard of hearing, physically handicapped, mentally handicapped (including slow learners, educable,

trainable). The concluding chapter compares the findings from the different agencies with government policies concerning special education.

Review of literature

Introduction

Education everywhere has been considered as an integral factor towards development, a key instrument to build an independent economy and social harmony (Ministry of Education, 1987; World Bank, 1990; Thanamai-Santasombat, 1987).

International organizations such as UNICEF, UNESCO and the World Bank have made many studies regarding children's rights and literacy. The United Nations Declaration of Human Rights clearly recognizes the right of all children to education. Yet millions of children are not allowed this right (World conference on education for all, 1990c).

During the 1990 Conference on Education for All held in Jomtien, Thailand, it was stated that around the world, there are more than 960 million illiterate and functionally illiterate adults, two-thirds of whom are women, and that 100 million children including at least 60 million girls have no access to primary education. The adult literacy rate in the world is estimated at 75% for the year 1990, and at 68% in Asian countries for the same year.

Education in Thailand

The Ministry of Education documents mostly provide information about the organization of the Ministry, its responsibilities, laws, educational programs, schools and mainstreaming facilities. Specific data, in English, can only be found through the research reports of international organizations. At the Foreign Affairs Department of the Ministry of Education, some information in English is available on the educational programs, schools and mainstreaming facilities.

A lot of information on Asian countries is available at the World Bank, UNESCO and UNICEF, but very little could be found on Thailand. Most documents from any ministry were in the Thai language; a few have been translated because they were used during international conferences.

Findings regarding education in Thailand show that in 1985, the literacy rate was estimated at 91.20% (World Conference on Education For All, 1990a) which is well above international standards. Primary education became compulsory in 1935 (Ministry of Education, 1974) yet, in 1980, the Thailand school enrollment ratio was 95% for the primary students. With the now moderated population growth, it is estimated that primary education is close to 100%. However, with a 30% enrollment at the secondary level, Thailand is far

behind other Asian countries. At the upper level of secondary, there is a 12% enrollment and 40% in the private sector in vocational education. Because of the open admission/distance universities, the university level enrollment ratio is twice the average ratio in Asia, that is 20% (World Bank, 1989).

Prevention

Several research studies have recently been made on countries in Asia and the Pacific. These countries are now coming to recognize that the full development of human resources and integrated development strategies require attention to the special situation and needs of persons with disabilities. Attention is called to the rehabilitation needs for disabled people, as well as to the prevention of disabilities, caused by more controllable factors such as disease, malnutrition and accidents (United Nations, 1989), toxic chemicals, radiation and poisons (UNICEF, 1990a). Many impairments can be minimized or even prevented if proper care is given (UNICEF, 1987). An organization called Impact Thailand Foundation is an international organization mainly dealing in the prevention of avoidable disabilities (Rhamkhamhaeng, 1990). However, early detection remains the key to quality of life improvement for children with impairments, and to the avoidance of secondary effects development (UNESCO, 1980).

Laws and regulations in special education

Documents from the Ministry of Education, Hiransasmi and UNESCO show the awareness of the Thai Government regarding the policy on special education for handicapped children, through the National Education Scheme of 1977. This document confirms that the Government of Thailand, has definite plans to provide special education services for handicapped children to the best of its ability. This responsibility is shared by the Health, Welfare, Education and Justice Ministries.

Private organizations such as O.P.H. (Operation Handicap International) and S.O.S./E.S.F. (SOS Enfants Sans Frontieres) have also worked in Thailand, studying the needs and setting up rehabilitation centres to help those living in remote areas where education is not easily accessible. Such centres are being organized by the government through the Department of Non-Formal Education. These centres allow both physically and mentally handicapped people to receive some kind of education. It must be noted that at present only about four percent of the handicapped population receive any formal education (The Nation, 1989). Articles from The Nation newspaper, which is one of Thailand's leading English newspaper, provided information on special education, which it had cumulated since the year 1988. This was a way to get updated statistics, in English.

Needs and services

Finally, two important reports have been done on the needs of children :

The National Youth Bureau appointed an Ad-Hoc sub committee to do a study on "Problems and Service Needs of Physically and Mentally Handicapped (1989)". In this document (which has not yet been officially translated into English), the importance of having more special schools for handicapped children is recognized. It also explains that the philosophy of special education is to integrate the handicapped in regular schools; this, they assume, will allow a better adjustment to a normal life situation (National Youth Bureau, 1989).

A second study, by the Government House in Thailand, was done in August 1990 and called "The First National Assembly on Child Development". This study aimed to establish the child's basic minimum needs. The needs of the handicapped may in many ways be the same as those of normal children, however certain facilities are necessary to help a child with special needs; these needs have not been assessed in this report (Government House, 1990).

CHAPTER II

EDUCATION IN THAILAND

Historical development

It was during the Sukhothai period that education emerged in Thailand. This was the reign of Ramkhamhaeng the Great (A.D. 1279-1300), inventor of the first Thai alphabet in 1283. This alphabet has undergone extensive changes although parts of the original alphabet are still used.

Basic education was provided through three institutions:

1. The Royal Institution of Instruction (Raj Bundit) and other palaces for princes and sons of nobles.
2. Buddhist temples where the Buddhist monks provided education to commoners.
3. Children's own home.

Boys received basic education in reading, writing and arithmetics; girls learned housekeeping or accomplishments befitting Thai ladies in palaces or in their own home.

Agriculture, weaving, and handicrafts were traditionally passed on from generation to generation. This basic structure of education for the princes and the commoners was ruled by the court of Ayudhya, then the capital of Thailand. This went on until the Bangkok era.

King Rama I initiated an educational reform in A.D. 1782-1809 of the Chakru Dynasty by reforming the Buddhist teaching which made an impact on the development of public education. The advent of formal education in Thailand was signified by the issuance of the "Command Declaration on School" (A.D. 1821).

The first printing press in Thailand was set up by King Monkut (Rama IV, A.D. 1851-1865) contributing to the modernization of the educational process. By introducing English, King Monkut restructured the educational subjects taught to Thai children.

King Chulalongkorn (Rama V, A.D. 1868-1910) further pursued the policy on educational modernization, recognizing the need for better trained personnel in royal and governmental services. He therefore opened a school in the palace offering academic subjects and bureaucratic practices. He then created an "English school" in the palace so the princes and nobles would be prepared to further their studies abroad. A number of schools were founded outside the palace for commoners' children. It is said that during a presentation of awards to students of Suan Kularp School in 1874, the King declared: "Members of the Royal Family, starting from my sons down to the lowest of my subjects will be given equal opportunity in education, be they of the Royal Family, the nobility or the common people" (Ministry of Education, 1987 p.1). The

educational activities started in the capital and then extended to the provinces. The Department of Education was set up in 1887 in order to administer education reform, educational and religious affairs for the whole of Thailand. On April 1st 1892, the Department became the Ministry of Education.

In 1898, the First Education Plan in Thailand was established one year after King Chulalongkorn's trip to Europe. This plan outlined details for educational contents, teaching methods and management for schools in Bangkok and throughout the provinces.

The year 1910 marked the end of the Chulalongkorn era and, in 1913, primary education was declared compulsory; the first school of arts and crafts, Poh Chang College, was opened. It is King Rama VI's more systematic organization and more specific objectives that made basic education for Thai children more meaningful.

From 1898-1911 the administration of basic education was shared by two governmental bodies: The Ministry of Education covering the Bangkok area, and the clergy looking after the provincial schools under the Ministry of Interior's supervision.

The first university in Thailand, Chulalongkorn University was founded in 1916 with four faculties: Medicine, Law and Political Sciences, Engineering, Arts and Sciences.

The private School Act was passed in 1918, outlining the responsibilities and regulations pertaining to the participation of the private sector in the educational system.

In the year 1920, there were approximately 2,526 primary schools in Thailand including 3,092 teachers and 127,957 pupils (Ministry of Education, 1987). King Rama VI proclaimed the Primary Education Act B.E. 2464 (1921), Thailand becoming the second country in Asia, after Japan, to introduce compulsory education. It was officially written on the Primary Education Act of 1935.

In 1932, Thailand became a Constitutional Monarchy instead of an Absolute Monarchy. National education was devised so that individual educational ability would be recognized, regardless of sex, social background, or physical condition.

After Field Marshalsarit Thamarat came to power in 1958, the National Education Council (NEC), was established as an educational planning body. In 1959, the Prime Minister was appointed chairman of the NEC. The next year, compulsory education went from six years (four years general education,

1 two years vocational education) to seven years. The child was entitled to education based on aptitude.

The Education Scheme of 1969 revised the 1959 Act giving the NEC authority and responsibility of control over private colleges and universities. This authority was transferred to the National Executive Council in 1972.

A new curriculum for primary and secondary schools was established in 1978. This curriculum was established grade by grade from primary grade one, and from secondary grade one. The system used was the 6-3-3 system: six grades for primary level, three grades lower secondary level, three grades for upper level.

Development activities were decentralized to regional levels; the secondary level was developing learning materials in vocational subjects; the primary level was looking at in-life experience, these two subject areas being in accordance with local needs.

Policy implementation

Thailand's educational policies are clearly stated in a document prepared by Dr Chantavit Sujatanond of the "National Education Commission" (1988a).

They have been divided into six five-year plans called National Education Development Plans (NED Plan) to serve as guidelines of actions and implementations in the educational sector. The first and second plans (1961-1971) focused mainly on the expansion of basic education, particularly on educational opportunity in primary schooling. The third and fourth NED Plans (1972-1981) emphasized the provision of basic education at a wider scale to cover both school age and adult or out-of-school population. During this period of development, compulsory primary education programs also received more serious attention with some increased funding from the government budget and external sources. During the fifth and sixth plans (1982-1991), quality issue became the major concern in the improvement of basic education. The emphasis was on extending education opportunities for the groups that the system was not yet reaching, namely the slum people, the hill tribes and the handicapped.

Present system and structure

Education is regarded by the Thai government as the foundation for achieving national development objectives. It is the key to the buildup of an independent economy and social harmony. However, the expansion of education at all levels has created disparities in educational quality and unemployment problems in both urban and rural areas.

The Sixth National Economic and Social Development Plan (1987-1991) was geared towards qualitative improvement particularly in the rural areas, and towards employment facilities for graduates of various levels. The aim of the sixth plan was to link formal and non-formal education, especially regarding religion, culture and in the rising of the quality of life.

The 1977 National Education Plan changed the educational system from 7-3-2-4 to 6-3-3-4, which means the six year primary schooling is compulsory, followed by the three year lower secondary, and another three year upper secondary for those continuing to college or occupational education. Charts 1, 2 and 3 in Appendix C show the Government Administrative Structure.

Pre-school education

The first kindergarten was established in Bangkok in 1940. Pre-school education has since expanded, even though it remains optional. 83% of the pre-primary schools are private and are situated in Bangkok. They come under the jurisdiction of the office of the Private Education Commission.

The aim of these pre-schools is to encourage the harmonious physical, intellectual, emotional and social development of

the child prior to formal education. A model school is open in every provincial capital for those wishing to set up their own school. This one-year pre-school prepares pre-school aged children for entry into the primary education system. The target services are aimed at children facing either social, cultural or economic problems, which situation could hamper their effective participation in the primary school system.

Primary education

The aims of primary education are to achieve permanent literacy in reading and in arithmetic, and to provide sufficient basic skills and knowledge so that the pupils will be able to earn a living, be law-abiding and socially conscious citizens. In 1980, the Office of National Primary Education Commission (ONPEC) was established to be responsible for all primary schools in Thailand, except municipal schools which are administered by municipal authorities; some demonstration schools fall under the authority of the Department of Teacher Education and the Office of General Education. The academic and administrative responsibilities for all primary education in Thailand are now under the Ministry of Education, more specifically, the ONPEC.

The administrative system is divided into four levels : national, provincial, district and school cluster levels. Each level has a committee consisting of officials from concerned government agencies, elective representatives of primary school teachers, and selected resource persons.

Level	Functions
National	Formulation of national primary education policies and development plans, budget allocation, standard-setting concerning academic requirements, school buildings and expenditures, and appointment of Directors of Provincial and Bangkok Metropolitan Primary Education.
Provincial	Consideration and approval of all activities undertaken in the province concerning implementation of policies and plans, budget allocation, academic and personal matters.
District	Co-ordination of all activities undertaken in the district, recommendation and provision of basic information concerning workplans, budgetary, academic and

personal matters for submission to the provincial authorities for consideration and approval.

School-cluster

Mutual co-operation and support, both physical and intellectual, for the improvement and effective operation of all activities of the schools in the cluster, submission of recommendations concerning workplans, budgetary, academic and personal matters to the district authorities for submission to the provincial authorities.

(Ministry of Education, 1987)

Thailand is still a developing country. It is sometimes very difficult for children to have access to education; such is the case where there is malnutrition or if schools are at such distances that it is practically impossible to get there. Therefore, the government has established a bicycle lending program allowing these children, between grades one to four, to get their education. There is also a textbook lending project for needy pupils. Finally, there is a school lunch program; many of the children in poverty-stricken areas go without lunch everyday. This project has benefitted many

children and has also encouraged parents to send their children to school knowing their child would get fed.

(Ministry of Education, 1987)

The current status of primary education can be best summarized with the following data 1987. (World Conference on Education for All, 1990a p.9).

Total population	53,605,100
Primary school age population	7,536,998
Primary school enrollment	7,002,890
Primary school enrollment ratio	92.91%
Admission ratio	103.12%
No. of primary schools	34,098
No. of teachers	350,020
Student-teacher ratio	20.29 / 1
Transition rate (Primary to lower secondary)	37.76%
Retention rate	80.38%
Private/public school enrollment	9.22%
Cost per pupil (government expenditure)	US\$ 143.50
Primary education budget / educ. budget	57.40%

Secondary education

Secondary level is divided into two parts, each covering a period of three years. The first part helps the student explore personal interests and aptitudes through a variety of academic and vocational subjects. The second part offers specialization which may eventually lead to employment.

Thailand has both public and private schools. However, all private schools are supervised by the Office of Private Education Commission. Government schools are controlled by a number of agencies, but mainly by the Department of General Education in the Ministry of Education.

In the second part of the secondary level, the government school offers academic courses with vocational options allowing the child to graduate and enter the labour market with basic vocational skills, or to continue to higher education if he can afford it. The private school concentrates on general education preparing the student for university studies. Vocational courses are provided by the Department of Fine Arts. Vocational Education and the Institute of Technology and Vocational Education are under the Ministry of Education, the Ministry of Defense and the Ministry of University Affairs.

Out-of-school population without any formal schooling also have access to secondary education. Two programs are offered

by the Department of Non-Formal Education for adult students: The Equivalency Adult by Correspondence and Radio courses; evening courses and self-study programs for external examinations.

Secondary schools, mostly those in rural areas, aim at educating not only the students but the whole community by developing social activities. Making use of local resources students learn to create a livelihood in their community.

Schooling opportunities have been emphasized by the government since 1977 both in qualitative and quantitative terms. Students can now study at their neighbourhood school which offers basic facilities such as books and qualified teachers.

Further education is encouraged for children from rural areas who have insufficient funds to help them pursue their education through boarding schools. Rural teaching units, free school uniforms, free school lunches, loaned textbooks, scholarships and exemption from supplementary school fees, now allow them to complete their secondary level. Teachers in remote areas can improve their teaching and learning process with the support of in-school and distant supervisors through tapes and manuals.

The retraining of vocationally unqualified personnel, or the provision of teaching skills to vocationally trained staff, alleviates the problem of shortage in qualified teachers for vocational subjects.

Even with all these new facilities, only 33% of Thai adolescents have a chance to study in secondary schools. The rate is very low compared to other ASEAN countries.

WORLD BANK REPORT OF 1987
(The Nation, Dec 13 1990)

90% South Korea & Taiwan

71% Singapore

68% Philippines

53% Malaysia

39% Indonesia

Higher education

Higher education is found in public and private universities, but mostly in open/distance universities which enroll the majority of students at this level of study. This system allows a number of students to pursue their studies at the university level, at a minimum cost. The enrollment ratio of 20% is well above that of other countries at Thailand's per capita income level. There is, however, a high drop-out rate.

One important field of higher education is teacher education, which is often separate from the regular university.

Teacher education

The first teacher training school was founded by King Chulalongkorn in 1892; it was to prepare for elementary school teaching.

The Ministry set-up another teacher training school in 1903. Students from other provinces were awarded scholarships if they promised to go back to their district after completing their studies.

There was a great demand for teacher education during the sixties leading to the opening of many teacher education institutions. Ramkhamhaeng and Sukothai Thamathiraj Universities (semi-open and open universities respectively) also offer courses in teacher education at the first degree level.

There are three levels of teacher education; diploma, first degree and post-graduate level for the teaching of primary, secondary and university levels respectively. The diploma and first degree are divided into 2 categories. One is for those who will be teaching primary school, the second is for secondary school teaching.

There are 36 teachers' colleges supervised and administered by the Department of Teacher Education. These colleges are distributed evenly throughout the country allowing one college for every two neighboring provinces. In order to meet the manpower demands in the community, two major programs are offered; one leading to a baccalaureate degree in education, the other in areas other than teacher education. The teachers' college also serves as a research institute.

Non-formal education

Thailand promotes education in schools but it also highly values learning outside school. When the first 1940 national census revealed that 68 percent of the nation's population were illiterate, the government launched a national literacy program. An adult education division was opened within the Ministry of Education.

In 1970, non-formal education was added to the education system providing three categories of educational services: basic education, news awareness and information skill training. Basic education implies literacy and numeracy skills. It also implies a post-literacy plan developing language arts, science and mathematics skills reaching the learners through classrooms, radio, self-instructional material and tutorial group sessions.

Newspapers provide continuous and updated information in order to maintain and upgrade reading skills, and to help in environmental decision making. Such information can be found in village reading centres, public libraries, educational radio and television programs and in a science museum and planetarium situated in Bangkok bringing selected exhibitions to the rural areas.

Special education

Special education in Thailand means the education of the handicapped and disadvantaged children. It is the 1977 National Education Scheme which is responsible for the organization of special education.

Education for the disabled

The Ministry of Education along with other government and private sector agencies is responsible for providing education for the disabled. It is, however, the Department of General Education which is primarily responsible for special education carrying out the policy stated in the National Education Scheme.

The department is responsible for special schools for the deaf, the blind, the mentally retarded, the physically handicapped and the multiple handicapped. It cooperates with

private foundations and state hospitals in providing personnel, equipment and other technical assistance to their special schools or programs. It also provides mainstreaming facilities in regular school classes for blind, hard of hearing and slow learners.

Teaching material and teachers manuals are provided to special education teachers regularly to further strengthen teaching/learning activities for the disabled.

Special in-service training is offered by the Department of General Education to teachers not specialized with disabled children. Special education is offered as a major subject in teachers colleges and universities. Further information will be found in the next chapter entirely devoted to education for the handicapped in Thailand.

Welfare education

Welfare education is a class by itself. The Ministry of Education through the Department of General Education is responsible for providing socially and culturally disadvantaged children with the opportunity to attend compulsory primary classes in regular schools.

These students are provided with free education, accommodation, food and clothing, equipment, textbooks and other necessities. Most of these children are boarders

although some are day-students. They receive special occupational training in view of eventual specific employment. Deserving welfare school graduates are eligible to a scholarship allowing them to continue at the lower secondary level.

In 1985, welfare education was expanded to accommodate mainstream programs for the hard-of-hearing, the blind and the slow learners. Special resources have been set up for hill tribe children, and hill tribe schools. Some welfare primary schools programs have been organized in neighbourhood secondary schools on an experimental basis.

Government budget for education

The Thai government has placed major importance on education over the last twenty years, as a strategy for economic development (World Bank, 1989). Both UNICEF (1989) and World Bank (1989) agree that the public expenditure rose from 15% in the 1960's to over 20% in 1984. In the Sixth National Plan, which will bring us to 1991, education will receive 17.9%. A chart from the UNICEF (1989) "Children in Thailand" document clearly shows the budget allocation.

GOVERNMENT BUDGET (PERCENT SHARE of total budget)

HEALTH & SERVICE	11.2
ECONOMIC	15.6
DEFENSE	17.0
EDUCATION	18.0
DEBT & SERVICES	24.5
ADMINISTRATION	2.8
INTERNATIONAL SECURITY	4.8
OTHERS	5.4

(Source: Bangkok Post Newspaper; WAR AND ECONOMIC REVIEW 1988)

Educational Policies are being assessed and adapted regularly according to the changing needs of the Thai population.

Cities are rapidly growing; roads and communication facilities are taken into consideration while developing educational plans.

Compulsory education remains at six years but there is a project to increase it to nine years. This is still a controversial topic especially in rural areas and for the disadvantaged; children must be able to work as young as possible in order to help provide for the rest of the family.

Although the primary education schooling is successfully achieved, the secondary level should be encouraged in order for its attendance to be increased.

Finally, special education must become accessible to all those with special needs whether they are handicapped, slum or hill tribe children. The Welfare Department is working to find ways to help needy children with the support of foreign countries.

CHAPTER III

LAWS AND REGULATIONS FOR SPECIAL EDUCATION

Special education as such appeared for the first time in 1938, with the establishment of the Foundation for the Blind, a school for the blind in Bangkok. An experimental unit for the deaf was established by the government in 1941 which then became the country's first school for the deaf. The Ministry of Education created the Special Education Division in the Department of General Education in 1952. This division is now acting as the coordinating centre of special education organization for disadvantaged children. The division also provides special schools for culturally and socially disadvantaged children i.e. children of the poor, of boat people, of hill tribes, of lepers. These groups are not considered "disabled" even though their condition may lead to physical or mental disabilities; they will not be discussed at length in this report. The Welfare Education department is responsible for these groups.

In 1957, the Ministry of Education provided experimental classes for slow learners under the authority of the Department of General Education. Rajanakul School for mentally retarded children started in 1964 on the grounds of the Rajanakul hospital. In 1965, Srisangmal School for the physically handicapped was established in Nonthaburi province

in the Pakkred district, under the Foundation for the Welfare of the Crippled. More schools were opened subsequently by both the government and the private sector.

Responsibilities

In Thailand, health, education and welfare services are under the responsibility of four ministries: The Ministry of Public Health, the Ministry of Education, University Bureau and the Ministry of Interior. Special education comes under the health, education and welfare departments and in certain cases under the Ministry of Justice. The University Bureau is responsible for the training and education of workers with the exceptional child. Funds and assistance are not only provided by the government. There are significant private sector contributions from foundations and charitable organizations. The chart in Appendix D shows the organization of special education in Thailand and how the responsibilities are shared by both government and private sectors.

The Ministry classifies special education into six categories (Ministry of Education, 1989a p.1):

1. The blind
2. The hearing impaired (including deaf and hard of hearing)
3. The physically handicapped

4. The mentally retarded (including slow learners,
educable, trainable)
5. The chronically hospitalized
6. The welfare schools (including culturally
disadvantaged, slum children, hill tribe children)

Note: Delinquents and emotionally disturbed children usually fall under the Ministry of Justice and the Ministry of Health.

The Thai government realizes the importance of children as the "valuable resource of the country". His Excellency Prime Minister General Prem Tinsulanonda made a declaration of the Government's policy to the Parliament on August 27, 1986. In relation to the development of children and youth, he announced that: "We (the Government) will support children and youths who have physical, mental, intellectual and emotional problems, particularly. Moreover, we will promote the development of such children and youths according to their individual conditions and differences, and protect the employed children and youths against disadvantages or physical and mental ill-treatment" (National Youth Bureau, 1988 p.351).

The agencies provide some form of special education specific to the type of impairment. The Ministry of Public Health concentrates on detection and remediation, and runs a school

for the mentally retarded. The Ministry of Interior through its Public Welfare Department takes care of the destitute and abandoned disabled and provides academic and vocational training in its residential centers. A Control Observation and Protection Centre for juvenile delinquents is run by the Ministry of Justice. Through the Special Education Department in the Faculty of Education at Srinakharinwirot University, the University Bureau offers a teacher training program at the Master's level, and is offering educational and child care counselling services including other related ~~problems~~ ^{Services} such as psychological, vocational and personal. ~~problems.~~

The Ministry of Education, through its Special Education Division in the Department of General Education, works in cooperation with agencies from both governmental and private sectors in organizing the general special education services for the specific needs of children in special institutions or those in regular schools through mainstreaming.

Special education in Thailand generally limits the child to the lower secondary level or up to grade 9. However, it is now possible for a physically handicapped (including a blind and/or deaf) person to pursue his studies to a university degree or graduate from a teachers college.

Disabled children are exempted from the Compulsory Education Act normally requiring all children from seven to fifteen years of age to attend school. Education is provided free of charge by the state.

Assuming that there is usually one percent of disabled people in any country, out of twelve million school age population (seven to fifteen) there should be almost 120,000 disabled children in Thailand. The 1980 statistics show there are only about 3,000 disabled children in Thailand enrolled in fourteen special schools or twelve other ordinary schools by mainstreaming; this means only 0.025% of the total school age population. In a country where over 70% of children get an education and 96.7% complete their primary level, there should be room for a disabled child.

Causes for disabilities

Causes for disabilities can be divided into two separate categories, unavoidable and the avoidable causes.

The unavoidable category includes heredity, complications during birth (lack of oxygen), chromosomal disorder and accidents.

Avoidable causes are those which are everybody's main concern; for instance, the mother taking some kind of acid to try and induce abortion is a very common factor for different birth defects. Other causes are emotional or environmental

instability in the child's family and lack of community services.

The important reasons for blindness and deafness are cataract and otitis. Here the problem is lack of specialists. In 1987, there was one eye and ear-nose-throat specialist for every 470,000 people in the provinces (The Nation, Dec.4 1987).

There is a national program for the immunization of school girls against rubella, a significant cause of deafness and multiple handicap. A 1987 survey showed that 52.52% of ear disease was otitis which is linked to poor hygiene and deprivation. Vitamin A deficiency and other vitamins and minerals may also cause physical and/or mental disorder. Reasons for physical handicap in Thailand are polio, meningitis, encephalitis, typhoid, malaria, tuberculosis and blood infection. Even something as simple as diarrhea, if not treated or if repeated too often, subjects patients to malnutrition (dehydration), and may eventually hamper physical and brain growth (UNICEF, 1989).

A study made by Mahidol University researchers shows that the specific risk factors for mental retardation among children aged two and one half to seven years are: delivery problems (many women still give birth at home without a doctor, especially in the country), maternal illness during

pregnancy (there are very few centres outside Bangkok for pre-natal care and advice), low birth weight, childhood convulsions and infections.

The important risk for urban children is plumbism or lead poisoning. The quantity of car fumes in Bangkok is a well known problem. With the very high lead content in the Thailand petrol, Bangkok children have dangerous levels of lead in their blood. An average of 40 micrograms per decilitre is sufficient to retard development of the central nervous system. (UNICEF, 1989). Even the mother's milk contains high levels of lead. In the UNICEF publication Children and the Environment (1990), it is stated that in Bangkok, the average content of lead is of 340 micrograms/l. WHO (1977, 1980) has available data showing that haematological effects occur in children at blood lead concentration of about 200 microgram/l, and that the earliest peripheral nervous effects begin to occur in the blood lead range of 400-500 micrograms/l (in a few individuals it may occur below 400 micrograms/l. Effects include seizures, behavioral changes, mental retardation, irritability, lack of coordination and clumsiness. In the year 1991, the Thai government has introduced no-lead gasoline to motorists. It is sold at a lower price than the leaded fuel in order to encourage its use.

Another environmentally related problem is the 1988/89 ecological consequences of cutting down many trees demonstrated in two contrasting disasters: floods and mud slides in the south of the country and the fourth year of prolonged drought in five provinces in the north east. Repercussions on the well-being of children was inevitable. Many parents in the north east migrated in search of work leaving young children in the care of old people, sometimes ill-equipped to search for scarce rice and water. Health problems notably an outbreak of measles and school dropout were only a few of the problems. In the south, a number of children lost their lives or were injured, many were orphaned, and many families were deprived of their livelihood as their land was swept away. These factors may directly or indirectly be responsible for impairing children either physically or mentally. (UNICEF, 1989). "Green" movements have been organized in Thailand to try and control deforestation.

Government Policies on special education

In 1981, the administration stated to the Parliament: "The government will promote full development of all children and youth in accordance with their conditions and individual differences. It will provide assistance and remediation for children with special problem, physically, mentally and

emotionally..." (Ministry of Education, 1981 p.4). The Division of Special Education, under the jurisdiction of the Department of General Education, Ministry of Education, responds to this policy either by relying on various foundations or the private sector to organize this education, or by establishing government sponsored and managed schools for handicapped children (UNESCO, 1980) (Ministry of Education, 1981b).

Objectives

The government has definite goals to promote special education services for the disabled (Ministry of Education, 1981b p.4):

- To provide equal educational opportunities.
- To offer individual programs tailored to the type of disabilities and the stages of impairment so that each exceptional child may develop his/her own potential at own speed and eventually fit into community life as a fully integrated member.
- To ensure the efficiency and cost-effectiveness of special education program, which should not only develop the full potential of exceptional children, but also benefit able-bodied children at the same time.

Curriculum

There is no specific curriculum written for special education. The government uses an adapted version of the regular outline. These modifications are based on five guiding principles: Type of disabilities, limitations of individual abilities, promotion and rehabilitation, intellectual and mental development, and necessary vocational skills.

Three forms of curriculum adaptation are now developed. Curriculum for the blind concentrates on orientation, mobility and braille; curriculum for the deaf includes sign language, lip-reading and speech therapy; curriculum for the mentally retarded especially those who are educable, is a simplified version of the regular curriculum. Government officials revise and develop curriculum regularly.

Special education program

The Department of General Education, through its Special Education Division, developed eight types of programs either simply or jointly with other agencies. The following information is based on the special education in Thailand listing of schools and facilities under the Ministry of Education's Department of General Education, Special Education Division (1989-1990).

1. Program for the Blind :

There are four institutions for the blind in Thailand, 1) The Bangkok School for the Blind, 2) Chiang Mai School for the Blind, 3) Surathani School for the Blind and 4) Pakkred Home for the Crippled Children in Nonthaburi.

Most of the children in these institutions live in residence. The children's average ages are between six and twelve years old. The school works in cooperation with the Ministry of Education, the latter providing necessary equipment, teaching material, and helping with program planning and teacher training depending on the needs of the school.

2. Program for the Deaf

There are nine special schools for the deaf and/or hearing impaired. 1) Sethasathian School in Bangkok, 2) Tung Mahamek School for the Deaf in Bangkok, 3) Khon Kaen School for the Deaf in Khon Kaen, 4) Tak School for the Deaf in Tak Province, 5) Songkhla School for the Deaf in Songkhla Province, 6) Anusan Sunthorn School in Chiang Mai, 7) Pakkred Home for the Crippled Children in Nonthaburi (Special Classes), 8) Chonburi School for the Hard of Hearing in Chonburi, 9) Wat Champa School for the Hard of Hearing in Bangkok.

Their program emphasizes vocational skills, such as dressmaking, weaving, typing, barbering and woodwork. The

average age of children in these schools are from seven to eighteen years old.

3. Program for the Physically Handicapped

More attention has been given to the physically handicapped by various hospitals and private institutions. There is only one school for the physically handicapped in Thailand, Srisangwan School run by the Foundation for the Welfare of the Crippled under the Patronage of Her Royal Highness the Princess Mother.

This school offers academic and occupational skills suited to specific disabilities. It is supported by the Ministry of Education as far as supply of equipment as well as personnel and other technical assistance is concerned.

4. Program for the Mentally Retarded

There are four public schools: 1) Rajanakul Hospital for the Mentally retarded runs the Rajanakul School for the Mentally Handicapped in Bangkok, 2) Kaveela Anukun School in Chiang Mai, 3) Ubon Panyanukul School in Ubon Ratchathani, and 4) Panyawuthikon school belonging to the Foundation for the Welfare of the Mentally Retarded of Thailand.

Two other schools are privately owned by individuals. 1) The Lighthouse Project specialized in profoundly retarded children and 2) Sataban Saeng Sawang Foundation which is not

recognized as a school because it does not follow Government programs as such; both are in Bangkok.

5. Program for the Chronically Hospitalized

Ten Hospitals in Thailand provide education for those children who are chronically ill and need to remain in hospital for an extended period of time. These hospitals are 1) Chulalongkorn Hospital in Bangkok, 2) Siriraj Hospital in Bangkok 3) Children Hospital in Bangkok, 4) Lertsin Hospital in Bangkok, 5) Khon Kaen Hospital in Khon Kaen, 6) Uwaprasat Wathayopratham Hospital in Samut Prakarn, 7) Maharaj Nakon Chiang Mai Hospital in Chiang Mai, 8) Sri Nakhon Hospital in Khon Kaen, 9) Rajwithi Hospital in Bangkok, 10) Rajanakul Hospital in Bangkok.

Special classes are held, and teachers answer the specific needs of children so they can return to their regular school without being too much behind their schoolmates. Some hospitals offer rehabilitation programs for autistic or emotionally disturbed children.

6. Program for the Slow Learners

Children with an IQ of 70 to 90, namely the slow learners, are placed in special classes at nineteen state schools in Thailand, mostly at the primary level. The Ministry of Education is responsible for the placement of these children.

7. Program for the Blind - Mainstreaming

Mainstreaming provides the child's education in a normal setting, helping him adapt and integrate into society in his adult life. The latest trend of thought is not to isolate the disabled from the able-bodied; sixty-four schools at the elementary level and thirteen at the secondary level officially admit blind children in their regular classes. Individual services are provided, upon request, by the Department of Education.

8. Program for the Hard of Hearing - Mainstreaming

Deaf and/or hard of hearing children are now recognized as being able, with some help from teachers and classmates, to follow regular school programs. There are now eight primary schools and two secondary level schools offering mainstreaming program.

Teacher training program

There are two types of teacher training program :

One is in-service training, offered by the Department of General Education, Ministry of Education, for teachers who have experience in regular classroom but no preparation for special education. This training is a five or six weeks' general program in all areas of special education.

The second is a pre-service training in four levels : higher Certificate, Bachelor's Graduate Diploma and Master's and Doctorate degree. Teachers colleges offer the two first levels whereas two universities offer the highest levels.

Both universities offering these classes (Srinakharinwirot and Mahidol) allow students to take courses in either institutions allowing a wider choice of subjects and experience for the students, and reducing costs in administration instructions and equipments.

Higher education for the disabled

Disabled children are now allowed to pursue their studies if they want and if they can afford it. It is still a new issue and graduates receive a good deal of attention. For example, in 1985 one blind student graduated from Chinoros Withayalai School for the Blind. In the following year, three finished their secondary six level from the institution. Two of the three studied at Suandusit Teachers' Training College, and another was studying for a bachelor's degree in law at

Thammasat University. In 1988, four blind students finished the highest educational level at Chinoros School. Three of them went to study at the Suandusit Teachers' Training College and another went to Thammasat University taking Liberal Arts (The Nation August 25, 1989).

Deaf or hearing impaired students are frequently found in Teachers' Colleges hoping to find a job to help the young child they used to be. At Sathsatian School for the deaf, eight teachers are deaf; in 1988, there were 14 hearing impaired teachers around Thailand.

Available facilities for the handicapped

According to The Nation of January 30, 1989, the government and private institutions are helping only a few thousand children and their parents.

Rajanakul Hospital which falls under the Public Health Ministry has a special school which only accepts mildly mentally handicapped cases. It admits 450 children regularly and has a few hundred out-patients. Children from outside Bangkok are resident. A similar facility has been set up in Chiang Mai with the help of the hospital. Other regional centre projects are regularly developed.

The Ministry of Education has about 20 schools in Bangkok and the provinces. These schools accept physically and mentally handicapped children. Some schools offer mainstreaming but this means that again, only mild cases are accepted.

The Public Welfare Department's Pakkred Home for the Mentally Handicapped Child in Nonthaburi has 403 children under seven and one-half years of age and 620 between seven

to eighteen. The staff being between 100 and 140, it is obviously not enough. Mahidol University provides help to a small number of children at its Ramathibodi Hospital.

The private foundations are running modern schools charging Baht 2,500 per month (US\$ 100) offering a child-staff ratio of 2:1. The Sataban Saeng Sawang Foundation accepts an average of 110 children and the Lighthouse Project which has helped about 250 severely handicapped children or those with moderate handicap and associated problems. Most children attending these two schools come from well-off families.

The Foundation for the Welfare of the Mentally Retarded in Thailand is responsible for the Lighthouse Project. Foundations are established, offering small school facilities and centres around Thailand. St. Gerard Rehabilitation Centre in Khon Kaen under the Catholic Church takes about 40 non-residential children in the Muang District Centre. Visits are organized through teams to the home of 50 children in Ban Phai District and around the centre. Parents pay for the service according to their income, some paying nothing and others paying Baht 3,000 (US\$ 120).

According to the figures provided by the government and different independent sources, there are approximately 6,000 children receiving special care from government and private special education schools. Approximately 1,670 students were

registered in government schools mainstreaming programs in the academic year 1989.

There are 389 teachers registered in government special schools. In the mainstreaming program, 217 teachers and/or resource teachers supervise the special education program. The student/teacher ratio depends, however, on the schools. Special schools for the blind have an average ratio of approximately 8:1 where Pakkred Home for the crippled children (blind) has a ratio of 19:1; Pakkred home for the mentally retarded offers a ratio of 10:1 and the Pakkred home for the crippled children (deaf) ratio is 53:1. The average ratio for the schools for the deaf is 9:1. The school for physically handicapped has a ratio of 8:1 and schools for the mentally handicapped, which are the most in need of extra staff have a ratio of 15:1.

The ratio for mainstreaming programs vary considerably.

In the mainstreaming programs for the blind:

- the primary education level, ratios go from 1:1 up to 40:1 with an average of 3:1.
- the secondary level has a ratio of 6:1.

Mainstreaming programs for the hard of hearing :

- the primary level go from 9:1 up to more than 20:1 with an average of 14:1
- the secondary level, the average is 5:1

Mainstreaming programs for the mentally retarded in regular schools is again the poorest in terms of resources. The ratio goes from 4:1 up to 301:1 for an average ratio of 30:1 (Ministry of Education, 1989a).

Thailand, like any other developing country finds itself constrained in terms of resources and personnel. Rural schools are still not sufficient in number and their access remains difficult. Special schools, in those areas are almost non-existent. Special education is costly in any country; it is a low-priority item on the national education budget allocation of the 63,750 million baht (US\$ 2.55 billion). For the fiscal year of 1991, special education organizations for the disabled received 637 million Baht (US\$ 25.5 million) or one percent of the education budget. New resources are urgently needed as far as personnel is concerned. Even with a pupil/teacher ratio of 10:1, when compared to 20:1 for primary level, and 17:1 for lower secondary level, it is alarming that only 35% of these 300 or so teachers are qualified in special education or have received some in-service training. Other teachers rely on on-the-job training during the summer vacation.

No early detection program for exceptional children has yet been developed. There is a lack of detection service and information centres. One early education program has been developed by Srinakharinwirot University.

No post-secondary program for the handicapped is offered. After high school graduation, there is very little education offered. The mentally retarded and the blind can get vocational training, but this is still very limited.

Because of a lack of budget, there are few qualified personnel and special services offered to the exceptional child. In fact, the whole social environment is not adapted to help handicapped people lead a normal life. For example, there are no special ramps for the handicapped, public telephones are out of reach.

Thai people believe that if they have a disabled child, it is the manifestation of their own wrongful deed, either in this life or in the previous cycle of reincarnation. They therefore accept the situation and usually shelter disabled children protecting them as much as possible. This interferes with any outside help provided by the government or other sources to help these children develop to their fullest.

Living by charity is a part of life in Thailand. The monks live from it and it is most acceptable that disabled people get help from able people. It is therefore even more difficult to implement rehabilitation in the community. Finally, there is no reliable system of data collection or statistics concerning the disabled. Educational planning becomes virtually impossible on a national scale.

CHAPTER IV.

AGENCIES AND SERVICES

Following are the results of twelve interviews with the different schools and foundations officials.

The meetings started with general information about the foundation and/or schools as to the origin and the development of the schools. More details were given through the use of an interview schedule (see Appendix B). These questions ranged from how many children were in the school, to reasons for handicaps, type of programs, the government's involvement and sources of financing.

Visits to the Ministry of Education and to Srinakharinwirot University helped finalize the statistics. Three hospitals were visited in order to better understand the causes of handicaps in Thailand and get a more medical opinion on the handicapped situation.

Figure 1

SUMMARY OF INSTITUTIONS

QUESTION /	SIZE	TYPE	REASONS	RATIO	SPECIAL	FACILITIES	CURRICULUM	FINANCING
AGENCY		OF HANDICAP	FOR HANDICAP	PUPIL/ TEACHER:	SERVICES			
FOUNDATION FOR THE BLIND	210	BLIND MULTIPLE HANDICAPPED	NUTRITION DEFICIENCY INFECTIONS DISEASE HEREDITY	11:1	NURSE PART-TIME MUSIC TEACHER	SWIMMING POOL LIBRARY PLAYGROUND MUSIC INST	REG. CURR BRAILLE	GOVERNMENT DONATIONS
FOUNDATION FOR THE WELFARE OF THE MENTALLY RETARDED OF THAILAND	SCHOOLS 230 50 32 25 12 25 32	MENTALLY RETARDED	ACCIDENTS AT BIRTH FROM BIRTH	FROM 8:1 TO 30:1	NONE	MUSIC ART	ONE OLD REGULAR CURRICULUM ADAPTED	PARENTS FUND - RAISING TUITION - FEE
FOUNDATION FOR THE PHYSICALLY HANDICAPPED CHILDREN	12 CENTRES 400 CBR 4 SLUM	PHYSICALLY HANDICAPPED	ACCIDENT MOTHER HEALTH LACK OF STIMULATION	6:1	DOCTOR PSYCHO- LOGIST	SWIMMING POOL ART THERAPY GIANT BALL	NURSERY LEVEL ADL (ACTIVITY DAILY LIVING)	PARENTS CHARITY SALES

SUMMARY OF INSTITUTIONS (CTND)

: KAVEELA	: 423	: MENTALLY	: ACCIDENTS	: NONE	: PLAYGROUND	: REGULAR	: DONATIONS
: ANAKUN	:	: MULTIPLE	: LACK OXYGEN	: 16:1	: ART/MUSIC	: CURRICULUM	: SUBSIDIES
: SCHOOL	:	: HANDICAPPED	: MALNUTRITION:	:	: CLASS	:	: TUITION
:	:	:	: BIRTH	:	: MUSIC INST.	:	: FEE
:	:	:	: COMPLICATION:	:	:	:	:
:	:	:	: CONVULSIONS	:	:	:	:
:	:	:	: MEDICINE	:	:	:	:
:	:	:	: TAKEN BY	:	:	:	:
:	:	:	: MOTHER	:	:	:	:
:	:	:	: DURING	:	:	:	:
:	:	:	: PREGNANCY	:	:	:	:
: PIBOON	: 28 IN	: HARD OF	: ACCIDENTS	: 30:1	: PSYCHO-	: MUSIC CLASS	: REG CURR
: PRACHASON	: A	: HEARING	: SICKNESSS	:	: LOGIST	: PAINT	: GOVERNEMENT
: SCHOOL	: SCHOOL	:	: MISSED	:	: GUIDANCE	: HEARING AID:	: TUITION
:	: OF	:	: ABORTION	:	: COUNSELLOR	: SCHOOL BAND:	: FEE
:	: 2500	:	: HIGH	:	: COORDINATOR:	:	: CHARITY
:	:	:	: TEMPERATURE	:	: MAIN-	:	: FOUNDATION
:	:	:	: HEREDITY	:	: STREAMING	:	: FOR DEAF
:	:	:	:	:	: PROGRAM	:	: PIBOON
:	:	:	:	:	:	:	: FOUNDATION
:	:	:	:	:	:	:	: TEACHERS
: SATABAN	: 120	: ED	: BIRTH	: 2:1	: SPEECH	: PLAYGROUND	: INDIV.
: SAENG	:	: AD	: ENVIRONMENT	: 3:1	: THERAPY	: PAINT	: DESIGNED
: SAWANG	:	: MR	: MOTHER	:	: ASSOC.	: MUSIC INST	: CURRICULUM
: FOUNDATION	:	: EMR	: PSYCHE	:	: TEACHERS	:	: CHARITY
:	:	: CELEBRAL	:	:	: PHYSICAL-	:	: FAIR
:	:	: PALS	:	:	: THERAPISTS	:	: JAPANESE
:	:	: AUTISTICS	:	:	:	:	: NON-GOVT
:	:	:	:	:	:	:	: ORG.
: SOTSUKSA	: 325	: DEAF	: HEREDITY	: 10: 1	: NONE	: PLAYGROUND	: REGULAR
: TOONG	:	: HEARING	:	:	:	: MIRRORS	: CURRICULUM
: MAHAMEK	:	: IMPAIRED	:	:	:	: HEARING	: PLUS
: SCHOOL	:	: MULTIPLE	:	:	:	: AIDS	: SIGN
: FOR THE	:	: HANDICAPPED:	:	:	:	:	: LANGUAGE
: DEAF	:	:	:	:	:	:	: LIP
:	:	:	:	:	:	:	: READING
:	:	:	:	:	:	:	: TEACHERS
:	:	:	:	:	:	:	: CLUB

THE FOUNDATION FOR THE BLIND
Under the royal patronage of Her Majesty the Queen
Sister Rose Moore, retired

This meeting with sister Rose Moore was most interesting in the sense that she was among the first foreign sisters who came to work in Thailand. She arrived in Bangkok in 1932 coming from Ireland's Salesian Sisters Congregation. She explained that the foundation was registered in 1939 and their objective was to give both general and vocational training to blind children regardless of sex, nationality or religion.

It was Miss Genevieve Caulfield (1888-1972) who pioneered the education of the visually handicapped of Thailand. She adapted, with the help of a Thai university student, the braille system. It must be noted that in the Thai alphabet, there are 44 consonants, 32 vowels, 8 accent signs and 5 tones compared with the Roman alphabet of only 26 letters. In 1943, Miss Caulfield received her first government subsidy of Baht 20,000 (US\$ 800) per year which has now been increased to Baht 200,000 (US\$ 8,000).

The newcomers start with preparatory classes in order for them to learn braille. This usually takes between one and two years; however, some take as many as four years to learn. When they know basic braille, they can start grade one.

In the school year of 1989-1990, there were 150 boarders, 70 day students, 7 high school students - integrated, 6 at teachers' training college, 3 at university level, and 2 studied at Overbrook School for the Blind - International Program.

Divided into two classes per level, (except three levels in kindergarten), thirty teachers share the responsibilities for educating these children from kindergarten to grade ten. One of the sisters is also a nurse. Students wishing to continue their studies can do so through mainstreaming programs.

All other services like those of psychologist, doctor and physiotherapist are available at a nearby hospital in case of necessity. The social worker along with the six Salesian sisters are responsible for the well-being and social integration of the child. The sisters share the responsibility with the Board of Directors of the Foundation for the overall smooth running of the institution.

Specially trained teachers are employed by the foundation. Most have regular school teaching degree and get an in-service training for the blind. A few get special training as in computer application of Thai, English and braille. Most staff is provided and paid by the Ministry of Education, Special Education Division while others are employed directly by the foundation.

The curriculum followed is the same as the one approved by the Ministry of Education for elementary and secondary schools in the general program. Gymnastics, sports and special olympics participation are encouraged.

Typing in both Thai and English (about 12 typewriters are available), basic computer science, (they have 2 computers capable of translating English typewriting into braille printing), and handicrafts are also offered. For those deprived of the sense of sight, hearing obviously becomes a very important factor. The children can learn both Thai and western music as well as choral singing and dramatics. The school has 5 pianos, bells, Thai musical instruments and at least one electronic keyboard. Students also learn to swim in the foundation's swimming pool. Cooking and gardening are among the secondary students' weekly lessons for learning and experimenting.

Financing comes partly from government subsidies, but mostly from citizens' donations. For example, the foundation never bought any rice. Between Baht 300,000 to 400,000 (US\$ 12,000 to 16,000) are received each month in donations. Also for those parents who can afford to pay, there is a tuition fee of 500 Baht (US\$ 20) per term (four months). The foundation provides free education for those who cannot afford to pay.

According to statistics, there are about 20,000 blind children in Thailand, and only 1,000 are registered in three schools for the blind. All are under the Foundation for the Blind.

**THE FOUNDATION FOR THE WELFARE
OF THE MENTALLY RETARDED OF THAILAND
Under the royal patronage of Her Majesty the Queen**

**Dr Vanrunee Komkris
Immediate Past President AFMR**

The meeting was with Dr. Vanrunee Komkris, MD, psychiatrist, retired director of Rajanakul Hospital for the mentally retarded.

The foundation was established in July 1962 and later accepted under The Royal Patronage of Her Majesty the Queen. In 1964, the foundation opened the first school for the mentally retarded. It was founded at the Mentally Retarded Hospital (Panyaon Hospital) and funded by the foundation. Equipped for training, the school was named Rajanakul School by His Majesty the King who presided at the opening ceremony accompanied by Her Majesty the Queen. The Department of Medical Services of the Ministry of Public Health now operates the school. It accepts between 200 and 300 children.

A home visit project for poor mentally retarded children was established in 1971. In 1972, the Rajanakul Hospital

constructed research and health centres mainly for research on the care of the mentally retarded.

In 1977, the training school for retarded children with potential to adjust to normal living, under the name of "Panyanudhikorn School", was opened. This school houses between 200 and 300 youngsters. It started a vocational training program for adults in 1978; and accepts between 20 to 30 adults. A self dependency vocational project was put into operation in 1979 to help the poor who were retarded. The first regional center to provide welfare services to the retarded in the north was open in Chiang Mai in 1981. This centre receives 10-15 people.

A pilot project was established in 1982 to develop severely mentally handicapped children. It also offers a teacher training program. The study of the appropriate teaching techniques for severely mentally handicapped children was part of this program. This Bangkok school accommodates 50 children. Two welfare centres were opened in 1983, one in the northeast and another in the southern part of Thailand. Each accepts approximately 30 children.

In 1981 a community based rehabilitation centre for pre-school mentally retarded children was established. This day-care centre accepts between 30-35 children from the slum area.

The foundation is also sponsoring Thai athletes to the International Special Olympics. Some local and regional olympics are also organized.

The ratio in the agency depends on the severity of the handicaps. It is usually 1:15 although with the very young it is 1:8-10; with severely retarded it is 1:4-5 and with educable mentally retarded (EMR) it is 1:40.

Except for the hospital settings which have physicians, psychologists, physiotherapists and social workers, these specialists are seldom found in schools and centres. If necessary, the school will refer the child or client to the specialist in a nearby hospital.

There is a program offered at Rajanakul Hospital to parents and professionals who wish to learn about mental retardation.

Teachers usually have a teaching degree and get in-service training for special education methods. There is support from other countries like Australia and Japan, which bring new approaches and ideas to the teachers.

The government does not provide any money for the foundation but it supplies qualified teachers. Financing comes from parents' donations and fund raising activities such as concerts, dinner parties and boys scouts. Funding also comes

from the fact that most parents pay a tuition fee to the school (approximately 150 Baht per three months or about 18 US\$). If the parents have no money, the foundation provides the funds. The curriculum followed in special schools is the same as the one in regular schools. It is adapted according to the disability or learning capabilities. The main subjects are Thai, Arithmetic, Art, Music, and Physical Education. Students also go on field trips, to the market and sometimes to the zoo.

Materials used largely depend on the budget of each school. Sometimes they share certain facilities. Some schools even have musical instruments which usually have been donated. Some books are used; photocopies are more practical.

THE FOUNDATION FOR HANDICAPPED CHILDREN
Private organization
Mr. Somchai Rungsilp - Coordinator

Situated in Bangkok, there is a total of 24 teachers working with the foundation. They are not specialized in special education. They may be in social sciences or they may be regular school teachers. They all received in-service training. They have access to one doctor/psychologist and one occupational therapist who is in charge of preparing the program. One Swiss volunteer is helping in the preparation of the program.

The aim of the foundation is to help the community and the government agencies carry out rehabilitation work according to disability and resources. In the past years, the foundation joined with hospitals, public health offices, sanitation works, primary education offices, schools, and public welfare units to work with the children and train both parents and personnel. It is a recognized consulting centre.

There are now two community-based work areas in Thailand: Bua Yai District of Nakornratchasima Province and the Sabooruang District of Udonthani Province, both in the northeastern part of Thailand. Four hundred children with diverse handicaps are involved in this project. The second project is to organize developmental and recreational activities in the slum communities of Bangkok in order to help disabled children in these underprivileged areas. In cooperation with the government, government agencies and personnel of these communities, the problems and needs of the disabled are surveyed so that specific activities can be developed. Activities such as camping and art exhibitions have been organized and proven to be successful and appreciated. Forty children are followed by staff. These children have different disabilities.

The centre receives 12 cerebral palsy children per year to help them develop physically, mentally, morally and socially.

The centre provides educational activities and contributes to their reintegration into their own family and into society. Admission criteria for the centre are basically that the child is between three and nine years and the parents are investing time in the rehabilitation program of their child. If they can pay, then they do; if not, the foundation will subsidize them. If too many children are eligible, they are put on a waiting list for three to six months. Meanwhile, the centre provides home programs for the parents and the child.

The curriculum covers three main areas: physical therapy, occupational therapy (ADL or activities in daily living) and education (most children are at the nursery level).

Disabilities are usually from birth, due to a lack of health or prevention on the part of the mother. There is a higher rate of disabled people from rural areas because of a lack of environmental stimulation and facilities.

Funding is done through charity sales and donations. There are no government subsidies. Because of a very low budget, few books are used. American books are consulted as a guideline. Most of the personnel work from their experience and are not specialized.

Handicapped children are fortunate when they have a nice playground, a big ball and a small swimming pool.

Educational toys are donated by parents and other people worried that if they give money it will not serve its intended purpose.

Mainstreaming is considered the best approach and both parents and children work on re-integrating into society with the help and support of the centre. The family will decide, according to its finances if the child can pursue his studies (depending on his intellectual capacity) to high school or university level. Very few do.

KAVEELA ANUKUN SCHOOL
Ministry of Education, Department of General Education,
Special Education Division
Mrs. Pijet Jarunet, Director

Kaveela Anukun School is situated a little outside Chiang Mai City, on a 8 1/2 ray (3.36 acres) land. It was opened in 1982, and was the first state owned school for the mentally retarded in Thailand. Two schools for mentally retarded fall under the Ministry of Education. This is the first, the second is in Ubon Ratchathhavi. Two similar schools can be found in Bangkok; one is run by the foundation for the Welfare of the Mentally Retarded, and the other is Rajanakul Hospital School, run by the Department of Medical Services.

The children can be accepted starting age four and are allowed to continue their studies until age eighteen. Some exception is given to the child who started his education later than required; he may complete his full nine years if he starts between seven and fourteen years old.

Most pupils are day student, except for 55 pupils who live in the school compound. The boarders usually come from northern provinces and some from the south. Education for the 26 classes is provided by 36 teachers, 35 assistants and 8 auxiliary staff; many of them live in houses within the school grounds. Most assistants, who are also employed as care staff, sleep in the pupils' dormitories and provide emotional and social support to the boarders.

The 423 pupils are divided into three groups:

- The first is for slow-learners (184 pupils). Most of these pupils finish their six years of elementary schooling then go to regular secondary schools.
- The second group (239) is for children having an IQ between 50 and 70. They usually continue in this school to get vocational training such as needle crafts, hairdressing, cement-block making, chicken and duck raising, ceramics, incense stick and coat hanger making, and mushroom growing. All pupils study home economics and horticulture.
- The third group (24) is for multiple-handicapped pupils.

These children have a physical or sensory handicap in addition to their learning difficulties. They are integrated into classes with pupils of similar learning ability.

All these children have learning problems or are severely retarded. Some have multiple handicaps which go from quadraplegic to low vision and deafness.

Reasons for handicaps are usually because of accident.

The mother took some over-the-counter drug when she was not feeling well and this was too strong for the child; there was a lack of oxygen at birth; some mothers do not know how to take care of their child or even how to feed the children; a child's untreated fever brings convulsions which may effect the brain.

Most teachers hold a Bachelor's Degree in Education and are helped by the supervisor to go into an in-service training of four to five months. This training is always done in Bangkok. Specialists can be found at a nearby hospital. Parents get house visits from their children's teachers to help them understand and cope with the situation. Some meetings are scheduled in the school for groups of three to four mothers.

Teachers' salaries are provided by the Ministry of Education along with the operating costs, building and resources.

There is no tuition fee. Boarders pay Baht 3,300 per year (US\$ 132) and all children must pay Baht 1,100 per year (US\$ 44) for lunch fee. If parents cannot afford it, they only pay whichever amount they can, if any. Charity money will provide for these children, while Their Majesties the King and Queen also account for some donations. The Parent-Teacher Association and private donations provide the funds for the assistants' salaries.

Depending on the group, curriculum will be altered. With the help of the supervisor, a more "diluted" or adapted curriculum will be established to suit the child's needs. Material used are mirrors, paints, tapes, records, video and musical instruments. They also have a well organized playground, a music class and an art class. Educational toys and games are sometimes bought, built or donated to the school. Books are usually home made since there is very little available material. American and European books are used as reference along with the Ministry of Education documents.

**PIBOON PRACHASON SCHOOL
(MAINSTREAMING PROJECT FOR THE DEAF)
Ministry of Education, Department of General Education,
Special Education Division
Mr. Vichien Ananmahapong, Director**

After the meeting with Mr. Vichien Ananmahapong, school director, he introduced me to the coordinators for the deaf

children in mainstreaming, in order to get some information on their school and program.

The school opened on July 14th 1952 sponsored by the Department of General Education which provided and supported teachers and budget. The Department of Social Welfare provided some financial support and the Women's Labor Association gave free food and clothing for the students.

The first objective of the school is to offer free education for children who are poor or deprived of the opportunity to get an education. The second objective is the education of hard of hearing students integrated with normal students at the secondary level (2-3 students per classroom). The third objective is the education for slow learners (IQ 70-90) in primary classes (15-20 students per classroom) with the total population of each class approximately 50 students. The school houses 2,500 "normal" and 28 hearing impaired children. It offers kindergarten (10 classes), primary (48 classes), and secondary (12 classes) levels. School personnel includes 140 teachers, one school counselor, two psychologists, two nurses and two guidance teachers.

Teachers usually hold a Bachelor's Degree, seven hold a Masters Degree, all from Thai Universities.

Reasons for the hearing impairment are accidents, sickness including high fever, heredity; the most common reason is the mother's attempt to abort herself.

Facilities in the school are those of regular schools including a music room with musical instruments, vocational classes with tools and/or facilities for hair dressing, dressmaking, carpentry, and electricity.

Curriculum is the Ministry of Education's program including art, folk dances and lip reading for the hearing impaired. The government supervisor visits the school giving seminars and bringing new teaching methods to the teachers. The hearing impaired has the possibility of furthering his studies, if he has sufficient funds. If not, vocational programs are followed.

Social reintegration is easy for these children. The school has been operating for 38 years and regular students are well aware of the problems encountered by the hearing impaired. They therefore help them as best they can, and share sports activities.

SATABAN SAENG SAWANG FOUNDATION
Private organization
Ms. Nunchalee Apussarn, Manager

The Sataban Saeng Sawang was established in 1979 under the Holt Sahathai Foundation, a child welfare organization. It started as a play group of five children one of whom was autistic.

The purpose of this foundation is to provide services to children with mental retardation, learning disabilities, autism, multiple handicaps and those who are emotionally disturbed. Most of these problems are from birth except for the emotionally disturbed where unfavorable environment is usually the cause.

In June 1985, the Sataban Saeng Sawang Foundation was established in Bangkok. Programs are offered from preschool to vocational. This school has 120 children with branches in Chiang Mai, Nakorn Prathom, and is a consultant to a small program in Kanchanaburi. There is a staff of 47 all holding a Bachelor's or Master's degree in education with an in-service training for special education. A few are specialized in special education. Three speech therapists, eight assistant teachers, and two physical therapists also work to help these children.

Levels are divided as follows:

Severely retarded nursery	1	(2 1/2-4 yrs. old)	ratio	2:1
Severely retarded nursery	2	4 - 7 yrs. old	ratio	2:1
Educable nursery	3	7 - 10 yrs. old	ratio	3:1
Educable preschool	1	4 - 7 yrs. old	ratio	3-4:1
			(some go to mainstreaming)	
Educable preschool	2	7 - 10 yrs. old	ratio	5:1
Educable special elementary	1	7 - 10 yrs. old	ratio	4-5:1
			(some go to mainstreaming)	

Special programs for the parents of the cerebral palsy and the Down's Syndrome children are established through lectures, helping these parents understand their child's problem, and share with other parents certain specific situations.

Children are referred by doctors and must pass a certain development assessment. The age limit is eight years old. A child can stay in the school until he is 18 but must be accepted before the age limit. Because of a lack of space, facilities and funds, children refused are put on a waiting list. These children can get special help on a one-to-one basis until they are accepted.

Financing comes from tuition fees of Baht 2,500 per month (US\$ 100) plus Baht 250 per month (US\$ 10) for food. This implies that only or almost only the fortunate have access to the special education facilities. Thirty percent of the

children in this school get scholarships which allow some parents to pay less money, depending on their income. Some funding comes from foreign countries.

The curriculum is an I.E.P. (Individual Education Program). The program starts by teaching basic skills (bathe, go to toilet, brush teeth, etc); it helps develop emotional and social awareness (art, music, games, dances), it teaches how to use language, to develop fine and gross motor skills, receptive and expressive language abilities, to teach how to tell time, count, read and write and be aware of the date.

The school is well equipped. Materials range from story books to tapes and paints, musical instruments and mirrors. The school has a nice playground and has access to a swimming pool. The physiotherapist has a running carpet, physiotherapy balls and other equipment. Teachers and capable students build educational toys based on games from the United Kingdom and the U.S.A.

Since these children are limited psychologically, it is difficult to say how far they can go in terms of learning capabilities. Those who have learning potential are sent into mainstreaming programs. All these children are living in their family environment and the parents are asked to follow-up their integration into society.

SOTSUKSATOONGMAHAMEK SCHOOL FOR THE DEAF
Ministry of Education, Department of General Education,
Special Education Division
Ms. Sararn Bunyanusanti, Director

The Bangkok school was founded in May 1961 under the control of the Special Education Division, Department of General Education, Ministry of Education.

There are 325 children in the school, divided into 32 classes on four levels (kindergarten, primary, secondary, vocational). The task of educating these children is shared by 45 teachers, of whom six are deaf and graduated from this school; most hold a Bachelor's or Master's degree. The student-teacher ratio is 10-1.

These children are all deaf or hard of hearing, some are multiple handicapped including slow learning or cerebral palsy. Most of these handicaps are attributed to heredity. The parents are taught sign language in order to communicate with and better understand their child. However, there are no special services or specialists such as psychologists, social workers or therapists. If children need medical assistance, they are referred to a nearby hospital. Some children are supplied with hearing aids if the parents can afford it.

The government allows some money for these schools but most financing comes from donations, either from the parents or

from charity events. The Parents/Teachers Club also provides funds to the school.

With maximum amount of children being admitted according to their academic level, preference is given to the older children. Others are put on a waiting list.

The curriculum is the same as the one in the regular school. A total communication program which includes sign language, lip reading and finger spelling is added to the already heavy school work load.

Facilities are impressive especially for courses at the vocational level. Kindergarten, primary and secondary levels have a nice playground and what seems to be a well equipped science classroom. The vocational level offers tools for carpentry, material for artificial flower making, art classes (sculpture, paint), and gardening facilities.

The books used are mostly from America or regular Thai text books. Educational toys and games donated by parents or concerned people.

Social reintegration is done by the teachers, through VTP (visiting teachers program). The teachers contact different factories or place of work in order to get the child accepted for a certain job and they supervise the situation. However,

if the child wants to pursue his studies and has the financial resources, then he can continue; he will be sent into a mainstreaming program at a regular school.

INTERVIEW SUMMARY OF INSTITUTIONS

According to the interview summary chart (Figure 1), it is possible to conclude that:

- No specific cause appears to be more responsible than others for inducing disabilities.
- The average pupil/teacher ratio is of 11:1 not counting the mainstreaming project having a 30:1 ratio.
- Services are very seldom found. They are present in the private school and in some public schools offering mainstreaming programs. In most cases, they are non-existent. Students usually have access to nearby hospitals which offer the services of doctors, psychologists and physiotherapists.
- Facilities are generally acceptable, even if limited. The staff tries to organize a favorable environment for the child. Many schools have a swimming pool or have access to one; students can paint, have musical instruments and play in a more or less organized playground.

- Curriculum is the one used for the regular school.
Subjects such as braille for the blind and sign language for the deaf are added to the program. For the mentally handicapped, the curriculum is adapted to meet the psychological limits of the handicapped child.

- Many schools receive government subsidies. However, it is the parents, through paid tuition fees or personal help that contribute the most. Many other sources such as charity sales, fund raising activities and donations from private and government organizations, local or foreign, contribute to the survival of the different foundations and schools.

- All agree that the compulsory education law includes the handicapped. It is however, not enforced because there are not enough schools in Thailand to allow these children to receive an education. Thus the fact that any request from a parent to exempt a child from going to school is accepted.

Figure 2

SUMMARY OF HOSPITALS, UNIVERSITIES AND GOVERNMENT AGENCIES

QUESTION / AGENCY	TYPE OF FACILITIES	SPECIAL SERVICES	REASONS FOR HANDICAP	FINANCING	HANDICAPPED POPULATION	ACCESS TO EDUCATION
RAJANAKUL HOSPITAL / SCHOOL	INSTITUTE FOR THE MENTALLY HANDICAPPED	DIAGNOSIS REHABILITATION HANDICAPPED EARLY INTERVENTION PARENT COUNSELLING	UNKNOWN GENETIC ENVIRONMENTAL BIOLOGICAL	GOVERNMENT TUITION	2% MENTALLY HANDICAPPED 1% MENTALLY HANDICAPPED CHILDREN	4%
UWAPRASAT WATHAYOPRATHAM HOSPITAL	INSTITUTE FOR CHILD PSYCHIATRIC CARE	PSYCHOLOGY SOCIAL WELFARE SPEECH THERAPY PSYCHIATRY	BIOLOGICAL ENVIRONMENTAL	GOVERNMENT TUITION	NOT CLEARLY DEFINED	VERY LOW
CHILDREN'S HOSPITAL	GENERAL HOSPITAL FOR CHILDREN	PEDIATRICS PSYCHOLOGY SPEECH THERAPY PHYSIOTHERAPY	BIOLOGICAL/ CONGENITAL ENVIRONMENT NUTRITIONAL DEFICIENCY POOR HYGIENE TRAUMA	GOVERNMENT	UNDER REPORTED NUMBER	VERY LOW
SRINAKHARINWIROT UNIVERSITY	SPECIALIZED IN TEACHERS' TRAINING	SPECIAL EDUCATION DEPARTMENT	MEDICAL COMPLICATION UNSUCCESSFUL SELF-ABORTION	GOVERNMENT TUITION	0.8% OF POPULATION BETWEEN 6-14 YEARS OLD	LOW
MINISTRY OF EDUCATION	GENERAL EDUCATION DEPARTMENT	SPECIAL EDUCATION DIVISION	NOT SPECIFIED	1% OF EDUCATION BUDGET	59,599 SCHOOL AGE CHILDREN	3.7%

RAJANAKUL HOSPITAL
Ministry of Public Health
Dr. Chavalat Dheandhanoo, M.D., Director

The Bangkok Rajanakul Hospital is an institution for mentally handicapped children. It was founded in 1960 under the Department of Medical Services, Ministry of Public Health. It was officially inaugurated by Prime Minister Field Marshal Savit Thanaratana on March 21, 1962.

All of the children in this hospital are mentally handicapped. Approximately 20% have Down's Syndrome, 10% are autistic and the others are retarded. The criteria for being accepted are that: 1. the child can help himself (can dress, walk, feed himself); 2. room is available (there is a waiting list of many years).

The objectives of the hospital are to provide 1. diagnosis, prevention, and treatment services for a mental handicap, 2. rehabilitation in various aspects through medical, social and vocational services for a mental handicap, 3. an early intervention programme, 4. parent counselling, 5. research into preventive measures against mental handicaps, 6. a teaching centre sharing knowledge in the field of mental handicap with resident doctors, medical students, nursing students, and teachers, and to inform public opinion through the media.

Rajanakul Hospital is financed by the government offering services for mentally handicapped children between the age four and eighteen; it also offers residential care, day-care and community care; 610 beds are available. Mentally handicapped infants between birth to four years old can get infant stimulation programs. All services can be obtained by attending an out-patient diagnostic and assessment clinic.

Early intervention programs are offered through in- and out-patient services. The medical rehabilitation services are physiotherapy and the appropriate physical aids, speech therapy and services for the non-communication child, and occupational therapy and activities of daily living. There is also an educational rehabilitation program with classroom activities and government special programs for special education. These programs are developed by the government in cooperation with Rajanakul School under the supervision of Dr. Delanee, principal of the school. A social rehabilitation program is also offered to help children adjust to community living and improve social skills.

A vocational rehabilitation centre gives the opportunity for the handicapped to develop personal skills in order to function as normally as possible in their adult life. They can learn carpentry, sewing, cooking or other domestic tasks, and agricultural work.

Finally, there is a community program for home visiting and parent counseling. This program is also responsible for setting up a rehabilitation centre. The centre accepts children who have slow development from birth to six; they are referred by Rajanakul Hospital.

Reasons for handicaps are 25% unknown, 20% genetic, 2% due to environment such as maternal deprivation or a lack of stimulation, 53% biological factors such as congenital factors, malnutrition, birth asphyxia or accident.

Classes are divided into six levels and into two categories, educable and trainable. Twenty-five teachers share the work and they have a ratio of 10-12 children to one teacher. Most of these teachers hold a Special Education Certificate or have done in-service training. A few hold a Master's degree in Special Education. Even if the hospital offers speech therapy and occupational therapy, it does not have any specialists. It has, however, an assistant speech therapist. It also has music teachers and one art teacher who are not therapists.

Dr. Chavalat estimates that two percent of the population is mentally retarded; which means 1.1 million people are retarded, of whom 400,000 are under 18 years old. From these children, only four percent are in schools. The government

now has a project in the proposal stage for opening 36 special classes next year.

Financing is provided by the government. Also, parents are required to pay 200 Baht (US\$ 8) per month for out-patients, and 500 Baht (US\$ 20) per month for boarders.

I then met with Dr. Delanee Thanaphorn, Director of Rajanakul School which belongs to the hospital. Dr. Delanee said that children are excluded from education when the parents request an exception for their child.

There is a definite lack of funds. The government has no money to build special education schools because this usually includes boarding, which is very expensive. Parents with handicapped children are scattered through Thailand; if they live in Bangkok, the traffic makes it impossible to drive long distances in the morning and evening; if they live outside the city, distances are too great, both transportation and communication often being very difficult. Dr Delanee's suggestion is that if the Ministry of Education and/or the BMA (Bangkok Metropolitan Administration) were to open at least one special class in each of their regular schools (or according to needs), it would be possible for parents to send their child on a day-student basis only, which would not be costly. It appears that the BMA is now considering this possibility.

UWAPRASAT WATHAYOPRATHAM HOSPITAL
Ministry of Public Health
Dr. Penkae Limisila, Assistant Director

Uwaprasat Wathayopratham Hospital is in Samut Prakarn province. It is built on a land of 20 acres offering many possibilities for its clients.

This hospital is specialized in child psychiatric care. Its main clients are autistic, emotionally disturbed children, children suffering from severe deprivation, to mutism and schizophrenia. All children are less than 15 years old.

One hundred beds are available for the most severe cases allowing boarding; there is a total of 187 in-patients and between 70-100 out-patients; 50% of these children are autistic.

Reasons for handicaps are very diverse; some are born disabled, others suffer from their environment (battered or neglected child, child abuse, rape, etc.)

There are eight classes divided between seven teachers, five of whom have been provided by the Ministry of Education. Three of the teachers hold a Master's degree in Special Education; others hold a Bachelor's degree in Education with 1 1/2 years of special education training. The ratio is 12-15:1 and for the severe cases, it is 4-5:1. The program used

is the same as the one used in regular school. This allows those children with intellectual capabilities to leave the hospital and continue their studies in regular schools. Last year, one autistic child graduated with a Bachelor's degree and two others with a Vocational Diploma.

Services are those of seven psychiatrists, three psychologists, three social workers, one speech therapist and several nurses. Special programs are designed to help the parents understand and control the child.

There are definitely not enough agencies and/or schools to take care of all the handicapped children. There is only one hospital which specializes in child psychiatric care; seven of the twenty psychiatrists in Thailand work in this hospital.

The hospital is preparing a short course for pediatricians in order for them to ease the load on the few psychiatrists. Also, small clinics are being set up in Thai hospitals. These clinics will be specially designed to help children with psychiatric disorders.

Financing partly comes from government budget, and partly from Baht 2,000 tuition fee (US\$ 80); 25% of the children do not pay any fee. Fairly well equipped, the hospital has a

swimming pool, playroom, drums, paints and mirrors to help the child work and develop.

CHILDREN'S HOSPITAL
Ministry of Public Health
Dr. Varundee Amoradhat, Pediatrician

Bangkok Children's Hospital has 575 beds and takes care of 500 to 800 out-patients offering special services such as physicians, psychologists, speech therapists and physiotherapists. The hospital has no psychiatrist. There is a lack of these specialists in Thailand (only about 20 psychiatrists for 56 million people).

The purpose of my visit was to get information on the handicapped population in Thailand and the reasons for their handicap. Dr Varundee Amoradhat, pediatrician at the Children's Hospital, first explained that it is very difficult to get specific numbers; handicapped children are under-reported and many children have multiple handicapped. There are two main reasons for handicaps: biological and environmental. These two reasons may effect the unborn, the new born and the school age child.

Insufficient funds or improper care of the expecting mother may be responsible for intra-uterine problems. There is a lack of facilities making communication and transportation very difficult. Also, many young parents still in need of

vitamins and minerals do not know how to prepare themselves, they eat anything, sometimes try to induce abortion, and the result can be a defective child. With the rising rate of prostitution, the number of AIDS and hepatitis mothers and children is also increasing. Newly born children face nutritional deficiency, poor hygiene facilities (lack of water pipe system and proper drinking water); birth complications and infections, and non-intentional accidents are major causes for handicaps.

School children may also suffer from nutritional deficiency. Diseases such as encephalitis, measles, mumps and accidents are the most current causes for physical problems. These young children are the target for child abuse which is usually related to AIDS or other venereal diseases along with severe emotional trauma.

Blindness is specifically related to side effects of low birth rates, consequences of medical treatment such as oxygen overdose, congenital malformation, brain malfunction, perceptual deformity and trauma. The prevalence of otitis in Thailand is mainly responsible for deafness and hearing loss. The use of antibiotics such as streptomycin or caromycin may also induce deafness.

Congenital or brain malformation and disfunction will alter the proper functioning of the body either physically or mentally. Trauma and malnutrition may also in some cases affect normal development. One must try to control avoidable situations and take care of those children with special needs.

**SRINAKHARINWIROT UNIVERSITY
SPECIAL EDUCATION DEPARTMENT
Ministry of University Affairs
Dr. Padoong Arrayavinyoo**

This university was first established in 1949 as the school of advanced teacher training at Prasarnmit and its program was meant for upper-level teacher training. In 1954, the school was changed to become the College of Education with the authority to grant Diplomas in Education and subsequently Bachelors' and Masters' degrees in Education. In 1973, the Bachelor's degree in Special Education was established. A Master's Degree was offered in 1974. This same year, the first Doctorate of Education Degree was conferred and Srinakharinwirot University was officially established in 1974, by Royal Decree.

The Special Education Department has dealt mostly with deaf and hearing impaired children. It is now developing a program for the gifted and 15 mentally handicapped children. Both programs will be offered for the school year 1991-1992.

Dr. Padoong Arrayavinyoo explained that according to his experience, most hearing problems are due to medical complications such as German Measles. Many children, however, are born without ears or have other deformities because the mother tried to take some medicine to induce abortion and failed. Only a few cases are hereditary. Total deafness is found in approximately 0.5% of the hearing impaired population. Concerning the physically handicapped and the blind, reasons are about the same except the type of disease would be different; for example, blindness is often caused by cataract. The mentally handicapped causes are mostly attributed to heredity.

The curriculum followed is according to the national program. There is no special curriculum for the handicapped. Teachers must follow the objectives set by the government for regular classes and add specific subjects according to the disability (e.g., braille and sign language).

According to a study by Dr Padoong, approximately 0.8% of children between ages 6 to 14 are disabled; approximately 0.12% are mentally handicapped, 0.10% are blind, 0.13% are hearing impaired, 0.18% are cerebral palsy, 0.05% are physically handicapped and 0.21% are in other categories.

THE MINISTRY OF EDUCATION
GENERAL EDUCATION DEPARTMENT
SPECIAL EDUCATION DIVISION
Mr. Kamol Dhitalakamol, Director

The Compulsory Education law of 2523 (1981) has not yet been revised. This law includes the handicapped children but adds an amendment which states that, upon request from the parents, children can be exempted from getting an education. (The district officer has full power of decision when it comes to exempting a child). In any case, there are not enough facilities for all the handicapped children, so this means that the law cannot be enforced. The limited facilities are mostly due to a lack of funds and very few specialized teachers. Teachers can get their Bachelor's degree from Sanusit Teachers College with a Major in Education and a Minor in Special Education; also from Srinakharinwirot University which offers Majors in Special Education and a Master's degree.

According to the National Education Council's (NEC) statistics, there has been an increase of about 10% in the attendance in schools for handicapped children. An estimated one percent increase per year is projected in the next National Master Plan (1992-1997). "At this rate, it will take nearly 100 years before all of the handicapped have the opportunity to attend school", said Mr. Kamol. He is now working on a project in order to change the status of the Special Education Division to the Department of Special

Education; in such a case, the budget allocation would be increased and personnel facilities would become more important. For instance, instead of supplying two teachers to Rajanakul School, they could have supplied up to twenty special education teachers. Mr. Kamol Dhutakamol says that by becoming a department, instead of a one percent per year increase in school attendance, there would be about 10% per year increase bringing up to 60% the attendance by 1997.

The Ministry of Education, in cooperation with the BMA (Bangkok Metropolitan Authority), private schools, foundations and other related special education organizations, is working on a project to open eight classes, in regular schools, for special education.

Also, two special education schools are expected to be built during the next school year (1991-1992), one for mentally retarded children accepting 70 children, and one for the deaf, accepting 101 children. Both these schools will be in the southern part of Thailand.

It must be noted that the budget allocated for special education is one percent of the total education budget.

INTERVIEW SUMMARY OF
HOSPITALS, UNIVERSITIES AND MINISTRY OF EDUCATION

According to the interview summary chart (Figure 2), it is possible to conclude that:

- All agencies offer some kind of special services which were selected according to the specific needs of each agency.
- Certain environmental causes such as nutritional deficiency, untreated diseases and pollution are considered as avoidable and are taken into serious consideration; specific measures are now being taken in order to reduce these avoidable handicaps.
- Financing mainly comes from the government. Measures must be taken in order to find new ways of financing organizations and help them become self sufficient (see concluding chapter).
- Nobody seems to know the exact number of handicapped people or children in Thailand. Estimates are used based on international standards.
- All agree that there are not enough facilities to accommodate the number of handicapped. The reason is said to be a lack of funds.

CHAPTER V

CONCLUSIONS

By tradition and temperament, Thai people have been generally noted for their humanitarian action. Their religious beliefs reinforce this national characteristic to the extent that Thai people have always stoically accepted disabilities in their children as manifestation of their own wrongful deeds, either in this life or in the previous cycle of incarnation. For this reason, handicapped children usually live with their parents.

Handicapped population in Thailand

Studies made to evaluate the number of handicapped people in Thailand are based on approximations. Data is usually based on the study of four provinces, one of each significant part of Thailand (North, North East, Central, South) out of which three areas are chosen; from these areas one or two villages are studied, and statistics are based on these few villages.

UNICEF (1989) made a study also based on estimates.

Approximately half a million Thai people or 1.14% of the population are disabled by impaired hearing and at least 2.0%

are affected by hearing loss. According to international standards, these rates are high. The rate for blindness is also about half a million people.

The Public Health Ministry believes there are about 500,000 mentally handicapped people, half of whom are children and about 20% are of school age (The Nation, Oct. 13, 1989). According to The Nation of December 10, 1989, a survey conducted by the National Committee showed that only 4% of these people received both formal education and professional care. The following chart shows the results of a study done by the National Education Commission in 1987 on "Education Opportunity of Various Students Classified by Region and Disability" (National Education Commission, 1987a).

EDUCATION OPPORTUNITY OF VARIOUS HANDICAPPED STUDENTS CLASSIFIED BY
REGION FOR THE SCHOOL YEAR 1983

REGION	BLIND			DEAF/HARD OF HEARING			MENTALLY RETARDED			PHYSICAL HANDICAP			TOTAL		
	POPULATION			POPULATION			POPULATION			POPULATION			POPULATION		
	NO. OF PUPILS	AGE 7-14	%	NO. OF PUPILS	AGE 7-14	%	NO. OF PUPILS	AGE 7-14	%	NO. OF PUPILS	AGE 7-14	%	NO. OF PUPILS	AGE 7-14	%
CENTRAL	51	737	6.92	121	894	13.53	21	3123	0.67	126	4530	2.78	319	9293	3.43
NORTH	38	1019	3.73	301	1308	23.01	28	3760	0.74	22	5316	0.41	389	11403	3.41
NORTHEAST	39	1751	2.23	167	2826	5.91	1	7483	0.01	19	9597	0.20	226	21567	1.04
EAST	19	257	7.39	54	296	18.24	1	1163	0.85	16	1866	0.86	90	3532	2.51
SOUTH	14	1150	1.22	261	1160	22.50	3	2073	0.14	19	3595	0.53	297	7978	3.72
BANGKOK	37	440	8.41	503	531	94.73	160	1872	8.55	64	2722	2.35	764	5565	13.73
TOTAL	198	5354	3.70	1407	7015	20.06	214	19471	1.10	266	27635	0.96	2085	59478	3.51

Translated from :

The National Education Commission - Educational Needs and Opportunity Study for Handicapped Children p. 32

The argument that "where there are no schools for able-bodied children, how can there be schools for the disabled " is still uppermost in the mind of educational planners in Thailand (Ministry of Education, 1981 p.7). With a literacy rate of 91%, it is now time to give access to education for the less fortunate. The government must allow more resources for special education. The existing government and private facilities can only handle a few thousand of them. Steps are now being taken to upgrade the present situation. The Council of the Social Affairs Ministry decided on October 12th 1989 to set up the National Committee to deal with the neglected problem of the mentally handicapped.

From the legal point of view, there is at present no provision to force disabled children to come forward for remediation and rehabilitation. There is no purpose in enforcing the law since there are not enough facilities available. If anything, the law favors further isolation of disabled children by exempting them from compulsory education. There is clearly an urgent need to amend the law and to set up legal machinery to ensure that every disabled child is registered as such (Ministry of Education, 1981).

"Law is not only a mechanism for the Government to set up standards for people to follow but it is the policy of the

state. No matter how well written the law is, if there is no one to obey it and no one to enforce, it is useless."

(National Youth Bureau, 1988 p.350).

Article 62 of the constitution of the Kingdom of Thailand B.E. 2521 (1978) says that "the State shall support and promote national youth development so that they may be physically, mentally and intellectually sound for the purpose of economic and social development and for the security of the State" (UNESCO, 1986 p.11).

Plans must be developed in order to improve medical facilities and set up social programs to help them lead a close to normal life in society. According to Dr Varundee Amoradhat from the Children's hospital, there is now a plan to give special training to pediatricians in order to help them better cope with the handicapped throughout Thailand. Many handicapped people never receive medical treatment in modern health facilities; many cannot afford it, others have difficulties communicating; there are also those who feel embarrassed by their disabilities (National Youth Bureau, 1989). One section or unit in every provincial hospital or medical centre should provide special treatment for the handicapped.

Primary health care for parents and/or future parents should be made more easily available in order to try and reduce birth defects and avoidable situations such as in mistreated or untreated diseases and fevers. Generally, pre-natal care is advisable, balanced nutrition is important and immunization necessary. All programs must be extended to reach people in remote areas.

Social workers say that in most cases mentally handicapped people are deprived of the opportunity to develop properly, and there is little if any professional assistance for the parents to help their child. This is also true for the physically handicapped children. Rajanakul and Uwaprasat Wathayopratham Hospitals offer an information program to parents and professionals who wish to learn about mental rehabilitation.

Financial support is being sought in foreign countries. The government will also share the responsibility of mentally handicapped people according to age, within different ministries. The Public Health Ministry will be responsible for the children of pre-school age, the Education Ministry for the school-age children and mainstreaming, and the Interior Ministry will handle the vocational training (The

Nation October 13, 1988). The government is preparing a bill to contribute to better humanitarian treatment (The Nation May 15, 1991).

Special education programs should be implemented with the improvement of suitable teaching materials and curriculum adjustment. Special services should be provided to the multiple handicapped, and counselling should be more accessible to parents; early detection plans should be widely implemented, and vocational training provided for all types of handicapped people.

Institutions should try and become self sufficient in order to be able to survive on minimal outside funding. More institutions should grow vegetables and/or make handicrafts which can then be used for their own needs, or sold to bring in some extra funds. Older children should be taught to help the younger ones. Raising animals is a good way of teaching children to take care of others. According to space, animals such as cows and chicken could be a source of supply for milk and eggs; small units can also be set up using the waste of the animals in order to produce the necessary electricity for the institution's use. By reducing operating costs, minimal government funding and outside financing should be sufficient to allow an adequately equipped centre to survive or better, to allow handicapped children a more fulfilling life.

Present curriculum is in need of change and should be adapted to answer specific situations. It should allow understanding of the handicapped person's own situation and a realistic view of his or her future possibilities; it should encourage career orientation according to personal capabilities not limited by social environment and past experiences.

The upgrading of education personnel is also important. More qualified personnel are necessary to better help the handicapped population. Most teachers hold a Bachelor's degree in teaching and get in-service training for special education approaches. Easier access to specialized training in special education may encourage a greater number of teachers to graduate in this field. However, even with their low salary and generally limited facilities, people dealing with handicapped children are genuinely concerned about the welfare of these children. They are fully dedicated, filled with energy and open to new ideas.

Except for the hospital settings which provide physicians, psychiatrists, psychologists, physiotherapists and other specialists, these professionals are seldom found in schools or centres. Only when judged necessary will the school or centre refer the child or client to the specialist. Private agencies usually offer some services but then only the privileged child has access to these schools.

Long term planning remains very difficult in Thailand due to a lack of official information. A report by the Ministry of Education (1981) mentioned that a nation-wide survey should be undertaken in order to know the exact number of handicapped people there really is in Thailand. This would allow better future planning and budgeting for programs, teaching material and services. Such a survey still has not been done. Therapeutic approaches using non-conventional interventions and tools such as music therapy and other wholistic approaches, should be developed. Finally, parents should be aware of the importance of education for their disabled child, and should request, that compulsory education be extended to the handicapped. In Japan, education has become compulsory for all children since 1989 (The Nation, February 3, 1989).

Because of ignorance, many people do not request an education for their child. They think that they cannot change the situation and must accept the fact their child is handicapped. This is true but they must understand that they may not always be there to take care of their child; the child must learn to take care of himself. An education will give him this chance. Those who know there are special schools, also know they are not free, and many of these people cannot afford to send their child to a private school.

1

Even if the child is accepted free of charge, unless it is a boarding school, parents are required to provide transportation. Since there are very few schools in Thailand, the school is usually far away from home, and transportation costs must be paid by the parents. It is the government's duty to inform the population of the advantages for their child's education.

Programs should be developed over a period of several years to assist and encourage handicapped people to integrate into society. Both government and non-government organizations must push for the upgrading of facilities and services. Laws must be amended to ensure the effect of these changes. The government has decided to give a tax incentive to owners of buildings, parts of which are designed for the convenience of the handicapped (The Nation, May 15 1991).

Companies must also be encouraged to hire more handicapped people. In August 1991, the government announced that it would subsidize companies employing handicapped people (The Nation, August 14 1991); their working abilities are generally underestimated. More vocational training centres should be organized around the country. Both government and private organizations have opened facilities in major cities.

The philosophy of special education states that it is not proper and practical to build special schools to serve all types of handicapped children. According to a study done by the National Education Commission (1987a), construction and management costs are three times higher than costs for regular schools. Children should be allowed to study in ordinary schools, in special classes, so that they can adjust themselves with normal children and live a normal life. This would be a cost efficient way to reach many handicapped children who cannot afford to go in a boarding school away from home. It would also allow the child to remain in a family environment which is healthier emotionally and psychologically. These classes could serve the severely handicapped who need constant supervision. Mainstreaming programs should remain, with proper support services, for the more capables.

Such an idea cannot be achieved on a short term basis. It requires a good preparation from the handicapped and financial support and from regular teachers as well. Society must learn to develop a positive attitude towards handicapped people.

Schools generally do not accept handicapped students. The teachers already have enough students in a classroom and are

not qualified to cope with these children. To counter this problem, the school would have to hire special education teachers and open especially adapted classes.

The school equipment and environment would need to be changed in order to suit special situations with the handicapped. Most of the basic material and facilities in the school could remain the same.

The first step has already been taken by the government; the responsibility for organizing education for handicapped and disadvantaged children is recognized in the National Education Scheme for 1977 (Ministry of Education, 1987).

In the Compulsory Education Act, handicapped children are included. The clause allowing children to be exempted upon the parents' request should only be used for very extreme cases. There should be enough facilities to deal with these children. The law must be enforced and not left to the personal opinion of a district officer. The second step must come from the people. Parents in Thailand should realize the need and benefit of education for their child.

Knowing the importance of education in this country, and the concern of the government for its people, short term solutions must be found in order to answer the needs, and offer more facilities for the disabled.

Reports from different continents show that disabled children from rural or slum areas are being denied personal development possibilities because they suffer impairment. They do not have access to specialized help or to existing technology which could enhance their life. Families and communities in developing countries have some available resources. The enrichment of existing training programs and also of basic health, welfare and education services will allow disabled children to be included in these services. It is through these human resources that effective help can be given to disabled children or those in danger of being affected by disabilities.

Thailand's needs are constantly changing and the way of life for people and children is changing at an astonishing rate. This used to be a third world country; already it is being called semi-industrialized, and it soon will be a recognized industrialized country. Let us hope that the new generation will be well prepared for the 21st century, and that rural development will bring greater knowledge to its population without destroying Thailand's natural environment, culture and values. Let us also hope that life will offer better opportunities for those with special needs, allowing the disabled to become a real part of Thai's society.

APPENDIX A

ACT OF LEGISLATION FOR PRIMARY EDUCATION
YEAR 2523 (1980)KING BHUMIPOL / ROYAL COMMAND
EFFECTIVE OCTOBER 9 OF THE YEAR 2523
DURING THE KING'S 35 YEARS REIGN

Article 1

Legislation for education of the year 2523

Article 2

Legislation effective October 1st 2523

Article 3

Cancels

- (1) Legislation of the year 2478
- (2) Legislation of the year 2483
- (3) Legislation of the year 2505
- (4) Legislation of the year 2509
- (5) Legislation of the year 2521

Article 4

Primary education

"Primary school" must follow the plan of education in Thailand.

"Parents" are the legal guardian of the child.

Article 6

Children must go to school no later than 8 years old.

Article 8

With the request of the parents, the district educational committee and sub-district educational committee have the authority to exempt the child from attending school

For the following children :

- 1) One that has physical or mental disability.
- 2) One that has a contagious illness as defined in the law.
- 3) One that has to take care of disabled parents who cannot earn a living and nobody to take care of them.
- 4) One with other necessity as defined in the Ministry's law.

Note : In item 3, disabled parents who have more than one child who go to school, only one can be exempted.

Note : If it occurred that the disabled child is freed from his disabled status, the two committees must annul the exemption.

Article 10

The parents must follow Article 6 otherwise they will pay a fine of more than Baht 1,000.00.

Article 11

Exception : If there are only 4 years primary level offered in the province, the child is exempted from the 2 following years of compulsory education.

APPENDIX B

Interview Questionnaire

1. Name of school foundation or association ?

2. Name of contacted person/position ?

3. How many children in school ?
Males / Females

Types of handicaps ?

Reason for handicap?

How many classes ?

How many teachers ?

4. Teachers qualification/certification/specialization in
special education ?

5. Kinds of services offered ?

- Physician
- Psychiatrist
- Psychologist
- Social Worker
- Physical Therapist
- Nurse
- Public Health Officer
- Certified Teacher
- Other Therapists
- Other Help
- Others

6. Do you have a program aiming at educating parent of the disabled children for better understanding and encouraging their involvement in improving the situation "

7. What is the population of disabled people in Thailand "

What is the population of disabled children in Thailand "

8. Is the compulsory Education Act for the disabled children enforced "

9. How many special education schools are there in Thailand?
In Bangkok ?

- Blind
- Deaf
- Hearing Impaired
- Mentally Retarded
- Mentally Handicapped
- Disadvantaged
- Physically Handicapped
- Slow Learners
- Long-term hospitalized
- Mainstreaming

- Private schools?

10. Where do the teachers get their training for special education ?

11. Are there any specific future plans for the disabled "

12. Do you get assistance from other countries "

Is there a student exchange and/or correspondence between different schools ? provinces ? countries "

13. Financing

Government budget

Parents

Charity

Others

14. Admission criteria for children ?

15. Maximum children in school ?

What happens if more children apply ?

16. What is the followed curriculum ?

Is there a special education programme ?

Academic level ?

Study subjects ?

Special subjects ?

Field trips ?

17. What kind of material/tools is being used with the children ? i.e. mirrors, tapes, paints, books, records, musical instruments ?

18. What type of facilities i.e. gymnasium, playground, art class, music class, swimming pool ?

19. Do you use special books ? special curriculum ?

Are they regularly updated ?

20. What kind of support do you get by the government supervisor ?

21. Are the children boarding ?

22. What kind of meals are served ? schedule ?

Are the meals adapted to the children's needs ?

Typical menu ?

23. What are the education toys and games used ? Are they chosen according to specific disabilities ?

24. Are disabled children allowed to pursue their studies if desired ?

25. Is there a social re-integration programme ?

APPENDIX C

ADMINISTRATIVE STRUCTURE

The structure for the administration of education, religion and culture, within the Ministry of Education, can be illustrated by the following 3 charts. (Ministry of Education, 1987)

Chart I

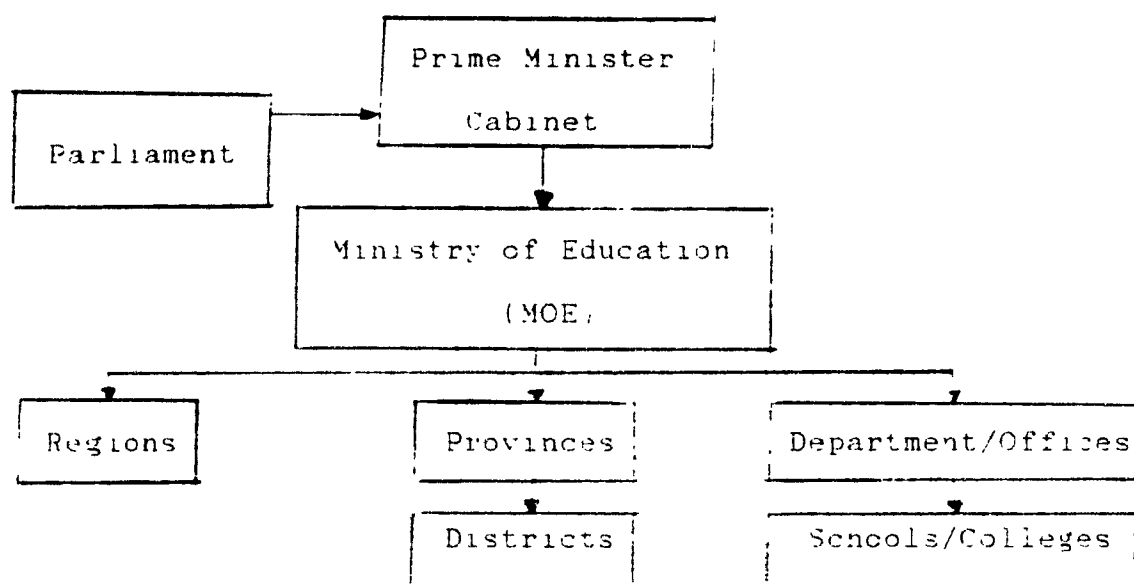
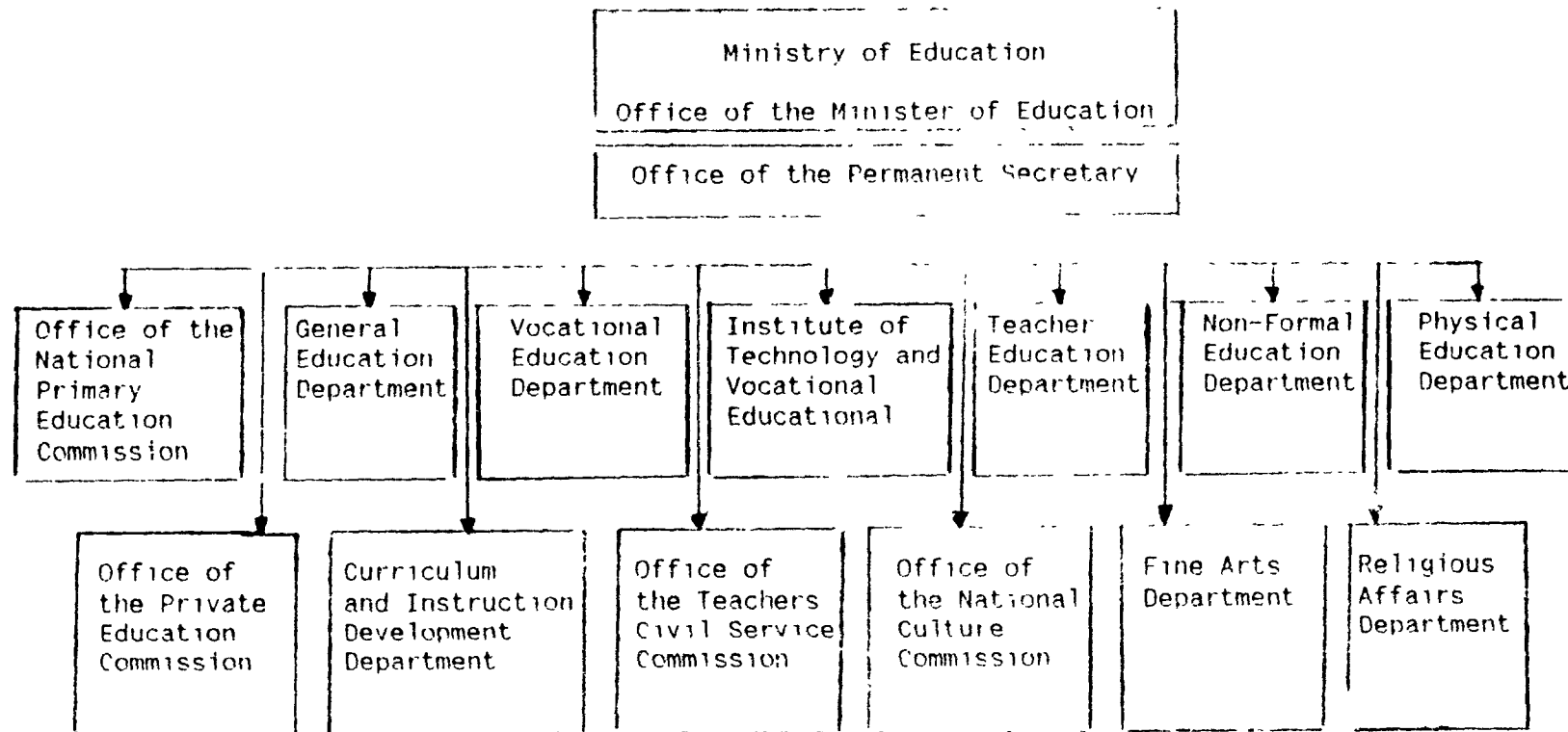
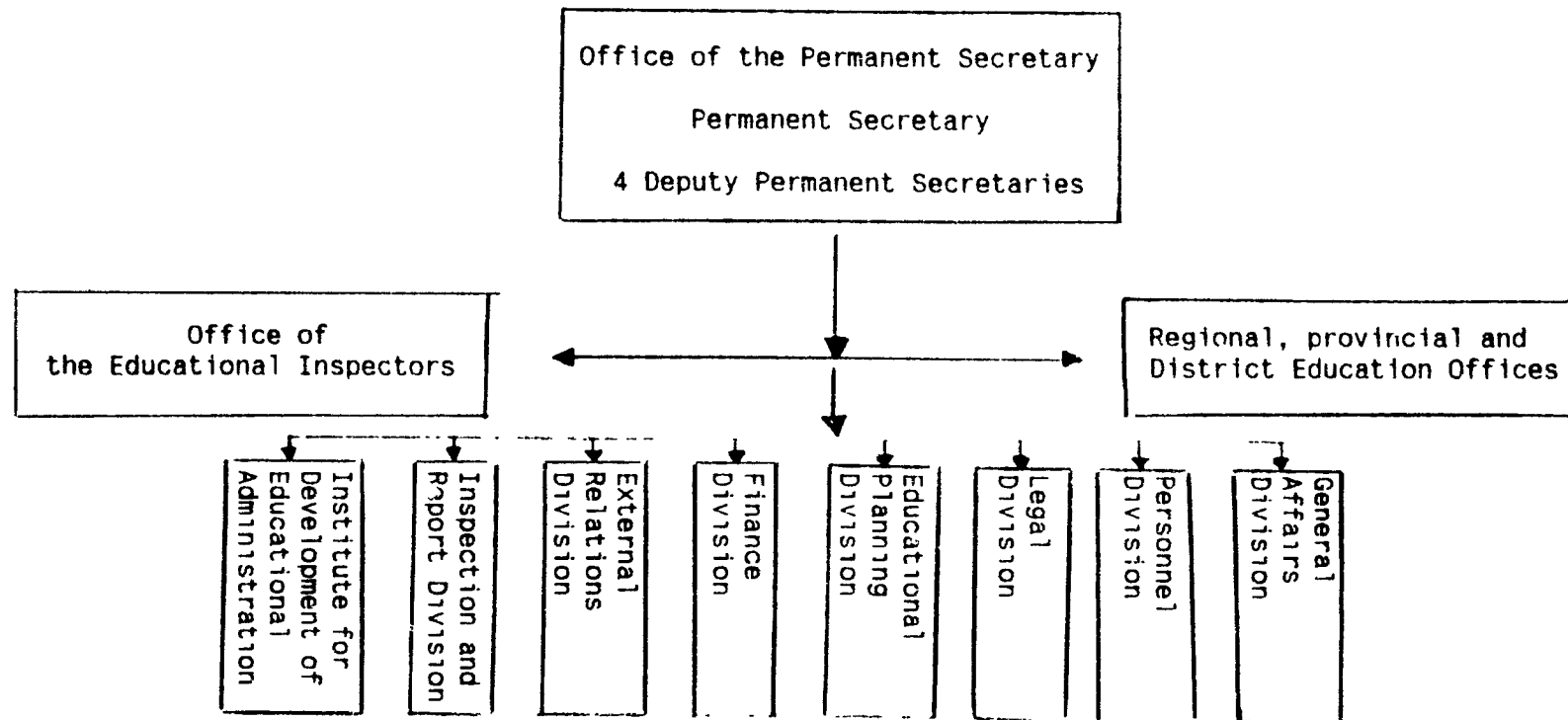


Chart II



The Office of the Permanent Secretary headed by the Permanent Secretary, with 4 Deputy Permanent Secretaries co-ordinates policies and implementation of education programmes by the 13 Departments, which are headed by Directors-General. Decentralization creates 12 educational regions, for instruction and supervision purposes. Regional education offices, are directly responsible to the Office of the Permanent Secretary.

Chart III



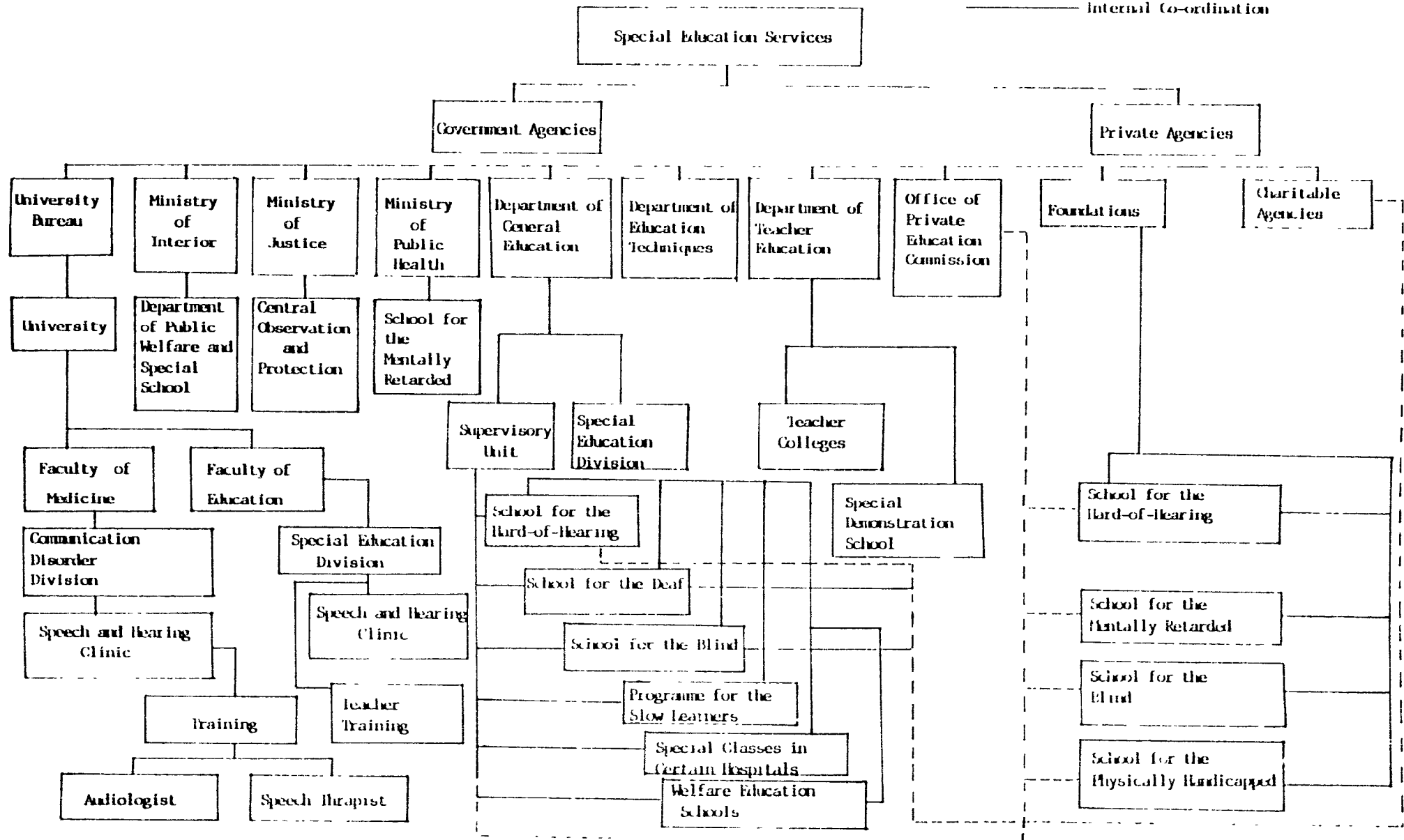
The Inspectors-General of the Ministry also directly responsible to the Permanent Secretary are assigned inspection functions for the different regions. At the provincial and district levels, each Department of the Ministry of Education maintains close and direct links with the schools and instructions under its care.

APPENDIX D

ORGANIZATION CHART

----- External Co-ordination

———— Internal Co-ordination



BIBLIOGRAPHY

Abraham, Martin (1985) The Lessons of Bhopal A Community Action Resource Manual On Hazardous Technologies. International Organization of Consumers Unions Pub, Regional office for Asia & the Pacific, Malaysia, 150 pages.

Ananmahapong, Vichien (1967). Developing a Program of Lipreading in the Schools for the Deaf in Bangkok, Thailand: An Essay submitted to the office for Graduate School, Wayne State University, Detroit, Michigan, 39-41.

Corvalan-Vasquez, O. (1984). Training Policies, Discussion Paper No.8, Vocational Training for Disadvantaged Youth in Developing Countries, BIT, Geneva, 2-67.

Dakin, Susanna (1986). Bhopal : A personal view, a system view and recommendation for action, India, 1-14.

Foundation for Welfare of Mentally Retarded : WHO'S WHO Company Profile (1981), Thailand, 63-66.

Government House (1990). First National Assembly on Child Development Report, Amarin printing group, Bangkok, 226 pages.

Hegarty, Seamus (1990). The Education of Children and Young People with Disabilities : Principles and Practice. A Special Study for the World Conference on Education for All, UNESCO, Paris, 1-25.

Heylin, Michael (Feb 1985). Bhopal report, C&EN Special Issue, Chemical & Engineering News, C&EN, Washington , 14-26.

Hiranrasmı, Nadda (1981). Country Report of Thailand prepared for the Seminar on Special Education in Asia and the Pacific, UNESCO, Japan.

Impact Thailand Foundation (1989). Work Programme (1990-1994), Thailand. 7 pges.

Impact Thailand Foundation (1989). Impact: an overview, Thailand, 1-13.

Isrowuthikul, Santi (1986). Human Rights Education, Overall Picture of Human Rights in Thailand, Thai Development Newsletter, Thailand, 24-26.

Ministry of Education (1974). Education for Life and Society: A Report of the Committee for Establishing the Framework for Educational Reform, Thailand, Appendix 11/1.

Ministry of Education (1977). The National Education Scheme, Bangkok, Sassana Press. 18 pages.

Ministry of Education (1980). Department of General Education: Special Education Division. Case studies on procedures for the early detection of handicaps in children and ways of making families and teachers aware of the problems of special education, Bangkok, 27-43.

Ministry of Education (1981a). Department of General Education: Special Education Division, Education for the Blind in Thailand, Thailand, 1-8.

Ministry of Education (1981b). Department of General Education: Special Education Division, Special Education in Thailand, Thailand, 18 pages.

Ministry of Education (1986). Report to the 40th Session of the International Conference on Education, Geneva : Education Development in Thailand (1984-1986), 1-25.

Ministry of Education (1987). External Division, Ministry of Education, Thailand, 1-118

Ministry of Education (1989a). Department of General Education: Special Education Division, Special Education in Thailand, Thailand, 19 pages.

Ministry of Education (1989b). Office of the National Primary Education Commission, Primary Education in Thailand, Thailand, 41 pages.

Ministry of University Affairs (1984). Introducing Public and Private Institutions of Higher Education in Thailand, Prakaipruk Pub. Thailand, 13 pages.

Ministry of University Affairs (1988). General information, The Office of the Permanent Secretary Pub. Thailand, 154 pages.

Office of the National Education Commission (1979). National Education Commission, Thailand, 1-2.

Office fo the National Education Commission (1987a). Educational Demand and Opportunity for the Physically and Mentally Handicapped, Thailand, Thailand (Thai Language) 258 pages.

Office of the National Education Commission (1987b). Report on the Population Forecast of the Handicapped in Thailand, Thailand (Thai Language) 83 pages.

Office of the National Education Commission (1988a). Direction for Future Educational Development in Thailand, Office of the Prime Minister, Thailand, 7 pages.

Office of the National Education Commission (1988b). The System of Education in Thailand, Office of the Prime Minister, Thailand, 1-25.

National Youth Bureau (1986). Problems and Service Needs of Disabled Children and Youth in Thailand, Thailand, 1-4.

National Youth Bureau (1988). Prevention and Protection of Working Children and Abandoned Children, Second Asian Regional Conference on Child Abuse and Neglect : Country Reports and Case Studies, Thailand, 333-390.

National Youth Bureau (1989). Problems and service needs of Physically and Mentally Handicapped Children. Translated by Ms. Mee, Bangkok, Thailand, 1-14

OHI (1988). Operation Handicap Internationale, Presentation on the OHI rehabilitation program in Thailand, Thailand, 6 pages.

Polit, D.F. & Hungler, B.P. (1987). Nursing Research: Principles and Methods, Philadelphia: J.B. Lippincott.

S.O.S. Enfants Sans Frontieres (1981). Mission :S.O.S./E.S.P. Thaïlande; Protheses Africaines, Thailand, 9 pages.

Thai Government Interministerial Group : Thailand Country Programme Framework (1982-1986), Thailand, 31-33.

Thananmai, Patcharee Dr. and Santasombat, Yos Dr. (1987) Regional Research Seminar on Perspective on Asia's Future Reflection of World Problems and Future-Oriented Studies: A Survey of Development Policies and strategies Implemented in Thailand During the Past Ten Years, Thailand, 26-53.

UNDP (1989). United nations Development Programme Press release, Geneva, 7 June, 2 pages.

UNESCO, (1980). Handicapped Children: early detection, intervention and education, selected case studies from Argentina, Canada, Denmark, Jamaica, Jordan, Nigeria, Sri Lanka, Thailand and United Kingdom, Paris, 109-123.

UNESCO (1986). Research Project Proposal: Special Education - Thailand, Thailand, 1-4.

UNICEF (1974). Education for Life and Society. A Report of the Committee for Establishing the Framework for Educational Reform, Thailand, 2-3.

UNICEF, (1985). Disability in Asia. One in Ten. Vol. 4 Issues 1,2,3, New York, 2-10.

UNICEF/EAPRO (1988). Priority Areas for Future Action on Disability Prevention, causes for disabilities, UNICEF in the East Asia and Pakistan Region, New York.

UNICEF (1989). Children in Thailand, A Situation Analysis of children in Thailand, The United Nation Children's Fund, Thailand, 69 pages.

UNICEF (1990). Thailand Annual Report, Thailand, 71-72.

UNICEF/ UNEP (1990). The State of the Environment - 1990 : Children and the Environment, UNICEF, New York, UNEP, Kenya, 73 pages.

United Nations, (1989). ESCAP, Social Development Division, Economic & social Commission for the Asia & the Pacific, 1-19.

Wilson, Sir John (1989). UNDP, Governing Council, New York.

World Bank Operations Evaluation Study (1989): Operations Evaluation Department, Educational Development in Thailand, The Role of World Bank Lending, Washington D.C., 1-47.

World Bank (1990). Population and Human Resources Division, Country Department II, Asia Region, Thailand's Education Sector at a Crossroads: Selected Issues, Washington, D.C., 1-69.

World Conference on Education For All (1990a). Basic Education for All : A Mission Possible, Thailand, 1-36.

World Conference on Education For All (1990b). Meeting Basic Learning Needs: A New Vision for the 1990's, Thailand, 1-119.

World Conference on Education For All (1990c). Meeting Basic Learning Needs, World Declaration On Education For All and Framework For Action To Meet Basic Learning Needs, Thailand, 1-21.

World Conference on Education For All (1990d). Programme of Exhibits : Thailand, WCEFA, New York, p.5.

World Health Organization (1977). Environmental Health Criteria No. 3. Lead., Geneva.

World Health Organization (1980). Recommended health-based limits in occupational exposure to heavy metals. Technical Report Series No. 647, Geneva.

World Health Organization (1988). Urbanization and its implications for children health, WHO, England, 80 pages.