

The Study of Early Intervention for Children with Disabilities in the Thai-Lao Ethnic Group

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Abstract

This study is in-depth research of the early intervention model for children with disabilities in the Thai-Lao ethnic group in Surin Province, Thailand and in Champasak Region, Lao People's Democratic Republic. Factors of this early intervention model for children with disabilities in the Thai-Lao ethnic group were analyzed and an educational policy model of early intervention for children with disabilities, in accordance with the context of Thailand, was proposed. Study methodology combined qualitative and quantitative methods with ethnographic research, focus group, and statistical factor analysis. Results of the study revealed that there were four aspects in the intervention model for children with disabilities in the Thai-Lao ethnic group derived from ethnographic research as follows: 1) family aspect, 2) assistant from community, government organization and related units aspect, 3) early intervention aspect, and 4) media, facility and environmental aspect. This four-aspect guideline was administered by personnel of the Special Education Center. With the application of statistical factor analysis, results indicated that there were 10 factors in the early intervention model for children with disabilities in the Tai-Lao ethnic

group as follows: 1) personnel or organization in early intervention for 19 items, 2) collaboration of related organizations networking for 13 items, 3) social rights for 13 items, 4) educational rights for 9 items, 5) participation for 14 items, 6) support in rights service received for 8 items, 7) support in educational service for 7 items, 8) coordination and transferable service for 7 items, 9) government service received for 3 items, 10) occupational rights for 3 items. All of these factors in the intervention model for children with disabilities in the Tai-Lao ethnic group were used in a focus group process. It revealed that the proposed policy model, measurement and project of the intervention for children with disabilities in the context of Thailand should consist of the following: 1) encouraging thorough good quality educational services for children with disabilities in five measurements and three prominent projects, 2) cooperation of educational management for children with disabilities in six measurements and three prominent projects, 3) intensively promoting social support for children with disabilities in five measurements and three prominent projects, 4) supporting educational requirements for children with disabilities in their need to study in five measurements and three prominent projects,

5) participation of concerned organizations for children with disabilities in four measurements and three prominent projects, 6) intensively promoting children with disabilities to attain the same service as normal people in five measurements and three prominent projects, 7) intensively promoting thorough valid service in education for children with disabilities in five measurements and three prominent projects, 8) supporting cooperation between organizations networking for children with disabilities in four measurements and three prominent projects, 9) supporting quality services from government organizations in three measurements and two prominent projects, 10) thoroughly supporting disabilities and disability caregivers with sustainable occupations in five measurements and three prominent projects. The results of the study in policy, measurements and projects directly relate to special education organizations to recognize the needs, and valid necessities of children with disabilities. The capacity of children with disabilities should be developed by coordinating local authorities and relating special and important need services to each disabled child. This should be provided by developing each organization unit to be in the home and the services coming from parents.

Keywords: *Early Intervention, multiple children with disabilities, Thai-Lao ethnic group*

Introduction

Thai society has different perspectives on disabilities. In the medical field there is an attitude that “a disability is a problem”, e.g. blindness, the inability to move or use some organs or to communicate in daily life or to participate socially. Medically it is inferred that these abnormalities should be inhibited or eliminated from disabled people, therefore the goal is to treat or prevent disabilities. On the other hand, the concept of the social model is that “disability is not a problem”

because disabilities cannot be changed altogether, therefore people with disabilities should be able to live in society without being forced to adapt themselves to their environment or society. This viewpoint attempts to improve the potential of people with disabilities and to help them be self-reliant in the form of “Special Education”. In the past, the public education service did not provide enough services for disabled children and were unable to respond specifically and appropriately.

In the Constitution of the Kingdom of Thailand BE 2550, there are provisions for the protection of civil liberties, human dignity and rights of people with disabilities for a better quality of life and self-reliance. The National Economic and Social Development Plan Issue 10 (BE 2550-2554) aims to develop Thai people physically, mentally and occupationally, as well as provide them with skills and stability to enhance and strengthen their contribution to families, communities and society. This is consistent with the National Education statute BE 2542 and amendment (2nd insurance) BE 2545, which the second paragraph defines as “Education should arrange opportunities for people who have physical, intellectual, mental, social, or emotional impairments, communication or learning problems, physical disabilities, or lacking self-reliance or caregiver equal rights, to receive basic education of not less than twelve years provided by the state in a thorough and ‘quality without cost’ manner “ (สุรศักดิ์ วาจาสิทธิ์ และคณะ. 2546: 16) Therefore the government has a policy to provide education to the public throughout their school-age years and particularly to children with special needs who need different learning and support than normal children. This focuses on developing the child’s skills including physical, emotional, social and intellectual parts of a child. These children should be accepted by their families, communities and society.

At the Jomtien World Conference on

Education for All in 1990 at Jomtien, Chonburi in Thailand, Thailand, UNESCO and each member country announced education goals by the year 2015. Education should be appropriate for all students. There should be no distinction between disabled children, religion, ethnicity, hill tribe children, children in remote areas, disadvantaged children and other school aged children, so that everyone receives appropriate basic educational opportunities. This is the principle of 'education for all'. These are important ideas for education reform according to the National Education Act BE 2542 (วารสารวิชาการ. 2550: ออนไลน์)

At present, Thailand focuses on managed education for disabled people. In 2008, The Act of Education for Persons with Disabilities on 27th January 2008 provided a clear definition of disabled people, caregivers, managed education and related persons. The defined key of "Disabled people" means people who are limited in performing daily activities and social participation because of impaired sight, hearing, mobility, communication, mental, emotional, behavioral, intelligence, learning disabilities or other impairment aspects including difficulties. They have special educational needs that must be assisted in order for them to perform daily activities and participate socially (กิ่งเพชร ส่งเสริม. 2552 : 4)

The Ministry of Education has developed a continuous form of education for this group to suit their special needs and economic conditions in society. This requires skilled and experienced personnel to collaborate in the mobilization of schools and communities. They need to coordinate with each other regarding policies and procedures, as well as instructional management, to fully develop the effective potential of these children. It must be done with appropriate innovation, providing quality education to all disabled children (พะโยม ชินวงศ์. 2547 : 2). The Thai government policy provides for a thorough public education for

all school aged children, including children with special needs, which includes educational needs and special assistance. The focus is on developing the child's skills physically, emotionally, socially and intellectually to their fullest abilities, and being accepted by their families, communities and society.

Current management of education for people with disabilities consists of many types of special education: special schools for specific disabilities, students attending school, non-formal education for the disabled, vocational schools, higher education and the basic education commission which are responsible for the provision of basic education, including early childhood education, for children and young people throughout Thailand with equity, quality and an emphasis on disabled and disadvantaged children. It provides suitable special needs for individuals. Under the Office of Education in Special Education, Commission for Basic Education, management is characterized by two models which are 1. special schools for specific disabilities and 2. special education centers. They are responsible for the education management of children with disabilities from birth or found in the early intervention period, as well as preparing children with disabilities and arranging their basic education with caregivers, parents, the community and other organizations at provincial level, with quality and efficiency.

Although this has increasingly been extended to children with special needs, these children have not been developed in large numbers because there are problems with definition and a classification system as a tool to find children with special needs in society. Accessing services of various organizations for children with special needs has neither been completely explored nor offered to them. In addition, there is a lack of availability of qualified personnel in the education field regarding curriculum, instruction, form of educational administration, educational support,

budgeting, building and partnerships with the community to provide education for children with special needs in some groups such as disabled children, etc. (กิ่งเพชร ส่งเสริม. 2552 : 3)

A survey of people with disabilities by the Office for National Statistics in 2007 indicated that there were 1,871,860 people, representing approximately 2.9 % of the total population of 65,566,359 people. There was a slightly higher proportion of females 3.0% compared with males 2.7%. Mostly they are in the group aged over 75 years (33 %). Data from the Bureau of Inspection and evaluation, Ministry of Social Development and Human Security report on local social information in 2009, showed there were 329,113 disabled people locally. Data was classified as blind people 42,014, people with hearing impairments 42,931, physical or mobility disabilities 141,934, psychological and behavioral problems 26,904, intellectual or learning disabilities (mental retardation) 53,129, disabled people with more than one disability type 228,201, disabled people who have not been registered 19,265 or 22.64 %, people with disabilities who have not been rescued (both registered and unregistered) 62,528, representing 73.46%, people with disabilities who were homeless or without attentive care from their families 3,323 people or 3.90%.

The above problems are because of several reasons. The growth of children in their first 2-3 years of life is the most important period for their development. Research has found that this period is associated with the nervous system connection, modifying learning experiences that affect a child throughout his or her life. Each child has different changes in their nervous system depending on parenting and provision of support and stimulation in their environment from family, community, etc.

Although medical technology and personnel capabilities have developed so that there is more

chance of a child surviving, and early detection of various disorders, some children however, may still have risks of delayed growth and development, such as some babies born prematurely with brain lesions which cause muscle tension, children with Down syndrome having flaccid muscles, and so on. Children with developmental delays also have emotional and behavioral problems that cause their family to suffer from anxiety and uncertainty. This also becomes a child care issue. Abroad, people have seen the importance of developing children with developmental delays for many decades, and they have improved patient care with a holistic method and multidisciplinary teams.

The initial service will be available to assist and develop children at a young age and their families, providing education and occupational therapy to enhance developmental abilities, and promoting the relationship between family members. There are a variety of services focusing on parents and children. These services are available in a wide range of locations, for example, hospitals, at home, special education centers or a combination of these. Selected services should be based on the availability of family, location and other factors such as the type of the disease.

The first stage of early intervention focused on children with mental retardation, cerebral palsy and other syndromes such as Down syndrome. After that, it expanded to services for children with developmental delays such as preterm children, children who lacked oxygen at birth and children who had environmental risk factors such as mentally retarded parents. Early intervention services help promote the nervous system function. There is increasing evidence that early intervention has a great impact, not only on children with developmental problems, but also helps reduce the stress of parents and family members who can give them a better quality of life (โรงพยาบาลจุฬาลงกรณ์. 2553 : ออนไลน์)

Early intervention during the ages of 0 -7 years old provides assistance or rehabilitation from birth, and when disabilities are found it improves their essential skills for living. That means the potential development targets the needs of disabled children during infancy or childhood, through collaboration between parents and professionals who provide services, in order to encourage children towards their full potential, reduce the impact of disabilities, and prevent complications or other problems that occur as a result of disabilities (Somporn Warnsej 2006: 11). If children receive support and early intervention services as soon as they are found to have defects, it will prevent them from suffering from complications and other problems due to social neglect or not getting early intervention services. It helps families to reduce hopelessness, grief or suffering if they do not understand their children. During pre-school age, families must understand every aspect of their children while developing their children's abilities and potential.

Early intervention is a process which covers the needs and deficiency categories of children. It is a closely coordinated network of many people who work together. Therefore, it is necessary to work through a process or system that directly and correctly develops children with special needs (Ministry of Education. 1997: 12). Early intervention is divided into three stages. The first stage is the period before children join the program and receive services; delivery, searching and separation. In the second stage, children participate in the program; monitoring, Individualized Education Program (IEP) or Individualized Family Service Plan (IFSP) and teaching and evaluation process. The third stage is the end of the service where children are transferred to a new program and schooling is provided. Every process has a significant impact on many aspects of the child's development. It's necessary for children with special needs to receive early comprehensive intervention support

from multidisciplinary, medical, educational and social preparation services to improve their development, such as the ability to convey meaning, social skills, academic skills, and occupational skills. The target group of early intervention services begins with newborns to seven years old so that they are developed to their maximum potential.

Statistical data of people with disabilities in 2009 by the Office for National Statistics, Bureau of Information and Evaluation, Ministry of Social Development and Human Security was reported in 2009 at local community level by supporting services for children with special needs of all types at the special education center, Surin province as part of early intervention and rehabilitation services to children with disabilities at home. The survey in each district in Surin province showed that the majority of children with multiple disabilities had several impairments. For example, children with physical disabilities and health impairments overlapped with intellectual disabilities. Some parents, caregivers and children were unable to visit and receive early intervention services at the special education center, Surin province, while special education services were not providing services to all target groups of children with multiple disabilities. Some parents were poor and lacked necessary knowledge. They were unable to provide a learning process for their children and did not understand how to care for their children. Moreover, cooperation between the special education center in Surin for supporting children with multiple disabilities, and media and technology, was insufficient to provide a learning process for early intervention and preparation of a facility at home, while communities had no apparent system (ศูนย์การศึกษาพิเศษประจำจังหวัดสุรินทร์. 2552 : 2)

In the Educational Management of the Lao People's Democratic Republic, the aim of the study was "For persons to be good citizens, with a patriotic spirit and love of a democratic system,

have unity among the tribes, have scientific, natural and social knowledge, have the ability to establish their mission, love and cherish culture and beautiful traditions that are nationally unique, conserve resources and the environment, and relate internationally in a proper and progressive way (กมลจัดตั้งและพะนังงาน. 2002 : 5)

At present, educational management of the Lao People's Democratic Republic is not as consistent as it should be with the needs of the individual, society and the country. Even more so, when confronted with the prospect of social demand for education to prepare the nation for development and to keep pace with the world. There are educational problems of confusion and lack of progress because of the views or opinions of various important people. (ธรรมวงศ์ สุทธิยะวงศ์. 2547 : 1) However, district governments have the power to govern independently and to be self-funding within in their districts. Furthermore, education is under district management so this is similarly decentralized to district responsibility.

The aims and problems of education in Thailand and Lao PDR are very similar e.g. the quality of education not being good enough, problems of corruption, a lack of transparency, financial leakage and failure to comply with the law. It is possible that both countries have a similar civilization. There is an adjacent border of 1,730 km long with only the Mekong River separating them. This results in a homologous society, cultural context, traditions and language. The language that is spoken is very similar especially in the Northeast of Thailand. They and Laotians use the same Lao language so they are able to communicate effectively. Lao people have unique features including gentleness, kindness, generosity, love, harmony, unity and honesty (as in the rousing song "Honesty is the property of the patrician"). The Theravada Buddhist religion is the same in both countries and is about 90 percent of the population. It is confirmed by Franz Boaz that "ethnic

groups who have lived in similar topography and climate livelihood relate to the culture"

"There has been strong cooperation with each other with a hidden administrative planning reason of the Thai-Lao ethnography known as the "heat sib song kong sib si". It is an intellectual culture which crystallized into a strong civilization and which has been handed down as a long tradition which has caused the Western world to be interested in the East. By reversing this effect it causes people in Asia to be retrospective of their own culture. This is in accordance with the Office of the Education Council, explained by the following:

Cooperation between the two countries is longstanding. There is still a powerful concealed formal tradition of government that is interesting in the Thai-Lao ethnic group called "heat sib song kong sib si", which crystallized a culture by knowledge into a strong civilization that has never been defeated by anyone in the world, which has been passed down the generations for a long time, and has an Eastern perspective. It is different in that it does not view things from a Western perspective. That is consistent with the Office of the Education Council which explains that :

"The development of the whole person is based on the approach of the West. This development is inconsistent with Lao culture and causes numerous problems. Collective wisdom used in the country is of fundamental importance in development and educational reform. The cultural dimension is both necessary and important in development".

From a community survey in Lao PDR, the researcher found that most children had multiple disabilities such as physical and health impairments overlapping with cognitive impairments. Educational management for disabled children, from newborn and upwards, has not been assisted by the government. There is also a lack of parental understanding of child care support. Development of disabled children

should have the participation of all involved parties, especially parents. This is consistent with the concept of educational reform. Rung Keawdang explained that the educational management concept in education reform is a response to the community's needs and emphasize the role of parents and the community as they participate in the process of greater learning, particularly with disabled children. Educational management that is appropriate for current society must provide education for families by supporting and promoting the teaching model because most children live with their families rather than at a school. Therefore the family is the institution that affects the learning of disabled children the most, especially parents who are the first teachers providing all aspects of their children's education themselves

After realizing the importance of education regarding early intervention services for disabled children, a curriculum was established in some universities but they mostly only taught theory. It was found that there was very little research done on the results of an early intervention model situation. In-depth and factor analysis were not used as a guide for correct and appropriate child caring. In addition, the characteristics of the Lao people are unique; gentleness, kindness, generosity, love, harmony, unity and honesty as in the rousing song "Honesty is the property of the patrician". From the reasons above, the researchers would like to study how disabled children can be established as good people and how their teachers can be good models for them too. Therefore, the researchers are interested in studying intensely about factor analysis and guidance for the early intervention model for disabled children and confirm by group discussion process in special education centers. These centers are organisations which participate in, and support, early intervention services for children with disabilities as part of appropriate educational policy in the future.

Purposes of the research

Research aims

1. Study of an early intervention model for children with disabilities in the Thai-Lao ethnic group aimed at in-depth research in Surin Province, Thailand and in Champasak Region, Lao People's Democratic Republic.
2. Factors of the early intervention model for children with disabilities in the Thai-Lao ethnic group were analyzed
3. An educational policy model of early intervention for children with disabilities was proposed in accordance with the context of Thailand.

Methods

The scope of this research is to be carried out in accordance with the following objectives

1. Scope of the study population and area, in-depth study of an early intervention model for children with disabilities in the Thai-Lao ethnic group to make proposals for educational policy that is consistent with the context of Thailand and determine the extent of the population. The objectives of this study are

1.1 Population and sample the study of the early intervention model for children with disabilities in the Thai-Lao ethnic group separates research study into two parts. The first part is a case study that local wisdom is recognized to develop children with disabilities is created by Pupai Somsrila in Nongbualamphu Province. The second part is observation in the study areas of Surin Province, Thailand and Champasak Region, Lao People's Democratic Republic. The study population involved 20 disabled children in Thailand (Purposive Sampling) and 10 children in Laos (Snow Ball Sampling).

1.2 Population and sampling in factor analysis, includes personnel from special education centers in 19 provinces in the Northeast of Thailand with 500 people being randomly chosen from a

population of 708 people.

1.3 Proposal policy experts. The study of the early intervention model for children with disabilities in the Thai-Lao ethnic group uses group discussion consisting of experts in special education, representative district administration organization, faculty of teachers college from Loung Pra Bang, Laos, parent representatives, teachers, academic representatives. Numbers were specified as 13 people and distribution was similar in all groups.

2. Scope of contents

2.1 The early intervention model for children with disabilities in the Thai-Lao ethnic group consists of law-related education for children with disabilities, principles of education for children with disabilities, beliefs related to disability, and causes of disability which were divided into genetic and environmental diseases.

2.2 Factors of the early intervention model for children with disabilities in the Thai-Lao ethnic group, consisted of the four aspects of family, community assistance, organizations and government agencies; initial supports; media facilities and the environment.

2.3 Educational policy model of early intervention for children with disabilities, including policy measurement and project

Research methodology

There are three main objectives in the research of factor analysis:

1) to study the early intervention model for children with disabilities in the Thai-Lao ethnic group with in-depth research in Surin Province, Thailand and Champasak Region, Lao People's Democratic Republic.

2) to analyze factors of the early intervention model for children with disabilities in the Thai-Lao ethnic group in Thailand

3) to propose an educational policy to support the early intervention model for children with disabilities appropriate to the Thai context.

Researchers divided the study into three phases.

First step was to answer the first research objective of this study which was divided into four stages as follows:

1. A case study of local wisdom to develop children with disabilities was created by Pupai Somsrila in Nongbualamphu province for guiding the process of data collection in the target area.

2. In-depth interviews and observations of children with disabilities in Thailand were done among the Thai-Lao ethnic group, in Muang District, Surin Province, Thailand from a sample of 20 people.

3. In-depth interviews and observations of children with disabilities in Laos were done among the Thai-Lao ethnic group as a representative community in Champasak District because this community is culturally similar to Thailand, particularly as people use the Lao language to communicate 10 people.

4. A synthetic approach of the early intervention model for children with disabilities in the Thai-Lao ethnic group, the researcher used information from a case study of local wisdom to develop children with disabilities by in-depth interviews and observations in the children's families in Laos and studied relevant documents by selecting only "main words" to be questions 100 items then presented them to the committee including Professor Dr. Padung Arayawinyu, Suwan Sathid, Dr. Kannika Jinakun, Dr. Vasantchan Kakkeaw. They considered the consistency of the quantitative survey of statistical analysis for increasing the reliability, confirming the qualitative research results, and knowledge of the source of questions (about 100 items) in the questionnaire.

Step 2 was to answer the second objective in this research. The researchers analyzed the factors by setting the question items after they had studied the early intervention model for children with disabilities in the Thai-Lao ethnic group. The main words were extracted from in-depth

interviews. The data was synthesized and used to create the questionnaires. The classification of questions provided the researchers with more evidence in policy determination and measurements to support early intervention services for children with disabilities in the Thai context.

Step 3 was to answer the third objective. The researcher divided the research into three steps as follows, the selection of experts (13 people) who joined in group discussion and the researcher proposed policy measurement and projects

Results

The results were divided into three parts; an in-depth study to provide the early intervention model for children with disabilities in the Thai-Lao ethnic group in Surin Province, Thailand and in Champasak Region, Lao People's Democratic Republic, the factors' analysis results of the early intervention model for children with disabilities in the Thai-Lao ethnic group in Thailand and to study policy, measurement and projects of early intervention relating to an appropriate Thai context.

1. The results of the study revealed that there were four aspects in the intervention model for children with disabilities in the Thai-Lao ethnic group in Surin, Thailand and Champasak Region, Lao People's Democratic Republic as follows: 1) family aspect, 2) assistant from community, government organization and related units aspect, 3) early intervention aspect, and 4) media, facility and environmental aspect.

2. The results of the application of statistical factor analysis indicated that there were 10 factors in the early intervention model for children with disabilities in the Thai-Lao ethnic group as follows: 1) personnel or organization in early intervention for 19 items, 2) collaboration of related organizations networking for 13 items, 3) social rights for 13 items, 4) educational rights for 9 items, 5) participation for

14 items, 6) support in rights service received for 8 items, 7) support in educational service for 7 items, 8) coordination and transferal service for 7 items, 9) government service received for 3 items, 10) occupational rights for 3 items.

Policy study proposals of early intervention for children with disabilities in the context of Thailand should consist of the following: 1) encouraging a thorough good quality educational service for children with disabilities, 2) cooperation of educational management for children with disabilities, 3) intensively promoting social support for children with disabilities, 4) supporting educational requirements for children with disabilities in their need to study, 5) participation from concerned organizations for children with disabilities, 6) intensively promoting children with disabilities to attain the same service as normal people 7) intensively promoting thorough and valid service in education for children with disabilities 8) supporting cooperation between organizations networking for children with disabilities 9) supporting quality services from government organizations, 10) thoroughly supporting disabilities and disability caregivers with sustainable occupations.

Discussion

Study results of early intervention services for children with disabilities in the Thai-Lao ethnic group, factor analysis of the early intervention model of development for children with multiple disabilities, and policy proposal study were matched in four aspects: family aspect; assistant from community, government organization and related units aspect; early intervention aspect; and media, facility and environmental aspect. With the application of statistical factor analysis, results indicated that there were 10 factors as follows: personnel or organizations in early intervention, collaboration of related organizations working together, social rights, educational rights, participation, support in rights service received,

support of various thorough educational services, coordination and transferral service, quality government service received, thorough support of disabilities and caregivers of the disabled through sustainable occupations.

Benefits of the research

1. It provides guidelines to support early intervention services for children with disabilities in the Tai-Lao ethnic group.

2. It has shown the factors of early intervention services for children with disabilities in the Tai-Lao ethnic group in Thailand and proposes policy for appropriate early intervention services in the context of Thailand.

3. It has resulted in collaborative parents' networks, and community and related organizations participating in the correct and appropriate care of children with disabilities.

Suggestions for further research

Researchers have suggested the research results be used in four ways; a theoretical proposal, strategic suggestions, suggestions for

units to apply, suggestions for further research as follows:

1. Academic suggestions. From the results of this study of providing early intervention services for disabled children, there are 10 factors for success

2. Strategic suggestions. From the results of this research of early intervention services for children with disabilities, much will be achieved, if the 10 policies are used.

3. Suggestion for units to apply. From the results of this research, Government agencies and the private sector should bring policies, measurements and projects into the annual action plan, to provide knowledge and quality of services, and to implement it systematically with continuous supervision.

4. Suggestions for further research. Research should be conducted to confirm the 10 factors in other regions, should use policy proposals as a trial model, should study the linear correlation within these 10 factors, and the 10 factors should be applied.

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Thai Language

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