

SPECIAL EDUCATION IN THE BEDOUIN COMMUNITY IN ISRAEL'S NEGEV REGION.**Iris Manor-Binyamini***Ben Gurion University of the Negev*

The purpose of this article is to present an overview of the special education sector of the Bedouin Arab community in southern Israel. The paper opens with the study rationale and the importance of the subject. The review is based on a thematic analysis of content taken from diverse sources. The analysis showed five principle themes: (a) numerous Bedouin children with special needs and the ensuing social issues (b) Physical infrastructure (c) Skilled professional and multi-professional personnel (d) Methods, and adequate diagnostic, placement and interventional tools and (e) Additional assisting services.

The analysis shows vast and numerous deficiencies vis-à-vis extant conditions and needs. It shows the necessity of an overall interventional program which will address diverse needs. At the end of the article I will propose Recommendations for future action emerging from the study adapted to the context and needs of the community; their main thrust relates to identifying all the Bedouin children with special needs, developing a professional- parent-community dialogue adapted to the needs of the community and devoting more attention to research of the subject.

The aim of this article is to present an overview of the special education system of the Bedouin community in the Negev area in Israel and to contribute to the discussion on this issue.

Some scholars claim that human culture developed from nomadism, as individuals and groups moved from place to place in search of food and water. The term nomadism however, denotes not only an economic and social way of life, but also a human culture embodying material and spiritual elements specific to a given culture. Thus nomadism it is not necessarily a stage of development, but rather a social state that may exist before or even after resettlement, which may occur for many reasons including climate, social change or war.

Bedouin-Arab is a general name for all nomadic tribes in the Middle East and North Africa. For both Bedouins and anthropologists, the term refers to a lifestyle and value system, as well as to social status, origin and organization (Al-Krenawi, 2004). Although they are Moslems, Bedouin-Arabs differ from other Arab populations in the world because they inhabit deserts. Furthermore, this should not infer a unified, racial, ethnic, or national group with a homogenous way of life. Bedouin-Arab populations reside in Egypt, Israel, Jordan, Saudi Arabia, Syria and other countries (Barakat, 1993).

The Bedouin-Arabs in the Negev

The settlement of Bedouins is considerably more complicated in Israel compared to other Middle Eastern countries, as there are greater cultural differences between Israeli and Bedouin society. The Bedouin currently residing in the Negev live in the midst of a Western culture with services are provided and organized mainly by the Israeli government.

Three different information sources revealed incompatible data concerning the number of Bedouin in the Beer-Sheba region in 2002. According to the Central Bureau of Statistics and the Ministry of Interior, there are 138,000 Israeli-Bedouins in the Negev. Data provided by the Central Bureau of Statistics and the Regional Council of Unrecognized Villages indicated 159,000 Bedouins (Statistical Yearbook of the Bedouin in the Negev, 2004), half of whom reside in seven villages established by the government of Israel: Rahat, Tel-Sheva, Kseifa, Arara, Segev Shalom, Laqiya and Hura. The population in these villages is very young: 54% are under the age of 14, and 1.3% are over 65 (Gardos and Abu-Saad, 1999). The other members of the community live in unrecognized villages, known as the *Pzura* (scattered dwellings). Basic services and infrastructure in these villages are insufficient and they receive very few services from the State. Accurate and updated data on the number of Bedouins living in unrecognized villages are not available, hindering any attempt to estimate the number of Bedouin children with special needs or to draw a conclusive picture of their situation.

A review of the past 50 years shows that Bedouin society in the Negev has undergone significant changes and transformations (Ben-David, 1993; Fenster, 1995, 1999; Pessate-Schubert, 2005), first and foremost the transition from a traditional, nomadic to an urban society (Abu-Saad, 1999; Abu Rabia, 2000, Pessate-Schubert, 2005). The transition from nomadic life to permanent settlement involved not only changes in dwelling, but also an upheaval in areas of life such as schooling, higher education, the status of women, division of labor, economy and the labor market (Pessate-Schubert, 2005). A society undergoing such a transition must contend with varied challenges, and special education is only one example.

Research and ensuing policy issues related to special education in the Bedouin community in the Negev engender myriad dilemmas, among them: what type of special education is most appropriate for the Bedouin community? Are special education schools the desired solution? Is an education and rehabilitation campus that will offer a broad solution within the community preferable to adopting current policy in Israel that is similar to other countries and characterized by a prevalent trend towards integrating special needs pupils in regular educational frameworks.

The inclusion issue is particularly relevant and significant in the Bedouin community because, despite the trend towards inclusion, its success depends, among other things, on the support of different entities in the pupils' social and educational environment, including the teaching staff and the community. (Sindelar et al, 2006) Additional dilemmas or considerations pertain to the daily environmental factors, for example inadequate and irregular supply of water and electricity, that are of particular importance in the case of special needs children. In seeking to find solutions and formulate recommendations for special needs children in the Bedouin community in the Negev, the researcher must first contend with the fundamental issue of gathering accurate data in order to draw an accurate, comprehensive and up-to-date picture of special education in the Bedouin community in the Negev. The problems involved in data collection in this specific community will be addressed below.

Research Goals

The article has three primary objectives:

- To provide an up-to-date picture of special education in the Bedouin community in the Negev.
- To clarify the complexity of the issue and to facilitate policy-making and organization concerning special education in the Bedouin community.
- To define key domains from which decision-making and policy-planning can be derived, thus enabling professionals in support services (educators, school principals, psychologists and educational counselors) to plan pragmatic intervention programs

The research question: What are the main themes that emerge from analysis of diverse existing data with respect to special education in the Bedouin sector?

Method

The research is based on diverse sources. Government sources include – Ministry of Education internal reports and data, State Comptroller and public committee reports, Central Bureau of Statistics data, studies funded by government budgets State budget data and parliamentary questions and answers. Special reference will be made to documents focusing on the special education population in the Negev - a study conducted by the Brookdale Institute and the National Insurance Institute that showed significant gaps between Arab and Jewish society with respect to services for special needs children (Naon et al., 2000); the Margalit Committee report that examined the application of the Special Education Law (Mazawi, 1997), reports of public organizations – the Shatil report (2002), which reviewed the service setup for children with special needs in educational settings in Arab society; and a position paper written by the Parents committee for Arab Special Education in the Negev (2000). Despite the author's efforts to present a comprehensive picture it was impossible to examine certain aspects due to limited information on the issue.

Data analysis in this paper is based on content analysis: the researcher *immersed* herself in the data, identified key domains and throughout all research stages continued to examine the domains to ensure they provided an accurate and reliable account of the data sources. The content analysis process is comprised of several stages:

- (a) Familiarization with existing material: repeated reading and rereading of, and in-depth familiarization with the material; reading as an active process, i.e., reading while searching for patterns and their significance in the material. At this stage the themes remain abstract and vague.
- (b) Internal coding of data: at this stage a list of ideas already exists and internal codes have been generated. The process of creating codes is part of the analysis, organizing the material into groups of meaning. The coding presented in the article was data driven.

- (c) Search for themes: collecting codes for possible themes, collecting all relevant material on all potential themes. At this stage, a list of identified codes comprising all sources was comprised and an additional data analysis was performed. The focus is on themes rather than codes. This stage was accompanied by the preparation of a thematic map and at the same time thought was given to the relationships between codes, and between themes and their different levels.
- (d) Review themes: At this stage each theme was reviewed vis-à-vis coding and internal data, and a code map of the analysis was prepared.
- (e) Define and name themes: The analysis continued while examining whether the analysis fit each theme. At this stage the themes were validated using member-checking techniques (Lincoln & Guba, 1985). A research colleague and a research assistant read the material.

Results and Discussion

A portrayal and analysis of special education in the Bedouin sector in the Negev as it emerges from the thematic analysis process is presented below. The analysis generated five principal domains:

(a) The large number of Bedouin children with special needs and ensuing social issues; (b) physical infrastructure; (c) multi-professional skilled personnel; (d) methods and diagnostic, placement and interventional tools; (e) support services.

Theme A: A large number of Bedouin children with special needs and the ensuing social issues

The number of Bedouin children with special needs was assessed at 4,000. It is not possible to present precise data due to lack of accurate data about the number of Bedouins living in the Negev area. There is a significant gap between the number of Bedouin children in the Negev with special needs known to the welfare services, the Ministry of Education and the National Insurance Institute, and their actual number. Government organizations do not have accurate information about the Bedouin children and youth population in the Negev. Thus for example, if we rely on the data presented in a nationwide survey conducted in 2000 by the Brookdale Institute in collaboration with the National Insurance Institute, *Children with Special Needs – Evaluation of Needs and their Service Coverage* (Naon et al., 2000), it appears that in the Arab (not the Bedouin) sector the percentage of children with severe disabilities is 4.2% according to the following distribution: mental retardation – 0.8%, sensory disabilities (deafness and blindness) – 1.4%, severe physical disabilities (cerebral palsy, spina bifida, skeletal and muscular illness) – 2%. Extrapolating from this data that is based on statistics of the Arab population in northern Israel the following table presents the estimated number of special needs children in the Bedouin sector in the Negev by locality (Table 1). Furthermore, there is a gap between the data presented in Table 1 and the actual state of affairs in Bedouin Unrecognized Villages.

Table 1
Evaluation of needs in the Bedouin sector in the Negev

Extrapolation based on data from a nationwide survey by the Brookdale Institute and the National Insurance Institute						
Locality	No. of residents	No. of children under 18	Retarded children (%0.8)	Children with sensory disabilities (1.4%)	Children with physical disabilities (%2)	Total
Rahat	35,800	22,837	183	320	457	959
Tel Sheva	11,900	7,500	60	105	150	315
Arara	11,000	6,500	52	91	130	273
Kseifa	8,500	4,800	38	67	96	202
Hura	8,200	4,868	39	68	97	204
Laqiya	6,600	3,300	26	46	66	139
Segev Shalom	5,500	3,200	26	45	64	134
Unrecognized villages	70,000	42,000	336	588	840	1,764
Total	157,500	95,005	760	1,330	1,900	3,990

Table 2 serves to illustrate the difficulty involved in gathering accurate data about the Bedouin sector. In a meeting between the Welfare Services Department and representatives of children with special needs that took place on 15.06.2005, the deputy director of the southern region in the Ministry of Social Welfare in charge of the supervision and treatment of children and adults with autism presented data that did not correspond to the expected number of individuals with autism based on their expected percentage in the population. The table points to the problems involved in identifying, not to mention treating, special needs children in the Bedouin sector.

Table 2
The number of autistic children/adults in comparison with the expected number

<i>Locality</i>	Number of autistic children/youth in the village	Expected (in relation to number in the population)
Mytar (Jewish)	7	6
Lehavim (Jewish)	4	5
Segev Shalom (Bedouin)	1	5
Laqiya (Bedouin)	1	8
Rahat (Bedouin)	3	35
Data related to Kseifa, Hura and the unrecognized villages is missing	-	-

Any survey or analysis of special education in the Bedouin sector in the Negev cannot ignore elements and processes in the Bedouin community which create singular characteristics with respect to special needs children. The most notable characteristic is the extremely high percentage of children with severe disabilities, for example mental retardation. Diverse factors joined forces and created a reality with many special needs children. The contributing factors are: the tradition of marrying within the family and the tribe, including inter-relative marriage (Raz, Atar, Rodnay, Shoham-Vardi and Carmi, 2003); the acute socio-economic situation of numerous Bedouin families. Bedouin villages are characterized by lower than average family income, a high rate of unemployment and small commercial or industrial activity (Lithwick, 2002, p. 2). In light of limited sources of income and severe economic hardship, most families, which in most cases have many children, live on child welfare payments, and in the case of a disabled child in the family also receive disability benefits. There are also severe transportation and access problems, particularly in unrecognized villages. Due to very limited public transportation, the high cost of transportation services and restricted mobility imposed on women, mothers are forced to carry their disabled children several kilometers to the main road and to wait there for a passing car in order to reach a treatment center. This situation is exacerbated due to tradition which restricts women's movement within the confines of her residential area. Hence every trip she takes from the domain of the tribe mandates accompaniment by a male relative. Consequently, every visit she makes to the a child development clinic or center, which is usually situated in a locality far from her place of domicile, depends on the availability and willingness of her male relatives (The Forum for Advancing Children and Youth with Special Needs in the Bedouin Community, 2003). Another contributing factor is the share of large families with many children. Bedouin mothers must care for numerous children and find it difficult to be active partners in the rehabilitation process. In most cases mothers of special needs children must cope alone with the difficulties of raising and caring for these children.

From the professional perspective, one of the characteristics of intervention for children with special needs is the fact that it is a long-term process. Many parents find this to be highly demanding in terms of the continuous and long-term investment required in the therapeutic-rehabilitative process. Bedouin daily life which demands immediate solutions for existential problems does not easily adjust to coping with long-term objectives. Furthermore, data of the Child Development Center at the Soroka Medical Center in Beer Sheba shows that a high percentage of Bedouin children with disabilities do not receive proper rehabilitative treatment. Traditional patterns of child rearing are an additional characteristic of Bedouin society with ramifications for the treatment of children with special needs. Playing and mediation are the two most important principles of developmental intervention, however the arduous living conditions and the large number of children leave almost no time for Bedouin mothers to play with their children. (The Forum for Advancing Children and Youth with Special Needs in the Bedouin Community, 2003).

The particularly arduous environmental conditions are another significant characteristic: the living conditions in unrecognized villages - huts and tents with irregular electricity and running water, exacerbate the hardships involved in caring for special needs children and hinder the use of equipment and advanced technology such as wheelchairs, walkers, computers, alternative communications means and additional aids which can improve the quality of life of the children and their family.

An issue currently under discussion in countries pertains to children's rights. Bedouin society is in the process of transition from a traditional to a modern society, however, it still lacks sufficient awareness of children's rights in general, and the rights of the child with special needs in particular.

Theme B: physical infrastructure

In 1991 the State Comptroller report indicated that special education institutions for Bedouin children are virtually non-existent, posing significant difficulties to those in needs of such services. As of 2005, there were only three special education schools in the entire Bedouin sector, as illustrated in Table 3.

Table 3
Special education schools in the Bedouin sector in the Negev

Locality	School Population	Number of Classes
Kseiifa	Medium and severe retardation	10 classes
Hura	Medium and severe retardation	8 classes
Rahat	Medium and severe retardation	14 classes

The table shows that as of 2005 there were no schools for Bedouin children with diverse special needs such as autism or children with behavioral disorders. Not only do insufficient suitable frameworks have implications for special education children, it is important to note that the development of children in frameworks that are unsuited to their needs may actually be harmful to them. Thus, for example, the shortage of settings for children with severe behavioral disturbances may result in their referral to psychiatric centers instead of receiving proper care in the community or in a suitable day care center.

Theme C: multi-disciplinary professional personnel

The unique characteristics of the special education school require a staff of professionals who are experts in their field. Thus the staff of special education schools in the Jewish sector for example, is multidisciplinary and comprised of experts from various fields: medical experts such as neurologists and psychiatrists; paramedical professionals such as speech therapists and physical and occupational therapists; experts from therapeutic fields such as psychologists, therapists and social workers; and education professionals, including school principals, special education teachers, vocational teachers and assistants. According to the Margalit Committee report (Mazawi 1997) only 30% of all special needs children in the Bedouin community in the Negev receive disability benefits to which they are entitled from the National Insurance Institute and enjoy paramedical services, compared to 73% of the children in the Jewish sector. In several spheres there is a significant shortage of professionals, mainly in paramedical professions, such as physical, occupational and speech therapists. This situation creates inequality in the availability of paramedical services and curriculums adapted to the Bedouin sector. It is important to emphasize the fact that paramedical treatment constitutes a basic component of special education such that a shortage of professionals in these fields hinders care and development of special needs children. As a case in point: an insufficient number of qualified diagnosticians impedes necessary diagnostic activities, and due to a shortage of professionals in treatment fields the children do not receive physical/emotional/behavioral treatment. Furthermore, due to a scarcity of support personnel to assist the teaching staff, teachers face greater difficulties in the classroom. The following table (Table 4) lists the paramedical services available in the Bedouin special education field as of 2005.

Table 4
Types of paramedical services in special education available in the Bedouin sector for 2005.

Types of paramedical services	Locality
Speech therapists	3
Occupational therapists	1
Physical therapy	2
Art therapists	8

From: Abu-Ajaj (2005)

In order to illustrate the problem I chose to focus on one professional field: speech therapists. The speech therapist's role is to diagnose and treat pupils with hearing, communication, language and speech difficulties. Speech therapists work in collaboration with the multidisciplinary team in the educational framework in accordance with the educational goals defined for each pupil. As part of the treatment process, the speech therapist provides counseling and guidance to the professional team and

the parents to ensure that work on communication, language and hearing will be integrated into the pupil's daily routine.

As shown in Table 4, speech therapy is one of the fields with the most significant shortage of professionals. In 1998, Professor Ornoy, advisor to the Minister of Health, told the Committee on the Status of the Child, that there was a shortage of 259 speech therapists in the Arab education system (Ornoy, 1998). This shortage has myriad ramifications resulting in impeded education, rehabilitation and development of special needs children. The scarcity of speech therapists in the Arab sector is especially significant as it hinders the integration of special needs children in the Arab sector into Arab society, since children treated by a speech therapist that is not a native Arabic speaker do not learn the language of the social environment in which they live.

The Ben-Peretz Committee recognized the shortage of professionals in the Arab special education system and recommended adding 50 professionals that will be trained to treat complex disabilities (The Ministry of Education, 1998). An extensive search conducted as part of the research did not produce documentation indicating implementation of this recommendation.

The homeroom teacher is the key professional in the special education system. Homeroom teachers working with special needs children fill numerous and varied roles. In light of their specific training these teachers are responsible for: diagnosing the child; conducting and providing an evaluation and profile of the child, the latter indicating the pupil's strengths and weaknesses; preparing an Individual Education Plan (IEP) in collaboration with all professionals working with the child; treatment following completion of the diagnosis process and defining educational and treatment goals in accordance with the child's specific needs. Treatment by the homeroom teachers in special education frameworks may be provided individually or in a group or class setting, and/or in combination with an additional professional, for example a speech therapist that joins the treatment session or the class in the aim of complementing the treatment and tracking the pupil's progress. In addition to working with the pupils, homeroom teachers are the focal point for support personnel and parents, providing information and guidance concerning drilling and reinforcing the study material, and for expanding the educational team's knowledge regarding necessary adjustments with the specific educational environment. The homeroom teacher also works with parents as part of the trend towards involving parents in determining appropriate intervention methods and deciding on specific goals and objectives, also providing guidance to parents in implementing the decisions and recommendations in the home. Homeroom teachers are also those responsible for coordinating between all entities working with the pupil in the educational framework for the purpose of transmitting information, coordinating approaches and formulating priorities. The professional responsibilities delineated above require homeroom teachers to receive broad and high-quality training in the special education field. Furthermore their strategic role highlights the need for highly competent homeroom teachers able to successfully fill their myriad roles in special education school system.

Table 5 presents data regarding the qualification of special education teachers who are, as described above, key figures in working with the children as well as parents and other team members (The Ministry of Education, 1999, p. 51). The shortage of qualified and certified special education teachers as revealed in Table 5 does not allow for effective and professional work with populations contending with complex developmental disabilities.

Table 5
Special education teachers according to level of education

	Hebrew education	Arabic education
Academic	%55	%30
Uncertified	%5	%14

In addressing the nomadic characteristic of the Bedouin community in the Negev, the State Comptroller's report describes the American Indian Special Education program (RAISE), a community-based native teacher education program located on the Navajo reservation in Kayenta, Arizona. The RAISE program is a pre-service teacher preparation partnership program between Northern Arizona University and schools. The program qualifies students to teach in impoverished rural and remote areas and to work in inclusive schools with culturally and linguistically diverse populations. The program is highly contextualized to the needs and strengths of the community. (Heimbecker et al., 2002).

Theme D: insufficient methods and diagnostic, placement and interventional tools

Arab diagnostic and therapeutic frameworks in Israel are not equipped, systemically or professionally, to provide special needs children with equal opportunities for realizing their full-fledged capabilities in their own language, while participating in the cultural and social life of their environment and community. A reference to the issue as it relates to the Bedouin sector can be found in the response of

the former Minister of Education, Mr. Yossi Sarid (1999), to a parliamentary question submitted by Arab Knesset Member Barakkeh. His reply clearly shows that Arab students have been over-represented for many years among children with mental retardation. On the other hand, in his response the Minister noted that only a negligible number of individuals diagnosed with learning disabilities among Arab students, as well as very few children diagnosed with autism, psychological disorders, behavioral disorders, language problems or developmental problems among Arab children. This situation is the result of a shortage of diagnostic services in the Arab sector, in addition to diagnostic tools that, when available, are not adapted to the specific needs of this sector. (Consequently, many children do not enjoy services to which they are entitled, and in some cases are labeled erroneously and as a result must contend with both social and psychological hardships. Due to insufficient valid and reliable diagnostic tools, in particular didactic tests adapted to the needs of Arab schools, inadequate diagnosis may lead to alienation and cause social-cultural harm.

The curriculum in Arab special education is often based on the translation of the corresponding Hebrew curriculum. It is important to understand that the social-cultural context that affects the overall relationship of the environment towards special needs children is fundamentally different in Jewish and Arab societies. Consequently, translation of an intervention program in and of itself is insufficient. There is a need to modify these programs and adapt them to the community and society in which the special needs children reside. In 1999 the Ben-Peretz Committee recommended allocating three teaching positions in the curriculum department responsible for preparing books and learning materials appropriate for the special education population in the Arab sector (The Ministry of Education, 1998, p. 2). Documentation indicating implementation of this recommendation was not found.

Theme E: support services

Analysis of assorted data sources shows that despite the far-reaching needs of the Bedouin population in the Negev, there is a gap in special education support services between the Jewish and Bedouin sectors:

- Transportation services – the Safe Transportation for Disabled Children stipulates that the local authority is obliged to ensure special needs children transportation to and from the educational institution, according to their needs, including appropriate accompaniment and suitable safety measures. Obligatory provisions and safety procedures exist, however in relation to special education in the Arab sector these provisions, in most cases, are not enforced. Consequently, special needs children in this sector face potential severe physical injury (Shatil, 2002).
- Non-profit organizations and private services – in addition to the government of Israel, voluntary organizations are active in the field of special education in general and with respect to specific populations in particular. Most of these organizations were established by parents in order to improve the level of educational and rehabilitative services provided to their children. Some organizations receive funds from the government to purchase services, in addition to varied support services from organizations such as Akim – a non-profit organization for advancing the mentally handicapped; Alut – a national organization for autistic children, Shema – an organization for educating and rehabilitating hearing-disabled children, etc. The voluntary and non-profit organizations provide services that are not supplied, or are only partially supplied, by government entities. Thus, for example, Micha provides educational services to hearing-disabled children aged 0-3, who are not entitled to receive services from the Ministry of Education. The majority of organizations play a significant role in enhancing public awareness to the needs of special needs groups and lead or participate in legal and public efforts aimed at ensuring the rights of special needs children. Wisel et al., (2000, p. 15) found that *despite the importance of the organizations and non-profit organizations they are for the most part non-active in the Arab sector.*

Among the active organizations worthy of mention in the Arab sector are Bizchut, Adalah, Shatil, as well as the action committee for Arab special education in the Negev. The majority of these organizations are non-profit organizations with heavy parent involvement. As such they constitute a collaborative framework between professionals and parents, enabling the latter to take responsibility, develop leadership and lead significant change processes. Parent leadership is important because great expectations and cultural diversity (Turnbull & Turnbull, 2001) cannot be realized if families do not participate in the future planning dialog (Callicott, 2003).

Summary and Recommendations

The analysis presented shows extensive gaps between the needs of special needs children in the Bedouin sector in the Negev and the availability and provision of these needs. The cardinal problem pertains to the rights of the Bedouin special needs children as a result of a policy incompatible with current needs. It is worthy of note that discrimination against minorities in the provision of services for special education is prohibited according to international law, and constitutes a patent breach of the UN convention against discrimination in education. The UN Convention of the Rights of the Child, to which the State of Israel is a signatory, guarantees children who are minorities the right to use their own language and observe their religion. The Special Education Law in Israel does not ground the obligation of observing the cultural rights of the Bedouin minority, such as the right of children to receive services in their own language and appropriate to their cultural needs (education that deals with Arab heritage, the Moslem holy days, etc.). Herr (2000), one of the senior counsels dealing in the rights of the disabled, leveled criticism at Israeli law when comparing it to the corresponding US law, and claimed that *the Israeli law for special education is too generalized*. The right of children to receive *educational services* and *accompanying services* is grounded in law, however this vagueness impedes suing for the provision of services. It is worthy of mention that the Director General's circulars, which constitute the *implementation arm* of the law, are for the most part only written in Hebrew.

The findings presented here clearly indicate the need for a comprehensive intervention program aimed at narrowing the gaps and ensuring affirmative action in special education in the Bedouin sector. Affirmative action is vital due to the wide gap in the rate of services developed for and provided to special education between the Arab and Jewish education system, in light of economic hardships facing parents in Bedouin society and Arab local government, as well as financial and other difficulties of non-government organizations dealing with special education in the Arab sector in general and in Bedouin society in particular.

These problems and issues are corroborated by recommendations proposed by the Margalit Committee (2000, Recommendation b,1). *The Committee recommends taking affirmative action in allocating resources and developing services for underprivileged social groups in the field of special education in the Arab education system in general, and in the education system serving Bedouin villages in particular. This affirmative action policy will be reflected in allocating the required resources for developing an infrastructure for training professional personnel in the relevant spheres, in order to narrow gaps and ensure equality and equity in access to special education services.*

The issue requires a solution based on pooling resources and services, integrating education and rehabilitation into the framework of the community and addressing children of all ages, in order to ensure their continued advancement in all areas of life. An urgent overall systemic effort is also required in order to develop a qualitative community infrastructure in the special education field in the Bedouin sector in the Negev.

The greatest challenge is to implement intervention programs based on collaboration between professionals and parent. Such collaboration will be predicated on a dialog enabling a shared definition of pupils' needs as well as joint decision-making and implementation.

Recommendations for future action emerging from the study:

- The analysis presented underscores the need to identify and diagnose all Bedouin special needs children in the Negev. Such a screening project must be implemented in collaboration with all relevant entities – health, welfare and education. Identifying and diagnosing all special needs children in the community will allow for an exchange of information between the different government authorities in the aim of exercising the children's rights.
- It is recommended to create a collaborative space for experts working with special needs children in existing special education frameworks, a space in which a dialogue will be conducted leading to the development of diagnostic, teaching and treatment programs adapted to the unique needs of special needs children in the Bedouin community in the Negev.
- *Parents from culturally diverse backgrounds may not share similar expectations about teaching, learning, or parenting (Manning & Lee, 2001). The Person-Centered Planning model (PCP) is one way to facilitate participation without articulating a single agenda for schools, families and individuals. This model can facilitate reform and restructuring of systems that are not easily accessible, flexible, or responsive to the needs of individuals with significant disabilities. In this way, PCP can also be a process that is sensitive to cultural and language differences.*
- *From the research perspective, the Bedouins are a sub-group of Arab society that deserves special attention. Accordingly, consideration should be given to establishing a*

center for applicative research on the subject of children and youth with special needs in the Bedouin community in the Negev.

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