THE DEVELOPMENT OF SPECIAL EDUCATION SERVICES IN THAILAND

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The government of Thailand has historically provided a limited number of educational opportunities for individuals with disabilities but has recently demonstrated movement toward a more comprehensive educational system. The educational policy has not only begun to expand the incorporation of services for children with disabilities but has also introduced efforts to include children with disabilities in regular education classrooms. This paper examines the development of the education system in Thailand with an emphasis on the development of special education programs.

Thailand is a Southeast Asian country bordering the Andaman Sea, the Gulf of Thailand, Myanmar, Laos, Cambodia, and the northern tip of Malaysia. Until 1939, the country was known as Siam, with the current formal name being the Kingdom of Thailand. Thailand is comprised of 76 provinces that are ruled by a constitutional monarchy. Thailand is the only Southeast Asian country never to have been overtaken by a European power. The economy of Thailand has demonstrated a slow but full recovery from the 1997-1998 Asian Financial Crisis, although the economy has been negatively impacted by a tsunami which occurred in December 2004. The tsunami resulted in approximately 8,500 deaths and substantial property destruction in the southern provinces.

The existence of special education services within the country has been evident for several years but is currently still expanding and attempting to train qualified individuals to provide educational services. The culture of Thailand has historically promoted mixed feelings regarding children with disabilities. The Buddhist religion in Thailand considers good and bad fortune in a current life to be based upon the attainment of merit through actions considered good in a previous life. This traditionally promotes a belief that knowledge is associated with age, position and current status which is bestowed because of actions in a previous life.

Attitudes toward children with disabilities may range from some Chinese-Thai considering a child with Down Syndrome to a be a sign of good luck to parents of a child with a disability considering themselves to be punished for their actions in a previous life (Fulk, Swerdlik, Kosuwan, 2002). Other factors that have impacted attitude toward disability are level of education, socioeconomic status, and rural versus urban geographic location. In addition, because Asian culture typically does not value individualization, education in Thailand was not designed to produce independent thinkers or support for student-centered learning. (MOE, 1996; ONEC, 1997a, 1998a). Educational reform in Thailand has struggled to keep pace with rapidly changing demands that may sometimes require changing cultural paradigms regarding perceptions of children with disabilities (Fullan, 1993; Hallinger, 1998a, 1998b).

Over the past ten years, the educational policy within Thailand has addressed issues regarding children with disabilities. The educational policy in Thailand appears to have rather quickly moved to a more inclusive practice toward individuals with disabilities. The rather rapid pace at which these policies have been implemented appear to have resulted in some difficulties associated with the provision of qualified educators, provision of appropriate services, and overcoming outdated practices. The purpose of this paper is to examine the development of
special education practices in Thailand along with the barriers to progress experienced with the development of appropriate services for children with disabilities.

**Demographics of Thailand**

The population of Thailand is estimated at over 64 million with approximately 5 million at or between 10 and 14 years of age and approximately 5 million at or between 15 and 19 years of age (Institute for Population and Social Research, 2005). Within the age range of 0 to 64 years, the distribution of males to females is very closely matched. The infant mortality rate is reported at 20.48 deaths per 1,000 live births. Based on estimates from 2003, the prevalence of adults infected with HIV/AIDS was 1.5%. Archavanitkul (1999) reported the approximate number of child prostitutes working within Thailand during 1997 at 20% of the estimated 90,916 prostitutes. The literacy rate as defined by those over the age of 15 years who could read is reported at approximately 92%. Approximately 10% of the population is considered to be below the poverty line.

**Overview of educational system and reforms**

The history of education in Thailand initially developed to support religious and royal household objectives. Education was provided by Buddhist monks to boys in an effort to sustain the religious functions of Buddhism. Education was provided to boys from royal households and noble families in order to train individuals to govern various provinces within the country. In an effort to increase the pool of trained individuals to work in governmental affairs, the 1898 Education Proclamation made education more available to the general public with academic and vocational education paths. Education in Thailand has a strong tradition of teacher-directed, rote learning, while recent policy change has focused toward more student-centered learning approaches. This has resulted in implementation difficulties due to resistance by educators to accept or change teaching strategies as well as modify strategies to meets the needs of children with disabilities. Additional educational reform has continued with a primary focus on expanding educational opportunities, implementing compulsory education, and including children with disabilities (refer to Table 1).

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1898</td>
<td>Education Proclamation</td>
<td>Education made more available to general public with academic and vocational tracks</td>
</tr>
<tr>
<td>1932</td>
<td>Educational Plan</td>
<td>First formal education plan included four years elementary and eight years secondary education</td>
</tr>
<tr>
<td>1951</td>
<td>Educational Plan</td>
<td>Programs for the deaf started by the government</td>
</tr>
<tr>
<td>1960</td>
<td>Educational Plan</td>
<td>Development of teacher training institutes to meet demands of extended compulsory education and population growth</td>
</tr>
<tr>
<td>1992</td>
<td>7th National Plan for Social and Economic Development</td>
<td>Raised compulsory education level to grade nine; children with disabilities were exempt from compulsory education</td>
</tr>
<tr>
<td>1995</td>
<td>Education for All</td>
<td>Intended to ensure that no child should be discriminated from attending school because of physical, mental, social, or economic reasons</td>
</tr>
<tr>
<td>1999</td>
<td>Towards the New Century of Learning</td>
<td>Mandated that all schools provide children with disabilities the opportunity to be included in regular education programs.</td>
</tr>
</tbody>
</table>

Source: Adapted from Amatyakul, Tammasaeng, & Punong-ong, 1995; National Education Act, 1999.

Special education programs for the deaf were started in Thailand in 1951 by the Thai government and additional programs were developed in the 1960’s. A movement toward the
The provision of educational rights to individuals with disabilities was implemented in 1991 with The Rehabilitation of Disabled Persons Act of Thailand. This act stated that individuals with disabilities have the right to pursue the same opportunities as those without disabilities. Although efforts have been made within Thailand to provide educational opportunities for some children with disabilities, the movement toward ensuring nondiscriminatory educational practices was enacted as recently as 1995. As of 1999, the government mandated a movement toward inclusion of students with disabilities in regular education programs. The government ministries from which the disabled receive support and services are as follows: Ministry of Communication, the Ministry of the Interior, The Ministry of Public Health, the Ministry of Labor and Social Welfare, and the Ministry of Education.

The National Statistics Office (1991) provided information on the prevalence of disabilities within the country. A survey estimated the number of people with disabilities to be 1,057,000 (1.8% of the total population of 57,046,500). Disabilities were most prevalent among people 60 years of age and older, followed by teenagers and adolescents. Traffic accidents were said to be among the major causes of disabilities among teenagers and adolescents. The most common types of disabilities were limb disability, hearing impairments, and intellectual disability. The northeast and north regions were considered to have the highest prevalence of people with disabilities representing 38.6% and 23.5% respectively. These two regions are also the most populated and have the highest incidence of poverty. These two regions have high populations of refugees from neighboring countries Myanmar and Laos. A study by Chitchupong (2004), reported approximately 2.9 million children in Thailand were considered poor with half of this population located in the Northeastern region of Thailand. This study also reported that approximately 7.9% of children from 6 to 14 years of age and 48.7% of those from age 15 to 21 years of age did not have formal schooling. The reasons for the lack of formal schooling included a lack of resources, entering the labor force to provide additional income for their family, and sickness or disability.

Table 2:

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Number of Disabled</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>19.6%</td>
<td>207,172</td>
<td>Limb disability</td>
</tr>
<tr>
<td>13.2%</td>
<td>139,524</td>
<td>Hearing impairment</td>
</tr>
<tr>
<td>10%</td>
<td>105,700</td>
<td>Intellectual disability</td>
</tr>
<tr>
<td>5.4%</td>
<td>57,078</td>
<td>Speech impairment</td>
</tr>
<tr>
<td>1.9%</td>
<td>20,083</td>
<td>Visual impairment</td>
</tr>
</tbody>
</table>


Difficulties with educational reform
The difficulties with educational reform within Thailand appear to stem primarily from the implementation of special education services rather than the introduction of educational policy. During the 1990’s, Thailand introduced several educational policies addressing special education services and has promoted education for all individuals regardless of disability. Although educational policy has changed quickly, the actual implementation of services has several barriers to overcome. The provision of training to teacher of students with disabilities has been limited and many teachers feel unprepared to teach students with disabilities. The allocation of resources to support the development of training programs for teachers has been
less than adequate to provide well prepared educators. The Ministry of Education proclaimed after the first year of its education reform law that 60% of the reforms had been implemented in the first year (Hallinger, 1998a). Although these claims seem to show significant progress, the implementation of new educational policies have not been supported but have rather been monitored by supervisors using checklists to look for evidence of policy implementation (Hallinger, Chantarapanya, Sriboonma, & Kantamara, 2000). A study by Chitchupong (2004) reported that although the government had developed programs to provide scholarships, loans, free food, and nutrition supplements, very few children actually received any of these resources. A large number of children were reported to enter into the labor force in order to provide additional income to their family.

Summary and Conclusion
The Thai monarch has expressed a concern to provide education for those with disabilities. It appears that governmental policies within Thailand have quickly moved toward less discriminatory education practices and are recognizing the need to educate all citizens regardless of disability. These policies promote more inclusive practices for children with disabilities in regular education programs as well as specialized schools providing services to children with specific disabilities. At present, the policy appears to have had different levels of implementation depending on the evaluation processes used and the individuals reporting on progress. Because Thailand is ruled by a constitutional monarchy, the tendency to criticize the government or the monarchy is greatly impeded due to fear of possible governmental reproof. Additionally, the country also struggles with limited facilities outside major cities, high poverty rates, and resistance to change in long-standing traditions. With these difficulties to overcome, the country has made movements toward improving the quality of special education services, but needs to continue efforts to expand availability of services and ensure implementation of governmental policies.

Some general strategies that could be beneficial toward the improvement of special education services could involve the development of financial incentives for special educators willing to provide services within rural/disadvantaged areas of the country. These incentives would also need to be supported by funding to improve on the facilities within these rural areas which many times are extremely limited on such as textbooks and writing materials. Another strategy which might be beneficial toward overcoming resistance to methods of providing special education services, such as movements toward inclusion of special education students in regular education classes, could involve increased in-service for all teachers and training on collaborative techniques between special and regular education teachers. Additionally, mentoring programs could be advantageous toward retaining newly certified special educators.

Criticism can be directed toward the effectiveness of special education services and the availability of these services, but the opportunities for children with disabilities does appear to have improved substantially over the past 20 years. The level and quality of special education services in Thailand have been well addressed in government policy and seem to be progressing toward the actualization of these policies. It would seem that progress would continue to be slow towards improving special education services within the country until both government policy, provision of funding, and attitudinal change can take place.

References


