

Country Report

1. Name of Training Course: THE GROUP TRAINING COURSE IN MENTAL RETARDATION IN FY 1995

2. Name of Participant: Mrs. Pigun Leosiripong

3. Name of Country: Thailand

4. Name of Your Organization: Kavila Anukul School
Special Education Division
General Education Department
Ministry of Education

5. Organization Chart:

Participants are requested to outline their function of the organization and their own job.

Kavila Anukul School is responsible in educating the MR from kindergarten to secondary level. As a model school, we provide the basic knowledge and understanding about mental retardation for parents and other people, develop curriculum and instruction, produce teaching medias and urge other special education school to make and use them, and forward the students to further education or to proper vocation

Besides having taken part in all of the stated functions, I have also been in charge of some other assignments such as training newly recruited personnel of the school and of other schools how to teach the MR, individual planning, and producing teaching medias. As a demonstrated school for colleges and universities from which the students come to have their teaching experiences, I have always been supervisor for those students.

Besides the stated roles, I am also responsible in collecting

the data of the MR in schools. As the Provincial Special Education Center, the data are used to guide the parents in taking care of their children at home and to send the students for medical cares or rehabilitation.

6. The current situation and trends in rehabilitation services.

Participants are requested to outline the status of educational, welfare/social and medical systems and services, financial aids and voluntary activities for people with mental retardation in their own country.

Education for the MR is enacted to be provided in both special education schools and general schools. Now there are one or more special education schools in every educational region and 25 schools are planned to be established in each of the following years until they are available in all provinces. Inclusive education is also provided, beginning in the capital and extending to the up country. Primary education offices in many provinces have urged their schools to provide inclusive education for the MR in their schools. The offices also provide materials and organize training programmes for their teachers.

Social welfare and medical cares for the MR begin in one hospital in Bangkok where psychologists, social-workers, physical therapists, and occupational therapists were main personnel. Nowadays, several hospitals in many cities have provided various types of services in therapy and rehabilitation, with supports from several foundations. After the Rehabilitation for the Handicapped Act was delivered, the handicapped people have been registered and they are allowed to have free medical cares in enlisted hospitals; they can attend vocational trainings or guidances; they can have counselling and economic assistances. They are expected to have further welfare in the future in order to help them live happily according to their ability.

The Handicapped Association provides various types of loans for the handicapped. For the MR, their representatives have to take care of this for them. The provincial welfare office receives from the government the fund for the MR when requested.

Organizations for the handicapped invite interested people to be volunteers in running programmes to rehabilitate and develop the MR's abilities, such as Art Day Camp, Recreation Camp, the handicap meetings etc. Foundations for the MR, and adult clubs or foundations are established in special education schools to cooperate with teachers in educating and various activities.

7. Participants are requested to state their own philosophy on rehabilitation services for people with mental retardation and problems to solve when making the philosophy an actuality.

The ability of the MR can be developed until they are less dependent in their families and society. The development should be done immediately as soon as their handicap is identified, and early intervention is a suitable system for this. Formal education is another important process that can help the MR.

In making the philosophy an actuality, there are still many problems. Early intervention is still unrecognized by most of the schools and only a small number of special education schools have been established. These few special education schools can admit only MR students who are able to help themselves in toilets and dressing or are at least 7 years old. Although there are early intervention centers in some colleges, hospitals and foundations in major cities, they are still inadequate. To solve the problems, parents of the MR in some cities established private centers for the MR and requested the government to provide inclusive education in general schools system and to declare the Rehabilitation for the Handicapped Act which was delivered in November 1994.

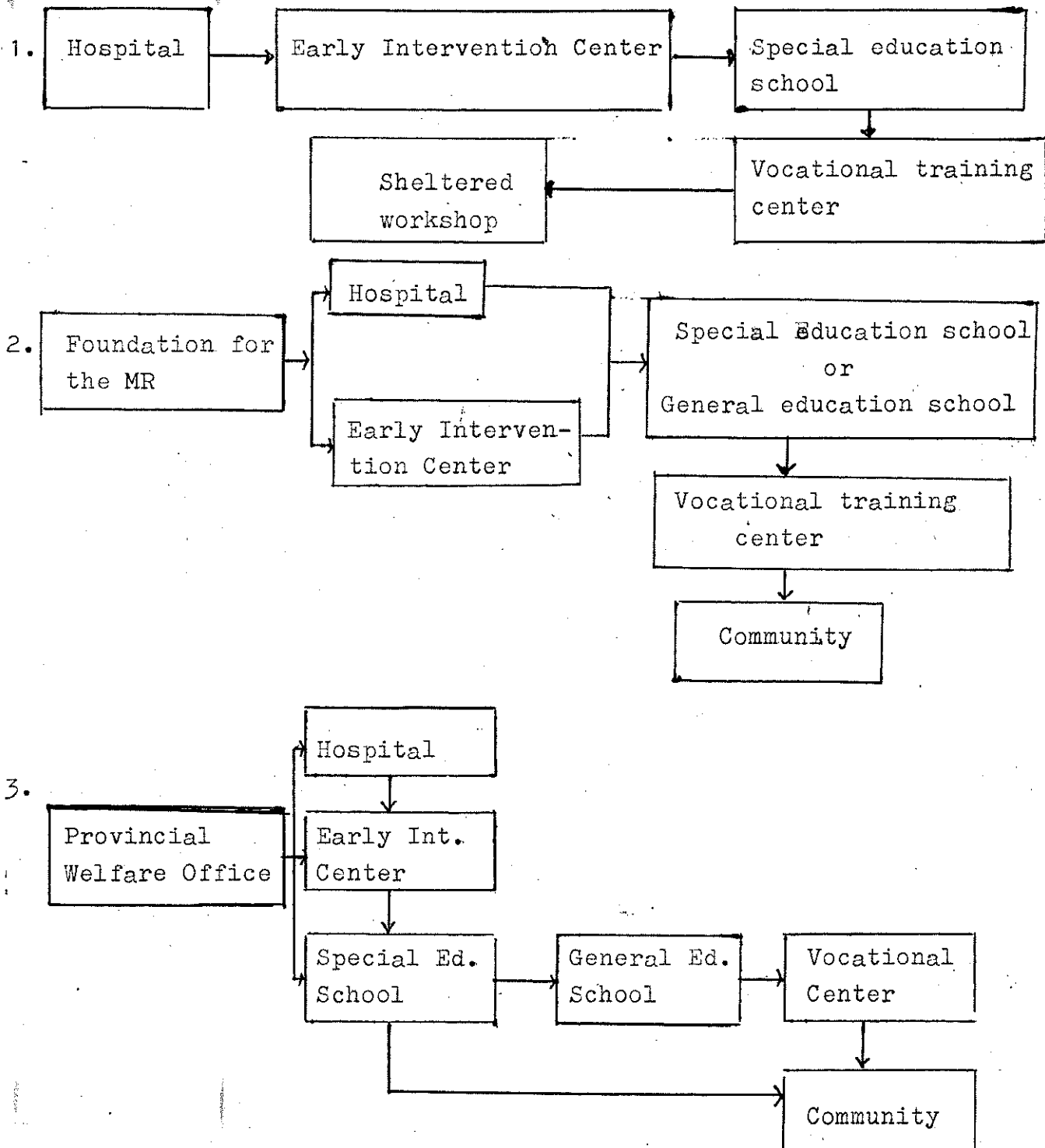
I have taken part in early intervention by guiding the parents to operate home training programmes for their children, providing some materials, running the self-help and social skills, and forwarding the students in waiting list to Children Promotion and Development Center.

8. Participants are requested to describe community-based rehabilitation programmes provided for people with mental retardation in their countries, if any.

In Thailand, CBR programmes are provided in centers by volunteers who assess the ability of the MR and run the programmes with helps from parents in training and making aids to be used with the children during the volunteers' training. The trainings of the target groups are scheduled at various places in the village in which the other parents can observe and learn how to rehabilitate the children. CBR programmes in the Northeast are more successful than those in other regions, and most of the fund for these programmes are obtained from foreign NGO's.

9. Service delivery system and relevant laws and regulations.

Participants are requested to draw an organization chart or flow chart (starting from sections at the lowest level) for every agency in their country which is responsible for service delivery systems.



Notes: It is advisable to use audio visual aids such as films, slides, pictures, etc., when presenting the country report.