Early Intervention for Young Children with Special Needs in Taiwan

Abstract

The purpose of this study was intended to investigate the current system of early intervention in Taiwan in order to understand the problems encountered and provide the coping strategies for improving the services. Documentary analysis and phone interview were employed in the study to collect the research data needed. The sample of phone interview consisted of 18 professionals from 14 municipalities and counties (cities) selected by the purposive-stratified basis. The self-developed semi-structured Early Intervention Questionnaire was used to collect the phone interview data. The modified analysis and the constant comparative method were adopted to treat the data.

The results of the study revealed that the Early Intervention Service Implementation Program for Children with Developmental Delays is the policy foundation for the finding, assessment and intervention of young children with special needs in Taiwan. The Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays and the Center of Team Evaluation for Children's Development in all municipalities and counties (cities) seem to be the core framework for early intervention. The current early intervention generally seems to have such functional problems as shortage of funding and professional manpower, poor coordination among social welfare, health and education agencies and organizations, low rate of notification for screening (especially for the ages 0-3), weak parental willingness to receive services, lack of assessment and intervention resources, as well as the reliability and validity problems in assessment instruments. Some coping strategies in accordance with these problems were also recommended in the study.

Key words: Early intervention, young children, Taiwan

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Introduction

In Taiwan, The earliest program for young children with special needs was the one established in Tainan School for the hearing impaired in 1968. Taipei School for the hearing impaired also offered a similar program from 1980 (Social Education Division of Ministry of Education, 1981). These are the earlier endeavors for early intervention in Taiwan. They are characterized by an experimental nature. However, a dramatic change, like many other countries around the world (Odom, Hanson, Blackman, & Kaul, 2003), has happened since various laws related to the welfare, education, and health services for people with disabilities, such as the Physically and Mentally Disabled Citizens Protection Act, the Special Education Act, as well as the Children and Adolescents welfare Act, have been enacted from 1980. These acts were also revised for several times in order to provide viable services for persons with disabilities. The most significant changes seem to extend upward and downward the ages (after age 15 and before 6) eligible for receiving education and services.

Interest in early intervention has been increasing since the late 1990s in Taiwan as well as many counties (Guralnick, 2005). Thanks to the importance of early intervention, the government has gradually put forth some substantiated measures to command the early intervention needs of young children (the ages from birth to 6) with developmental delays or disabilities since 1995. However, there is no study found in literature on describing the condition of early intervention for young children with special needs in Taiwan. The purpose of this paper is intended to present the current system and problems of early intervention in Taiwan. Some coping strategies for improving the services will also be suggested in the article. Specifically speaking, the following research questions were addressed in the study:

- 1. What is the current system of early intervention in Taiwan?
- 2. What are the problems of early intervention system in Taiwan?
- 3. What are the coping strategies for improving the services recommended by professionals in the field?

Methods

Based on the aforementioned research questions, documentary analysis and phone interview were employed in the study to collect the research data needed. The two methods were described as follows.

Documentary Analysis

Documentary analysis was used to understand the current status of early intervention system, problems and coping strategies in Taiwan. In addition to literature review, other data were obtained from the Children's Bureau of Ministry of the Interior, Department of Health, some municipality and county (city) governments, and several Early Intervention Notification, Referral and Case Management Centers for Children with Developmental Delays as well as Centers of Team Evaluation for Children's Development in some municipalities and counties (cities). Documentary data were collected through phone call or official correspondence contacts with related agencies or organizations and through Internet search. For the purpose of documentary analysis, all literature and data collected were reviewed, classified, and integrated in order to present an initial picture of current status of early intervention system, problems and coping strategies in Taiwan. Specifically speaking, the process of documentary analysis consisted of reviewing all collected documents, finding information associated with research questions, finding the commonalities and differences of the documents, and making generalization and conclusion.

Phone Interview

Phone interview was conducted to understand problems and coping strategies of the early intervention system. The sample of phone interview, selected by the purposive-stratified basis, consisted of 15 experienced supervisors and social workers (14 females and one male) from the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays in 12 municipalities and counties (cities) as well as 3 directors (all males) who were all physicians from the Center of Team Evaluation for Children's Development at 3 hospitals in 3 counties (cities). Totally, there are 25 municipalities and counties (cities) in Taiwan. The researcher independently completed all phone interviews.

The self-developed "Early Intervention Questionnaire" was the instrument for phone interviews. This questionnaire was designed to elicit responses from professionals working in the fields of early intervention notification, referral, assessment, and case management in order to understand the difficulties and coping strategies in the early intervention. It pertains to a semi-structured format and the interviewees are free to respond. Three issues in relation to "notification and referral," "children's development assessment" and "case management" were included in the questionnaire. The interviewees were asked to express their opinions in terms of difficulties encountered and coping strategies recommended. All responses on the phone were recorded for analysis.

The modified analysis and the constant comparative method (Glaser, 1965) were adopted to treat the phone interview data. Based on these methods, all concepts or ideas in the interview records were picked up, classified, compared and integrated into adequate interview findings. For establishing trustworthiness of the interview data, the researcher repeated the main ideas of the interviewees again for clarification during the phone calls. Basically the author analyzed the interview data alone but shared the interview findings with some of the participants to check if those findings reflect their opinions after the interviews. Fortunately they all confirmed the descriptions of the findings.

Results

From the documentary analysis and phone interview, the results related to the research questions were derived. They could be summarized, synthesized and described as the

following themes: Present system of early intervention services as well as problems and coping strategies.

Present System of Early Intervention Services

Owing to the rapid information exchange of the global village, the "time difference" between Taiwan and other developed countries in many considerations and designs in education, health and social welfare services for people with disabilities is virtually limited (Ho, 2007). As mentioned above, some fragmentary endeavors in early intervention for young children with special needs before age 6 have actually been made since 1960s. In 1990s, a great many private social welfare institutions had eagerly established early intervention programs or child development centers one after another in Taiwan.

The finding and assessment of young children with special needs are the foundation stones of early intervention practice. At the present time, the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays and the Center of Team Evaluation for Children's Development both founded by each municipality and county (city), seem to be the core operation framework for early intervention. Therefore, the description of early intervention services system in Taiwan will be focused on the policy foundation and operation procedure as follows.

Policy Foundation

Since 1997, the central government has been using the Early Intervention Service Implementation Program for Children with Developmental Delays as an important policy measure to organize the resources of social welfare, health, education and so on to promote the early finding, intervention and related services for children with developmental delays and their families. This program should be considered a fundamental policy statement for early intervention services (Ministry of the Interior, 2006). The highlights of this program could be listed as follows:

- 1. General planning:
 - (1) Supervise or coordinate social welfare, health and education agencies in finding, screening, notification, referral and assessment for children with developmental delays.
 - (2) Develop children's assessment scales and determine the establishment standards for the Center of Team Evaluation for Children's Development and the criterion of diagnostic grading.
 - (3) Promote the research and development of early intervention services
- 2. Finding and Screening:
 - (1) Provide children's development scales for parents, related agencies and organizations to use.
 - (2) Promote the early screening for the ages 0-6 in order to find the abnormal cases as soon as possible.
 - (3) Increase the finding rate of children with developmental delays through the efforts of preventive care for children, inoculation or community health education activities.

- (4) Reinforce the finding and referral of children with developmental delays from disadvantaged families.
- 3. Notification and Referral:
 - (1) Assist the public and private sectors in the fields of social welfare, health and education to implement the notifying measures of children with developmental delays.
 - (2) Establish the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays.
 - (3) Develop the transition and follow-up mechanisms among notification, referral and case management centers, assessment centers and intervention institutions.
 - (4) Develop the case management computer database to command the case condition and establish its follow-up mechanism.
 - (5) Develop the cross-counties (cities) resource network, case referral and follow-up systems.
- 4. Team Assessment:
 - (1) Establish at least one team evaluation center in every county (city) or establish the team evaluation mechanism. And assist public and private hospitals to plan and organize team evaluation services in order to increase the accessibility of assessment.
 - (2) Establish the integral assessment procedure and cooperation mechanism among professionals of evaluation teams.
 - (3) Assist evaluation teams to finish the comprehensive assessment reports
 - (4) Provide these reports to parents and the local notification, referral and case management center for the upcoming services within 4-8 weeks from the initiation of the case.
- 5. Intervention and Related Services:
 - (1) Placement of young children with developmental delays.
 - (2) Provide financial support for early intervention.
 - (3) Provide guidance and financial support to educational and medical institutions for early intervention.
 - (4) Develop inclusion and transition services for young children with developmental delays.
 - (5) Develop various programs to meet the early intervention needs of young children with developmental delays.
 - (6) Provide assistive technology services.
- 6. Publicizing and Training:
 - (1) Designate a screening month for child development to advocate the concepts of child development.
 - (2) Plan the training courses for early intervention professionals.

The Early Intervention Service Implementation Program for Children with Developmental Delays is based on the Children and Adolescents welfare Act, Special Education Act, as well as Physically and Mentally Disabled Citizens Protection Act.

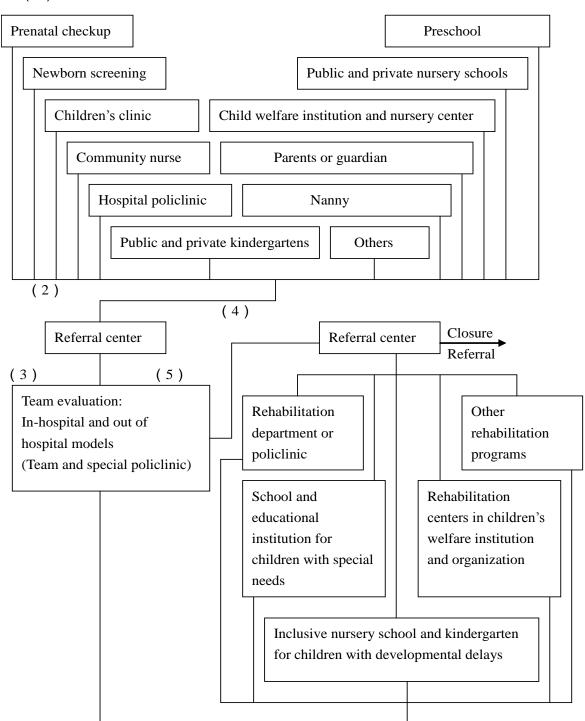
This program has become the important policy foundation for early intervention in Taiwan.

Operation Procedure

For the administrative operation of early intervention services for young children with special needs, the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays and Center of Team Evaluation for Children's Development have been established in every municipality and county (city). In addition, the Early Intervention Promotion Unit or Early Intervention Promotion Committee is also organized in every local government for the purpose of policy formation, coordination and guidance of early intervention services. In essence, the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays and Center of Team Evaluation for Children's Development are actually two departments related to finding, assessment, referral, and case management of young children with special needs.

Figure 1 presents the general flowchart of early intervention notification, referral, assessment, and placement for children with developmental delays in Taiwan. From this flowchart, we could understand the working relationship between the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays and Center of Team Evaluation for Children's Development. Young children with special needs might be notified from prenatal checkup, newborn screening, children's clinic, community nurse, hospital policlinic, public and private kindergartens, preschool, public and private nursery schools, child welfare institution and nursery center, parents or guardian, nanny, etc. When these notifications reach the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays, all cases are arranged to receive assessment and evaluation from the Center of Team Evaluation for Children's Development. After the individualized intervention plan and relevant recommendations are developed by the center of team evaluation, the Early Intervention Notification, Referral and Case Management Center for Children with Developmental Delays will take over the case for arranging placement or referral of intervention services. If no further placement is needed, the case will be closed. The intervention- relevant rehabilitation placement institutions may include rehabilitation department or policlinic, school and educational institution for children with special needs, inclusive nursery school and kindergarten for children with developmental delays, rehabilitation centers in children's welfare institution and organization, and so on. Generally speaking, the whole early intervention model seems to reveal a community-based nature. In addition, the medical facilities appear to assume a major role in terms of assessment and intervention services. Generally speaking, the whole operation procedure for early intervention exhibited in Figure 1 is somewhat similar to the Developmental Systems Model described by Guralnick (2001) and the early childhood intervention landscape in Israel (Al-Yagon & Margalit, 2005).

(1)



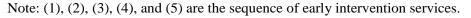


Figure 1. Flowchart of Notification, Referral, Assessment and Placement for Children with Developmental Delays (Ministry of the Interior, 2005)

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Problems and Coping Strategies

Even though a basic service system for early intervention services has been established in Taiwan, some functional problems in the areas of notification and referral, assessment for children's development, as well as case management seem to be found from the documentary analysis and phone interview. These problems could be categorized and listed as follows:

1. Notification and Referral Problems:

- (1) Low willingness to accept the notification from parents.
- (2) Lack of concepts about notification.
- (3) Poorly funded and understaffed.
- (4) Poor coordination among social welfare, health, and education agencies.
- (5) Low notification rate due to noncompulsory notification.
- (6) Poor notification from nursery schools and kindergartens.
- (7) Inconsistent screening outcomes resulting from the instrument problems.
- (8) Lack of mandatory power conferred on the commissioned sector.
- (9) Poor notification rate from ages 0-3.
- 2. Assessment for Children's Development Problems:
 - (1) Lack of assessment resources.
 - (2) Poorly funded and understaffed.
 - (3) Low screening rate that is inconsistent with the prevalence.
 - (4) Assessment instrument problems.
 - (5) Quality of assessment problems.
 - (6) Poor coordination among agencies and organizations.
 - (7) Poor willingness to accept assessment from parents.
 - (8) Professional dominance resulting in poor communication.
 - (9) Significant inconsistence on the assessment results among psychologists.
- 3. Case Management Problems:
 - (1) Understaffed and poorly funded.
 - (2) Low willingness to seek help from parents.
 - (3) Lack of intervention resources.
 - (4) Influences of family problems.
 - (5) Computer operating system problems of Children's Bureau Ministry of the Interior.

For the abovementioned problems in the areas of notification and referral, assessment for children's development as well as case management, some coping strategies mentioned or recommended in the study are as follows:

- 1. Notification and Referral Strategies:
 - (1) Enhance the public awareness about notification and referral for children with developmental delays through home visit, workshop, and familiarizing parents and nonprofessionals with the children's development scale (Hsu, Chang, & Chou, 2006).
 - (2) Provide adequate funding and manpower.
 - (3) Reinforce communication and connection among social welfare, health, and education agencies and organizations.

- (4) Have the physical checkup mechanism for young children prescribed by the National Health Insurance put into effect in order to early detect children with developmental delays before age 3.
- (5) Associate the financial aid with notification to raise the willingness to accept further assessment from parents.
- 2. Assessment for Children's Development Strategies:
 - (1) Increase assessment resources such as more team evaluation centers and provide appropriate funding in order to establish an efficient assessment mechanism.
 - (2) Enhance the quality of assessment services through the efforts such as professional preparation, in-service training and reasonable allotment, assessment instruments improvement, case conferencing, and communication with parents.
 - (3) Provide needed professionals such as clinical psychologists, speech therapists, and physicians in the fields of pediatrics orthopedics, genetics, etc.
 - (4) Pay close attention to the assessment of 0-3-year-olds through the efforts such as follow up the development of premature babies and screening at inoculation (Liang, 2006).
 - (5) Improve coordination and communication among agencies, organizations and parents to promote the assessment services for children with developmental delays.
- 3. Case Management Strategies:
 - (1) Provide reasonable funding and manpower to upgrade the case management services.
 - (2) Pay attention to the preparation and in-service training of case managers.
 - (3) Provide families necessary assistance such as respite service, parental education, etc. in order to increase parental willingness to accept early intervention.
 - (4) Develop and integrate resources through such strategies as increasing intervention programs, acquiring help from the private sector, and itinerant services to provide assistance for the families in need.
 - (5) Improving the computer operating system of Children's Bureau Ministry of the Interior to upgrade the efficiency of case management.

Based on the abovementioned present system of early intervention services, problems and coping strategies, although a good early intervention framework has been established, funding, professional manpower and parental attitude toward early intervention appear to be fundamental concerns for early intervention in Taiwan. In addition, like other countries (Kemp & Hayes, 2005; Gine, Garcia-Die, Garcia &Momplet, 2005), cooperation and coordination among agencies and organizations have always been, and remains, problematic in the provision of early intervention in Taiwan. Apparently the function of this system seems to need more support in the provision of adequate funding, professional manpower, cooperation and coordination among associated parties as well as parental awareness.

Implications

From the documentary analysis and phone interview in the study, it is found that Taiwan has established the necessary policy and operation procedure on early intervention for young children with special needs. However, some problems and coping strategies in the function of this intervention system have still been suggested by professionals in the field.

In order to provide a better early intervention service for young children with special needs in Taiwan, reasonable financial support and continuing professional development remain a critical need for the future. Funding and personnel preparation all relate to the resource distribution nearly in all countries. Therefore, it is fundamental that the resource allotment needs should be favorably considered by the government and properly reflected on the early intervention policy making in the future. In addition, the coordination problems among the agencies and organizations related to early intervention also indicate a necessity to establish some administrative cooperation and connection schemes for early intervention services to deliver well. Finally, parental awareness about child development and the importance of early intervention must be raised as an ongoing process to upgrade early intervention for young children with special needs in Taiwan.

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