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Mitigating the Effect of Children's Disabilities on Elementary Education Outcomes

Longitudinal Cohort Study on the Filipino Child
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Of the 92 million Filipinos reported in the 2010 Census of Population and Housing, 1.443 million were persons with disabilities. Of these, 7.2% were children aged 10-14 (PSA, 2013).[1] Children's disability impacts educational performance in various ways depending on the nature of the disability and the effectiveness of educational practices that accommodate for such impairments. This Policy Note describes the results of the Longitudinal Cohort Study on the Filipino Child[2] (Cohort Study) on disability among 10-year old children and its effect on schooling outcomes, policy responses of the Philippine government to address issues of children with disabilities and education, and suggestions for moving forward.[3]

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[1] In the Census, "disability refers to any restriction or lack of ability (resulting from an impairment to perform an activity in the manner or within the range considered normal for a human being. Impairments associated with disabilities may be physical, mental, or sensory motor impairment such as partial or total blindness, low vision, partial or total deafness, oral defect, having only one hand/no hands, one leg/no legs, mild or severe cerebral palsy, retarded, mentally ill, mental retardation and multiple impairment". (PSA, Technical Notes in https://psa.gov.ph/content/persons-disability-philippines-results-2010-census).

[2] The Longitudinal Cohort Study on the Filipino Child is a collaborative undertaking of government agencies, development partners and demographic researchers aimed to examine how the lives of Filipinos are changed in the course of the implementation of the Sustainable Development Goals (SDG) agenda (OPS,2018). The research strategy is to prospectively observe a nationally representative sample of 4,952 Filipinos from age 10 through 24 (2016-2030) and collect data on significant life course milestones such as puberty, school completion, labor force entry/exit, sexual activity initiation and other reproductive health events, and marriage. Data collected at each survey round are analyzed to determine the interplay of child, household and community attributes that explain various health and socio-demographic outcomes among the cohort. A qualitative segment was added to the study on a non-probability sample of marginalized children (including children with disability) outside of the cohort sample (OPS, 2019). Study findings will inform policy decisions, program design, and service delivery efforts.

[3] This Policy Note complements a recent Policy Brief published by UNICEF, Australian Aid and DSWD (2018). The Policy Brief raised a number of concerns regarding the common definition and categorization of "disability", governance and accountability among national institutions with programs on children with disability and role of local government units. Its recommendation with respect to education and health include (a) enhance early detection and referral systems to link children with disabilities to all the necessary resources and services; (b) strengthen programs that prevent disability at childhood; and c) implement the inclusive

Cohort Study Results

The Cohort Study provides additional information on the extent of disability among 10-year old children at baseline. Table 1 presents the types of disability reported among the cohort index children.

Table 1. Types of disability among cohort participants (n=65) and their characteristics

Characteristics	Number
Types of disabilities:	
Visual impairment	18
Intellectual disability	16
Speech/communication impairment	12
Physical/orthopedic disability	9
Hearing impairment	3
Multiple disabilities	7

School participation among the children with disabilities in the Cohort Study (57 of 65 or a weighted proportion of 90%) reflects the national average of 98% among children with disabilities aged 6-11 (Agbon and Mina, 2017). Controlling for other factors in weighted multivariable regression models, the data on the 10-year old Cohort Study sample show that having a disability reduces the likelihood of being in school compared to those without. As shown in Figure 1, children with disabilities are predicted to have three times the likelihood of repeating a grade. Another great concern is that having a disability is significantly associated with no aspirations for college education whether among the children themselves or their own mothers/caregivers. While such reaction maybe expected, not having the much-needed push from parents already sets these children at a disadvantage in terms of obtaining higher levels of education. Other indicators of negative school outcomes show no statistically significant differences between children with disability and those with no disability.

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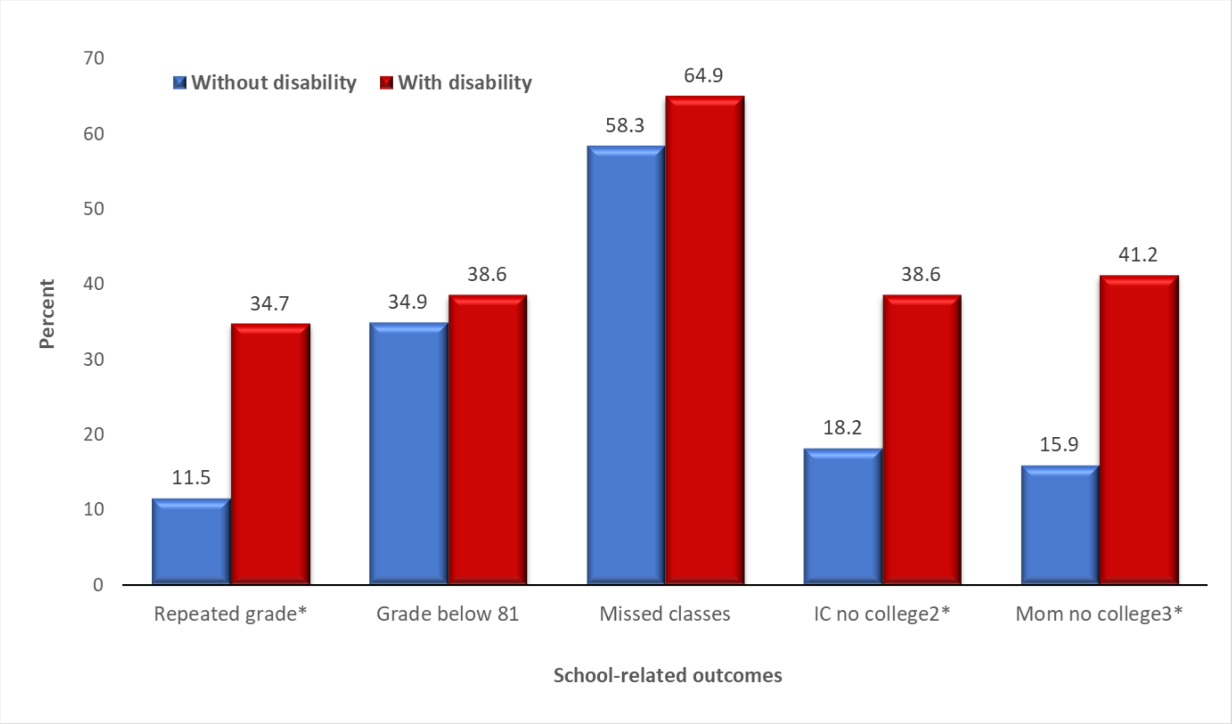
education program. This Policy Brief is based on the 2018 report “Study on the Situation of Children with Disabilities in the Philippines” prepared by the Development Academy of the Philippines (DAP) and supported by UNICEF in collaboration with DSWD and the Australian Government (NEDA and UNICEF, 2018).

Figure 1. School performance and disability[1]



[1] Predicted rates adjusted for relevant child, household, and community characteristics. Excluded in graph: being in school since about 98% were in school.
[2] IC does not aspire for nor believe he/she can attain college education
[3] Mother/caregiver does not aspire for college education for IC nor believes IC can attain such level
*Significantly different between with and without disability at $p<0.05$.

In the qualitative component of the Cohort Study (OPS,2019), in-depth interview data from 31 children with disability and their parents reveal additional information regarding their school experiences. Although 27 of the 31 children interviewed were in school, finding the right school, which catered to the children's needs was a challenge for the parents. The children also talked about being bullied by their peers, and worse, being ridiculed even by their own teachers. There were also instances when teachers did not respond to appeals for help when the children were bullied by their classmates. On the other hand, the qualitative interviews also mentioned receiving positive emotional support from parents, family, friends and teachers. Schooling-related support in the form of school supplies from barangays, NGOs and local governments were mentioned while government programs like the Special Education (SPED) of the Department of Education (DepEd) and the Pantawid Pamilyang Pilipino Program (4Ps) were cited as sources of support.

Policy Response

By ratifying the United Nations Convention on the Rights of the Child (CRC) and the Convention on the Rights of Persons with Disabilities (CRPD), the Philippines signaled its commitment to ensure that all children, irrespective of ability or disability enjoy their rights, including that of quality education. This commitment to the well-being of persons with disability is strengthened with the enactment of the Magna Carta for Disabled Persons (RA 7277) in 1992, which makes it state policy to ensure access to quality education for disabled learners and to provide assistance to make the latter possible. The Persons with Disability Affairs Office (PDAO) was created through RA 10070 to serve as the institutional mechanism for implementing RA 7277.

RA 7277 further established the special education program "for the visually impaired, hearing impaired, mentally retarded persons and other types of exceptional children in all regions of the country", and to allocate funds for their effective implementation nationwide. Subsequent implementations through DepEd internal circulars (DepEd, 2017) point to a concerted effort to establish a multi-modal delivery system for children with disabilities as part of the inclusive education framework including various alternative learning systems and the placement of children with disabilities in regular schools when possible.

Training is essential as teachers and other staff may need to perform complementary functions to address the special needs of children with disabilities when specialists are not present or not feasible to fund. The fact that qualitative data report incidences of unsympathetic or even undesirable behavior on the part of teachers to children with disabilities only reinforce this need. Data obtained from DepEd reports only 438 public SPED Centers across the country as of June 2020. Hence, the mainstream delivery system will be expected to carry a significant portion of the educational needs of children with disabilities. The regions with the largest proportion of such schools are CALABARZON (12.23 percent), Zamboanga Peninsula (9.13 percent), and Ilocos Region (8.68 percent), while ARMM (0.46 percent), CAR (2.05 percent), Eastern Visayas (3.2 percent), and CARAGA (3.2 percent) regions have the lowest. Similar implications apply to the special facilities and procedures that may be made available to regular personnel. This reliance on the mainstream delivery system is expected to continue given the deletion of the special purpose budget line items for the Special Education Program (DepEd, 2018).

DepEd has made inclusive education the core principle in K to 12 Basic Education, outlining an Inclusive Education Framework that calls for the implementation and evaluation of programs and interventions that adequately responds to the diverse educational needs and contexts of learners, which includes learners with disability (DepEd, 2019). One area for action for ensuring inclusion is early childhood care and education with the aim of early identification and remediation of children at risk of disability (UNESCO, 2009; UNICEF, Australian Aid and DSWD, 2018). There are laws supporting the implementation of the National Early Child Care and Development System.[4] These include RA 11148 (Kalusugan at Nutrisyon ng Mag-Anak) of 2018, which strengthens the maternal, neonatal and child health and nutrition in the first 1,000 days of life; the RA 9288 of 2004 (Newborn Screening); RA 8980 of 2000 (Early Child Care and Development) and RA 10410 of 2013 (Early Years Act), the latter extending the age of

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[4] The objectives of the National ECCD System include: "to achieve improved infant and child survival rates by ensuring that adequate health and nutrition programs are accessible to young children and their parents, from the prenatal period throughout the early childhood years; to enhance the physical-motor, socio-emotional, cognitive, language, psychological and spiritual development of young children; to facilitate a smooth transition from care and education provided at home to community or school-based setting and to kindergarten; to ensure that young children are adequately prepared for the formal learning system that begins at kindergarten; and to establish an efficient system for early identification, prevention, referral and intervention for the wide range of children with special needs from age zero to four years (RA 10410 of 2013).

intervention from 0-6 years to 0-8 years with ages 0-4 years being the responsibility of the Early Child Care and Development (ECCD) Council, and 5-8 years being the responsibility of DepEd.

Moving Forward

A number of policies are in place that recognize and respond to the special learning needs of children with disability, including enabling policies to ensure early detection, referral, and remediation of children at risk of disability. There is a need to monitor compliance of government and learning institutions with the requirements of the various policies to identify shortcomings that require timely and adequate budgetary, technical, and institutional support. One important concern is the difficulties that LGUs face in setting up PDAOs in their localities (Alampay, 2018).

Moreover, and more importantly, there is a need to systematically evaluate, with the concerned implementer and stakeholders, the effectiveness of various programs and interventions, in particular, the special education programs that are being implemented to address the special needs of children with different disabilities. How do children with different disabilities respond to various interventions and with what outcomes? (See various reports of Special Education Elementary Longitudinal Study (SEELS); https://www.seels.net/grindex.html).[5] Changes to be implemented must be similarly systematic and comprehensive with consistent and concerted action from all stakeholders and implementors.

In order to make 'inclusive education' a reality for children with disabilities, there is a need to reinforce addressing diversity and promoting inclusion. These include flexible curriculum, innovative teaching methods and approaches to the use of teaching aids and equipment as well as the use of Information Communications Technology (ICTs) (UNESCO, 2009).

Finally, early detection and prevention, and timely referral to the appropriate agencies are key elements in addressing the needs of children with disabilities. Effective coordination between DepEd and other national agencies (DOH, DSWD) and local government units is essential to mitigate the effects of disability on children's schooling. It is worth noting that the Philippine Health Insurance Corporation (Philhealth) has moved to providing benefits for children with disabilities on top of existing benefits funding prostheses for persons with disabilities (Philhealth, 2019). These expanded benefits involving diagnoses and treatment for mobility, visual, hearing, and developmental disabilities are implementations of the expanded mandate for Philhealth under RA 11228 (An Act Providing For The Mandatory Philhealth Coverage For All Persons With Disability). Referrals to the identified Philhealth service providers (not available as of the writing of this note) would serve children with disabilities well and serve to offload some of the burden

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[5] Special Education Elementary Longitudinal Study (SEELS) was a study of school-age students funded by the Office of Special Education Programs (OSEP) in the U.S. Department of Education and was part of the national assessment of the 1997 Individuals with Disabilities Education Act (IDEA 97). From 2000 to 2006, SEELS documented the school experiences of a national sample of students as they moved from elementary to middle school and from middle to high school. From 2000 to 2006, SEELS collected data at three points in time through school staff, direct assessments, and parent interviews to provide information about the experience of students with disabilities. Various reports from the study will be available at https://www.seels.net/grindex.html as they become available.

off DepEd when possible. The PDAO office in LGUs would ideally be the locus of such a referral system including other community-based initiatives such as those meant to address concerns of parents with respect to having their children with disabilities attend and succeed in the school system. The PDAO is also recommended to spearhead a multi-stakeholder effort to ensure compliance with Batas Pambansa 344, the law mandating that buildings, institutions, establishments, and public utilities install facilities to ensure mobility for disabled persons. This is in recognition of the difficulties of children with disabilities in commuting to schools and traversing paths within schools as important impediments to their learning efforts.

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