Country Report
Thailand

The 7th ASEAN & Japan High Level Officials Meeting on Caring Societies:

"Towards an Inclusive Society

-Strengthening the Collaboration between Social Welfare, Health and Medical Systems for Children with Disabilities"

Tokyo, Japan

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Ministry of Public Health

And

Ministry of Social Development and Human Security

Thailand

1. General Information

Thailand covers the area of approximately half a million square kilometers, a size comparable to that of France. Thailand is divided into four regions: Central, North, Northeast and South and is administratively divided into 76 provinces, one of which is the Bangkok Metropolis. Each province is further subdivided into districts 877 (amphoe and king-amphoe), 7,255 sub-districts (tambon) and 74,944 villages (muban). Some areas are also designated as municipalities, including all provincial capitals.

In term of Poverty Rate, Thailand has made impressive progress in poverty reduction. Poverty incidences in Thailand dropped from 33.69 per cent in 1990 to 9.6 percent in 2008. It means that Thailand has already achieved the Millennium Development Goal 1: Eradicate extreme poverty and hunger.

With regard to the budget for social welfare and its percentage of total national budget, in 2009 fiscal budget, the Ministry of Social Development and Human Security which is a key organization of the government to provide social welfare services for women, children, persons with disabilities, older persons; and vulnerable groups was allocated budget Baht 9,698.6278 million which was 0.53 percent of total national budget. The health budget has increased from 4 percent of the total national budget in 1980s to 9.6 percent in 2009.

General Information	Data	year
1.GNI per capita (US $)	3400	2009
2.Poverty rate	9.6	2008
3.Adult literacy rate		
male	96	2008
female	90.6	2008
4. Urban population(%)	36.1	2009
5.Budget for social welfare as % of total national budget	0.53	2009
6. Budget for health as % of total national budget	9.5	2009

2. Vital Statistics

According to the Institute of Population and Social Research, Mahidol University, as of 1 July 2009 the population of Thailand is 63.4 million, and almost 10 million of whom work and reside in Bangkok. When considering the age group, it was found that the young population (aged 0-14) accounted for 13.412 million or 21.16 % of the total population. The working-age group (aged 15-59) accounted for 42.71 million, or 67.37 %, and the elderly group (aged 60 or more) accounted for 7.274 million or 11.47%.

Change in demographic structure is a major factor contributing to human resources development, which in turn, strengthens economic development. Thai demographic structure is changing to aging society in the near future of 20 years. The fertility rate has slowed down while the crude birth rate fell from 35.6 per 1,000 population in 1974-1976 to 12.5 per 1,000 population in 2009 and the crude death rate was 8 per 1,000 population. The total fertility rate (TFR) dropped from 6.3 in 1964-65 to 1.5 in 2009.

Vital statistics	2009
1. Total Population	63,121,000
1.1 Population by Sex	
Male	31,241,000
Female	32,155,000
1.2.1. Population in Urban Areas	22,899,000
1.2.2. Population in Rural Areas	40,497,000
1.3. Population by Region	
Bangkok Metropolis	6,720,000
Central (excluding Bkk Metropolis)	15,301,000
Northern	11,721,000
Northeastern	21,231,000
Southern	8,423,000
1.4. Population by Age Group	
Children (under 15)	13,412,000
Labor force (15-59)	42,710,000
Elderly (60 and over)	7,274,000
School ages (6-21)	15,347,000
Women in RH ages (15-44)	17,819,000
2. Crude Death Rate (per 1,000 pop)	8.0

Vital statistics	2009
3. Crude Birth Rate (per 1,000 pop)	12.5
4. Infant Mortality Rate (per 1,000 lbs)	12.5
5. U5MR (per 1,000 live births)	14.5
6.Maternal Mortality Ratio (per 100,000 lbs)	41*
7. Life Expectancy at Birth (years)	
Male	69.5
Female	76.3
8. Total Fertility Rate (per women)	1.5

Source: Mahidol population gazette Midyear 2009 (1st July)
* Bureau of Policy and Strategy, 2009.

3. Current situation concerned with children with disabilities

A. From the National Survey of Disabilities 2007 by the National Statistical Office showed that there were 0.59 percent of persons 0-24 years with disabilities. Of which male is higher than female.

Age Group	Persons with Disabilities	% of persons with disabilities	% of persons with disabilities	
			Male	Female
Total	**1,871,860**	**2.85**	**2.69**	**3.02**
0-4	6,562	0.13	0.14	0.12
5-6	6,175	0.33	0.33	0.31
7-9	15,872	0.56	0.57	0.54
10-14	27,621	0.54	0.59	0.48
15-19	33,835	0.64	0.75	0.54
20-24	58,691	1.11	1.32	0.89
0-24	**148,756**	**0.59**	**0.67**	**0.50**

Source: From National Survey of Disabilities 2007.

In addition, the latest record of the National Office for Empowerment of Persons with Disabilities (NEP) illustrated that from 1 November 1994-31 March 2009, children with disabilities (0-18 years old) who registered with NEP was 114,381. Their types of disabilities can be classified, as follows:

Types of disabilities	**Number**		**Total**	**Percent**
	Boys	**Girls**		
Visual Disability	3,242	2,488	5,730	5.01
Hearing/communication Disability	8,792	7,360	16,152	14.12
Physical/Movement Disability	14,283	9,746	24,029	21.01
Mental/Behavior Disability	1,651	636	2,287	2.00
Intellectual/Learning Disability	20,847	14,548	35,395	30.94
Multiple Disability	14,069	9,830	23,899	20.89
Others	3,908	2,981	6,889	6.02
Total	66,792	47,589	114,381	100.00
Per cent	58.39	41.61	100	

Source: Registered by the National Office for Empowerment of Persons with Disabilities during 1 November 1994-31 March 2009.

B. The number of health and social welfare support center/facilities for children with disabilities

The Thai government recognizes that children with disabilities need special treatments and cares, therefore, it established the Homecare Centers for Children with Disabilities which are classified by the children's sex, age, and types of disabilities. Moreover, the centers which are under the Ministry of Social Development and Human Security have the main functions to nurture the children with disabilities by providing basic needs, medical capacity rehabilitation, education, occupational training, and psychological and mental health development. As such, the following

4 homecare centers were established for each group of children with disabilities.

1. Home for Intellectual-Disabled Babies is tasked for boys and girls with disabilities who have the range of age from 0 -7 years, and are impaired by intellectual, hearing, visual, movement, and multiple disabilities;

2. Home for Intellectual-Disabled Boys is responsible for boys with intellectual disabilities at the range of age from 7-18 years;

3. Home for Intellectual-Disable Girls takes care of girls with intellectual disabilities from 7-18 years old;

4. Pak Kret Home for Children with Disabilities receives children with disabilities both boys and girls who are 7-18 years old and impaired by hearing, visual, and movement disabilities.

Furthermore, the Thai government realizes that social welfare services for children with disabilities are very essential for empowering them to live in society with dignity, equality and self-reliance. The offered services are covers the following areas.

1. Physical Rehabilitation

The government gives physical rehabilitation services to children. They are facilitated with assistive devices, physical therapy, and other necessary facilities to enable them to live independently.

2. Education service

The government supports education services for the children both in the homecare centers area and educational institutions outside so that they have a chance to join classrooms with normal students. According to the Person with Disabilities Education Act, 2008, children with disabilities are able to access free education as high as possible based on their potential and capacity. In addition, schools for particular disabilities such as Schools for the Blind, Schools for the Deaf were established nationwide to respond to special needs of the children.

3. Sport activities

The government gives support for children with disabilities to express their sport talents and interest by supporting their participation in national and international sport competition events.

4. Promotion of Community involvement

Communities are encouraged to involve in managing social welfare services for the target groups including children with disabilities in their communities.

5. Occupational Training Programme

The Occupational Training programmes for children with disabilities are offered not only in the homecare centers, but also institutions outside. The programme is considered one of therapy guidelines to rehabilitate the children for independent living.

6. Child Autistic Group

The programme of career capacity development for the autistic has been initiated to promote and empower them for living in society. Yet, it also enhances accurate understanding and practices of the guardians and parents as well as relevant organizations to properly and correctly communicate and look after the autistic children.

C. The number of social welfare workers for children with disability

There are 590 social welfare workers working for children with disabilities. Their responsibilities include:

1. Social workers have responsible for providing assistances based on social welfare practices for vulnerable groups such as children, person with disabilities, older persons, women and destitute persons;
2. Social development workers task for the promotion of social development which is in line with policies and plans of the organizations;
3. Physical therapists have the duties to rehabilitate, reshape, improve, and repair physical disabilities of the disable people;

4. Psychologists perform in the area of psychological support

at the basic level;

5. Professional nurses work to provide and develop nursing services for the disable people;

6. Chaperones provide assistance for the disable people in daily living and sanitation;

7. Home Supervisors take responsibilities for monitoring the children to comply with the doctors' advice, and staying on the duty at night;

8. Occupational trainers work to educate occupational skills for the children.

4. Summary of Laws related to Children with Disabilities

1. The Constitution of the Kingdom of Thailand A.D. 2007 emphasizes that all Thais shall enjoy the equal rights and access to public services. As such, it contains many sections ensuring the protection and promotion of the well being of persons with disabilities. For example, section 54 and 80 indicate that persons with disabilities shall enjoy the rights to access to social welfare and public facilities, and the government has responsibilities to provide social welfare and service for the better quality of life of person with disabilities. Section 30 specifies that "Unjust discrimination against a person on the grounds of the difference in origin, race, language, sex, age, disability, physical or health condition, personal status, economic or social standing… shall not be permitted. Section 49 regarding education indicates that all persons including persons with disabilities have the equal rights to access to 12 years free education supported by the government (the government has launched a 15-year free education policy for all Thai children since May 2009).

2. The Rehabilitation of Disabled Persons Act A.D. 1991 stated the rights of persons with disabilities by providing vocational rehabilitation in order to support self-reliant living and a better quality of life. In addition, Thai Government also provided 4 main benefits to people with disabilities who were registered, including:

- free of charge on medical rehabilitation which emphasized on assistive devices;
- free education for children with disability;
- tax intensive for employers who hire people with disabilities;

- architectural access for people with disabilities.

3. The Person with Disabilities Empowerment Act A.D. 2007 is a comprehensive rights-based law for person with disabilities. It contains several measures to promote and protect the rights of persons with disabilities such as employment, social welfare and services, facilities in building, vehicles for persons with disabilities, and strong anti-discrimination section.

This act has been developed from the Rehabilitation of Disabled Persons Act B.E. 2534, 1991. Three main gists are changed. Firstly, disability is divided into 6 types comparing with 5 types of the 1991 law. Secondly, the definition of disability is based not only on 'body function' and 'activity limitation' but also 'participation limitation'. Thirdly, the benefit on medical, educational, vocational, and social participation are increased. For example, the medical rehabilitation benefits increase from 13 items to 26 items. These medical benefits which emphasize on children with disability are music therapy, basic learning for school, life skill, dental care, media for developmental training etc. This act assigned the Ministry of Social Development and Human Security to be the focal point.

4. The Person with Disabilities Education Act A.D. 2008 is intended for persons with disabilities to be able to access free education services and other resources at all levels and to improve the Thai education system to enhance their quality of life and independent living through empowerment programmes.

5. The 3rd National Plan on Quality of Life Development of Persons with Disabilities (2007-2011) is an integrated and guideline for disability development practice for all authorities concerned.

6. The Child Protection Act of A.D. 2003 claims that procedures and proper treatment for children shall be specified to ensure that they are brought up, educated and develop a healthy growth that will further strengthen family institution. The law also protects children from being abused, commercially exploited or discriminated and promotes cooperation between public and private sector in proper child protection.

7. The Child Adoption Act of A.D. 1979 and the Child Adoption Act Amendment (No.2) A.D. 1989: According to the law, prospective parents are required to observe and follow rules and regulations concerning child adoption. Its main goals are: 1) to provide welfare protection for adopted children taking into consideration their best interest and the prevention of children from being commercially exploited by means of child adoption; and 2) to protect the interest of both the natural parents and the adoptive parents.

8. The Convention on the Rights of Person with Disabilities: Thailand was actively involved in the drafting of the Convention on the Rights of the Persons with Disabilities (CRPD) since the beginning. It was among the first countries that signed the Convention on the date that the CRPD was open for signature. Certain laws and policies related to the equalization of opportunities for person with disabilities have been put in place while various pieces of legislation in the country are still under review. Those that still contain elements of discrimination against PwD will be pushed forward for amendment, while Thailand is also stimulating social awareness of the CRPD to promote and protect human rights and fundamental freedoms of all persons with disabilities.

9. The UN Convention on the Rights of the Child: The principles with regard to the rights of children in 4 main areas, including:the right to survival; the right to be protected; the right to participate ;and the right to be developed on an equal basis bearing in mind the best interest of children. As a party to the Convention on the Rights of the Child, Thailand fully adheres to basic rights and principles for the best interests of the child. The National Economic and Social Development Plan has given priority to human development, including child protection and participation. Indicators such as Social Indicators (Basic Minimum Needs), Indicators on Child and Youth Development and Indicators on Child Rights were introduced as guidelines for the effective protection of children's right. Furthermore, Thailand attaches great importance to the outcome of the 27^{th} Special Session on Children. Accordingly, she formulated the "National Strategy and Plan of Action for a World Fit for Children" for

the year 2005-2015 with adding certain aspects pertinent to the situation in the Thai society.

5. Summary of official support programmes for children with disability in health and social welfare sectors

Recognizing the importance of person with disabilities including the children, Thailand has promoted projects that aim for strengthening and empowering the person with disabilities. Some of key projects are shown, as follows:

5.1 The social welfare aspect

- **The Group Home and Home Care Programme**s

There are 3 objectives of the programmes, as follows:

1) To promote participation from families and communities in looking after and managing social welfare services that reflect the need of the target groups including persons with disabilities, older persons, and destitute persons;

2) To empower and provide physical and mental rehabilitation services for the targets groups to ensure that they can live independently and don't be perceived as a burden for their family and community;

3) To reduce the number of person with disabilities in the homecare centers which have limited capacity to reach out all of the target groups.

In term of the advantages to children with disabilities, they will be rehabilitated and empowered by the community and their family, and brought up in family atmosphere and caring communities.

With regard to implementing process for persons with disabilities, they will be classified into two groups taking into consideration of their physical capacity level. The first group is persons with disabilities who are able to do their daily routine and volunteer to join the programmes. They will be facilitated to live with their families, go to schools located in communities, or do their career

in the communities. The other group is person with disabilities who unable to do their living routine and poor. For this group, social volunteers in the community and family will play significant roles in looking after persons with disabilities. For both groups, the government will support funding aid to the persons with disabilities Baht 2,000 month/ person with disability. Yet, in order to prepare their readiness, the government will educate rehabilitation skills to concerned stakeholders including, local administrative officers, family, and social volunteers. However, officers from the homecare centers in consultation with the committee of the programmes will monitor and evaluate the effectiveness of programmes quarterly. In 2009, the government allocated Baht 18.240 million as funding aid for 760 participants from target groups;

- **The Pilot Projects of the Establishment of Community Learning Center (CLC):** After the government has set planed and successfully implemented the Community-based Rehabilitation (CBR) during 2004-2008, she initiated the Community Learning Center (CLC) to build on the CBR under the responsibility of Ministry of Social Development and Human Security. The CLC is expected to serve as; 1) sharing experience forums for the development of CBR; 2) information centers for persons with disabilities and capacity development; and 3) consultation and suggestion center regarding persons with disabilities. In the meantime, the pilot project has been launched in 10 provinces where the CBR had already been implemented;

- **Allowance for the disabled people:** The government has a resolution that the persons with disabilities who severely impaired and unable to earn a living will be provided Baht 500 monthly allowance. From Jan-June 2009, about 260,000 disabled persons received the allowance, which was totally Baht 1.58 million or about Baht 6,000 per person. However, the Ministry of Social Development and Human Security will propose a resolution to the cabinet that allows all registered person with disabilities able to receive the allowance;

- **Pleasant City of the Persons with Disabilities:** The government has launched the projects to promote awareness of public and private sectors to provide facilities for persons with

disabilities in buildings and transportations. In 2009, there are 2 important projects launched, including;

1) The Excellent Award Competition for buildings or sites that provide facilities for persons with disabilities. The programe intended to encourage and promote public and private sectors to build facilities for person with disabilities. The winner will receive Baht 1 million award; and
2) The establishment of pleasant city models in 5 provinces to serve as a pilot project in order to expand results to other provinces later.

5.2 The Health aspect

All Thai population are under the universal health care coverage policy since 2002. All children can access to free medical services. These medical services include health promotion, disease prevention, curative and rehabilitation. Children with disabilities are included in these health schemes. They can access to health services from hospitals in every provinces and even in some district hospitals. These hospitals were technically supported by the Department of Medical Services and Department of Mental Health. The Department of Medical Services gives support for the children with physical & movement disability, visual and hearing disability while the Department of Mental Health provides supports for children with intellectual, learning disability, and behavior problems. District hospitals take the major role in community based rehabilitation by cooperating with local authority, some existing groups, schools and social welfare workers in communities to improve the quality of life.

6. Non-governmental support programmes for children with disabilities

Many non-governmental organizations for persons with disabilities in Thailand have taken part in promoting the capacity development activities and rights protection for children with disabilities. In this regard, the government have provided funding support to the organizations to facilitate their ability to implement projects and researches on children with disabilities.

Organizations	**Activities**
1. Cross Cutural Solution (CCS), USA.	- Recruit international volunteers to be partnerships with community in sharing experience and cultures to develop the well-being of children with disabilities.
2. Students Exchange Programme between Rangsit University of Thailand and Sovania University of Applied Science of Finland	- Provide physical therapy, nursing, and growth development
3. Christian Care Foundation for Children with Disabilities in Thailand (CCD)	- Provide care and support for abandoned children and young adults in a professional learning and developmental environment. The children are stimulated mentally and physically when they are at one of four CCD day-care centers. CCD teachers teach the children to count, read, color, etc while physical therapists rehabilitate those children that do not have complete control of their bodies. This is all done with the hope that the children will one day be able to live independently.
4. Art for all Foundation	-Teach art skills for children with disabilities and bring them to join activities such as art camps, and classrooms
5. The National Association of the Deaf in Thailand	-Promote the better education for the deaf -Teach Thai sign language
6. IBS International School	- On Wednesday, the school brings children with disabilities to join activities with normal students.

7. Christian foundation for the blind in Thailand	-Pre-school, support child in school, and vocational support for blind children as well as home for blind with multiple disabilities
8. Foundation for crippled children	Boarding school for children with physical disability to receive both medical training as well as the education
9. Foundation for handicapped children	Parent empowerment through parent camp, develop parent's skill to improve child development and skill to cope with family problem.

7. The implementation of Community Based Rehabilitation (CBR)

CBR may be defined, according to three United Nation Agencies, ILO, UNESCO, and the WHO, as a "strategy within community development for the rehabilitation, equalization of opportunities, and social integration of all people with disabilities. CBR is implemented through the combined efforts of disabled people themselves, their families and communities, and the appropriate health, education, vocational and social services" (WHO, 1994). Being aware of its significance, the government has implemented CBR in health and social welfare sector, as follows:

7.1 CBR in health sector

The Ministry of Public Health started CBR program in the year 1992 by promoting health personnel from all over the country to empower village health volunteers to provide simple medical rehabilitation to people with disabilities.

In the year 2004, the WHO/ILO/UNESCO stated in their joint position paper as " CBR not simply as a strategy for the rehabilitation and social inclusion of people with disabilities, but as a multi-sectoral mechanism for reducing poverty, advancing socioeconomic

development, and fulfilling national obligations in terms of equal opportunities and human rights". From this concept and improvement of access to health care, the Ministry of Public Health changes the strategy on health personnel in district level that they will not only provide medical services but also work as facilitators for local authority and self help groups in the community. The health personnel emphasize on promoting access to health services for PWD and also work collaboratively with education, vocational, social and welfare services in each area.

7.2 CBR in social welfare sector

Since 2004, Ministry of Social Development and Human Security has implemented CBR as a means to ensure that person with disabilities can comprehensively access to public services and promote community participation in providing rehabilitation services to the disabled. It employs the model namely "Village Volunteer for the Disable System" to raise awareness and understanding towards the disable in community as well as promoting participation of all stakeholders in providing rehabilitation and development for the disable.

a) How Communities look after the disable people?

Communities are encouraged to develop their community strategies for looking after the person with disabilities in the community through medical services, education, vocational programme and social integration activities. The homes of the person with disabilities are built in line with the strategy of the community in close consultation with government officials. In addition, the family members and the community will be trained to provide rehabilitation services to the disabled people in their respective community.

b) CBR implementation strategies

The government has set up 3 year action plan (2004-2006) to promote sustainable CBR in community.

The First year programme: Rehabilitation programme for disabled by the community (CBR), 2004

- Organize training on disability/basic rights of disabled people and rehabilitation knowledge & improvement of the livelihoods for the disabled people for the people in the community, village volunteer, leaders of community, Tambon Administration Officers and all local officers related to the community development.
- Conduct Survey/identification of the disabled people in the community
- Provide support care, rehabilitation and improve individual disabled person's livelihoods.
- Follow up/exchange information for learning from each other's experience/discuss problem and agree on its solution.

Second year programme: Support the rehabilitation service by the community (CBR), 2005

- Home visit/follow up the rehabilitation services and improvement of the disabled people's livelihood programme.
- Involve the community participation to make the rehabilitation plan for the disabled people in the community

Third year programme: Sustainability programme for the better living of family of the disabled and the community, 2006

- Organize a meeting for local community networking groups to implement the CBR programme according to the requirements of the Ministry of Social Development and Human Security.
- Support the community to provide rehabilitation services and care for the disabled people according to the requirement of the Ministry of Social Development and Human Security.
- Support the expansion of providing rehabilitation services and care for the disabled people in the other target areas.

Outcomes: Community Look after the Disable people

The implementation and expansion of CBR during 2004-2008 had been successful. The programme was launched in 157 districts through the operation of 2,210 volunteers joining the programme nation wide. Consequently, there were 375,026 persons with disabilities receiving the services from the programme-among those were 80,000 children with disabilities approximately. The CBR brought

about positive changes and achievement for the disable and community in many areas.

1. Change of the attitude of people in the community
   - The family and community understood and involved in providing rehabilitation services to the disable.
   - Community has recognized the needs to provide rehabilitation, or to give opportunity to the disabled to improve themselves.
   - The disabled people are able to participate in decision making for the community activity

2. Village volunteers/village field workers look after the disabled people
   - The rehabilitation network for the disabled was developed in the format of " the community help community"
   - The disable were empowered and able to contribute their abilities to in the community activities and also give opinion to the rehabilitation programme.

3. The disabled in rural communities are capable of accessing to public services, receiving empowerment and rehabilitation services in responding to their needs.

In 2009, the Ministry of Social Development and Human Security moved further to expand the CBR programme to 25 target areas in Bangkok. At the provincial level, the successful CBR programmes were built on and included in provinces' development plan. Furthermore, other disabled organizations, private organizations were encouraged to take part in supporting the CBR.

8. Summary of the education systems for children with disabilities

Stipulating in the Rehabilitation of Disabled Persons Act 1991, persons with disabilities are entitled to receive basic education, occupational education and higher education in accordance with the National Education Plan. In 1994, the government announced a Special Educational Development Plan for persons with disabilities planned by the Ministry of Education. The Ministry of Education

organized a public forum on education management for persons with disabilities in 1998 in order to identify problems, needs, and suggestions of persons with disabilities.

Educational opportunities for persons with disabilities were further confirmed with the new Constitution of Thailand in 1997, which states that all Thai citizens will have an equal right to obtain basic education.

A major turning point of education management for persons with disabilities emerged in 1999, when the Government declared that year 1999 as the "Year of Education for Persons with Disabilities", which was one of the national policies in that year. It clearly confirms "Any disabled persons who wishes to go to school, can do so". In the same year, the Government also announced a new policy on education for persons with disabilities, by stating that persons with disabilities must have the same educational opportunities as others. It is considered a long-term policy and a goal regulation for persons with disabilities for education in Thailand. It can also improve the well-being of families with persons with disabilities.

Moreover, according to the Person with Disabilities Education Act, 2008, persons with disabilities shall be able to access education services and other resources without fee at all levels throughout their life. It aims to improve the Thai educational system for persons with disabilities and to enhance their quality of life and independent living through education system. In Thailand, there are three educational systems arranged for persons with disabilities, as follows:

1. special schools for persons with disabilities, using a similar curriculum to mainstream schools;
2. mainstream schools where persons with disabilities are entitled to participate at all levels of education;
3. a non-formal education system with no age limitation on participants and basically initiated by volunteers.Apart from these systems, there areclasses in hospitals for chronically ill children with disabilities.

In 1998, Ratchasuda Colleage, Mahidol University set up higher education for persons with disabilities. The College offers certificates, bachelors and masters degrees in disability related fields and has special programmes for the deaf and the blind. Additionally, the college conducts researches and studies to develop knowledge for maximizing the potential of persons with disabilities through

participation from all stakeholders. To date, 18 masters students with disabilities have graduated, some with degrees in rehabilitation counseling and others in access technology. Currently, 58 deaf and hearing-impaired undergraduates are studying at the College. Many of them have already received certificates. Importantly, the College also offers training courses for sign language instructors.

9. Case example of services for children with disability

a) Collaboration between health and social welfare

The Thai government set up a one stop service, the cooperation among Ministry of Public Health, Ministry of Social Development and Human Security, Ministry of Education, Ministry of Interior, to promote the rights to access welfare and service of persons with disabilities. The one stop service center is regarded as the mechanism and network at the provincial and community level which joined hand by social development volunteers, local administrative office, health care centers, schools, and the Provincial office of Social Development and Human Secuirity.

b) The programmes of early detection and intervention

- **Registration of persons with disabilities**

The National Office for Empowerment of Persons with Disabilities (NEP) has proceeded the registration of person with disabilities nation wide. The records will allow the government to analyze and formulate effective strategies and plans to detect the root cause of the problems and find solutions, at the same time, the PwD will manage to access to social welfares and services from the government. As of 30 Jun 2009, there were 821,711 persons with disabilities registered with NEP.

- **Development and Amendment of Laws**

The Person with Disabilities Empowerment Act A.D. 2007 will be amended to reflect the changed situation and needs of the persons with disabilities. It is expected that the section of the establishment of NEP will be adjusted in order to change NEP's status to be a legal entity. This will strengthen the work of NEP in promoting and protecting persons with disabilities.

- Screening for hypothyroid and phyneyketonuria was done in every newborn, and each baby will be screened for development during vaccination programme at the 2nd, 4th and 6th month old. Additionally, babies who delay in development will be refered for diagnosis and early intervention program in district and provincial hospitals.

10. Current situation of international cooperation of health and social welfare services for children with disability

1) The establishment of Asia-Pacific Centre for Disability (APCD) in Thailand

The "Asia-Pacific Development Center on Disability" (APCD) is a regional center on disability established in Bangkok, Thailand as a legacy of the Asia and Pacific Decade of Disabled Persons 1993-2002, under joint collaboration of the Government of Japan and the Royal Thai Government. APCD has been endorsed by the United Nations Economic and Social Commission of Asia and the Pacific as a regional cooperative base for its Biwako Millennium Framework for Action towards an Inclusive, Barrier-free and Rigths-based Society for Persons with Disabilities in the Asian and Pacific Decade of Disabled Persons, 2003-2012.

The APCD project was implemented in Bangkok on 1 August 2002 through the technical cooperation from the Japan International Cooperation Agency (JICA) with the Ministry of Social Development and Human Security,Thailand; the necessary infrastructure was provided by Japan's Grant Aid.

2) The First Asia Pacific Community-based Rehabilitation Congress, Bangkok, Thailand

From 18-20 February, the 1st Asia-Pacific Community-Based Rehabilitation Congress was held in Bangkok, Thailand with the theme "Community-Based Inclusive Development". 630 participants attended from 53 countries in the region, including representatives from central and local governments, NGOs, disabled people's organizations, and regional and international organizations. The involvement of people with disabilities was extremely high, both as presenters and participants.

The Congress was inaugurated by the Honourable Social Welfare Minister from the Government of Thailand and was the largest gathering of community-based rehabilitation (CBR) practitioners to date. The Congress provided an important opportunity to present innovative initiatives underway in the region as well as interesting work being done in research on CBR. The 2nd Asia-Pacific Congress on Community-Based Rehabilitation may be held in the Philippines in 2011.

3) Thailand has been a party to several international agreements on children an person with disabilities. As such, she has an obligation to abide by those agreements and develop country reports to express Thailand's progress, sincerity, and efforts to comply with the agreements for the better quality of life of persons with disabilities. The key international agreements that Thailand have been agreed and abided by including:

3.1) Convention on the Rights of Persons with Disabilities: Thailand ratified the convention on 29 July 2009 by having the Person with Disabilities' Quality of Life Promotion Act, 2007 and the Person with Disabilities Education Act, 2008 as maing supporting laws to the convention;

3.2) The Biwako Millennium Framework for Action and Biwako Plus Five towards an inclusive, Barrier-free and Rights-based Society for Persons with Disabilities in Asia and Pacific: Thailand has not only actively complied with the BMF, but also played role in emphasizing, and encouraging other state parties to take serious actions to abide by the BMF. At the 64th Session of ESCAP in April 2008, Thailand proposed the resolution on the regional implementation of the BMF calling for the parties to consider and assimilate issues of person with disabilities to their development plans;

3.3) The Convention on the Rights of the Child: Thailand became a party to the convention on 26 April 1992. Consequently, every five years, Thailand must provide a progress report to the Committee on the Rights of the Child. This Committee is based in Geneva and monitors each country's efforts to guarantee the rights laid out in the Convention.

After considering Thailand's latest report, delivered in 2005, the Committee noted many successes in setting up legislation and

state structures for the protection of children and their rights. But the Committee also highlighted a number of areas of concern such as domestic and international legislation, enforcement of legislation, monitoring and data collection, and ensuring access to basic services for the most vulnerable children. Currently, Thailand is proceeding to develop the 3rd country progress report on the convention to be submitted to the committee in 2010.