Screening of Children with Learning Disabilities and Emotional Behavior Disorders

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Children with LD = Vulnerable: Why?

- Attitude of parents: likely to leave their children’s health and education to be primarily under both health organizations and schools.

- Schools and hospitals perform basically on KPI and lack of integrated programs between health and education, especially for children with LD.
Inspirations

• Perceiving the problem of LD in children of our health personnel.

• Education system identifies children with LD as a “Special Child” group and they will be sent to attend a class at a special school.

• Health care professionals could do only diagnosis to indicate that LD children are able to be entitled to get proper services, which are still difficult to access.
1. Arranged a meeting among parents, school managers and hospital.
2. Sent health personnel, physicians and nurses to attend a “Child and Adolescent Psychiatry and Child Development” course.
4. Organized a training program on LD screening for teachers.
5. Used an appointment system to reach access from both schools and hospital.
6. Designed treatment, referral and monitoring process and support schools in providing additional classes such as sports and music.
7. Visited schools and homes of children with LD.
Meeting among parents, schools and hospital
Techers and parents brought students with primarily screened for LD to the hospital for repeated LD screening

Screening place
Monitor additional classes
Case follow-up

Special Child’s Parents Association
Results

Information: September, 2016

- 46 (41%) schools under the administration of Loei Primary Educational Service Area Office participated in this project, covering 3 districts.
- 2,009 (35.7%) students were screened.
Information: September, 2016

- Primary screening found 243 students with learning problems, representing 12.1%.
- Repeated screening found 3 (0.15%) students without learning problems and 240 (11.95%) students with learning problems.
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By Loei Primary Educational Service Area Office and Dansai Crown Prince Hospital

Teachers screen students using an “observatory form of behavior for children with LD and Emotional Behavior Disorders”

Children with out LD and Emotional Behavior Disorders

Attend a regular study Program

Slow Learners

Coordination process

Assessment and Diagnosis processes perform by psychiatric nurse in Child and Adolescent Mental Health, and pediatrician

LD ADHD ID Autism

School create an additional study program called “Individualiza Education Program” (IEP)

Occupational herapist
Outcomes

• Social is aware of children’s health behaviors.

• Have an effective screening program and instrument based on local context.

• Schools are able to cope with the problems and being more creative in creating appropriate additional classes for LD students and students with LD can still stay in a regular study program.

• Parents accept and spend quality time with their children.

• Hospital has a good diagnosis and management system, covering children living in its catchment area.
Success factors

1. Effective coordination among hospital and school managers.

2. Simple and effective screening instrument.

3. High skilled multidisciplinary team with good attitude toward providing services to children with LD.

4. Good cooperation and trust from parents and teachers.
Recommendation

“Government should set up a development center networks to exchange knowledge about services for children with LD based on area context”.

[Image of children planting and watering a plant]