

Autism at a Glance in ASEAN



Under the Autism Mapping Project
in the ASEAN Region

Part II Country Profiles



Japan-ASEAN Cooperation

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PREFACE

In 2016 the ASEAN Secretariat initiated the idea to undertake the “Autism Mapping Project in the ASEAN Region” to understand the situation of autism and to take stock of what had been done so far for persons with autism in the region. It estimated that autism affects one percent of the world’s population. According to the World Health Organization, one in 160 children has an autism spectrum disorder. About 6 million persons with autism live in Southeast Asia. It is a significant number that affects the development of all ASEAN Member States (AMS) in the region.



However, the prevalence of autism in the ASEAN region is unknown since autism is a hidden disability that is difficult to detect because autism is a neuro-developmental disorder which is a spectrum, there is no one type of symptoms and it can affect people differently. As a consequence, many persons with autism are neglected and not included in governmental and non-governmental programs and services designed for persons with disabilities. Their exclusion from the development process also obstruct the creation of laws and policies for the promotion and protection of the rights of persons with autism.

The issues concerning persons with autism were propelled mainly by persons with autism themselves, their families and other stakeholders. These are evidenced by the conduct of the annual commemoration of Autism Day on the 2nd of April of every year and the conduct of autism sport events and other community-based activities to raise awareness and to construct unitary collaboration on strengthening persons with autism among AMS.

I wish to take this opportunity to express my sincere thanks to the ASEAN Secretariat for assigning the Asia-Pacific Development Center on Disability (APCD) to be the implementing agency for the “Autism Mapping Project in the ASEAN Region.” The project is intended to contribute towards data collection, policy recommendation and awareness raising which are critical to building evidence-based interventions that can prevent and remove barriers faced by persons with autism.

This document “Autism at a Glance in ASEAN” is one of the major outputs of the project. It highlights the country profiles on autism especially the present scenario of AMS. It is proof of the strategic partnership between AMS through the ASEAN Senior Officials Meeting on Social Welfare and Development (SOMSWD) and the ASEAN Secretariat and together with APCD.

I hope that it will contribute to data collection on persons with autism in the ASEAN region. It may also lead to improvement in their wellbeing and quality of life as well as of their parents and caregivers. Most significantly, it may improve the understanding of society as a whole and contribute to the empowerment of persons with autism in the inclusive society.



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Introduction

Autism refers to a range of conditions characterised by some degree of impaired social behaviour, communication and language, and a narrow range of interests and activities that are both unique to the individual and carried out repetitively. Autism begins in childhood and tends to persist into adolescence and adulthood. In most cases the conditions are apparent during the first 5 years of life (World Health Organisation, 2020). In current, the prevalence estimation of persons with autism globally is approximately at 1% of the population worldwide (CDC,2020).

The United Nations (UN) commemorated World Autism Awareness Day on April 2, which is also commemorated globally on this date. World Autism Awareness Day was established by the U.N. General Assembly (A/RES/62/139) on Dec. 18, 2007. Members of the U.N. General Assembly expressed deep concern regarding the prevalence rates of autism throughout the world and the need to address the long-term outcomes for children, families and communities. The resolution declared that starting April 2, 2008, and on this date each year, representatives of the U.N. and nongovernmental organizations (NGOs) would raise awareness about autism throughout the world as well as address the fundamental human rights of persons with autism (U.N. General Assembly, 2007).

In crafting Resolution 62/139, members of the U.N. General Assembly acknowledged the Convention on the Rights of the Child (U.N. Human Rights, 1989) and the Convention on the Rights of Persons with Disabilities (U.N. Enable, 2006), which guarantee rights and freedoms to; (i) Live in dignity, (ii) Live a full life in the community as other children do, and (iii) be self-reliant economically in adulthood (Gary & Neal, 2015).


Currently, lack of data on persons with autism, particularly in developing countries, collection of research data and statistics to support the formulation of evidence-based policies is key to all aspects of the implementation of disability-inclusive policies and programmes in line with the Convention on the Rights of Persons with Disabilities. Reliability of data and statistics is essential for the formulation of policies, and to monitor progress and assess the effectiveness of measures to implement the Convention, and to advance disability inclusive development and realize all internationally agreed development goals for persons with autism. For better policy making, a government requires more in-depth information from every sector that provided services to persons with autism, which becomes possible with big data. Analysing gathered data can improve the autism related policies and allow governments to boost their services faster and in a sustainable manner.

Autism at the Glance in ASEAN collates the available data on autism in the region, with a particular emphasis on the number, education, employment, health and social welfare programme of persons with autism.

Part 1: Autism at a Glance in ASEAN. Chapter 1, explained the methodology used in this project, how data was collected and analysed from all ASEAN Member States. Chapter 2 explores the ASEAN country national law and international commitments. Chapter 3 elucidate facts and figures about the number of persons with autism, education, health and employment. Chapter 4 present the programs and services for persons with autism in early intervention, health, education, employment, and social services provided by ASEAN Members States. Finally, Chapter 5 highlights the challenges faced by ASEAN members to promote empowerment for persons with autism.

In Part 2: Country Profiles, provide the latest country's report on demographic, information of persons with autism, programme and services, challenges and country strategic plan by governments to enhance the quality of life for persons with autism.

Country Profiles on Autism



BRUNEI
DARUSSALAM

BRUNEI DARUSSALAM AUTISM COUNTRY PROFILE

for

‘AUTISM AT A GLANCE IN ASEAN’

1. Introduction

- 1.1. Brunei Darussalam achieved its full independence on 1 January 1984, and joined ASEAN as its sixth member on 7 January 1984. The country is situated on the north-west coast of the island of Borneo with a total area of 5,765-sq. km. and a coastline of about 161-km along the South China Sea. Brunei Darussalam is divided into four districts namely Brunei-Muara, Tutong, Belait and Temburong. Bandar Seri Begawan is the capital city and has an area of about 16 sq. km.
- 1.2. The estimated population for Brunei Darussalam in 2018 is 442,400 of which 233,400 are males and 209,000 are females. The multi-ethnic population is made up of Malays (66%), Chinese (10%) and others (24%). According to the country’s 2001 population census, the average household size was 6.0 persons per household.
- 1.3. Islam is the official religion of Brunei Darussalam while other religions are also practiced. Although Malay is the official language, English is widely spoken. There are also other languages spoken by the respective communities, such as Mandarin.
- 1.4. Melayu Islam Beraja (MIB) or Malay Islamic Monarchy has been in existence since the 15th century and was officially proclaimed in January 1984. MIB is a national philosophy which integrates the language, culture and Malay customs, teachings of Islam and the monarchy system of administration.
- 1.5. In 2019 the number of Persons with Disability (PWD) is about 7,038 people which about 1.6% of Persons with Disability exist in Brunei Darussalam.

2. Methodology

- 2.1 There are no specific data available on the diagnosis nor category of impairments in Brunei Darussalam. Content on data collected nationwide is composed of basic information of individual PWDs from various agencies and organizations.
- 2.2 Data on PWDs are collected from various Government agencies through their respected responsibilities of health, education including vocational and welfare. Methods of collecting data are extended through registrations made under Organizations of Persons with Disabilities (OPD). All data are centralized to the Department of Community Development under the Ministry of Culture, Youth and Sports for compilation quarterly and annually.
- 2.3 Government agencies involved in data collection are: -
1. The Children Development Center, Ministry of Health.
 2. The Paediatrics Unit, Suri Seri Begawan Hospital, Kuala Belait, Ministry of Health.
 3. Department of Community Development, Ministry of Culture, Youth and Sports.
 4. Special Education Unit, Ministry of Education.

3. Law and Policy

- 3.1 In Brunei Darussalam, PWDs are addressed as Persons with Different Abilities. Following several inter-agency consultations, the proposed definition of PWDs, which is suggested for incorporation in the draft law "Persons with Different Abilities Order", is: -

"Persons with different abilities means a person whose prospects of securing sustainable livelihood including retaining places, retaining and advancing in education and training institutions, employment, recreation and social interaction as equal members of the community is substantially and continuously reduced as a result of physical, sensory, communication, intellectual, behavioral and developmental impairments."

3.2 Since the signing of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), Brunei Darussalam has introduced several laws that encompass the rights of PWDs in related areas, and enable the implementation of the Convention on a rights-based approach.

3.3 These laws and policies provide for the care and protection of PWDs and ensure their access to education, health, shelter, security and other human rights and are generally in conformity with the principles and articles of the Convention:

3.3.1 *Old Age and Disability Act*

3.3.2 *Civil Law*

3.3.3 *Syariah Penal Code*

3.3.4 *Building Control Order*

3.3.5 *Education Act*

3.3.6 *Emergency Regulation Act*

3.3.7 *Compulsory Education Act*

3.3.8 *Education Regulation*

3.3.9 *Compulsory Islamic Education*

3.3.10 *Islamic Family Law Order*

3.3.11 *Legitimacy Order*

3.3.12 *Employment Order*

3.3.13 *Mental Health Order*

3.3.14 *Children and Young Person Order*

3.3.15 *Women and Girls Protection Act*

3.3.16 *Women and Girls Protection Act (Place of Safety Rules)*

3.3.17 *Criminal Procedure Code*

3.3.18 *Chinese Marriages Act*

3.3.19 *Workmen Compensation act*

3.3.20 *Employment Agencies Order*

3.4 In Asia and the Pacific, Brunei Darussalam supports the UN Economic and Social Commission for Asia Pacific (UNESCAP)'s initiatives on advancing the rights of PWDs and participated in the 2012 High-Level Intergovernmental Meeting on the Final Review of the Implementation of the Asian and Pacific Decade of Disabled Persons 2003 – 2012 in Incheon, South Korea.

- 3.5 Brunei Darussalam is also active in regional activities that promote and protect the rights of people with different abilities. In 2011, Brunei Darussalam, along with fellow ASEAN Member States, adopted the Bali Declaration on the Enhancement of the Role and Participation of the Persons with Disabilities in ASEAN Community. In 2013, when Brunei Darussalam was the Chair of ASEAN, it hosted the 3rd ASEAN Disability Forum which carried the theme of "Reduce Poverty and Enhance Employment Prospects", with a view to serve as a platform for realizing national and international policy initiatives towards empowering, developing and involving persons with disabilities in the society. Currently, Brunei Darussalam is working within ASEAN to develop a Regional Action Plan on Mainstreaming the Rights of Persons with Disabilities in the ASEAN Community.
- 3.6 The strategic directions of the Brunei Darussalam Plan of Action on PWDs that was formulated by the Special Committee on Persons with Different Abilities and the Elderly under the National Council on Social Issues, has been aligned with the UNCRPD, Incheon Strategy and ASEAN vision on the promotion and development of PWDs.
- 3.7 To further strengthen measures taken to effectively protect PWDs, Brunei Darussalam is currently drafting a law which is the Persons with Different Abilities Order that includes protection provisions for PWDs in the following situations:
- 3.7.1 Neglect or ill-treatment,
 - 3.7.2 Willful abuse without grievous hurt,
 - 3.7.3 Willful abuse with grievous hurt,
 - 3.7.4 Failure to prevent abuse,
 - 3.7.5 Willful or negligent neglect by relative or person having charge

4. Stakeholders

- 4.1 A Ministerial-level National Council on Social Issues, chaired by the Minister of Culture, Youth and Sports, was established in April 2008, whose main functions are to identify social issues, promulgate new legislation or amend existing legislation pertaining to these social issues, and to coordinate with relevant agencies in ensuring their implementation.

- 4.2 Under this National Council, six Special Committees were set up, including the Special Committee on Persons with Different Abilities and The Elderly which was established in 2008. The committee is chaired by the Minister of Culture, Youth and Sports and its membership comprises of senior officials from relevant ministries and agencies, as well as non-governmental organizations. The committee's function is to ensure an enabling environment and strengthening mechanisms for policy formulation and implementation of initiatives on the interests of PWDs. Through this committee, a national plan of action has been drafted which seeks to promote the rights of, and ensure effective participation of PWDs in the community. As mentioned in para 3.6 above, the strategic directions of this national plan of action has been aligned with Brunei Darussalam's international commitments on PWDs.
- 4.3 The government recognizes the participation of PWDs through the establishment of the Welfare Council for Persons with Different Abilities that represents nine Organizations of Persons with Disabilities (OPD) in Brunei Darussalam, which are as follows:
- 4.3.1 The Association of the Handicapped Children (KACA),
 - 4.3.2 Paraplegic and Physically Disabled Association (PAPDA),
 - 4.3.3 Pusat Ehsan Al-Ameerah Al-Hajjah Maryam,
 - 4.3.4 Society for the Management of Autism Related issues – in Training, Education and Resources (SMARTER),
 - 4.3.5 Special Olympics Brunei Darussalam (SOBD),
 - 4.3.6 Brunei Darussalam National Association for The Blind (BDNAB),
 - 4.3.7 Learning Ladders (for ASD),
 - 4.3.8 Persatuan Orang Kurang Pendengaran (OKP) for those with Hearing Impairments
 - 4.3.9 ABLE - Down Syndrome Society
- 4.4 National efforts to advocate and empower the differently-abled in Brunei Darussalam is carried out through a "whole of nation" approach in collaboration with other government agencies, non-governmental bodies and strategic partners. In this regard, the Council for the Welfare of Persons with Different Abilities and all non-governmental organizations also play an important role in educating and raising public awareness to support the rights of the differently-abled, especially through activities such as commemorating World Autism Awareness Day and national charity runs.

5. Statistical data on Autism

- 5.1 In Brunei Darussalam, there is no specific data on Autism nor in areas pertaining to diagnosis and impairment on the national scale. However, Persons with Autism are not excluded from any of the services and facilities provided in the country.
- 5.2 The Child Development Centre of the Ministry of Health is currently carrying out a pilot study to set up a National Register for Autism Spectrum Disorder in an attempt to collect data on Autism and in areas pertaining to diagnosis and impairment on the national scale.

	Statistic	Comment								
A	Social Welfare	<p>The Department of Community Development collects data based on the issuance of three types of allowances as below:</p> <table border="1"> <thead> <tr> <th>Type of allowance</th> <th>No. of recipients</th> </tr> </thead> <tbody> <tr> <td>Disability allowance</td> <td>2443</td> </tr> <tr> <td>Blind allowance</td> <td>241</td> </tr> <tr> <td>Mental disorder allowance</td> <td>866</td> </tr> </tbody> </table> <p><i>*Data collected as of December 2019</i></p>	Type of allowance	No. of recipients	Disability allowance	2443	Blind allowance	241	Mental disorder allowance	866
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Disability allowance	2443									
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B	Health	<p>The Child Development Centre at RIPAS Hospital in Bandar Seri Begawan and The Paediatrics Department in SSB Hospital in Kuala Belait collects data on Children with Disabilities (CWD) referred for concerns about their development, as well as those who have established disabling conditions.</p> <table border="1"> <thead> <tr> <th>Male</th> <th>Female</th> <th>Total</th> <th>Ratio of male to female</th> </tr> </thead> <tbody> <tr> <td>1329 = 72% of the total</td> <td>529 = 28% of the total</td> <td>1858</td> <td>2.6 to 1</td> </tr> </tbody> </table> <p><i>Note: Statistics do not include those children seen in the SSB Hospital, Kuala Belait – data is up to date until 31st December 2019, being collected from all available records since 1999.</i></p>	Male	Female	Total	Ratio of male to female	1329 = 72% of the total	529 = 28% of the total	1858	2.6 to 1
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	Statistic	Comment																								
C	Education	<p>The Special Education Unit collects data on students with disabilities under the services and program provided by the Ministry of Education</p> <p><u>Autism Data on Government Primary & Secondary Schools as of Dec. 2019</u></p> <table border="1"> <thead> <tr> <th>Level</th> <th>Pre-School</th> <th>Primary (Year 1 to Year 6)</th> <th colspan="2">Secondary</th> <th>Total</th> </tr> <tr> <td rowspan="2">No. of Students</td> <td rowspan="2">55</td> <td rowspan="2">238</td> <th>Mainstream (Academic)</th> <th>Pre - Vocational Programme (Functional Academic)</th> <td rowspan="2">418</td> </tr> </thead> <tbody> <tr> <td>45</td> <td>80</td> </tr> </tbody> </table> <p><u>Autism Data on Private Primary & Secondary Schools based on referral received as of December, 2019.</u></p> <table border="1"> <thead> <tr> <th>Level</th> <th>Pre-School</th> <th>Primary (Year 1 to Year 6)</th> <th>Secondary</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>No. of Students</td> <td>12</td> <td>9</td> <td>2</td> <td>23</td> </tr> </tbody> </table>	Level	Pre-School	Primary (Year 1 to Year 6)	Secondary		Total	No. of Students	55	238	Mainstream (Academic)	Pre - Vocational Programme (Functional Academic)	418	45	80	Level	Pre-School	Primary (Year 1 to Year 6)	Secondary	Total	No. of Students	12	9	2	23
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D	Employment	<p>Currently, there is no comprehensive data on employment of PWDs. However, in 2019, the Government through the Ministry of Culture, Youth and Sports conducted a profiling survey on employment of PWDs. Based on the feedback received from several government agencies and government-linked companies, it has so far shown that a total of 117 PWDs were employed in the public and private sector. More results from the survey is expected.</p>																								
E	Other resources	<p>There are 2 OPDs providing services exclusively designated for Persons with Autism: -</p> <ol style="list-style-type: none"> 1. SMARTER Brunei 2. Learning ladders Society 																								

6. Programs and Services for Persons with Disabilities

No	Program/ Services for PWDs	Comment
A	Early- Intervention	<p>The country's universal child health surveillance program via the Maternal and Child Health services provides excellent opportunities for the early detection of children with autism spectrum disorder as well as other disabling conditions.</p> <p>These children are then referred to The Child Development Centre (CDC) or The Paediatrics Department in Suri Seri Begawan (SSB) Hospital in Kuala Belait, which provide services to facilitate the early diagnosis, assessment, treatment and support therapy for children with disabilities in order to ensure their optimal health and development.</p> <p>Both health facilities provide early diagnosis, and early intervention via the provision of assessment and therapies such as speech and language therapy, occupational therapy and psychology. They also provide programmes to educate and support parents of children with autism.</p> <p>From 2010, the CDC ran the National Autistic Society EarlyBird Programme for Parents of Children with Autism and since 2016, this had been replaced by the Ministry of Health's Parent Education Program on Autism (PEPA) for the parents whose children have been recently diagnosed with autism spectrum disorder. In addition, there are also non-government organizations providing early intervention services for Persons with Autism, which include:</p> <ol style="list-style-type: none"> 1. <u>Non -profit</u> <ul style="list-style-type: none"> • SMARTER Brunei – this center caters exclusively for children and young adults with ASD • Pusat Ehsan Al-Ameerah Al-Hajjah Maryam • Learning ladders Society

No	Program/ Services for PWDs	Comment
		<p>2. <u>Private</u> – There are now many private early child intervention/enrichment centers throughout the country.</p>
B	Health	<p>The national health care policy of universal coverage ensures high accessibility of comprehensive health care services provided through a network of health facilities for all Bruneians including those with disabilities. There are hospitals, health centres and clinics, dental services situated in all the districts. All Bruneians, including persons with different abilities have free access to these services and in areas where these facilities are physically inaccessible, travelling clinics and flying medical services are provided. Other services include the Community Psychiatry Service and Home-Based Nursing Service for persons with different abilities who are unable to leave their homes.</p> <p>Assistive devices are provided for persons with different abilities to help them optimize their function and live as independently as possible. The Rehabilitation Services and Department of Paediatric Services assesses persons with different abilities of their abilities and needs and prescribe suitable assistive devices. The Ministry of Health provides only basic prosthetic limbs, orthoses and hearing aids to persons with different abilities.</p>
C	Education	<p>To fulfil the targets of the Brunei Vision 2035, free education is provided to all Brunei citizens, including the Government's efforts towards mainstreaming PWDs perspectives in development. Brunei Darussalam has an inclusive education policy whereby there is no segregation of schools for those with different abilities. Education services for them are provided by Special Education Needs Assistance (SENA) available in many schools. The Government is currently establishing Centre of Excellence for students with different abilities, after a successful attempt at establishing a Model Inclusive Schools of Excellent Services for Children (MIS) earlier in 2008 and 2009.</p>

No	Program/ Services for PWDs	Comment
		<p>Model Inclusive Schools of Excellent Services for Children (MIS) is a significant initiative undertaken by the Ministry of Education in order to meet the needs of students with different abilities including those with Autism. Through this initiative, nine purposely built buildings, five at primary level and four in secondary level, are equipped with specialized learning equipment and teaching resources built within the vicinity of the mainstream school compound. MIS are feeder schools for students with different abilities within the catchment area. Such students could acquire the relevant learning and adaptive skills to prepare them to actively participate alongside their same age peers in the regular classroom.</p> <p>In order to respond to challenges such as limited accessibility, inadequate specialized resources, and shortage of skilled human resources, the Ministry of Education embarked on a major centralization project to set up two Centers of Excellence for Inclusive Education in the Temburong District in early 2019. These centers are essentially local schools that are equipped with the appropriate infrastructure and facilities, specialized resources and learning equipment as well as the provision of SENA teachers and teacher aides to meet the needs of students based on their diagnosis. Sultan Hassan Primary School is the chosen school that is strategically located within the Temburong District for students with Autism, speech, language, and communication needs as well as those with behavior issues. Whereas, Rataie Primary school caters for students with sensory (hearing and visually impaired) and physical needs. It aims to promote equal opportunities according to student needs and abilities in order to ensure access, engagement and active participation in central schools.</p>

No	Program/ Services for PWDs	Comment
		<p>Selected primary and secondary schools have also been allocated additional funding and support to ensure they have the necessary school facilities, special learning equipment or resources, specialist support services, and teacher training programs to provide quality inclusive education for a wide range of students with diverse learning needs.</p> <p>The National Education System for the 21st Century (SPN-21), which commenced in 2009, provides students with multiple pathways according to their individual capabilities, interests, inclination, growth and development, thereby catering to their needs.</p> <p>The Education Act, 2003 stipulates that MOE "... shall provide special education in such government primary or secondary schools as he thinks fit and in any special school established by the Minister ..."</p> <p>Under the Compulsory Education Act, 2007 a child of compulsory school age, that is, "a child above the age of 6 years who has not yet attained the age of 15 years", shall attend school regularly as a pupil.</p> <p>Under the services of the Religious Special Education Unit, Religious Schools Division, Department Of Religious Studies, Ministry Of Religious Affairs, several programmes for PWDs are also provided:</p> <ul style="list-style-type: none"> • <u>Intervention Programme by Pull-Out System</u> <p>Teaching and learning for Special Religious Education students, especially autism students, are held in the same religious school building by "Pull - Out System". This is done in order to help and provide appropriate learning services. The students will be taught with individual learning through a method of structured learning approach using the Picture Exchange Communication System (PECS) system and also study while playing.</p>

No	Program/ Services for PWDs	Comment
		<ul style="list-style-type: none"> • <u>The National Religious Programme for Religious and Arabic Schools</u> The objective of the programme is to realise strategic plans in order to increase the percentage of students following co-curricular activities in the religious and Arabic schools. However students with different abilities, including autistic students are welcome to participate and be involved in this programme in their religious schools respectively. With their involvement, they can socialize and often get to know their peers. Some forms of activities arranged during the programme are also performed, including the recitation of the Quran recitation and some “ibadah” or worship sessions. • <u>Religious Internship Programme [Program Latihan Amali Uqama]</u> Every religious school conducts a religious internship programme to strengthen the ability of pupils in religious areas especially “Solat” (prayer) and “Thoharah” (cleanliness in Islam). This activity is carried out once a month or in every school term. This programme also involves students with different abilities, such as autism students, and who are assisted and aided by their special religious education teachers. Indirectly, they are involved in every activity or programme organized by their schools. • <u>Cued Speech Programme</u> Cued Speech is a visual system of communication used with and among deaf or hard-of-hearing people. It also can be used by people with non-verbal autistic challenges. It is phonemic-based and systemizes traditionally spoken languages accessible by using a small number of handshapes, known as cues (representing consonants), in different locations near the mouth (representing vowels) to convey spoken language in a visual format.

No	Program/ Services for PWDs	Comment
		<p>Thus, cued speech is one of the initiatives of the Special Religious Education Unit under Department of Islamic Studies which aims to approach and teach students not only with hearing and speech impairment but also students with autism, down syndrome, selective mutism and multiple learning disabilities. Perhaps cued speech is one of the alternatives to the effective teaching approach to teach students hearing and speech.</p> <ul style="list-style-type: none"> • <u>Oral and written test / examination and Religious Education Primary Schools Certificate (SSSRU) examinations</u> <p>Autism students also participate in either oral or written tests or examinations, in the same manner as other pupils. These forms of oral and written questions can be modified according to their needs and levels of ability. The implementation of assessment can be modified according to the suitability, appropriateness and understanding of students with different abilities especially those with autism.</p> <p>It is compulsory for Qualified Autism students in primary 6 to sit for Religious Education Primary Schools Certificate (SSSRU) examinations and registered as special candidates. Several modifications and adaptations are carried out during the test and the examination such as:</p> <ol style="list-style-type: none"> a. Using simple language. b. Be exceeded or given additional time. c. Language translations. d. Read the question. e. Written answers according to what students are spoken for. f. Using the sign language or cued speech. g. In a separate room.

No	Program/ Services for PWDs	Comment
		<ul style="list-style-type: none"> • <u>Centralization of mid-year and final year examination.</u> Normally special education needs students are centralized when undergoing their midyear and final year written examinations. Centralization of examination was implemented in 2014. Several religious schools all over the country have been selected as examination centers for students with different abilities including Autistic students. <p>Through this centralization, the examination management can be adjusted regularly and properly coordinated. Other than that, examination management procedures can be carried out more systematically, efficient, well managed, planned orderly and effectively.</p> <ul style="list-style-type: none"> • <u>Recitation of the holy Quran during the holy month of Ramadan</u> Students with different abilities, including those with Autism, are encouraged to participate in this religious activity throughout the holy month of Ramadan. Students with different abilities in primary four, five and six are required to attend religious schools during the holy month of Ramadan. <p>Special religious education unit was involved to enliven the holy month of Ramadan. Thus, several activities were arranged and one of them was reciting the holy Quran by the students with different abilities. The students will be assisted by their teachers to recite the Quran.</p>
D	Employment	Brunei Darussalam recognizes the rights of PWDs to work and to gain a living by participating in the labour market and an open work environment. Through the multi agencies approach in preparing PWDs for that purpose, the Government provides opportunities for such PWDs to achieve their full potential and learn various

No	Program/ Services for PWDs	Comment
		<p>independent living skills. The more able among such group of students with different abilities may acquire some basic academic skills; living and social skills; basic vocational and work skills to prepare them for the world of work. There has certainly been an increase in public awareness about PWDs over the years and a corresponding increase in public acceptance of PWDs. There is an increasing recognition that they can be useful members of the community and contribute to the economic development of the country. Presently, there is no employment quota in the country for PWDs. However, more public and private employers are employing people PWDs, where such encouraging examples can be currently observed in several government departments and private institutions.</p> <p>Under the purview of the Ministry of Culture, Youth and Sports, several programs and opportunities are available for PWDs to undergo skills development courses that will enable them to find employment or start their own businesses, training for entrepreneurship (self-employment), including through social enterprises:</p> <ul style="list-style-type: none"> • Pusat Bahagia, under the Department of Community Development is a skill training (job coaching) center for PWDs, focusing on living and social skills; basic vocational and work skills. Each of the 4 districts in Brunei Darussalam have an established Pusat Bahagia to assist PWDs. • The Youth Development Centre runs vocational and skills-training courses, which are also open for PWDs. In 2019, 20 PWDs participated in short term courses in tailoring, baking and pastry-making, and beauty courses, which are aimed at developing marketable and employable skills.

No	Program/ Services for PWDs	Comment
		<p>In an effort to ensure an effective transition for PWDs in the work market, the Community Based Rehabilitation Unit also works with strategic partners to provide work placement for 3 months and job matching for PWDs, whereby in 2019, 5 PWDs were successfully employed.</p> <p>In addition, Pusat Bahagia, through its network of strategic partnership, also works to raise awareness to ensure prevention of harassment of PWDs in the workplace and that access to the general labor market are monitored and addressed. The government also provides assistance through promoting and marketing products made by PWDs, and providing entrepreneurial spaces for their products in public premises including government buildings.</p> <p>Under the purview of the Special Education Unit, Ministry of Education, in the final years of the Pre Vocational Programme (PVP) under Government secondary schools, students with different abilities undertake a work attachment for three to six months that provides them with appropriate work related skills at various placements. Schools and officers from the Special Education Unit collaborate with employers from various industries to provide suitable work attachment for these students according to their abilities and skills.</p>
E	Social services	<p>Brunei Darussalam looks into strengthening the family institution as a key priority in helping to care for the vulnerable, including PWDs, and have introduced various social security measures to ensure their accommodation, shelter and social participation needs are met.</p> <ul style="list-style-type: none"> • <u>Disability pension allowances</u>: Brunei Darussalam provides disability pension allowances for PWDs (citizens and permanent residents) categorized under the Old Age Pension and Disability Act at the rate of BND\$250 per month. In 2018, this pension allowance has been extended to citizens and

No	Program/ Services for PWDs	Comment
		<p>permanent residents who are 15 years old and below at the rate of BND\$150 per month. The allowances also covers the recipient's dependents at the rate of BND\$188 per month to the spouse and dependents above 15 years old, whilst dependents below 15 years old receives BND\$113 per month.</p> <ul style="list-style-type: none"> • <u>Subsistence allowances:</u> Welfare benefits are provided for families in need in the form of subsistence allowances amounting to BND\$200 per adult. Each child in the family will also receive subsistence allowance of BND\$65 or an education allowance of BND\$65 if he or she goes to school. These allowances are targeted to vulnerable groups such as widows, divorcees, orphans, and PWDs. • <u>Old Age Pension:</u> Regardless of means, all Brunei Darussalam citizens and permanent residents who have reached the age of 60 are also eligible for a universal old-age pension every month (BND\$250). • <u>Zakat:</u> The Brunei Islamic Religious Council (BIRC) administers and distributes zakat to eligible Muslim recipients according to the appropriate welfare support required. • <u>Government Pension Scheme (GPS):</u> The GPS is a non-contributory scheme offering old-age pension, impairments and survivorship benefits to civil servants hired prior to 1993 and all members of the uniformed forces including the military, police and prison guards. The Old Age Pension (OAP) is a universal demo grant provided to all Brunei citizens aged 60 and above. • <u>Employee Trust Fund (TAP):</u> The TAP is a contributory provident fund providing pension and social security benefits for all public and private sector workers in Brunei and those civil

No	Program/ Services for PWDs	Comment
		servants who began work in 1993. The TAP provides early withdrawals for housing and preparation for retirement as well as for death and disability. In addition, a Supplementary Complementary Pension (SCP) has been proposed which would provide an additional annuitized benefit.

7. Challenges

- 7.1. Data collection is one of the main challenges faced by service providers for PWDs in Brunei Darussalam. Technical data gathering and data analysis are required not only for the category of Autism but are fundamental to improve strategies, policies and services to the wide categories of disabilities.
- 7.2. Agencies and organizations of PWDs often have different formats and purpose of collecting data. This poses a challenge in integrating data (such as duplication, information gaps and verification) from different agencies and organization. Only basic information can be integrated and shared.
- 7.3. Brunei Darussalam applies the use of four main categories of disabilities (*Different abilities on Visual, Hearing, Intellectual and Physical*) for administrative and statistical purposes. However, the term Autism is an emerging usage on impairment that has a wide variety of diagnosis such as Asperger syndrome, Attention disorder, and high/low spectrum but currently, is positioned under the category of intellectual. This pose as a challenge when statistics are requested.
- 7.4. Data available from the Child Development Centre however shows that the prevalence of autism is increasing. As of 31st December 2019, the CDC has 1858 children and young people with autism spectrum disorder in its records.
- 7.5. The lack of local skilled professionals and the availability of training programs specific to Autism Spectrum Disorder locally pose as a challenge to produce more competent teachers who are able to provide services to students with Autism Spectrum Disorder.

8. National Strategy

- 8.1 Brunei Darussalam's national strategy on autism are essentially based on what has been set out through its National Vision 2035 (*Wawasan 2035*), the National Education System 21st Century (*SPN 21*) and Plan of Action for Persons with Disabilities (*POA*).
- 8.2 **National Vision 2035 (Wawasan 2035):** To sustain and enhance its achievements, the Government has formulated a long-term development framework for a 30-year period. The framework provides for a National Vision, Outline of Strategies and Policies for Development (OSPD) and Rancangan Kemajuan Negara (RKN). The National Vision called *Wawasan Brunei 2035* has well defined goals: By 2035, Brunei Darussalam as a nation to be recognized 'for the accomplishment of its educated and highly skilled people as measured by the highest international standards; quality of life that is among the top 10 nations in the world; and a dynamic and sustainable economy with income per capita within the top 10 countries in the world.
- 8.3 **National Education System 21st Century (SPN 21):** The Sistem Pendidikan Negara 21 (SPN 21) curriculum is designed to be broad-based and it offers various and seamless to higher education from mainstream schools and vocational institutions. One of the various pathways are designed specifically for students with different abilities. Special Educational Needs Programmed is for students who have been identified as having different abilities. The curriculum is modified and/or adapted according to the student's ability and educational needs according to an Individualized Educational Plan (IEP).
- 8.4 **Plan of Action for Persons with Disabilities (POA):** As already mentioned above, the Special Committee for persons with different abilities and the elderly has introduced a national POA that has embraced the provisions mentioned in international commitments. This POA is carried into action with multiple Ministries in providing access to PWDs in urban and rural areas by providing personalized form of a whole government approach. Its function is to ensure an enabling environment and strengthening effective mechanisms for policy formulation and implementation on the interest of PWDs.

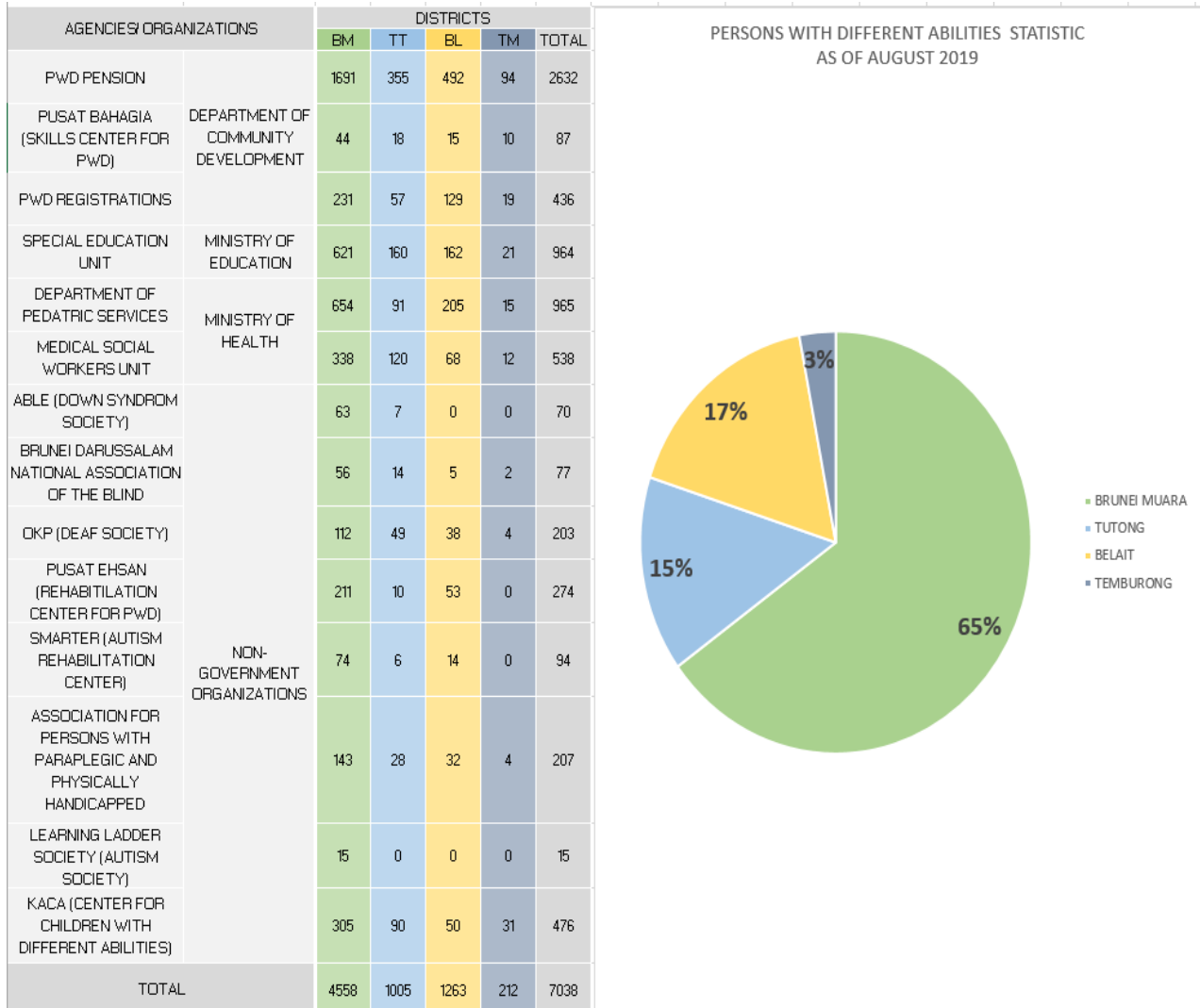
9. Conclusions and Recommendations

- 9.1 Given that autism spectrum disorder is an incurable and lifelong condition, and the prevalence of autism is increasing, there must be a whole of nation approach to address the needs of children, young people and adults with autism in Brunei Darussalam. This is where the UNCRC and the UNCRPD provides a useful foundation, and for the National Plan of Action for Persons with Disabilities to be effectively implemented.
- 9.2 There is existing cooperation between stakeholders on data collection for PWDs, which are then collected and centralized by the Department of Community Development. The data is in basic format (name/ date of birth/ address and contact details). However, there are plans to establish a national PWD registration and issue Identity Cards for PWDs, and is currently proposed under the draft Persons with Different Abilities Order.
- 9.3 In addition, Brunei Darussalam is also in the process of establishing a National Welfare System, which is a centralized database for welfare recipients, including elderly and PWDs. This effort is aimed at providing a comprehensive way for capturing data in a holistic manner, so as to ensure that government policies and intervention programmes can be targeted and provided more efficiently, with the long-term objective of empowering vulnerable groups to be more independent, employable and self-sufficient.
- 9.4 The Child Development Centre is also currently doing a pilot research study to develop a registry for children with Autism Spectrum Disorder, in collaboration with the Medical School of Universiti Brunei Darussalam.
- 9.5 Additionally, Brunei Darussalam is currently conducting a profiling survey on PWDs in two phases that includes employment, diagnosis, access for information, building and assistive aids. The first phase (conducted in 2019) gathered information about the differently-abled employed in the government sector and the private sector which so far have shown a total of 117 PWDs employed (88 in the public sector and 29 in the private sector). The second phase (expected to begin in 2020) will collect information on the involvement of the differently-abled in the community. All this is expected to improve data collection efforts on PWDs and is intended to further strengthen policies, support services and programs towards the welfare of PWDs in Brunei Darussalam.

- 9.6 For special education, it is important to send SENA teachers for training programs especially in areas related to Autism. Applied Behavior Analysis is one area that provides interventions catered for students with Autism. Having a behavior analyst localized in schools, can help increase the attainment of students with Autism by providing them with intervention programs specific to their needs.
- 9.7 More focus and efforts must be made on early intervention programs because early intervention has been shown to be very cost-effective in reducing future educational and social burdens. This can include strengthening human resources of existing government facilities and to provide support to existing non-government and non-profit early intervention centres. A monitoring mechanism for the for-profit early intervention centres may also be useful, to help parents make sure that their children get the best quality intervention and good value for their financial investment.
- 9.8 Furthermore, as the children grow into adulthood, their ongoing educational and social participation needs will need to be met. Their special educational needs will need to be addressed, not just in the primary and secondary levels but also in tertiary education by the provision of specially trained educational psychologists, teachers, and learning support staff. Those who are able to work may need help to find suitable employment.
- 9.9 For some autistic individuals, ongoing support may need to be provided, for the time when they outlive their parents and caregivers. There may be a need for supervised independent living arrangements for those that are more capable as well as residential care for those who are dependent and do not have extended family support networks.

10. Directory Support Annex References

Figure 1: Percentage of PWDs in Brunei Darussalam as of August 2019



Note: The data of PWDs registered in each agency/organization may overlap

Figure 2: Autism Statistics In The Religious Schools In Brunei Darussalam In The Year 2019.

Districts	Total numbers of students		
	Male	Female	Total
Brunei Muara	150	38	188
Tutong	27	8	35
Temburong	2	1	3
Belait	28	6	34
Overall	207	53	260

Note: The enrolment of Autistic students in religious schools include those from primary and secondary government schools and non-government organizations such as SMARTER, LEARNING LADDER SCHOOL etc

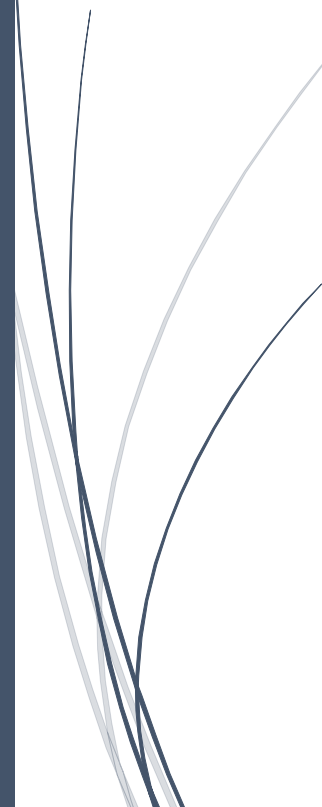
Country Profiles on Autism



Kingdom of Cambodia
Nation Religion King



Autism Mapping Country Profile in Cambodia



Foreword

In Cambodia, if we are talking about disability, we give strong priority to the inclusion, such as education, health, employment and vocational training, accessibility, social protection, cultural life, recreation, leisure and sports as well as gender, which evident stated in our National Disability Strategic Plan (NDSP), Law on the protection and the promotion of the right of persons with disabilities, Strategic plan of the Ministry of Social Affair, Veteran and Youth Rehabilitation and the others National legislative documents and we are implementation the CRPD, Incheon strategy and Asian Enabling mater plan 2025 on mainstreaming the right of persons with disabilities.

In awareness raising program, Cambodia has annually organized a number of events for Persons with Disabilities, that including Autism and Down Syndrome Day, Deaf Day, Leprosy Day, and International Day for Persons with Disabilities (IDDP). There are around 3,000 to 5,000 participants for each event. Thus, public people and Persons with Disabilities themselves are aware of the disability's rights. In addition, the Convention on the Rights of Persons with Disabilities (CRPD) was translated to national language as Khmer and printed in brail for publishing to public. Now, we have printed 100,000 CRPD books in Khmer and English together, 300 books in brail reading, and 1,500 copies CD sound.

The Royal Government of Cambodia is working hard to promote the rights of people with Autism by following the Constitution of the Kingdom of Cambodia (1993), Criminal Code of Cambodia (2004), Law on the Protection and the Promotion of Persons with disabilities (2009), the Policies and Rectangular Strategy of the Royal Government of Cambodia 4th Mandate, The Convention on the right of person with disabilities (2012), National Disability Strategy Plan (2019-2023), 5 years Strategy Plan of The Ministry of Social Affairs, Veterans and Youth Rehabilitation (2019-2023).

Cambodia has been empowerment of persons with disabilities in technology, digitalization, and ICTs areas, Cambodia has a policy to provide prize and incentive to the champion's youth with disabilities including youth with Autism who won the national and international challenge on ICTs and sports. In fact, in 2014, the leadership gold medal from Global IT Challenge (GITC) in Asia Pacific was awarded to Cambodian youth with disabilities.

Each year, Cambodia produces about 28,000 assistive devices with high quality standard of ISO 9001:2015 for free of charge to 322,421 Persons with Disabilities including 145,204 Women with Disabilities. In 2018, there were 1,851 hearing aids have given to 1,701 persons with hearing impairments. Cambodian with visual impairment has used two software programs, Job Access with Speech (JAWS) and Non-Visual Desktop Access (NVDA). Furthermore, Cambodia is going to ratify Marrakesh Treaty that facilitate access to published works for persons with print disabilities.

To provide a highest standard of health for social inclusion, Cambodia has developed the National Social Protection Policy Framework. This policy will continue to implement the allowance schemes for person with disabilities at community level by focus on persons with disabilities who are members of households holding an ID poor card. In addition, persons with disabilities have received free of charge for health consultation, health care and treatment services from all national hospitals, health centers, capital and provincial hospitals; and also, they can get financial support for food and travel

cost. There are also 285,088 Persons with Disabilities and 118,341 Women with Disabilities have received medical rehabilitation services.

Another aspect of inclusion is inclusive education. Cambodia has created Policy on Inclusive Education, which ensure that Persons with Disabilities can receive equitable quality of education service and opportunities for life-long learning. Currently, there are 2,546 Pupils with Disabilities studying in pre-schools, 43,344 Children with Disabilities studying in primary schools, 8,948 Children with Disabilities studying in high schools, and 11,191 Students with Disabilities studying in institutions and universities. Apart of this, there are 1,252 Persons with Disabilities are employed for serving education services in education sector. They are trained and equipped with all levels of inclusive skills such as sign language, brail, and other communications.

For recreation and leisure, there are about 603 Children with Intellectual Disabilities are toured to public tourist places for picnic and camping. Youth with Intellectual Disabilities are guided to international countries on the program of international studies and tour visits.

We look forward to discussion via the Autism agenda.

I. National Profile

Cambodia Autism Country Profile

I	<p>Introduction (including country background, etc.)</p> <p><i>Cambodia has started to talk about autism only recently and little is known by the health authorities about the condition, its characteristics and the forms of treatment. Over the last years, with the introduction of principles of Occupational and Speech Therapy, the disorder started to be given greater attention and forms of treatment started to be advised and performed, mainly in regards to communication, routine and sensory stimulation.</i></p>
II	<p>Methodology (how to collect data)</p> <p><i>A deep search in all rehabilitation clinics and Service Operators (mainly private ones) is necessary to have a better mapping of the places able to provide treatment and also to have a better understanding in regards to what is known in Cambodia.</i></p> <p><i>The best way for collecting data, for now, is a qualitative method in which clinics, hospitals, non-government organization and other institutions that are involved in rehabilitation are interviewed and asked about their knowledge about autism and methods of intervention.</i></p>
III	<p>Law and Policy (concerning people with disabilities including autism)</p>
	<p>A. Defining Autism (including a diagnosis system used in the country)</p> <p><i>Autism is a cause of developmental disorder with impairment on social skill, communication skill and repetitive, restricted behavior patterns.</i></p>
	<p>B. International Commitments (including international organization participation and regional instruments such as UN, Incheon strategy etc.)</p> <ol style="list-style-type: none"> <i>1. Cambodia has ratified United Nation on the rights of persons with disabilities in 20 July 2012 and come into force on 19 January 2013..</i> <i>2. Cambodia is the first country to launched decade of disability in Asia Pacific Incheon Strategy make the rights real, on May 2013 presided over Samdach Techo Hun Sen prime Minister of Cambodia.</i> <i>3. Asian Master plan was adopted and disseminate wildy use in Cambodia. This master plan was also including into NDSP 2019-2023.</i> <i>4. Incheon strategy</i>
III	<p>National Legal and Policy Framework (including the governmental structure of organizations concerning people of disabilities, especially persons of autism)</p> <ol style="list-style-type: none"> <i>1. Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i> <i>2. National Disability Strategy Plan (2019-2023)</i> <i>3. Strategy plan of Ministry of Social affairs, Veterans and Youth Rehabilitation (2019-2023) (3rd priority and Chapter 3, Program 1 and Sub-program 1.3 on the promotion of welfare for persons with disabilities)</i> <i>4. Policy on Education for Children with disabilities (March 2008)</i> <i>5. National Social Protection Policy Framework (2016-2025)</i> <i>6. Inter-ministerial Prakas N0 248 on technical physical infrastructures standard of accessibilities for persons with disabilities</i> <i>7. National Community-Based Rehabilitation Guideline</i> <i>8. Inter-ministerial Circular N0005 on Reasonable Accommodation on Employment of Persons with Disabilities</i> <i>9. Prakas N0 959 on Cambodia Disabilities Inspection (Procedure of Disability Registration in Workplace)</i> <i>10. The National Employment Policy (NEP2015-2025)</i>
IV	<p>Stakeholders (providing detailed information of the followings)</p>
	<p>A Government Bodies (responsible for data collection and providing support services/ Interventions throughout the country)</p>

1. *The National Institute of Statistics (NIS), which is part of the Ministry of Planning, is the focal point on statistical matters in Cambodia. It compiles and consolidates statistics provided by decentralized offices and also collects primary data through household and establishment surveys and population, agricultural and economic censuses.*
2. *Welfare for Persons with Disability Department (WPD) in under the direction of MoSVY responsible in direct implementation legal document (persons with disabilities identification and administration data collection.*
3. *Disability Rights Administration (DRA) both national and sub national level*
4. *Disability Action Council (DAC) both national and sub national level.*
5. *Person with Disability Foundation (PwDF) is a part of Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) responsible*
6. *Disability Working Group in the line Ministry of Government*

B. Non-Government Organizations (of and for persons with autism)

1. *Hand of Hope Community (HHC)*
2. *Rabbit School (RSO)*
3. *Centre for Child and Adolescent Mental Health(Caritas)*
4. *Pour Un Sourire D' Enfant (PSE)*
5. *National Borei for Infants and Children (NBIC)*
6. *M'LOP TAPANG*
7. *M'LUPRUSSEY*
8. *Child in The Families (CIF)*
9. *Jesuit Service Cambodia (JSC)*
10. *Disability Development Services Program (DDSP)*
11. *SOS Children Village Siem Reap*
12. *Phachid*
13. *Epic Art*
14. *KARUNA BATTAMBANG*
15. *Komar Pikar Foundation (KPF)*
16. *DAMNOK TOEK*
17. *Operation Enfants Du Cambodge (OEC)*
18. *Cabdico*
19. *Action Camboge Handicap (ACH)*
20. *Essential Personnel Cambodia (EPC)*
21. *Community International Cambodia*
22. *Safe Haven*
23. *Einstein Education International School*
24. *Cambodia Autism Network*
25. *Association for Aid and Relief, Japan (AAR Japan)*
26. *National Special Olympics Cambodia*
27. *Happy Kid Clinic*

Statistic data on Autism

A. Social Welfare: 1313 Person with Autism (18 province of 25 province in Cambodia)

B. Health: 70 children in a month accesses to Health Care

C. Education: 1483 Students with Autism, 602 Female

D. Human Resources: 218 Teachers, 144 Female

E. Other resources: inclusive pedagogic training teachers and Professors on Disability to 7036 teachers

Programs and Services for persons with autism (provided by governmental and non – governmental organizations)

A. Early-Intervention

- Created case management and personalized support plan for children
- The small early intervention unit Caritas-CCAMH provides service to about 60 to 80 children in a month, focus on 8 domains of child development activities (Social, cognition,

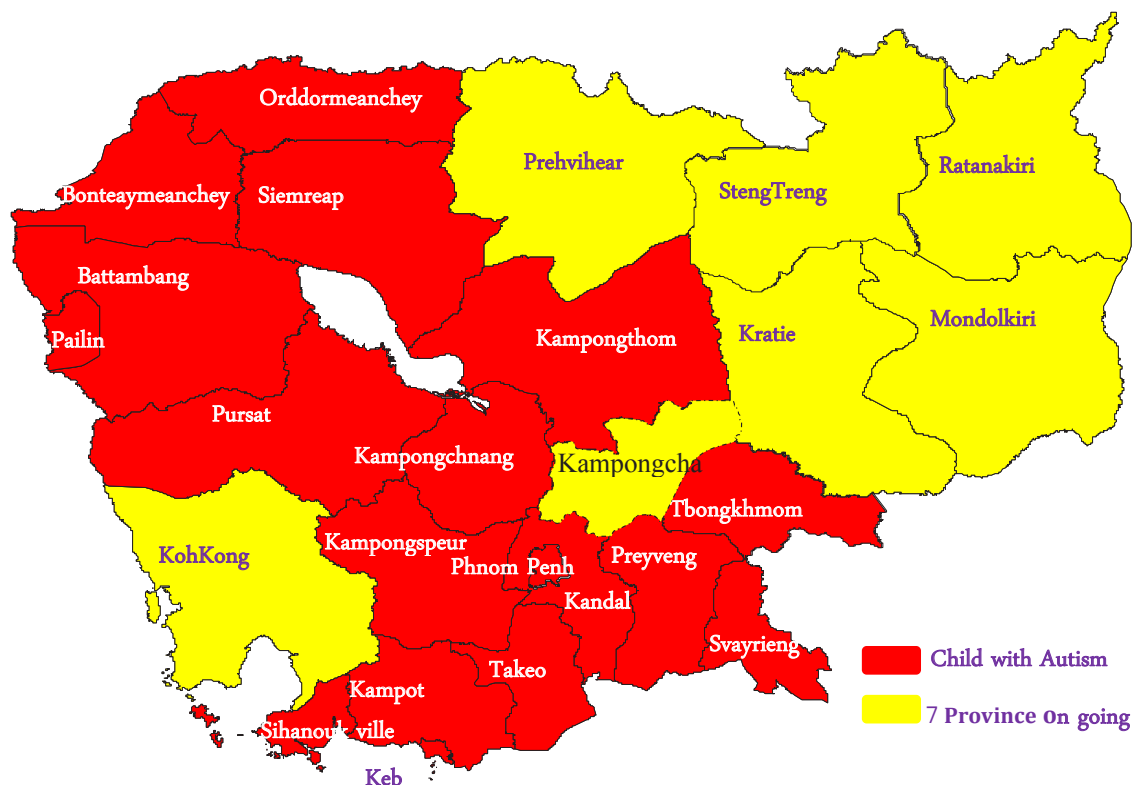
<p>language, hearing, vision, gross motor, fine motor, and self-care) using blue book published by HI.</p> <ul style="list-style-type: none"> - Sensory stimulation needs, communication strategies - DDSP has intervened in Autism on issues of food shortage and other abuses.
<p>B. Health</p> <ul style="list-style-type: none"> - Psycho-education on autism by giving brochure for participatory assessment on level of autism and newsletter for additional information. - Assessment and treatment at our Medical Clinic - Nurses do full assessment and health education - Referrals for medical treatment and provision of hygiene and health equipment - Referral the children to rehabilitate health services with others organizations - direct practice with the Autism child on how to eat, how to focus, or to exercise, allowing him or her to engage in activities with their peers - Redirect children with autism to health services
<p>C. Education</p> <ul style="list-style-type: none"> - Caritas-CCAMH provides structured teaching (TEACCH) to about 40 to 50 children in a month - Special Needs Program at our Education Center - Inclusive Education in primary schools - Provides special education and life skills through games and pictures - Provide special education for teaching skill and their parents how to know the disabilities - Project staff educate autism children so that they can communicate with their classmates, their families and their neighbors in the community through the use of real-world, simple or communicating with them as much as possible without limited the times unless they can understand - Train teachers on environmental education, including the production of learning and teaching materials - Provides education for children with autism, self-help skills, social skills, language skills and movement skills - Build the capacity of teachers in teaching methods of children with autism
<p>D. Employment</p> <ul style="list-style-type: none"> - Caritas-CCAMH does not provide employment but we provide vocational skills training in collaboration with Caritas-Youth Development program (YDP), Takhmao, Kandal province. - Provide skills such as cooking food, sport art, and handicraft - We have allowed some Autism youths to work in offices related to simple documentation, cleaning, or snacks for guests, etc. so far we have not done so by helping young Autism get a job official yet
<p>E. Social Services (such as benefits system, incentives etc.)</p> <ul style="list-style-type: none"> - Caritas-CCAMH provides transportation support for ID poor with autism. - Transportation and nutrition subsidy when needed - Train parents about autism care methods - disability rights promotion and current education policies to reduce discrimination against children, especially children with autism
<p>Challenges (including risks or obstacles and how they will be mitigated)</p> <p>In Cambodia, Children and young people on the autism spectrum are reported to have difficulties with many main areas:</p> <ul style="list-style-type: none"> • Diagnostic on Autism in Cambodia is not accurate. Most diagnostics based on clinical manifestation rather than IQ measurement or special diagnosis. CCAMH is the only institute which could diagnose the autism spectrum positive but not 100% accurate.

	<ul style="list-style-type: none"> • Autism spectrum is not curable, more over along with symptom and sign of constipation, diarrhea, cognitive problem then advance this issue more server. • Persistent difficulties with social communication and social interaction. For example, they may find it hard to begin or carry on a conversation, they may not understand social rules such as how far to stand from somebody else, or they may find it difficult to make friends. • Restricted, repetitive patterns of behavior, interests, or activities. For example, they may develop an overwhelming interest in something, they may follow inflexible routines or rituals, they may make repetitive body movements, or they may be hypersensitive to certain sounds. • Children and young people on the autism spectrum- and their parents and care giver face many issues and challenges on a day to day basis. Some issues - such as difficulties with excessive anxiety and finding the right school • Services provision to persons with autism are still limited in Cambodia, there are only four provinces among 25 provinces service on education to children with autism are accessible. The coverage of services provision for these four provinces are still limited, that mean the services are accessible at urban areas. • Understand on Autism spectrum among families of autism, community and relevant stakeholders are still limited, for example the parents of autism usually reported that their children are obstinate, timid not respected to the advices of their parents.
VIII	<p>National Strategy (<i>concerning people of disabilities including autism</i>)</p> <p>Conclusions and Recommendations</p> <p>A lot of research and awareness raising is needed to get the attention of authorities, families, and health-related bodies. There's still a lot of work to be done until rehabilitation in Cambodia gets to the importance it needs for autism to be taken into consideration as a great need for intervention by hospitals and public rehabilitation centers. Physical Rehabilitation is still the biggest focus at the moment and the number of professionals is still very limited.</p> <p>There needs to be awareness raising not only for autism but for rehabilitation as a whole so more university students pursue a career in rehabilitation, enabling the creation of new courses (e.g.: Occupational Therapy and Speech Therapy) and the formation of new professionals specialized in this type of group with this profile specifically.</p>
	Directory Support
X	<p>Annex</p> <p>References:</p> <ul style="list-style-type: none"> • Data Collection by Welfare for Persons with Disabilities Department of ministry of social affairs Veterans and youth Rehabilitation • National Workshop on “The Autism Mapping Project in the ASEAN Region” (1- April -2019) • National Meeting on “The Autism Mapping Project in the ASEAN Region” (12-Feb-2019) • Ministry of Education Youth and Sport • Web link: <p>http://hhccambodia.org/services/,http://mluprussey.org.kh/en/, http://www.caritascambodia.org/ccamb/, https://www.pse.ngo/story-our-association-recounted-movie-pepites-little-gems, http://www.ddspcambodia.org/ https://www.sos-childrensvillages.org/who-we-are/impact https://komarpikar.org/ http://www.damnoktoek.org/ http://action-cambodge-handicap.org/en/goals/ https://www.ccc-cambodia.org/en/ngodb/ngo-information/5197 https://eehcambodia.com/what-is-autism/ https://www.aarjapan.gr.jp/english/activity/cambodia/</p>

Remark:

1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok.
2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.”

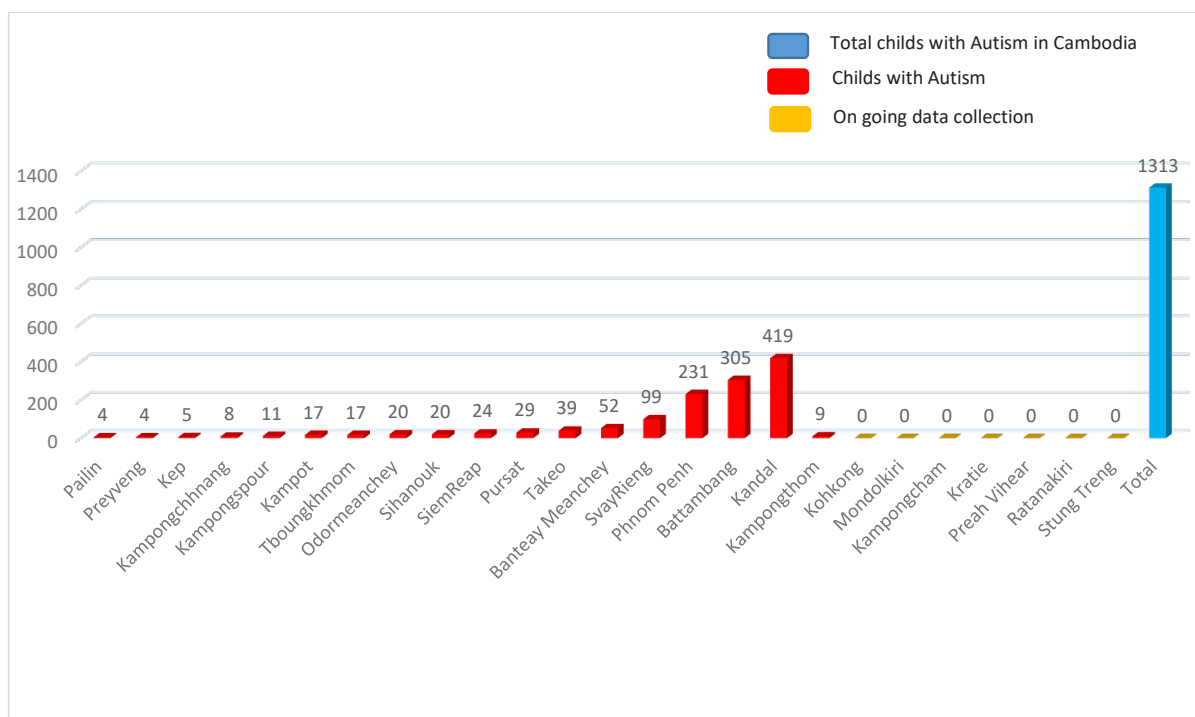
A. Coverage of Data Collection by Provinces of Cambodia



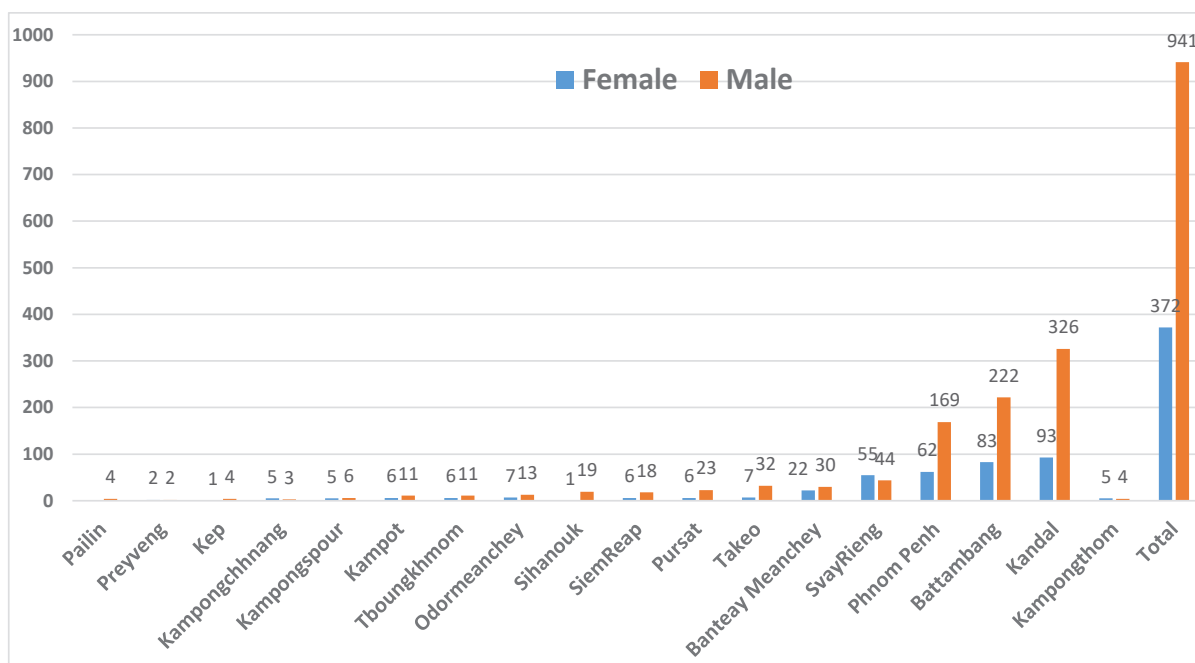
B. People with Autism classified by living area

No	Capital/Province	Female	Male	Total
1	Pailin		4	4
2	Prey Veng	2	2	4
3	Kep	1	4	5
4	Kampong Chhnang	5	3	8
5	Kampong Spour	5	6	11
6	Kampot	6	11	17
7	Tboung khmom	6	11	17
8	Odor meanchey	7	13	20
9	Sihanouk	1	19	20
10	Siem Reap	6	18	24
11	Pursat	6	23	29
12	Takeo	7	32	39
13	Banteay Meanchey	22	30	52
14	Svay Rieng	55	44	99
15	Phnom Penh	62	169	231
16	Battambang	83	222	305
17	Kandal	93	326	419
18	Kampong Thom	5	4	9
19	Kohkong			On going
20	Mondolkiri			On going
21	Kampong Cham			On going
22	Kratie			On going
23	Preah Vihear			On going
24	Ratanakiri			On going
25	Stung Treng			On going
Total		372	941	1313

C. People with Autism classified by living area



D. People with Autism classified by Gender



E. Special Education

Special Education 2018-2019 (Including Children with Autism)															
N	Capital/Province	School Name		Student		Total Class	The number of Teacher						Management by		Other
				Total	Female		Teacher in Contract		NGO's Teacher		State's Teacher		GoV	NGo	
							Total	F	Total	F	Total	F			
1	Phnom Penh, Trea Villedge Sangkat StengMeanchey Khan Meanchey	1	PSE	43	19	2			6	6	9	8		√	
2	Battambang and Kampong Chhnang	2	SOKSAN CENTER	68	37	4			12	5				√	
3	Kandal	1	LAVALA	86	37	7			2	1	11	6		√	
4	Battambang and Kampong Chhnang	2	METAKARUNA	260	135	6			69	39				√	
5	Phnom Penh	3	KPF	140	55	7			6	5	14	8	√		
6	Poursat	1	SCI	11	8	1					2	1			
7	Kandal	1	HHC	160	70	16			5	4	14	5	√	√	
8	Kampot	1	EPIC ARDF	38	11	1			8	5				√	
9	Jesuit Service located in Phnom Penh	1	JSC	11	7	2			2	1	2	2		√	
10	Phnom Penh, Kampong Chhnang, Siem Reap, Kampong Spuer	17	RABBIT SCHOOL	666	223	49	26	19	18	14	12	8	√	√	
Grand Total				1483	602	95	26	19	128	80	64	38			

II. SERVICE OPERATOR

Autism Country Profile	
CCAMH	
TAKHMOA, PHNOM PENH, CAMBODIA	
I	Introduction Autism is neurodevelopmental disorder with social, communication and behavioral challenges. (Informal definition used at CCAMH).
II	Methodology
III	Law and Policy (<i>concerning people with disabilities including autism</i>)
	A. Defining Autism (<i>including a diagnosis system used in the country</i>)
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.)</i> - <i>Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i> - <i>Royal Government of Cambodia committed by ratifying UNCRPD to provide services for persons with autism.</i>
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism) Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i>
IV	Stakeholders (<i>providing detailed information of the followings</i>) <ul style="list-style-type: none"> • Parents/ caregivers • Teachers • Parent support groups/ Autism parent association group
	A Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i>
	B. Non-Government Organizations (<i>of and for persons with autism</i>) <ul style="list-style-type: none"> • Caritas-CCAMH provides assessment, early intervention, parent child interaction therapy, sensory integration therapy and structured teaching (TEACCH program- Treatment and Education of Autistic and related Communication-handicapped CHildren) • AAR Japan, Kandal • Karuna Battambang and Kompong Chhnang • CDMD, Phnom Penh • Peace Village Center, Takeo • DDSP, Pursat • National Borey for Infants and Children • Rabbit School, Phnom Penh (provides special education) • CAMYOD, Phnom Penh • Komar Pikar Foundation (KPF) (address children's rights issues, special education,...) • Goutte D'eau, Phnom Penh • HHC, Takhmao (provides day care, special education,...) • Mlop Tapang, Sihanouk Ville • Missionaries of Charity • PSE, Phnom Penh

	<ul style="list-style-type: none"> • Children In Family • All Ears Cambodia • Epic Art, Kompot • Other special schools in Phnom Penh
V	Statistic data on Autism
	<i>(including the situation and prevalence of autism with the identified source of data)</i> To our knowledge there is no reliable prevalence data in the country. Per week, Caritas-CCAMH used to receive 10 per week which recently increased to 15-20 children.
	A. Social Welfare:
	B. Health: Caritas-CCAMH provides comprehensive service to about 60 to 70 children in a month.
	C. Education: Caritas-CCAMH provides structured teaching (TEACCH) to about 40 to 50 children in a month.
	D. Human Resources: Caritas-CCAMH trained psychiatric residence at University of Health Science, pediatric residence at National Pediatric Hospital and health center staff at Kompong Cham and Tboung Khmum province.
	E. Other resources:
VI	Programs and Services for persons with autism
	<i>(provided by governmental and non – governmental organizations)</i> Caritas-CCAMH provides services to children with autism and their families: <ul style="list-style-type: none"> • Psycho-education • Early Stimulation (under 5 years old) • Occupational therapy (Sensory integration therapy) • Structured teaching (TEACCH) • Speech therapy (Parent-Child Interaction, toddlers group therapy) • Art therapy • Behavior management • Medication (For comorbidity)
	A. Early-Intervention: (under 5 years old): The small early intervention unit Caritas-CCAMH provides service to about 60 to 80 children in a month, focus on 8 domains of child development activities (Social, cognition, language, hearing, vision, gross motor, fine motor, and self-care) using blue book published by HI.
	B. Health: Psycho-education on autism by giving brochure for participatory assessment on level of autism and newsletter for additional information.
	C. Education: Caritas-CCAMH provides structured teaching (TEACCH) to about 40 to 50 children in a month
	D. Employment: Caritas-CCAMH does not provide employment but we provide vocational skills training in collaboration with Caritas-Youth Development program (YDP), Takhmao, Kandal province.
	E. Social Services <i>(such as benefits system, incentives etc.)</i> : Caritas-CCAMH provides transportation support for ID poor with autism.
VII	Challenges <i>(including risks or obstacles and how they will be mitigated)</i> <ul style="list-style-type: none"> • Lack of awareness in the community • Lack of validated instrument to diagnose autism- diagnostic challenge (Autism VS Language Developmental Disorder) • Lack of trained personnel to provide service (Occupational therapist, speech therapist, special educator). • Parental stress, burden of care for children with autism Lack of inter-agency collaboration
VIII	National Strategy <i>(concerning people of disabilities including autism)</i> <ol style="list-style-type: none"> 1. Awareness raising in general public

	<ol style="list-style-type: none"> 2. Training teachers on early identification and inclusive education 3. Promote inclusive schools to include children with autism 4. Piloting innovative care (e.g. Parent-Child Interaction) 5. Training physicians, pediatricians and psychiatrists to identify and provide services 6. Formal accredited training courses (Occupational therapy, Speech therapy, Special educator,....etc) 7. Employ psychologists, social workers in the health care system 8. Family care support through National Health Insurance
IX	Conclusions and Recommendations
X	Directory Support
Annex	
References	
<p>Remark:</p> <ol style="list-style-type: none"> 3. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. 4. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	

Autism Country Profile



អង្គការកុមារក្នុងគ្រួសារ
 គាំទ្រដល់កុមារដែលមានបញ្ហា
CHILDREN IN FAMILIES
...where they belong

CHILDRENS IN FAMILY (CIF)	
CAMBODIA	
I	Introduction
II	Methodology
III	Law and Policy (<i>concerning people with disabilities including autism</i>)
	A. Defining Autism (<i>including a diagnosis system used in the country</i>) <i>Autism is a cause of developmental disorder with impairment on social skill, communication skill and repetitive, restricted behavior patterns. The only diagnostic system we know of in Cambodia is done through CCAMH</i>
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.)Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i>
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism) Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i>
IV	Stakeholders (<i>providing detailed information of the followings</i>)
	A Government Bodies(<i>responsible for data collection and providing support services/ Interventions throughout the country</i>) B. Non-Government Organizations (<i>of and for persons with autism</i>) <i>Caritas – Center for Child & Adolescent Mental Health, Hands of Hope Community, Komar Pikar, PSE, Karuna Battambang, Damnok Teuk, ACH, CABDICO, OIC/Happy Kids Clinic,Banteay Prieb, Rabbit School, Children In Families (ABLE Project)</i>
V	Statistic data on Autism (<i>including the situation and prevalence of autism with the identified source of data</i>)
	A. Social Welfare:
	B. Health:
	C. Education:
	D. Human Resources:
VI	E. Other resources:
	Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i>
	A. Early-Intervention: Hand of Hope Community, Karona Battambang, Komar Pikar, OIC, Safe Haven, Grace House Community Center, CIF (ABLE Project)
	B. Health: CCAMH, Happy Kids Clinic, National Pediatric Hospital, Angkor Hospital for Children, Kuntha Bopha
	C. Education: Rabbit School, Hands of Hope Community, PSE
VII	D. Employment: Rabbit School, Caritas, PSE, Banteay Prieb, Damnok Teuk, ACH
	E. Social Services (<i>such as benefits system, incentives etc.</i>): MoSVY Child Welfare Dept.
VIII	Challenges (<i>including risks or obstacles and how they will be mitigated</i>) <i>Limited understanding- need for more advocacy and awareness training, lack of available services – need for better coordination and addressing gaps, lack of specialists (speech therapy, occupational therapy, special education, etc.) – need for development of these professions</i>
IX	National Strategy (<i>concerning people of disabilities including autism</i>)
IX	Conclusions and Recommendations

X	Directory Support
Annex	
References	<p>(From http://www.menteheadband.com/wp-content/uploads/2015/10/Autism-Worldwode-2012.pdf) Approximately 67 million people affected by autism worldwide. This article includes a breakdown of autism prevalence in 13 countries.</p> <p>Another article on worldwide prevalence: http://www.hrpub.org/download/20180228/UJCM2-16910947.pdf</p>
<p>Remark:</p> <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	



Autism Country Profile	
DAMNOK TEUK	
CAMBODIA	
I	<p>Introduction: Cambodia has started to talk about autism only recently and little is known by the health authorities about the condition, its characteristics and the forms of treatment. Over the last years, with the introduction of principles of Occupational and Speech Therapy, the disorder started to be given greater attention and forms of treatment started to be advised and performed, mainly in regards to communication, routine and sensory stimulation.</p>
II	<p>Methodology: A deep search in all rehabilitation clinics (mainly private ones) is necessary to have a better mapping of the places able to provide treatment and also to have a better understanding in regards to what is known in Cambodia. The best way for collecting data, for now, is a qualitative method in which clinics, hospitals and other institutions that are involved in rehabilitation are interviewed and asked about their knowledge about autism and methods of intervention.</p>
III	<p>Law and Policy (concerning people with disabilities including autism) A. Defining Autism (including a diagnosis system used in the country) <i>Autism is a cause of developmental disorder with impairment on social skill, communication skill and repetitive, restricted behavior patterns. The only diagnostic system we know of in Cambodia is done through CCAMH</i> Autism is a disorder that may affect the individual in different levels and should be included into a spectrum called the Autism Spectrum Disorder (ASD). Below there are links from recognized sources that give a complete and detailed definition of the condition:</p>
	<p>B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.) Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i> I have no more information in this regard.</p>
	<p>C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism) Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i> I have no more information in this regard.</p>
	<p>Stakeholders (providing detailed information of the followings) A Government Bodies (responsible for data collection and providing support services/ Interventions throughout the country) - Welfare for Persons with Disabilities Department of Ministry of Social Affairs Veterans, and Youth Rehabilitation - Provincial Department of Social Affairs Veterans, and Youth Rehabilitation - District Authority</p>
	<p>B. Non-Government Organizations (of and for persons with autism) <i>Caritas – Center for Child & Adolescent Mental Health, Hands of Hope Community, Komar Pikar, PSE, Karuna Battambang, Damnok Teuk, ACH, CABDICO, OIC/Happy Kids Clinic, Bontey Prieb, Rabbit School, Children In Families (ABLE Project)</i></p>
V	<p>Statistic data on Autism (including the situation and prevalence of autism with the identified source of data)</p>
	<p>I have no more information to add!</p>
	<p>A. Social Welfare:</p>
	<p>B. Health:</p>
	<p>C. Education:</p>

	D. Human Resources:
	E. Other resources:
VI	Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i>
	A. Early-Intervention: Hand of Hope Community, Karona Battambang, Komar Pikar, OIC, Safe Haven, Grace House Community Center, CIF (ABLE Project)
	B. Health: CCAMH, Happy Kids Clinic, National Pediatric Hospital, Angkor Hospital for Children, Kuntha Bopha
	C. Education: Rabbit School, Hands of Hope Community, PSE
	D. Employment: Rabbit School, Caritas, PSE, Banteay Prieb, Damnok Teuk, ACH
	E. Social Services <i>(such as benefits system, incentives etc.)</i> : MoSVY Child Welfare Dept.
VII	<p>Challenges <i>(including risks or obstacles and how they will be mitigated)</i> <i>Limited understanding- need for more advocacy and awareness training, lack of available services – need for better coordination and addressing gaps, lack of specialists (speech therapy, occupational therapy, special education, etc.) – need for development of these professions</i></p> <p>There is indeed a huge lack of understanding about the condition and also very few professionals qualified to work with this type of profile. There are NGOs and other organizations working on training and education of rehabilitation professionals but it's not enough as training is limited and also is the number of professionals willing to take training and become specialized in this area of rehabilitation.</p> <p>Language is also a big challenge as most of the material available is in English and other languages, but not in Khmer.</p> <p>Limited understanding within the families that don't know how to recognize the condition or are embarrassed of seeking for help.</p> <p>Lack of professionals capable of performing appropriate diagnosis.</p> <p>Lack of interest by the authorities in addressing the issue.</p>
VIII	<p>National Strategy <i>(concerning people of disabilities including autism)</i> I also cannot contribute with this information at the moment.</p>
IX	<p>Conclusions and Recommendations</p> <p>A lot of research and awareness raising is needed to get the attention of authorities, families, and health-related bodies.</p> <p>There's still a lot of work to be done until rehabilitation in Cambodia gets to the importance it needs for autism to be taken into consideration as a great need for intervention by hospitals and public rehabilitation centers. Physical Rehabilitation is still the biggest focus at the moment and the number of professionals is still very limited.</p> <p>There needs to be awareness raising not only for autism but for rehabilitation as a whole so more university students pursue a career in rehabilitation, enabling the creation of new courses (e.g.: Occupational Therapy and Speech Therapy) and the formation of new professionals specialized in this type of group with this profile specifically.</p>
X	Directory Support
Annex	
References	<p><i>(From http://www.menteheadband.com/wp-content/uploads/2015/10/Autism-Worldwode-2012.pdf) Approximately 67 million people affected by autism worldwide. This article includes a breakdown of autism prevalence in 13 countries.</i></p> <p><i>Another article on worldwide prevalence:</i> http://www.hrpub.org/download/20180228/UJCM2-16910947.pdf https://www.nimh.nih.gov/health/topics/autism-spectrum-disorders-asd/index.shtml https://www.webmd.com/brain/autism/understanding-autism-basics#1 https://www.autismspeaks.org/</p>
Remark:	

1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok.
2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.”

Autism Country Profile	
KARUNA BATTAMBANG	
BATTAMBANG PROVINCE, CAMBODIA	
I	<p>Introduction: Autism is a developmental disorder of variable severity that is characterized by difficulty in social interaction and communication and by restricted or repetitive patterns of thought and behavior.</p> <p>Autism is a behaviorally defined disorder, characterized by qualitative impairments in social communication, social interaction, and social imagination, with a restricted range of interests and often stereotyped repetitive behaviors and mannerisms. Sensory hypo sensitivities or hypersensitivities to the environment are common features.</p> <p>For Diagnosis of Autism Spectrum Disorder, we observe on diagnose the disorders, the child's behavior and development to make a diagnosis and social I interactions during their ages are 18 months or younger than these stages.</p> <ul style="list-style-type: none"> ▪ Continue to carry out all requirements of NU convention and Incheon that were stated to be improved the better living conditions of children with Autism. ▪ Have continued to promote the key articles of UN convention and Incheon as well as other national sub degrees and commitment statements to remote areas or countryside's. ▪ In case, we get training course of autism preventions or on how to provide the services to children with autism, we are to contribute these skills or knowledge to all the involved departments or persons. <p>Set up action plan to be promoted UN convention and National sub degrees everywhere we have worked.</p>
II	<p>Methodology:</p> <p>All kinds of people and all involved departments should work for children with autism because they need to know and understand about the Autism issues and interventions.</p> <p>1. The organizations that have been experiences and worked for autism because they know how to help and have intervention on time of autism issues.</p>
III	<p>Law and Policy (<i>concerning people with disabilities including autism</i>)</p> <p>A. Defining Autism (<i>including a diagnosis system used in the country</i>)</p> <p>B. International Commitments</p> <p>(<i>Including international organization participation and regional instruments such as UN, Incheon strategy etc.</i>) <i>Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i></p> <p>C. National Legal and Policy Framework</p> <p>(<i>including the governmental structure of organizations concerning people of disabilities, especially persons of autism</i>) <i>Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i></p>
IV	<p>Stakeholders (<i>providing detailed information of the followings</i>)</p> <p>A Government Bodies</p> <p>(<i>responsible for data collection and providing support services/ Interventions throughout the country</i>)</p> <p>B. Non-Government Organizations (<i>of and for persons with autism</i>)</p>
V	<p>Statistic data on Autism</p> <p>(<i>including the situation and prevalence of autism with the identified source of data</i>)</p> <p>Number of children: 97 Children with odd problems. Of these, 36 were girls. And they were 75% -85% under 18 years of their ages</p> <p>A. Social Welfare: Coordinate children to participate in social events</p> <p>B. Health: Adapting the children to public health services based on the rights set by the Royal Government</p> <p>C. Education: Provide special education for them at the Community Rehabilitation Centers.</p>



	D. Human Resources: More than primary skills training to children before giving agricultural skills and sending to external skills.
	E. Other resources: Provide agricultural skills and work with partner organizations in sending children to learn more skills
VI	Programs and Services for persons with autism (provided by governmental and non – governmental organizations) Every work undertaken between the organizations responds to the Government's plans and strategies as follows: <ul style="list-style-type: none"> ▪ There is a Law on the Protection and Promotion of the Rights of Persons with Disabilities ▪ Undergraduate education subdivision ▪ National Strategic Plan on Gender, etc. ▪ Inclusive education.
	A. Early-Intervention: Collaborating with Healthcare Authorities in pre-post and postpartum prevention.
	B. Health: Adapting the children to public health services based on the rights set by the Royal Government
	C. Education: Provide special education for them at the Community Rehabilitation Centers.
	D. Employment: Provide agricultural skills and work with partner organizations in sending children to learn more skills
	E. Social Services (such as benefits system, incentives etc.): There is a social service worker in contact with external bodies to protect the rights and interests of persons with disabilities.
VII	Challenges (including risks or obstacles and how they will be mitigated) <ul style="list-style-type: none"> ▪ Difficult to provide the special educations to all children with autism. ▪ Spend for long time to work with children with autism. ▪ Have still discrimination against on children with autism through behaviors or attitudes. ▪ There are not enough special teachers to teach children with autism where we have worked. ▪ Some equipment's and materials for teaching the children with autism are limited and they are hardly found in where we have worked. Lack of special schools and skills on how to work with children with autism in Cambodia.
VIII	National Strategy (concerning people of disabilities including autism) All of the above practices are in line with national policies and laws, especially with all these departments collaborating with each departments.
IX	Conclusions and Recommendations <ul style="list-style-type: none"> ▪ Accept NGO staff working with children with autism as government staffs. ▪ Expand and train many special education teachers and special class, especially in remote areas. ▪ Continue to provide training on how to work with children with Autism issues with their citizens where they live in remote areas. Continue to disseminate Children with Autism in remote communities.
X	Directory Support
Annex	
References	
Remark: <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	

Autism Country Profile	
M'LOP TAPANG	
CAMBODIA	
I	Introduction
II	Methodology
III	Law and Policy <i>(concerning people with disabilities including autism)</i>
	A. Defining Autism <i>(including a diagnosis system used in the country)</i>
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.) Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i>
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism) Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i>
IV	Stakeholders <i>(providing detailed information of the followings)</i>
	A Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i>
	B. Non-Government Organizations <i>(of and for persons with autism)</i>
V	Statistic data on Autism <i>(including the situation and prevalence of autism with the identified source of data)</i>
	A. Social Welfare:
	B. Health:
	C. Education:
	D. Human Resources:
	E. Other resources:
VI	Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i>
	A. Early-Intervention: Assessments
	B. Health: Assessment and treatment at our Medical Clinic
	C. Education: Special Needs Program at our Education Center
	D. Employment:
	E. Social Services <i>(such as benefits system, incentives etc.):</i>
VII	Challenges <i>(including risks or obstacles and how they will be mitigated)</i> <ul style="list-style-type: none"> - Not enough space in our classrooms for all the children with special needs - Students come half days to class and out teams also follow up with children and their families in the community
VIII	National Strategy <i>(concerning people of disabilities including autism)</i>
IX	Conclusions and Recommendations
X	Directory Support
Annex	
References	
Remark: <ol style="list-style-type: none"> The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	

Autism Country Profile



M'LUPRUSSEY

KHAN MEANCHEY, PHNOM PENH, CAMBODIA

I	Introduction
II	Methodology
III	Law and Policy <i>(concerning people with disabilities including autism)</i>
	A. Defining Autism <i>(including a diagnosis system used in the country)</i> <ul style="list-style-type: none"> ▪ Unusual gestures or face ▪ Unusual voices ▪ Avoid the eyes of others ▪ Behavioral disturbances ▪ Weakness in language comprehension ▪ Delay in speech
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.) Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i>
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism) Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i>
IV	Stakeholders <i>(providing detailed information of the followings)</i>
	A Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i>
	B. Non-Government Organizations <i>(of and for persons with autism)</i>
V	Statistic data on Autism <i>(including the situation and prevalence of autism with the identified source of data)</i>
	A. Social Welfare:
	B. Health:
	C. Education:
	D. Human Resources:
	E. Other resources:
VI	Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i>
	A. Early-Intervention: yes
	B. Health: yes
	C. Education:
	D. Employment:
	E. Social Services <i>(such as benefits system, incentives etc.): yes</i>
VII	Challenges <i>(including risks or obstacles and how they will be mitigated)</i>
VIII	National Strategy <i>(concerning people of disabilities including autism)</i>
IX	Conclusions and Recommendations
X	Directory Support
Annex	
References	Address: 4&5 F , Street 26BT,Tnout Chrom Village,Sangkat Boung Tompon, Khan Mean Chey ,Pnom Penh, Cambodia. Email: h_sareth@mluprussey.org.kh / www.mluprussey.org.kh
Remark:	
1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN	

Secretariat's Project "The Autism Mapping Project in the ASEAN Region" during 23- 25 July 2018 at APCD Training Center, Bangkok.

2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the "Autism at a Glance in ASEAN."

Autism Country Profile

SAFE HAVEN

SEIMREAP PROVINCE, CAMBODIA



I	Introduction
II	Methodology
III	Law and Policy <i>(concerning people with disabilities including autism)</i>
	A. Defining Autism <i>(including a diagnosis system used in the country)</i>
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.)Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i>
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism) Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i>
IV	Stakeholders <i>(providing detailed information of the followings)</i>
	A Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i>
	B. Non-Government Organizations <i>(of and for persons with autism)</i>
V	Statistic data on Autism <i>(including the situation and prevalence of autism with the identified source of data)</i>
	A. Social Welfare: 21 of children with autism, 5 Females
	B. Health:
	C. Education:
	D. Human Resources:
	E. Other resources:
VI	Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i>
	A. Early-Intervention: including sensory stimulation needs, communication strategies
	B. Health: Nurses do full assessment and health education
	C. Education: No – but we meet with child’s teachers/school when appropriate
	D. Employment: No
	E. Social Services <i>(such as benefits system, incentives etc.):</i> Yes – transportation and nutrition subsidy when needed
VII	Challenges <i>(including risks or obstacles and how they will be mitigated)</i> <ul style="list-style-type: none"> - Not enough trained staff, many families seeking help - Hoping to send staff for more training at CCAMH and maybe to Singapore
VIII	National Strategy <i>(concerning people of disabilities including autism)</i>
IX	Conclusions and Recommendations
X	Directory Support
Annex	
References	
Remark: 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.”	

Autism Country Profile	
DDSP	
PURSAT PROVINCE, CAMBODIA	
I	Introduction
II	Methodology
III	Law and Policy <i>(concerning people with disabilities including autism)</i> A. Defining Autism <i>(including a diagnosis system used in the country)</i> Autism refers to people with a disability in their ability to communicate, behave, socialize, and express themselves, usually before the age of 30 months. In Cambodia, the diagnosis is still lacking in this area. 1. Autism in Cambodia's disability sector is new. So there is no specific set of tools or norms for autism.
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.)</i> Convention on the Rights of the Child, Convention on the Rights of People with Disabilities
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism)</i> Law on the Protection and the Promotion of the Rights of Persons with Disabilities
	Stakeholders <i>(providing detailed information of the followings)</i>
	A Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i>
IV	B. Non-Government Organizations <i>(of and for persons with autism)</i>
	Statistic data on Autism <i>(including the situation and prevalence of autism with the identified source of data)</i> - Currently, a number of organizations are working with Autism, these organizations are networked to provide Autism services. - Currently, DDSP has been working with 12 Autism children on social welfare, health and education needs.
V	A. Social Welfare: 12 Autism children
	B. Health: 12 Autism children
	C. Education: 12 Autism children
	D. Human Resources:
	E. Other resources:
	Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i>
VI	A. Early-Intervention: DDSP has intervened in Autism on issues of food shortage and other abuses.
	B. Health: Referrals for medical treatment and provision of hygiene and health equipment.
	C. Education: Provides special education and life skills through games and pictures.
	D. Employment:
	E. Social Services <i>(such as benefits system, incentives etc.):</i>
VII	Challenges <i>(including risks or obstacles and how they will be mitigated)</i> ▪ Children with autism face the challenge of lacking the skills needed to help them. ▪ Lack of schools that are unique to their problems.
VIII	National Strategy <i>(concerning people of disabilities including autism)</i> There is no specific national strategy to help autism, but there is a network of NGOs.
IX	Conclusions and Recommendations



	In short, people with autism in Cambodia are more isolated compared to other people with disabilities. Although Cambodia has all kinds of laws, and legal frameworks to support people with disabilities, people with disabilities still face difficulties.
X	Directory Support
Annex	
References	
<p>Remark:</p> <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23-25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	




Autism Country Profile	
EPIC ARTS	
KAMPOT PROVINCE, CAMBODIA	
I	Introduction
II	Methodology
III	Law and Policy (<i>concerning people with disabilities including autism</i>)
	A. Defining Autism (<i>including a diagnosis system used in the country</i>) Autism is variety of human that have a difficulty to communication in social and daily behavior. - International Convention on the Rights of the Child.
	B. International Commitments (<i>Including international organization participation and regional instruments such as UN, Incheon strategy etc.</i>) <i>Convention on the Rights of the Child, Convention on the Rights of People with Disabilities</i>
	C. National Legal and Policy Framework (<i>including the governmental structure of organizations concerning people of disabilities, especially persons of autism</i>) <i>Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i>
IV	Stakeholders (<i>providing detailed information of the followings</i>)
	A. Government Bodies (<i>responsible for data collection and providing support services/ Interventions throughout the country</i>)
	B. Non-Government Organizations (<i>of and for persons with autism</i>)
V	Statistic data on Autism (<i>including the situation and prevalence of autism with the identified source of data</i>)
	A. Social Welfare: decreasing a data management of case and teach them how to protect
	B. Health: Referral the children to rehabilitate health services with others organizations.
	C. Education: Provide special education for teaching skill and their parents how to know the disabilities.
	D. Human Resources:
	E. Other resources: Provide skills such as cooking food, sport art, and handicraft.
VI	Programs and Services for persons with autism (<i>provided by governmental and non – governmental organizations</i>)
	A. Early-Intervention:
	B. Health: Hygiene
	C. Education: Primary Education
	D. Employment: Vocational training, Entrepreneurship
	E. Social Services (<i>such as benefits system, incentives etc.</i>):
VII	Challenges (<i>including risks or obstacles and how they will be mitigated</i>) <ul style="list-style-type: none"> ▪ Have still discrimination against on children with autism through behaviors or attitudes. ▪ There are not enough special teachers to teach children with autism where we have worked. ▪ Lack of special schools and skills on how to work with children with autism in Cambodia.
VIII	National Strategy (<i>concerning people of disabilities including autism</i>) Meeting with organizations work on education to disabilities.
IX	Conclusions and Recommendations <ul style="list-style-type: none"> ▪ Expand and train many special education teachers and special class, especially in remote areas. Continue to provide training on how to work with children with Autism issues.

X	Directory Support
Annex	
References	
<p>Remark:</p> <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	



Autism Country Profile	
OPERATIONS ENFANTS DU CAMBODGE (OEC)	
BATTAMBANG PROVINCE, CAMBODIA	
I	Introduction: Cambodia has started to talk about autism only recently and little is known by the health authorities about the condition, its characteristics and the forms of treatment. Over the last years, with the introduction of principles of Occupational and Speech Therapy, the disorder started to be given greater attention and forms of treatment started to be advised and performed, mainly in regards to communication, routine and sensory stimulation.
II	Methodology
III	Law and Policy (<i>concerning people with disabilities including autism</i>)
	A. Defining Autism: Autism is neurodevelopmental disorder with social, communication and behavioral challenges. (Informal definition used at CCAMH)
	B. International Commitments: <ul style="list-style-type: none"> - Royal Government of Cambodia committed by ratifying UNCRPD to provide services for persons with autism. - Convention on the rights of persons with disabilities - Convention on the rights of the Child
	C. National Legal and Policy Framework
IV	Stakeholder
	A. Government Body
	B. Non-Government Organizations (<i>of and for persons with autism</i>)
V	Statistic Data on Autism
	A. Social Welfare: Created cause management and personalized support plan for children
	B. Health: Yes
	C. Education: Yes
	D. Human Resources:
	E. Other resources:
VI	Program and Service
	A. Early-Intervention: infants and Children with Disabilities.
	B. Health: Yes
	C. Education: Yes
	D. Employment:
	E. Social Services (<i>such as benefits system, incentives etc.</i>):
VII	Challenges (including risks or obstacles and how they will be mitigated)
VIII	National Strategy (<i>concerning people of disabilities including autism</i>)
IX	Conclusions and Recommendations
X	Directory Support:
Annex	
References	Organization address: #402, Trea Village, Sangkat Steng Meanchey 2, Khan MeanChey, Phon Penh. Box: 2107, Tel: 023955660 E-mail: pse@site-pse.org Website: www.site-pse.org
Remark:	
1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok.	

2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.”

Autism Country Profile	
	
KPF	
KHAN CHBA AMPOV, PHNOM PENH, CAMBODIA	
I	Introduction: Autism is a developmental disorder of implement function and have a difficulty on sense. Autism is a behaviorally defined disorder.
II	Methodology
III	Law and Policy (<i>concerning people with disabilities including autism</i>)
	A. Defining Autism (<i>including a diagnosis system used in the country</i>)
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.)</i> Convention on the Rights of the Child, Convention on the Rights of People with Disabilities
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism)</i> Law on the Protection and the Promotion of the Rights of Persons with Disabilities
	Stakeholders: A Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i>
IV	B. Non-Government Organizations: The KPF organization provides services for Autism children :
	<ol style="list-style-type: none"> 1. Emergency Intervention: After meeting Autism children, the staff of the project advises parents to let them know what autism is and how bad it will be to help the children improve in the future. As well as instructing parents to take their child to a specialist for further help and advice without delay. 2. Health: The project staff provides direct practice with the Autism child on how to eat, how to focus, or to exercise, allowing him or her to engage in activities with their peers. 3. Education: Project staff educate autism children so that they can communicate with their classmates, their families and their neighbors in the community through the use of real-world, simple or communicating with them as much as possible without limited the times unless they can understand. 4. Job: We have allowed some Autism youths to work in offices related to simple documentation, cleaning, or snacks for guests, etc. so far we have not done so by helping young Autism get a job official yet. 5. Social services (such as benefit systems, interventions)
V	Statistic data on Autism <i>(including the situation and prevalence of autism with the identified source of data)</i>
	A. Social Welfare: 14 Children. Of these, 04 were girls. And 10boys
	B. Health: 14 Children. Of these, 04 were girls. And 10boys
	C. Education: 14 Children. Of these 04 were girls, And 10boys
	D. Human Resources: 20 Teacher, 13 females
	E. Other resources: 3 centers
VI	Programs and Services for persons with autism

	<i>(provided by governmental and non – governmental organizations)</i>
	A. Early-Intervention:
	B. Health:
	C. Education: Inclusive education, State school’s integration
	D. Employment:
	E. Social Services <i>(such as benefits system, incentives etc.)</i> :
VII	<p>The Challenge:</p> <ul style="list-style-type: none"> ▪ Have still discrimination against on children with autism through behaviors or attitudes. ▪ There are not enough special teachers and school to teach children with autism that deprives them of opportunity. ▪ Autism individuals are particularly vulnerable to the exploitation of opportunists by using them to serve illicit interests <p>How to reduce:</p> <ul style="list-style-type: none"> ▪ There should be widespread dissemination from the Autism to the general public. <p>Creating a combined activity between Autism child and children in general.</p>
VIII	National Strategy <i>(concerning people of disabilities including autism)</i>
IX	Conclusions and Recommendations
X	Directory Support
Annex	
References	Address: 46A, St. 369, Au andoung Village, Prek Pra distrct, Phnom Penh, Cambodia.
	<p>Remark:</p> <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23-25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and summited to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.”

Autism Country Profile

RABBITE SCHOOL

KHAN MEANCHEY, PHNOM PENH, CAMBODIA



I	Introduction:
II	Methodology:
III	Law and Policy (concerning people with disabilities including autism)
	A. Defining Autism: Autism is neurodevelopmental disorder with social, communication and behavioral challenges. (Informal definition used at CCAMH)
	B. International Commitments: <ul style="list-style-type: none"> - Royal Government of Cambodia committed by ratifying UNCRPD to provide services for persons with autism. - Convention on the rights of persons with disabilities - Convention on the rights of the Child
	C. Non-Government Organizations (referring children with ID and autism to CCAMH) <ul style="list-style-type: none"> • Rabbit School, Phnom Penh (provides special education) • HHC, Takhmao (provides day care, special education...) • DDSP • JSC, • OIC (Provide training of trainer) • Children with disabilities Foundation (Education, Health Care)
	D. National Legal and Policy Framework: Law on the Protection and the Promotion of the Rights of Persons with Disabilities
IV	Stakeholders:
	A. Government Bodies: <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i> <ul style="list-style-type: none"> • Ministry of Education, Youth and Sport • Ministry of Social Affairs, veterans and youth rehabilitation • Disability Action Council • Ministry of Health • Ministry of interior • Ministry of Justice
	B. Non-Government Organizations <i>(of and for persons with autism)</i> <ul style="list-style-type: none"> • Rabbit School, Phnom Penh (provides special education) • HHC, Takhmao (provides day care, special education...) • DDSP • JSC, • OIC (Provide training of trainer) • Children with disabilities Foundation (Education, Health Care)
V	Statistic data on Autism
	A. Social Welfare:
	B. Health: 666 persons (223Femals) Redirect children with autism to health services
	C. Education: Childs with autism 666 persons (223Femals) received educational services such as self-help, social skills, language skills and movement skills at the Rabbit School Organization.
	D. Human Resources: 56Teacher,
	E. Other resources: 17 Schools
VI	Programs and Services for persons with autism:
	A. Early-Intervention: Under 5 years old
	B. Health:

	<p>C. Education:</p> <ul style="list-style-type: none"> - Redirect children with autism to health services - Provides education for children with autism, self-help skills, social skills, language skills
	D. Employment:
	E. Social Services (<i>such as benefits system, incentives etc.</i>):
VII	<p>Challenges (including risks or obstacles and how they will be mitigated)</p> <ul style="list-style-type: none"> • There is community discrimination • There are not enough schools for children with autism • Lack of health service and social services for children with autism • Lack of human resources in autism, Especially the teachers of the children have autism <p>How to reduce</p> <ul style="list-style-type: none"> • Spread the issue of autism, laws and policies to the relevant authorities • Collaborates with the Ministry of Education on establishing integration classes in public schools • Ask the Autism Authorization Authority (when they needs social services) • Training the Autism Teachers • Train to parents about the dangers and care of autism
VIII	<p>National Strategy (<i>concerning people of disabilities including autism</i>)</p> <ul style="list-style-type: none"> - Bind a network of partner organizations to work with relevant institutions in the government to promote the implementation of laws and policies for persons with disabilities, especially autism. - Establish an autism-infringing parent / guardian network to collaborate and provide information about the needs of his / her team to policy makers and practitioners.
IX	<p>Conclusions and Recommendations: Children with autism are a new issue that our community is not aware of and understand about their behavior, which is why they are not getting all the same services as other children.</p> <ol style="list-style-type: none"> 1. Raise awareness of autism (child with autism) 2. Provides social services to support his / her team, especially to establish a service branch 3. Providing educational / vocational education services to autism people 4. Training the Autism Specialist to work with autism
X	Directory Support
Annex	
References	<p>Organization address: Domnak Thom village St DoungNgeb, Sangkat StengMeanchey, Khan Meanchey, Phnom Penh.</p>
<p>Remark:</p> <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23 - 25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	

Autism Country Profile	
POUR UN SOURIRE D'ENFANT (PSE)	
KHAN MEANCHEY, PHNOM PENH, CAMBODIA	
I	Introduction: Cambodia has started to talk about autism only recently and little is known by the health authorities about the condition, its characteristics and the forms of treatment. Over the last years, with the introduction of principles of Occupational and Speech Therapy, the disorder started to be given greater attention and forms of treatment started to be advised and performed, mainly in regards to communication, routine and sensory stimulation.
II	Methodology
III	Law and Policy (<i>concerning people with disabilities including autism</i>)
	A. Defining Autism: Autism is neurodevelopmental disorder with social, communication and behavioral challenges. (Informal definition used at CCAMH)
	B. International Commitments: <ul style="list-style-type: none"> - Royal Government of Cambodia committed by ratifying UNCRPD to provide services for persons with autism. - Convention on the rights of persons with disabilities - Convention on the rights of the Child.
	C. Non-Government Organizations (referring children with ID and autism to CCAMH) <ul style="list-style-type: none"> • Rabbit School, Phnom Penh (provides special education) • HHC, Takhmao (provides day care, special education...) • DDSP • JFC • OIC
	Children with disabilities Foundation
	D. National Legal and Policy Framework <ul style="list-style-type: none"> • Total of Children with Autism 1 and no female. • Non-Government Organizations: Pour Un Sourire d'Enfant (PSE) • Parents/ caregivers • Other NGOs staff (Collaborating partners in referral and capacity building) • Teachers • Parent support groups/ Autism parent association group
	B. Non-Government Organizations (<i>of and for persons with autism</i>)
	A. Social Welfare: Created cause management and personalized support plan for children
	B. Health:
	C. Education:
D. Human Resources:	
E. Other resources:	
VI	Programs and Services for persons with autism: Redirect children with autism to health services Provides education for children with autism, self-help skills, social skills, language skills
	A. Early-Intervention: Under 5 years old
	B. Health:
	C. Education:
	D. Employment:
E. Social Services (<i>such as benefits system, incentives etc.</i>):	
VII	Challenges (including risks or obstacles and how they will be mitigated) <ul style="list-style-type: none"> • There is community discrimination • There are not enough schools for children with autism • Lack of health service and social services for children with autism

	<ul style="list-style-type: none"> • Lack of human resources in autism, Especially the teachers of the children have autism <p>How to reduce</p> <ul style="list-style-type: none"> • Spread the issue of autism, laws and policies to the relevant authorities • Collaborates with the Ministry of Education on establishing integration classes in public schools • Ask the Autism Authorization Authority (when they needs social services) • Training the Autism Teachers • Train to parents about the dangers and care of autism
VIII	<p>National Strategy (<i>concerning people of disabilities including autism</i>)</p> <ul style="list-style-type: none"> -Bind a network of partner organizations to work with relevant institutions in the government to promote the implementation of laws and policies for persons with disabilities, especially autism. -Establish an autism-infringing parent / guardian network to collaborate and provide information about the needs of his / her team to policy makers and practitioners.
IX	<p>Conclusions and Recommendations: Children with autism are a new issue that our community is not aware of and understand about their behavior, which is why they are not getting all the same services as other children.</p> <ol style="list-style-type: none"> 3. Raise awareness of autism (child with autism) 4. Provides social services to support his / her team, especially to establish a service branch 5. Providing educational / vocational education services to autism people 6. Training the Autism Specialist to work with autism
X	Directory Support:
Annex	
References	<p>Organization address: #402 Trea Village Sangkat StengMeanchey2 Khan MeanChey Phon Penh Box: 2107 Tel: 023955660 E-mail: pse@site-pse.org Website: www.site-pse.ngo</p>
<p>Remark:</p> <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and summited to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	

Autism Country Profile	
National Borey for Infants and Children	
Khan MeanChey, Phnom Penh, CAMBODIA	
I	<p>Introduction</p> <p>Cambodia has started to talk about autism only recently and little is known by the health authorities about the condition, its characteristics and the forms of treatment. Over the last years, with the introduction of principles of Occupational and Speech Therapy, the disorder started to be given greater attention and forms of treatment started to be advised and performed, mainly in regards to communication, routine and sensory stimulation.</p>
II	Methodology
III	Law and Policy <i>(concerning people with disabilities including autism)</i>
	A. Defining Autism <i>(including a diagnosis system used in the country)</i> Autism is neurodevelopmental disorder with social, communication and behavioral
	B. International Commitments <i>(Including international organization participation and regional instruments such as UN, Incheon strategy etc.)</i>
	<ul style="list-style-type: none"> - Convention on the Rights of the Child, Convention on the Rights of People with Disabilities - Royal Government of Cambodia committed by ratifying UNCRPD to provide services for persons with autism. - Convention on the rights of persons with disabilities - Convention on the rights of the Child
	C. National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism) Law on the Protection and the Promotion of the Rights of Persons with Disabilities</i>
IV	Stakeholders <i>(providing detailed information of the followings)</i>
	<ul style="list-style-type: none"> • MoSVY • DAC • PwDF
	A Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i>
V	B. Non-Government Organizations <i>(of and for persons with autism)</i>
	<ul style="list-style-type: none"> • Corporate with Rabbit School • CCAMH
	Statistic data on Autism <i>(including the situation and prevalence of autism with the identified source of data)</i>
	A. Social Welfare: Total of Children with Autism 36 (17males and 19 females)
	B. Health:
	C. Education: Corporate with Rabbit School,
VI	D. Human Resources: 37, female
	E. Other resources:
	Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i>
	A. Early-Intervention:
	B. Health:
	C. Education: Inclusive education,
VII	D. Employment:
	E. Social Services <i>(such as benefits system, incentives etc.):</i>
VIII	Challenges <i>(including risks or obstacles and how they will be mitigated)</i>
VIII	National Strategy <i>(concerning people of disabilities including autism)</i>



IX	Conclusions and Recommendations
X	Directory Support
Annex	
References	St DoungNgeb2 Sangkat Steng Meanchey Khan MeanChey Phnom Penh.
<p>Remark:</p> <ol style="list-style-type: none"> 1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok. 2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.” 	

IV. List of Service Operators

N	Service Operators	Female	Male	Total
1	Hand of Hope Community (HHC)	-	-	210
2	Rabbit School (RSO)	24	121	145
3	Centre for Child and Adolescent Mental Health(Caritas)	30	179	209
4	Pour Un Sourire D' Enfant (PSE)	0	1	1
5	National Borei for Infants and Children (NBIC)	19	17	36
6	M'LOP TAPANG	-	-	20
7	M'LUPRUSSEY	-	-	
8	Child in The Families (CIF)	-	-	-
9	Jesuit Service Cambodia (JSC)	12	9	21
10	Disability Development Services Program (DDSP)	0	12	12
11	SOS Children Village Siem Reap	1	2	3
12	Phachid	-	-	6
13	Epic Art	3	5	8
14	KARUNA BATTAMBANG	36	61	97
15	Komar Pikar Foundation (KPF)	4	10	14
16	DAMNOK TOEK	4	2	6
17	Operation Enfants Du Cambodge (OEC)	0	2	2
18	Cabdico	-	-	-
19	Action Camboge Handicap (ACH)	0	3	3
20	Essential Personnel Cambodia (EPC)	2	0	2
21	Community International Cambodia	0	1	1
22	Safe Haven	17	36	53
23	Einstein Education International School	-	-	-
24	Cambodia Autism Network	-	-	-
25	Association for Aid and Relief, Japan (AAR Japan)	-	-	-
26	National Special Olympics Cambodia	45	105	150
27	Happy Kid Clinic	-	-	-
	Total	197	566	999

Country Profiles on Autism



INDONESIA



INDONESIA

Country Profile on Autism



REPUBLIC OF INDONESIA

Foreword

Indonesia has ratified CRPD in 2011 and continuously committed to respect, to protect safety and to fulfill of the rights of persons with disabilities including those with autism. A number of measures have been done to accelerate the fulfillment of the rights of persons with disabilities in Indonesia in accordance to the 2030 Agenda and ASEAN regional commitments on disabilities. During the ASEAN Regional Workshop for Policy Recommendation on Autism, the Foundation of Asia Pacific Development Center on Disability with support of SOMSWD Indonesia launched the Country Profile Indonesia on Autism. The profile demonstrates the disability situation in Indonesia, particularly in the context of autism, and concrete actions taken by various stakeholders to make situations of those with autism visible in policy making.

The Indonesia Country Profile on Autism is a document that jointly formulated by several relevant stakeholders, including Ministry of Social Affairs of the Republic of Indonesia and Yayasan Autisme Indonesia, having responsibilities to ensure the full and equal participation of those with autism in all spheres of society and create enabling environments by, for, and with persons with autism. The profile documents Statistical Information, Policy and Program, provided services, involved stakeholders, and identified challenges in implementing measures for persons with autism. From this point forward, the document is expected to be a guideline for the policy development of providing integrated services for persons with autism.

The profile mostly explains about the situation of disabilities in general since the program and services provided for persons with autism are an inseparable part of disabilities' policies. Furthermore, the profile mentions that the measures intended for persons with autism are explicitly attached to the existing regulation, policies, and program for persons with disabilities.



The major point of this profile is the compiled data of autism that benefits the formulation of policies, program, and services for those with autism. It is worth noting that autism is a cross-cutting issue with multi-stakeholder involved. Consequently, coordination platform to facilitate data synchronization on autism between stakeholders is crucial.



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Abbreviations

AAN	ASEAN Autism Network
ABK	Child with Special Needs
AKESWARI	Indonesian Children's and Adolescent Mental Health Association
APCD	Asia-Pacific Development Center on Disability
ASEAN	Association of Southeast Asian Nations
BUMN	State-Owned Enterprise
BUMD	Regional-Owned Enterprise
DAPODIK	Information Management System in Education
DSM V	The Diagnostic and Statistical Manual of Mental Disorders
KIE	Information and Education Communication
KIS	Indonesian Health Card
M-CHAT	The Modified Checklist for Autism in Toddlers
NIK	National Identity Number
PAUD	Early Childhood Education Programs
PLA	Participatory Learning and Action
PLB	Special Education
PWD	Person With Disabilities
PDGJI	Indonesian Mental Medicine Specialist Association
PUSKESMAS	Community Health Center
PUSDATIN	Data and Information Center
RIKESDAS	Basic Health Research
SIMPD	Information Management System for Person with Disabilities
SIRS	Information System for Hospital
SD	Elementary School
SMP	Junior School
SMA	High School
SDLB	Special Elementary School
SMPLB	Special Junior School
SMALB	Special High School



SDIDTK	Stimulation of Early Intervention Detection for Growth and Development
SDQ	Strengths and Difficulties Questionnaire
SRQ	Self-Reporting Questionnaire
SDM	Human Resources
U.N.	United Nations
YPAC	Indonesian Society for the Care of Disabled



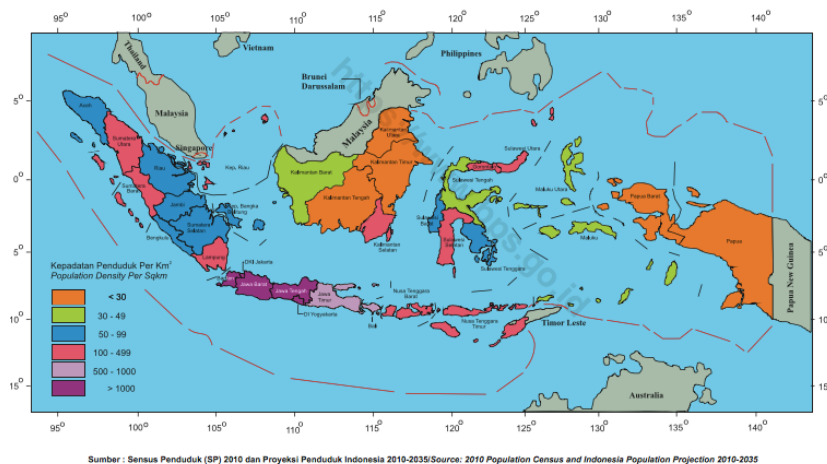
1. Population

Population (total)	268.074.600	2018
	261.900.000	2017
	255.461.700	2015
% of women	50.28	SUPAS 2015
% of men	49.72	SUPAS 2015
Population Growth	1.34	Statistic of Indonesia 2018
Life expectancy rate	71.1	SUPAS 2015

2. Geography

Area Land	1.916.862.2 km ²	2017
Water	3.257.483 km ²	2017
Island	16.056 km ²	2017

Figure 1 : Geographic Situation and Population Density of Indonesia 2017



Source : Statistical Yearbook Of Indonesia 2018. Report of Central Agency on Statistics, 2018



Figure 2 : Geographic Condition in Indonesia 2017



Source : Statistical Yearbook Of Indonesia 2018. Report of Central Agency on Statistics, 2018

B Methodology

All concerned Ministries and Departments Republic of Indonesia have contributed in the preparation of this document along with other stakeholders, including non-governmental organization working in the field of autism. Ministry of Social Affairs which dealing with disability rights invited inputs on the ASEAN Autism Mapping related initiatives from all concerned ministries that is the Ministry of Education, the Ministry of Health, the Ministry of Manpower. Contributions were also received from the APCD as implementing agency for the ASEAN Autism Mapping, and AAN as the cooperating Partner that has member of non-governmental organizations of Autism in 10 countries in ASEAN.

On the basis of the inputs received and the independent collection of relevant material, a draft report was placed, which was intensively discussed at Ministry of Social Affairs according to which all concerned



ministries, representatives from organizations for autism were invited. The Report was also made virtually available to enable stakeholders to provide their feedback. On the basis of the feedback received, the next draft of the report was prepared, which was presented to the Cross-Sectoral Coordination Meeting, consisting of concerned ministries and state governments with due representation of non-governmental organizations working in the field of disability.

C Law and Policy

1. Definition of Autism

In accordance to DSM V autism is developmental disorders involving various problematic behaviors including communication problems, perception problems, motoric problems, and development. Autism is a persistent developmental disorder which may children with autism in their developmental stages from adolescence to adult can develop autism symptoms which may need to be treated as early as possible comprehensively to minimize sequelae.

2. Diagnostic System

The early screening on autism commonly used is the M-CHAT (<https://m-chat.org>), is a validated developmental screening tool for toddlers between 16 and 30 months of age. It is designed to identify children who may benefit from a more thorough developmental and autism evaluation.

The screening can be used for the initial process, a thorough diagnosis should address using DSM 5 (*Diagnostic and Statistical Manual of Mental Disorder*, (<https://www.psychiatry.org/psychiatrists/practice/dsm>) by the clinicians.



3. International Commitment

- a. **The Convention on the Rights of Persons with Disabilities** and its Optional Protocol (A/RES/61/106) on Dec. 13, 2006. The Convention follows decades of work by the United Nations to change attitudes and approaches to persons with disabilities. It takes to a new height the movement from viewing persons with disabilities as “objects” of charity, medical treatment and social protection towards viewing persons with disabilities as “subjects” with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society.
- b. **World Autism Awareness Day** was established by the U.N. General Assembly (A/RES/62/139) on Dec. 18, 2007. Members of the U.N. General Assembly expressed deep concern regarding the prevalence rates of autism throughout the world and the need to address the long-term outcomes for children, families and communities.
- c. **The Incheon strategy** was established by United Nation ESCAP on November 2, 2012. It provides the Asian and Pacific region, and the world, with the first set of regionally agreed disability-inclusive development goals. It comprises 10 goals, 27 targets and 62 indicators, including ensuring disability-inclusive disaster risk reduction and management.
- d. **United Nations General Assembly** resolution 67/82 on March 19, 2013. Addressing the socioeconomic needs of individuals, families and societies affected by autism spectrum disorders, developmental disorders and associated disabilities
- e. **The World Health Assembly Resolution 67.8** on May 24, 2014. The resolution urges Member States to increase the capacity of health and social care systems to provide services for individuals and families with autism spectrum disorders and other developmental disorders.
- f. **Bali Declaration**, adopted by the World Parliamentary Forum on Sustainable Development in Bali on November 17, 2011 entitled



“on the enhancement of the role and participation of PWD's in ASEAN communities and ASEAN decade for PWD's 2011-2020”

- g. **The Thimphu Declaration** was issued by World Health Organization on April 21, 2017. Also signed by 10 member ASEAN Country which focuses on integrating the needs of individuals with autism and their families into national health and socioeconomic development plans.
- h. **The ASEAN Enabling Masterplan 2025** was adopted at the 33rd ASEAN Summit on November 15, 2018. Is an ASEAN's policy framework toward advancing the rights and welfare of persons with disabilities in the southeast Asian regions.

4. National and Policy Frameworks

- a. **Republic of Indonesia Law Number 19 Year 2011**, The law for ratification of The Convention on the Rights of Persons with Disabilities.
<https://sipuu.setkab.go.id/PUUdoc/17346/UU0192011.pdf>
- b. **Republic of Indonesia Law Number 8 Year 2016**, The law describing the type of disabilities and its 22 rights for person with disabilities, 4 specific rights for women with disabilities and 7 specific rights for child with disabilities in the Republic of Indonesia.
https://sipuu.setkab.go.id/PUUdoc/174847/UU_Nomor_8_Tahun_2016.pdf
- c. **Republic of Indonesia Law Number 20 Year 2003**, Law that describe the National educational system and specifically mention and explain about inclusive education related to autism.
https://jdih.kemdikbud.go.id/arsip/UU_tahun2003_nomor020.pdf
- d. **Republic of Indonesia Law Number 18 Year 2014**, Law that describe about national mental health system, even not specifically mention autism, but based on the law autism are part of mental health disability.
<http://ditjenpp.kemenkumham.go.id/arsip/ln/2014/uu18-2014bt.pdf>



- e. **Government Regulation Number 27 Year 2019**, Concerning access to facilitation for creation for disabilities in reading and using braille letters, audio books, and other means.
https://sipuu.setkab.go.id/PUUdoc/175815/PP_Nomor_27_Tahun_2019.pdf
- f. **Government Regulation Number 52 Year 2019**, Concerning about implementation of social welfare in social rehabilitation, social security, social empowerment and social protection for person with disabilities
https://sipuu.setkab.go.id/PUUdoc/175913/PP_Nomor_52_Tahun_2019.pdf
- g. **Government Regulation Number 2 Year 2018**, Concerning about minimum standard of services of the basic requirement in 6 area of living for the each provinces and region in Republic of Indonesia that related to the rights for person with disabilities
<https://sipuu.setkab.go.id/PUUdoc/175411/PP%20Nomor%202%20Tahun%20018.pdf>
- h. **Government Regulation Number 2 Year 2018**, Concerning about child health, which explains the definition, scope and variety of child health efforts
<http://kesmas.kemkes.go.id/perpu/konten/permenkes/pmk-no.-25-ttg-upaya-kesehatan-anak>
- i. **Government Regulation Number 32 Year 2008**, concerning Academic Qualification Standards and Special Education Teacher Competencies
http://simpuh.kemenag.go.id/regulasi/permendiknas_32_08.pdf
- j. **Regulation of the Minister of National Education Number 70 of 2009** concerning Inclusive Education for Students Who Have Disabilities and Have Potential Intelligence and / or Special Talents.
<https://jdih.kemdikbud.go.id/arsip/Abstraksi%20Permendikbud%20Nomor%2070%20Tahun%202009.pdf>
- k. **Regulation of the Minister of Manpower Number 8 of 2017** concerning Standards for Vocational Training Centers, including vocational training centers for persons with disabilities
<http://peraturan.go.id/common/dokumen/bn/2017/bn1108-2017.pdf>
- l. **Minister of Social Affairs Regulation Number 20 Year 2015** Regarding Ministry of Social Organization and Work Procedures



<https://puslit.kemsos.go.id/detail-peraturan/9/permensos-nomor-20tahun-2015-tentang-organisasi-dan-tata-kerja-kementerian-sosial-ri>

- m. **Minister of Social Affairs Regulation 9 of 2018** concerning Basic Technical Services Standards for Minimum Service Standards in the Social Sector in Provinces and Regencies / Cities

<https://intelresos.kemsos.go.id/v4/files/Permensos%20No.%209%20Tahun%202018%20Tentang%20Standar%20Teknis%20Pelayanan%20Dasar%20pada%20SPM%20Bidang%20Sosial.pdf>

- n. **Ministry of Social Affairs Regulation** on the Family Hope Program

<https://pkh.kemsos.go.id/dokumen/DOCS20181009100229.pdf>

D Stake Holders

1. Government Bodies

- a. Ministry of Social Affairs of the Republic of Indonesia

A ministry that organizes and in charge of internal affairs within the government to assist the President in administering state governance in the social field.

The ministry has the task of carrying out social rehabilitation in an effort to develop the capacity and social responsibility of persons with disabilities, autism, families and communities in the continuation of the care process and its growth and development.

<https://www.tkemosos.go.id/>

- b. Ministry of Education and Culture of the Republic of Indonesia

A government ministry which organizes early childhood education, elementary education, secondary education and community education affairs and the management of culture within the Indonesian government.

Carry out the preparation of the formulation and implementation of policies in the field of fostering special education and special services for people with autism

<https://www.kemdikbud.go.id/>



- c. Ministry of Health of the Republic of Indonesia
A government ministry which organizes public health affairs within the Indonesian government.
<http://www.kemkes.go.id/>
- d. Ministry of Manpower of the Republic of Indonesia
A government ministry responsible for the workers and Labor Laws of Indonesia.
<http://www.kemkes.go.id/>
- e. Local Government
A county government's main function is to locally administer state laws. Have the powers and responsibilities in the administration of a particular geographic area.
2. Non-Government Organizations
- a. Autism Foundation of Indonesia
A non-profit organization for people with autism and their families. Campaigning the awareness on autism and advocates the movement for the rights of person with autism in Indonesia
<http://autisme.or.id/>
- b. Hellen Keller
<https://www.hki.org/>
- c. AKESWARI
- d. PDSKJI
<https://www.pdskji.org>
- e. Rumah autisme
<https://www.rumahautis.org/>
- f. YPAC
<http://www.ypacjakarta.org/>
- g. Bakti Luhur
<https://www.bhaktiluhur.org/>
- h. Yayasan Sayap Ibu
<http://www.yayasansayapibu.or.id>



E

Statistic Data on Autism

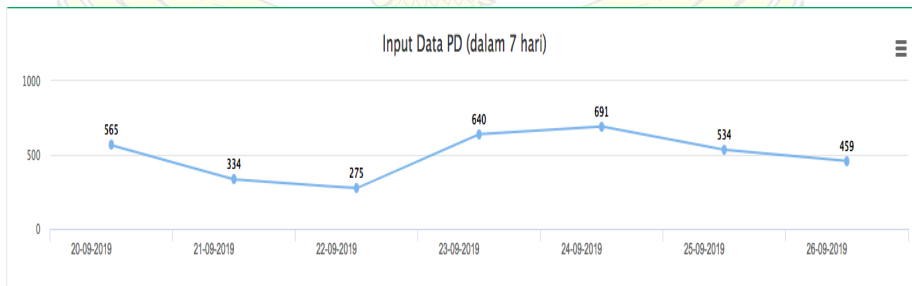
1. Social Welfare

Sistem Informasi Penyandang (SIMPDP)

<https://simpdp.kemsos.go.id/>

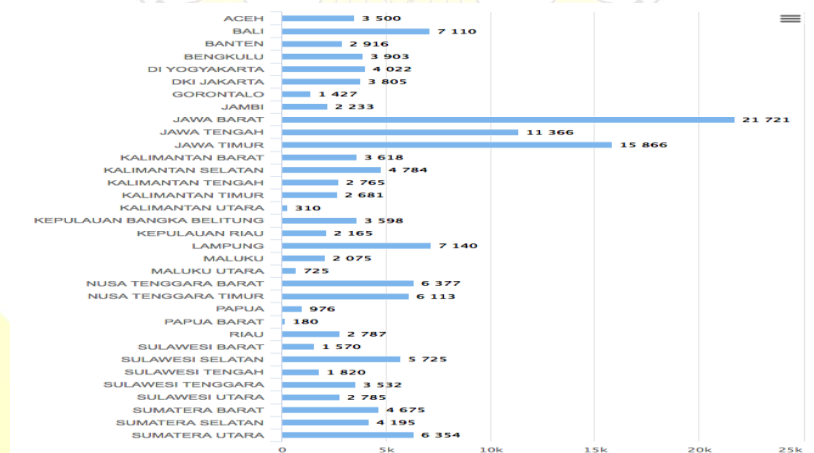
It is an existing information management system for persons with disabilities collecting data on persons with disabilities throughout Indonesia which updated daily by 245 assistants with disabilities and 998 social welfare workers working with persons with disabilities in 34 provinces in Indonesia.

Figure 3 : Daily Updated Status Information Management System for Person with Disabilities (SIMPDP)



Source : Information Management System for Person with Disabilities (SIMPDP), Minister of Social Affairs Republic of Indonesia 2019

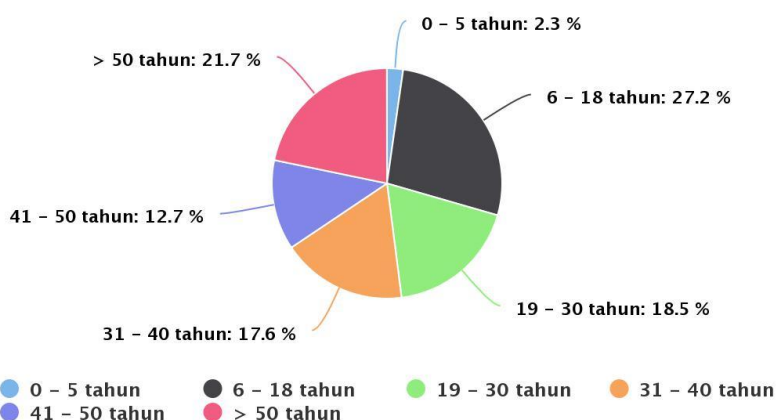
Figure 4 : Number of Person with Disability based on Province



Source : Information Management System for Person with Disabilities (SIMPDP), Minister of Social Affairs Republic of Indonesia 2019

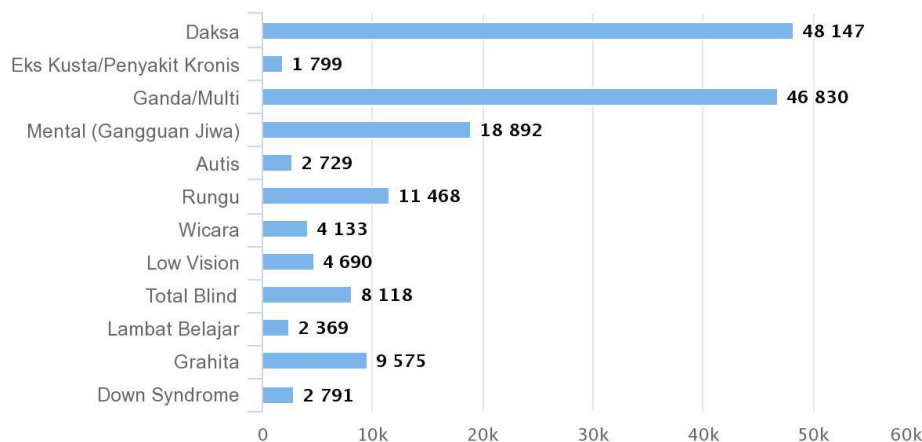


Figure 5 : Number of Person with Disability based on Age Groups



Source : Information Management System for Person with Disabilities (SIMPD), Minister of Social Affairs Republic of Indonesia 2019

Figure 6 : Number of Person with Disability based on Type of Disability

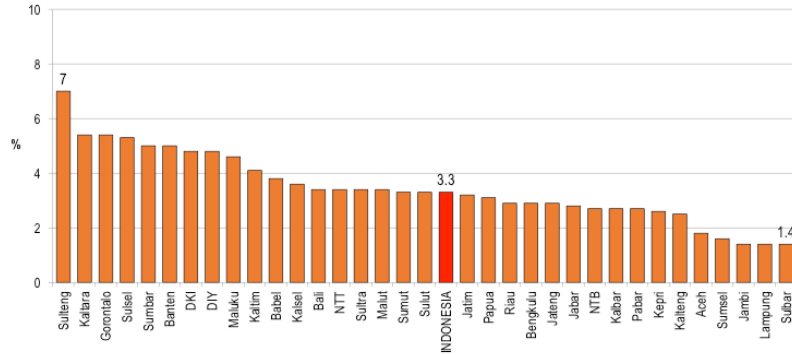


Source : Information Management System for Person with Disabilities (SIMPD), Minister of Social Affairs Republic of Indonesia 2019



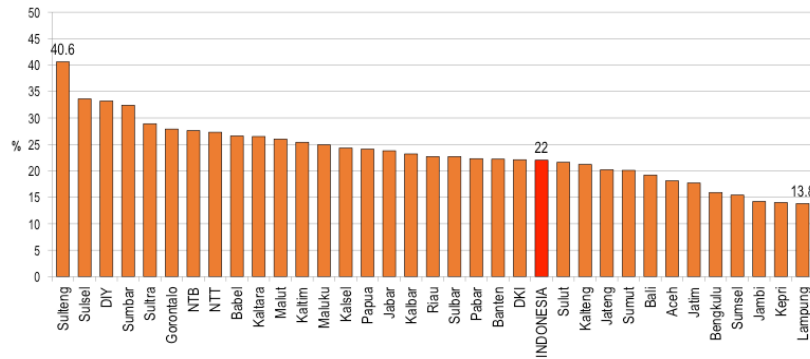
2. Health

Figure 7 : Number of Children with (5-17 Years old) in Each Province Disability



Source : Basic Health Research (RIKESDAS), Minister of Health Republic of Indonesia 2018

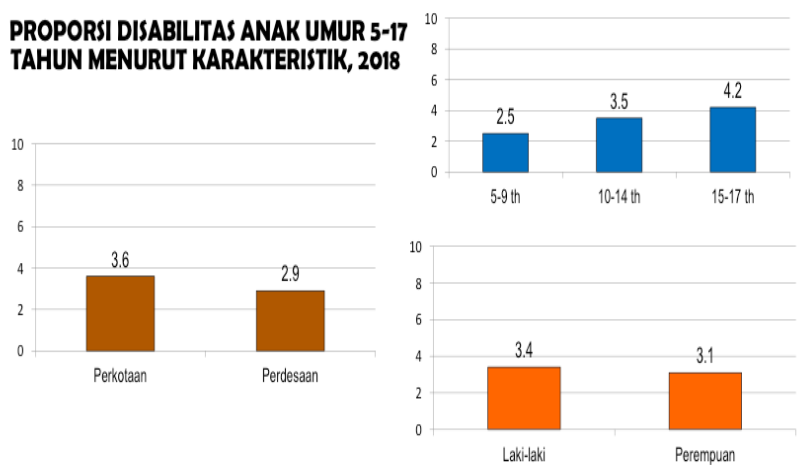
Figure 8 : Number of Adult with Disability (18-59 Years old) in Each Province



Source : Basic Health Research (RIKESDAS), Minister of Health Republic of Indonesia 2018



Figure 9 : Proportion of Child with Disability (age 5 - 17 Years Old) based on Characteristic



Source : Basic Health Research (RIKESDAS), Minister of Health Republic of Indonesia 2018

Figure 10 : Community Health Center (PUSKESMAS) Growth



Source : Data and Information Center (PUSDATIN), Minister of Health Republic of Indonesia 2018



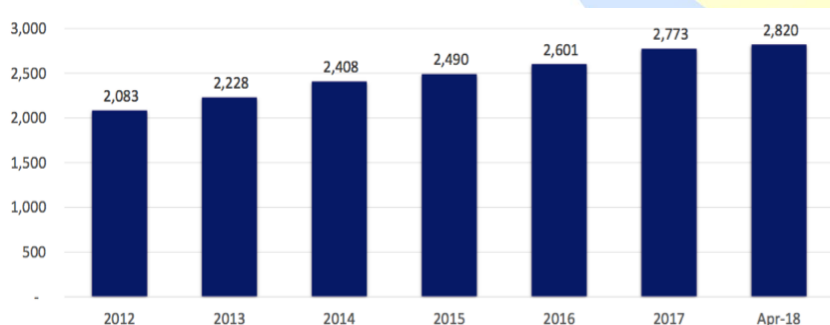
TABEL 1 : Number of Community Health Center (PUSKESMAS) in 2014 until 2018

No	Provinsi	Jumlah Puskesmas				
		2014	2015	2016	2017	2018
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1	Aceh	337	339	340	341	348
2	Sumatera Utara	570	571	571	571	581
3	Sumatera Barat	264	264	264	269	275
4	Riau	211	212	213	215	216
5	Jambi	176	176	183	186	195
6	Sumatera Selatan	321	322	322	322	332
7	Bengkulu	180	180	180	180	180
8	Lampung	290	291	292	297	302
9	Kepulauan Bangka Belitung	61	62	62	63	64
10	Kepulauan Riau	73	72	73	74	83
11	DKI Jakarta	340	340	340	340	321
12	Jawa Barat	1.050	1.050	1.050	1.056	1.069
13	Jawa Tengah	875	875	875	876	881
14	DI Yogyakarta	121	121	121	121	121
15	Jawa Timur	960	960	960	963	967
16	Banten	231	233	233	233	242
17	Bali	120	120	120	120	120
18	Nusa Tenggara Barat	158	158	158	160	166
19	Nusa Tenggara Timur	370	371	371	372	381
20	Kalimantan Barat	238	238	238	241	244
21	Kalimantan Tengah	195	195	195	196	200
22	Kalimantan Selatan	228	230	230	230	233
23	Kalimantan Timur	174	174	175	179	183
24	Kalimantan Utara	48	49	49	49	56
25	Sulawesi Utara	187	187	188	189	193
26	Sulawesi Tengah	184	189	189	193	202
27	Sulawesi Selatan	446	448	448	451	458
28	Sulawesi Tenggara	269	269	269	274	284
29	Gorontalo	93	93	93	93	93
30	Sulawesi Barat	94	94	94	94	94
31	Maluku	197	199	199	199	208
32	Maluku Utara	127	127	128	129	134
33	Papua Barat	149	151	151	155	159
34	Papua	394	394	393	394	408
Indonesia		9.731	9.754	9.767	9.825	9.993

Source : Data and Information Center (PUSDATIN), Minister of Health Republic of Indonesia 2018



Figure 11 : Number of Hospital in Indonesia



Source : Hospital Information System (SIRS), Minister of Health Republic of Indonesia 2018

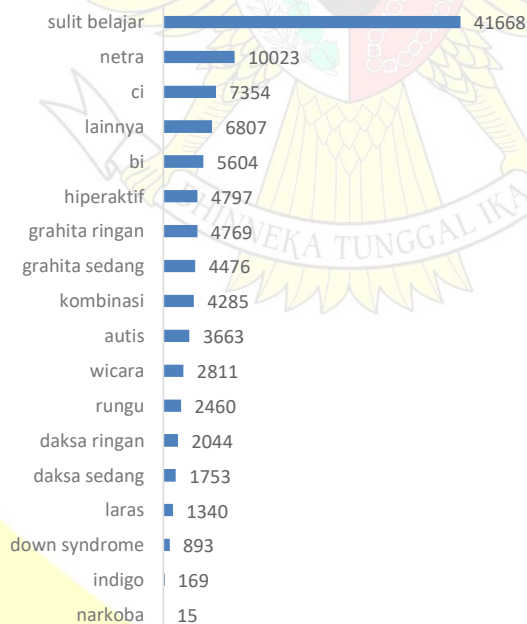
3. Education

Data Pokok Pendidikan (DAPODIK)

<http://dapo.dikdasmen.kemdikbud.go.id/>

Is an ongoing information management system in education, it recapitulates data in every school throughout Indonesia.

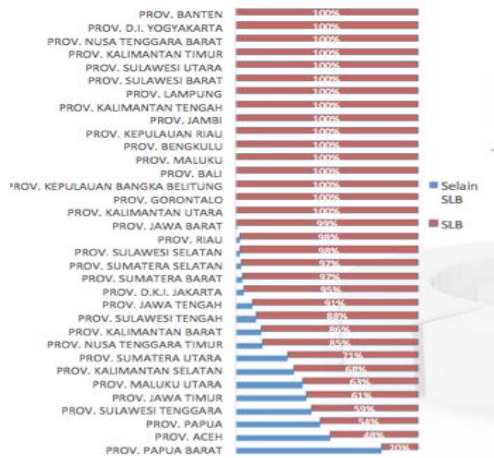
Figure 12 : Type of Disability in the School Settings



Source : Basic Education System (DAPODIK), Minister of Health Republic of Indonesia 2019



Figure 13 : Percentage of Special School in Each Province



Source : Basic Education System (DAPODIK), Minister of Health Republic of Indonesia 2019

Figure 14 : Number of Student in Special School

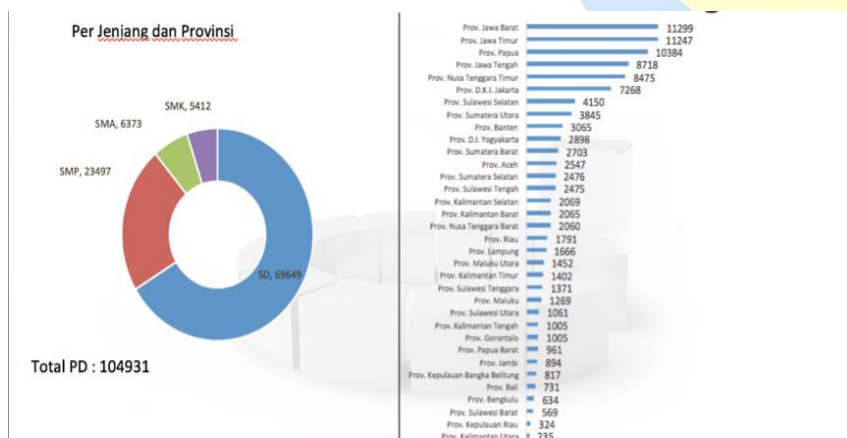


There are 132. 582 Student in Special School in Indonesia

Source : Basic Education System (DAPODIK), Minister of Health Republic of Indonesia 2019



Figure 15 : Number of Student with Disability in Reguler School



Source : Basic Education System (DAPODIK), Minister of Health Republic of Indonesia 2019

Based on the updated date of May 28, 2019, there were 132,852 students with disabilities at elementary to high school, there were 3,663 students with disabilities at SDLB to SMALB were 10,089 students with autism. Those data still ongoing and will be continued to be updated and increased.

4. Human Resource

Figure 16 : Demography Employment in Indonesia



Figure 17 : Profile of the Employment in Indonesia



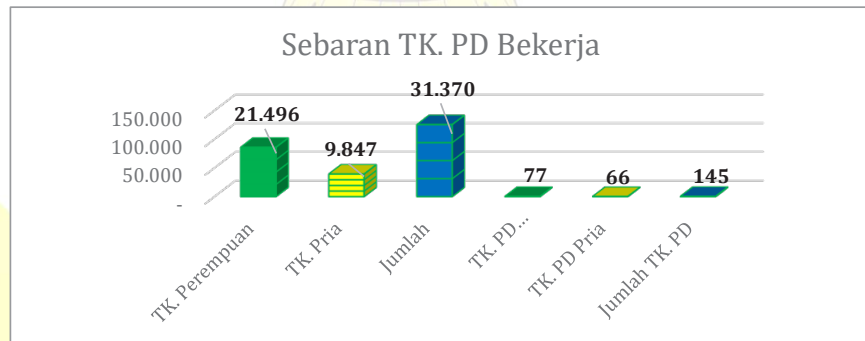
Source : Basic Education System (PUSDATIN), Minister of Manpower Republic of Indonesia 2018

Figure 18 : Type of the Disability Work Force in Indonesia

No	Jenis Disabilitas	Laki-Laki	Perempuan	Jumlah
1	Penglihatan	3.741.649	3.792.611	7.534.260
2	Pendengaran	653.713	574.200	1.227.913
3	Berjalan	689.571	965.704	1.655.275
4	Jari Tangan	127.890	120.458	248.348
5	Bicara	151.391	126.674	278.065
6	Lainnya	641.202	737.709	1.378.911
7	Disabilitas Ganda	2.130.630	2.460.721	4.591.351
8	Disabilitas Tiga Macam	903.137	1.291.340	2.194.477
9	Disabilitas Lebih Dari Tiga Macam	1.294.623	2.160.169	3.454.792
Jumlah		10.333.806	12.229.586	22.563.392

Source : Basic Education System (PUSDATIN), Minister of Manpower Republic of Indonesia 2018

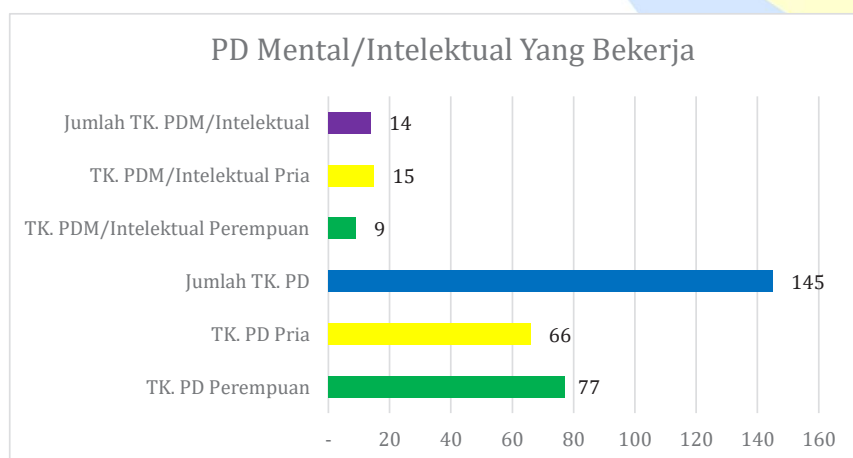
Figure 19 : Type of the company that has received Disability Work in Indonesia



Source : Based on Ministry of Manpower's data, which updated on April 30, 2019, there were 15 companies in Indonesia which recruits persons with disabilities.



Figure 20 : Type of the company that has received mental/intelektual Disability Work in Indonesia



Source : Based on Ministry of Manpower's data, which updated on April 30, 2019, there were 15 companies in Indonesia which recruits persons with mental-intellectual disabilities.

F Programs and Services for Person with Autism

1. Early Intervention

Stimulation of Early Development Intervention Detection is a guidebook compiled by the Ministry of Health to screen children who experience developmental problems or problems at the health center level. This guideline also reviews early detection of autism using M-CHAT

Early detection of SDQ and SRQ, scoring early detection of emotional and behavioral problems for children aged 4 to 18 years (SDQ) and for someone over the age of 20 years (SRQ)

PAUD handbooks related to child growth and development screening used by PAUD level teachers related to child growth and mental health problems



2. Health

a. **Promotive methods include:**

- 1) Advocacy and outreach
- 2) Development of IEC Media

b. **Preventive methods include:**

- 1) Early detection
- 2) Mapping and research
- 3) Risk factors control which are protective measures by managing several risk factors that influence the occurrence of autism

c. **Curative method include :**

- 1) Training for health workers
- 2) Provision of child friendly health service facilities with special needs.

d. **Rehabilitative efforts include providing services**

- 1) Autism spectrum disorders require integrated treatment, namely medical therapy for mentosa, functional therapy and biomedical therapy.
- 2) Functional therapy includes:
 - a) Behavioral therapy
 - b) Occupational therapy
 - c) Speech therapy and
 - d) Sensory integration
 - e) Biomedical therapy is to improve physical disorders that affect brain function

3. Education

a. Autism Service Centers have been established in 31 provinces in Indonesia that provide integrated counseling, assessment and therapy services for people with autism. In addition, PLA is also a center for research and scientific development regarding people with autism.

b. Inclusive Schools are educational services that include all children, including children with special needs or special needs student, in the same learning process. Inclusive education is different from special education for children with disabilities, where ABK is separated from general students.



- c. Training of inclusive school teachers.
 - d. SLB school, a special school for school-age children who have "special needs" which aims to help students with physical and / or mental, behavioral and social disorders to be able to develop attitudes, knowledge and skills as individuals and community members in establishing reciprocal relationships. with the social, cultural and natural environment and can develop skills in the world of work or attend further education.
 - e. Special tutors are teachers who are tasked with assisting children with special needs in the teaching and learning process in regular classes that qualify for Special Education (PLB) or who have received training on the implementation of inclusive schools.
4. Employment
- a. Dissemination of the Promotion of the Rights of Persons with Disabilities in the Field of Work in accordance with Law No. 8 of 2016;
 - b. Facilitation of Disability Workforce Placement in Private Companies, Government, state-owned enterprises and regionally-owned enterprises state-owned enterprises and regionally-owned enterprises; and
 - c. Entrepreneurship empowerment and training for persons with disabilities as well as training and apprenticeship.
5. Social Services
- a. Advocacy for the issuance of NIK for persons with disabilities including autism. Advocacy and access to obtain KIS.
 - b. Social Assistance through the Hope Family Program.
 - c. Social rehabilitation through social rehabilitation centers and social welfare institutions, with components:
 - 1) Bantuan bertujuan (BanTu)

Is a assistance program for persons with disabilities that can be in the form of goods, services and money. The assistance provided includes assistance with tools, independence assistance and social assistance for persons with disabilities.



2) Providing therapeutic services

- a) Physical therapy in the form of therapeutic exercises, massage, massage, electronic therapy, exercise therapy and therapy in the use of assistive devices as mobility support for people with disabilities.
- b) Mental therapy and spiritual therapy that uses moral, spiritual and religious values to harmonize the mind, body, and spirit of persons with disabilities in an effort to overcome anxiety or other problems and find meaning in life.
- c) Psychosocial Therapy Is a collection of therapies to overcome problems that arise in the interaction of persons with disabilities with their social environment both family, groups, communities and communities. Psychosocial therapy aims to strengthen and mobilize the potential of persons with disabilities as well as improve self-management capabilities in their social environment. This psychosocial therapy is carried out to overcome problems related to cognitive, psychological and social aspects
- d) Life Skills Therapy (Livelihood) Is a therapy that aims to increase the productivity of life and maintain the ownership of assets of people with disabilities. This therapy is also to improve skills in the work environment, through the development of life skills, vocational skills and entrepreneurial skills.
- e) Care is a series of efforts (protection, support, personal care) that makes a person able to do / live his life activities better, adaptive to the conditions of disability. The purpose of care is to meet the needs for affection, attachment, safety, permanent and sustainable welfare for persons with disabilities carried out by parents or family or foster parents, foster parents, guardians and institution-based care as a last resort.



f) Family support is a program aimed at strengthening the capacity of the family as a whole, so that people with disabilities and families have an increase in their social functioning abilities. Family support is carried out through activities:

- 3) Assistance by the institution to families with disabilities through home visits. Activities that can be carried out include family gatherings, family consultations, family tracing, reunification.
 - a) Strengthening family capacity.
 - b) Organization of family group education.
 - c) Support family replacement.

G Challenges

1. Ministry of Social Affairs

a. Data statistic

- 1) Make a data collection instrument that fits the characteristics of the autism problem.
- 2) Data collector HR must be given technical guidance in order to be able to collect data accordingly.

b. Service

- 1) Synchronization related to management of handling from the central and regional levels
- 2) HR service providers who need technical assistance related to the issue of autism
- 3) Regional institutions, facilities and infrastructures for persons with autism for social rehabilitation

2. Ministry of Health

a. Statistic data

Nomenclature of autism in the data collection of persons with enforcement authority disabilities diagnosis

b. Service T

- 1) Public opinion (stigma)
- 2) HR mental health personnel
- 3) Mental health facilities and infrastructure



- 4) Parental and community awareness of late detection / identification
- 5) Limited resources (mental health workers and infrastructure)
- 6) Reducing stigma and discrimination against people with autism

3. Ministry of Education and Culture

a. Statistic data

- 1) Data management information system
- 2) Information dissemination and coordination related to the inclusion of school data collection from provincial offices to schools
- 3) Data validation and evaluation

b. Service

- 1) Synchronization of regulations across ministries and directorates related to special assistant teachers.
- 2) Sustainability of the program related to HR management
- 3) Information dissemination and distribution of information and assistance at the central and regional levels

4. Ministry of Manpower

a. Challenges:

- 1) Not all business sectors have the awareness and willingness to exploit the potential of Disability;
- 2) Limited data on job seekers and job vacancies for workers with disabilities;
- 3) Limited job opportunities that are open to workers with disabilities;
- 4) Discrepancy in the types of skills of workers with disabilities with the conditions of the job and existing conditions;
- 5) The existence of personal internal barriers and employment of persons with disabilities both from themselves and from their families;
- 6) Limited accessibility for workers with disabilities to carry out activities and mobility; and
- 7) Not yet socialized successful business practices utilizing the potential for disability.



b. Strategy / Solution taken:

- 1) Placement of workers with disabilities who meet the qualifications to fill vacancies available in employment / formal relationships;
- 2) Strengthening data on job seekers and vacancies for workers with disabilities;
- 3) New business approaches are needed that make it possible by exploiting the potential of disability;
- 4) Effective dialogue among stakeholders includes the central government, regional governments, entrepreneurs, organizations of persons with disabilities.
- 5) Fulfill accessibility for people with disabilities; and
- 6) Disability job seekers whose qualifications do not meet and or because there are no vacancies available can increase the qualifications of workers for independent / non-work / informal businesses through training in funds or apprenticeship.

H National Strategy

1. Accelerate the issuance of relevant Government Regulation that is derivative from Law no. 8, 2016
 - a. Government Regulation on Planning, organizing and evaluating the fulfillment of the rights of persons with disabilities (Ministry of National Development Planning)
 - b. Government Regulation on Reasonable accommodation for students with disabilities (Ministry of Education and Culture)
 - c. Government Regulation on reasonable accommodation in justice (Ministry of Law and Human Rights)
 - d. Government Regulation on disability service unit (Ministry of Manpower)
 - e. Government Regulation on Habilitation and Rehabilitation (Ministry of Social Affairs)
 - f. Government Regulation on Settlement and Public Services



- (Ministry of Public Infrastructures)
- g. Government Regulation on Incentive and Concession (Ministry of Finance)
 - h. Government regulation on the National Disability Commission (Ministry of State Apparatus and Bureaucratic Reforms)
 - i. Presidential regulation on awards (Ministry of Social Affairs)
This Presidential Decree regulates the mechanism of awarding individuals and institutions that become the champion on disability issues. This award is intended to encourage the acceleration of the fulfillment of the rights of persons with disabilities.
 - j. Social ministerial regulation on cards for persons with disabilities (Ministry of Disabilities)
2. National Medium-Term Development Plan 2020-2024
One priority mentioned in the National Medium-Term Development Plan 2020 - 2024 is the advancement of qualified and competitive human resources, including those with disabilities, in order to achieve inclusive and equitable development in all regions.
3. National Action Plan on Human Rights
The National Action Plan for Human Rights is a document that contains procedures for coordination, monitoring, evaluation, and reporting mechanism for the implementation of Human Rights including those with disabilities.

I Conclusion

The profile of autism documents the situation persons with autism in Republic of Indonesia in order to promote and protect their rights. Country profiles which will include an accurate data source on the prevalence of autism; a mapping of organizations of and for persons with autism to facilitate exchanges and cooperation between these organizations; and a directory of support services available to persons with autism in the Republic of Indonesia. The above information will be



vital as a basis for developing laws and policies to promote and protect the rights and empowerment of persons with autism in Indonesia.

A synergy of central-local government and integrated policies, programs and data between it is a fundamental aspect that need to be review and enhanced to fulfill the protection of the rights and empowerment of persons with autism in Republic of Indonesia



DRAFTING TEAM



Ministry Of Social Affairs



Ministry Of Health



Ministry of Education



Ministry Of Manpower





Country Profile on Autism

REPUBLIC OF INDONESIA

Country Profiles on Autism

The logo consists of a large green circle with the text "LAO PDR" centered inside it in white. A smaller yellow circle is positioned at the bottom-left edge of the green circle, partially overlapping it.

LAO PDR

I	<p>Introduction (Including country background, etc.)</p> <p>Based on the national census in 2015, Lao PDR has a total of 160,881 persons with disabilities covering 2.8% of population from 5 years old and above (which are 5,810,245 people. It means that this number does not include children with disabilities who are of 0-5 years old); among that 80,115 are females, 80,766 are males, persons with disabilities of 60 years old and above cover 18.4% of total persons with disabilities. The 2015 census also indicated persons with a visual disability cover 1.3%, persons with a walking disability 1.3%, persons with a hearing disability 1.2%, persons with a memory disability 1.2%, persons with a self-care disability 1.1% and persons with a speech or communication disability 0.9%; Furthermore, the census indicated that the percentage of persons with disabilities living in rural areas without road access covers 3.3% of rural population without road access, persons with disabilities living in rural areas with road access cover 2.9% of rural population with road access and persons with disabilities living in urban areas cover 2.5% of urban population.</p> <p>Through the operation of disability work in UN member countries, it has been found that the opportunity given to persons with disabilities to participate in the development is not high enough, consequently, the 61st UN General Assembly Conference out of 106, dated 13 December 2006 had adopted the Convention on the Rights of Persons with Disabilities (CRPD) and the Convention on Cluster Munitions (CCM) on 3 December 2008.</p> <p>Following the adoption of the Convention on the Rights of Persons with Disabilities, the Asia-Pacific and Southeast Asia regions (ASEAN) countries have put efforts to implement action plans and projects as adopted from time to time by the UN resolutions having the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP) as coordinator, monitoring and providing support as well as doing researches in collaboration with member countries to issue various acts such as: Biwako Declaration in Japan in 2002 on inclusive development and barrier elimination for persons with disabilities in the society from 2003-2012, Incheon Declaration and Strategy in the Republic of Korea to make the right real for persons with disabilities for 2013-2022. The ASEAN has also put its efforts of cooperation for the implementation of the Convention on the Rights of Persons with Disabilities (CRPD) for which the leaders of 10 ASEAN countries have agreed to issue the Bali Declaration in Indonesia on the Enhancement of the Role and Participation of the Persons with Disabilities and the ASEAN Human Rights Declaration including strategies for social welfare and development for 2011-2015 and for 2015-2020 to be the bases for the development of disability affairs.</p> <p>For the disability affairs to be materialized, on 25 September 2015 the UN General Assembly adopted the Resolution on Sustainable Development Goals (SDGs) especially policies and implementation must focus on underserved groups including persons with disabilities.</p> <p>To implement the direction and policies of the Party and the Government as set out in the Resolution of the 10th Congress of Lao People's Revolutionary Party Congress, 8th National Socio-Economic Development Plan of the Government, implementation of the Convention on the Rights of Persons with Disabilities</p>
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	<p>(CRPD) which Lao PDR has ratified in 2009. Over the past years, the Government has issued policies to ensure legitimate rights and interest and access to services and participation of persons with disabilities in different aspects of the society, notably the Government has issued Decree on Persons with Disabilities No. 137/GOL, dated 18 April 2014 and has established different associations of persons with disabilities, established vocational centers for persons with disabilities, promoted their employment according to their ability and knowledge and received appropriate remuneration to improve the living conditions of persons with disabilities. A Law on Persons with Disabilities has been discussed by the National Assembly in December 2018 and is now in the final round of editing.</p> <p>Nonetheless, through the past implementation, it has been found that policies, legislation relating to persons with disabilities are still inconsistent and incomplete with limited budget, small number of personnel with knowledge on disabilities, low involvement of persons with disabilities, some of whom still lack courage in discriminating family and social environment, subjected to mockeries, prevented from participation and so on such as:</p> <ul style="list-style-type: none"> • Opportunity given by the society to persons with disabilities to have access to education, rehabilitation-treatment, vocational training, employment, social welfare, social services etc. is not high enough; • Budget provided for the implementation of disability affairs is still limited, social participation in the development of persons with disabilities is not broad due to lack of understanding on the types of disabilities; • Personnel, vehicles, equipment, development of techniques and technologies to serve disability affairs are still limited; • Relation and coordination methods and mechanism between organizations related to disability affairs are still not good enough and to work in collaboration with persons with disabilities is still new to many sector authorities; • Basic services for, and governance of disability affairs are not yet strong and outreaching; • Data and statistics on persons with disabilities have not yet been clearly analyzed;
II	<p>Methodology (how to collect data)</p> <ul style="list-style-type: none"> ▪ Secondary source, official documents such as: (Draft) National Policy for Persons with Disabilities. ▪ Data from relevant organization such as Association for Autism (AfA); National Rehabilitation Centre.
III	<p>Law and Policy (Concerning people with disabilities including Autism)</p> <p><u>National Reference</u></p> <ul style="list-style-type: none"> ▪ Lao Constitution No.63 date 8 December 2015 ▪ Law on Resistance and Prevent Violence against Women and Child No.56 date 23 December 2014 ▪ Law on Education No. 62 date 16 July 2015 (promote inclusive education system) ▪ National policy and strategy plan on inclusive education from 2010-2015 ▪ Law on Labour (Amended) No.43 date 24 December 2013 (promotion of vocational training and employment)

- Law on Hygiene, Disease Prevention and Health Promotion (Amended) No.8 date 21 December 2011 (promotion nutrition)
- Law on Health treatment (Amended) No.58 date 24 December 2014 (promote treatment and rehabilitation)
- Law on Construction No.5 date 26 November 2009 (promote accessibility)
- Law on Land Transportation(Amended) No.24 date 12 December 2012 (promote accessibility)
- Decree on the Organization and Operation of National Committee for Disabled People and the Elderly No. 232/PM, dated 6 September 2013.
- Decree on Persons with Disabilities No. 137/Gov, dated 18 April 2014.
- National Policy for Persons with Disabilities (final draft submitted to NCDE Board in 2017 and waiting approval)
- Law of Persons with Disabilities (Adapted by President of Lao PDR in May 2019).

International Reference

- Human Rights Declaration
- Convention on Cluster Munitions in May 2008. Article 5 Victim Assistance
- United Nations Convention on the Rights of People with Disabilities (UNCRPD) No. A/RES/61/106 date 13 December 2006 (Laos ratified on 25 October 2009)
- Child Right Convention (CRC) by General Assembly resolution 44/25 date 20 November 1989
- The Convention on the Elimination of All Form of Discrimination against Women and its Optional Protocol (CEDAW)
- Incheon Strategy to Make the Right Real for Person with Disability in Asia and the Pacific
- ASEAN Enabling Master plan 2025: Mainstreaming the Rights of Persons with Disabilities

A. Defining Autism (including a diagnosis system used in the country)

There is no specific Lao definition about Autism in the country. The common definition used by Association for Autism is based on DSM5, a diagnosis of autism is made by looking at difficulties in two areas:

Persistent deficits in:

- A. Social communication and social interaction across multiple situations
- B. Restricted, repetitive patterns of behavior, interests, or activities, as seen in at least two areas

A diagnosis system used in the country does still not exist. The child hospital and association for autism can do the initial screening.

Disability Law (to be adopted) identifies type of disability by functionality based on the Results of Population and Housing Census 2015 which use six questions of the Washington Group form:

Population 5 Years Old and Over with Disability by Type of Difficulty by Sex and Age Group (functionary)

1. Seeing

	<ol style="list-style-type: none"> 2. Hearing 3. Walking 4. Intellectual 5. Communicating 6. Other (we cannot category for instance: crazy, nerved and etc)
	<p>B. International Commitments (including international organization participation and regional instruments such as UN, Incheon strategy etc.)</p> <p>ASEAN Enabling Master plan 2025 Human right</p> <ul style="list-style-type: none"> ▪ Human Right Declaration ▪ Convention on Cluster Munitions in May 2008. Article 5 Victim Assistance. ▪ United Nations Convention on the Rights of People with Disabilities (UNCRPD) ratified in 2009. ▪ Child Right Convention (CRC) ▪ Concluding observations of the Committee on the Elimination of Discrimination against Women (CEDAW) ▪ Incheon Strategy to Make the Right Real for Person with Disability in Asia and the Pacific ▪ ASEAN Enabling Master plan 2025: Mainstreaming the Rights of Persons with Disabilities
	<p>B. National Legal and policy Framework (including the governmental structure of organizations concerning people of disabilities, especial persons of Autism)</p> <p>According to the draft National Policy for Persons with Disabilities, National Committee for Persons with Disabilities and the Elderly, Ministry of Labor and Social Welfare has the following role, rights and duties:</p> <ol style="list-style-type: none"> 1. To further elaborate policies into strategies, action plans, projects and regulations; 2. To take a key role of coordination with relevant stakeholders at the central and local levels for effective implementation; 3. To collaborate with State organizations and organizations of persons with disabilities to conduct monitoring, inspection, evaluation and to report the implementation outcome of the National Policy for Persons with Disabilities in a regular manner. <p>The draft policy cover main 12 areas as following:</p> <p>5.1 Awareness raising in the society regarding persons with disabilities</p> <ul style="list-style-type: none"> • To encourage each sector to include disability affairs in their legislation, policy, strategy, action plan and projects; • To raise awareness and change negative attitude on disability in the society; • To promote equality and create opportunity for persons with disabilities to participate in all sectors. <p>5.2 Data and statistics of persons with disabilities</p> <ul style="list-style-type: none"> • To collect detailed and complete data-statistics on persons with disabilities with the participation of persons with disabilities;

- To promote dissemination of data and statistics of persons with disabilities in the society;
- To establish a database, to provide, manage and protect personal information of persons with disabilities.

5.3 Access facilitation for persons with disabilities

- To promote development of legal framework on construction design of facilities in favor of persons with disabilities to have access to buildings, workplaces, public places, roads and other places;
- To promote access for persons with disabilities to transportation, information, technology, communication etc.;
- To improve and create access for persons with disabilities various services available in the society in an equal manner with persons without disabilities.

5.4 Political participation

- Persons with disabilities have equal rights with persons without disabilities in terms of politics as per the Constitution and laws of Lao PDR based on their conditions and actual capacity.
- To develop mechanism, methodology, guidance for persons with disabilities to be able to participate in the election and candidature.

5.5 Right to live

- To promote equal live conditions for persons with disabilities in the society;
- To respect rights of persons with disabilities to earn their living, to build their family and conduct other activities equally;
- To assist and protect persons with disabilities from violence in the society and family, human trafficking, and disaster risks etc.

5.6 Access to justice

- Persons with disabilities have access to justice in an equal manner with persons without disabilities according to laws;
- To develop mechanism, methodology, guidance for persons with disabilities to have access to justice.

5.7 Healthcare, prevention, treatment and rehabilitation.

- To promote development of policies on prevention, treatment for victims or from any impact of unexploded ordinances, for physical and mental rehabilitation especially for women, children and elderly people with disabilities without discrimination;
- To encourage and promote families, society to assist and take care of persons with disabilities;
- To appropriately provide prostheses, various assistive devices for support, lifting and listening for persons with disabilities;
- To create favorable conditions for persons with disabilities to have broad access to medical information and data for their treatment;
- To grant appropriate reduction or exemption of fees for care, rehabilitation, treatment and other fees;
- To attentively prevent disability before birth, to assist and provide early treatment for children with disabilities from their birth.

5.8 Social welfare

- To create favorable conditions for persons with disabilities to benefit social welfare especially with access to the State-owned social security system for them to obtain services in an equal manner with persons without disabilities in the society;
- To promote monthly allowances based on actual capacity and conditions for poor persons with disabilities who could not help themselves;
- Organizations of the State, private, family, civil society organizations must provide assistance and care towards persons with disabilities in terms of material and mental support on a need basis;
- To establish a welfare fund for persons with disabilities and its governing rules to ensure its sustainability.

5.9 Education and sports

- To promote, develop an inclusive education system and to provide some education for persons with disabilities;
- The State and private sector give importance and opportunity to persons with disabilities for them to have access to the same education as persons without disabilities;
- To publicize and raise social awareness and understanding on education for persons with disabilities and to encourage social participation in the implementation process;
- To improve and create facilities at educational institutions to ease access for persons with disabilities;
- The State and private sector have policies of reduction or exemption of tuition fees for persons with disabilities;
- To promote and develop sports-physical activities of persons with disabilities in the country and overseas.

5.10 Vocational training and labor skill development

- To promote access for persons with disabilities to vocational training at vocational training places owned by the State, private and social organizations;
- To create facilities at vocational training places and to provide appropriate equipment and coherent curriculum to ensure the quality of learning and teaching activities for persons with disabilities;
- To disseminate and provide access to information and data related to vocational training and development of labor skills for persons with disabilities;
- The State and private sector have policies of reduction or exemption for training and development fees for persons with disabilities.

5.11 Profession and employment

- The State, private sector and civil society organizations create opportunities for persons with disabilities to be employed according to their knowledge and capacity in an equal manner;
- To ensure that persons with disabilities receive their salary, wage, promotion, upgrading of knowledge and capacity in an equal manner;
- To support persons with disabilities to have their own or collective businesses, and access to various sources of funding as provided by the

State with lower¹ interest rate as well as to benefit tax-tariff reduction as appropriate;

- To create facilities at workplaces for persons with disabilities.

5.12 Social-cultural activities

- To promote persons with disabilities to participate in social activities and traditional festivities in an equal manner;
- The State, private sector, organizations, families and society must provide opportunities and facilities to persons with disabilities for them to participate in artistic-literature, cultural exhibitions and shows, and celebration of important national and international days for their enjoyment.

The draft policy recommends following responsibilities:

1. Ministries, ministerial equivalent state agencies have the following responsibilities:
 - National Assembly is responsible for tasks (5.1); (5.2); (5.3); (5.4); (5.6);
 - Ministry of Labor and Social Welfare is responsible for tasks (5.1); (5.2); (5.3);(5.4); (5.5); (5.7); (5.8); (5.9); (5.10); (5.11); (5.12);
 - Ministry of Education and Sports is responsible for tasks (5.1); (5.2); (5.3); (5.9); (5.10);
 - Ministry of Public Health is responsible for tasks (5.1); (5.2); (5.3); (5.5); (5.7); (5.9);
 - Ministry of Natural Resources and Environment is responsible for tasks (5.1); (5.2); (5.3); (5.5);
 - Ministry of Planning and Investment is responsible for tasks (5.1); (5.2); (5.3); (5.5); (5.7); (5.8); (5.9); (5.10); (5.11);
 - Ministry of Finance is responsible for tasks (5.1); (5.2); (5.3); (5.9); (5.11);
 - Ministry of Science and Technology is responsible for tasks (5.1); (5.2); (5.3);
 - Ministry of Public Works and Transport is responsible for tasks (5.1); (5.2); (5.3);
 - Ministry of Information, Culture and Tourism is responsible for tasks (5.1); (5.2); (5.3); (5.5); (5.12);
 - Ministry of Foreign Affairs is responsible for tasks (5.1); (5.2); (5.3);
 - Ministry of Justice, People's Offices of Prosecutor, Courts of each level are responsible for tasks (5.1); (5.2); (5.5); (5.6);
 - Ministry of Internal Affairs is responsible for tasks (5.1); (5.2); (5.3); (5.5); (5.8); (5.12);
 - Ministry of Public Security is responsible for tasks (5.1); (5.2); (5.3); (5.5); (5.6);
 - Ministry of National Defense is responsible for tasks (5.1); (5.2); (5.3); (5.5);
 - Ministry of Post, Telecommunication and Communication is responsible for tasks (5.1); (5.2); (5.3);

	<ul style="list-style-type: none"> - Ministry of Industry and Commerce is responsible for tasks (5.1); (5.2); (5.3); (5.11); - Ministry of Agriculture and Forestry is responsible for tasks (5.1); (5.2); (5.3); (5.8); (5.11); - Central Front for National Construction is responsible for tasks (5.1); (5.2); (5.3); (5.5); (5.6); (5.8); (5.12); - Central Lao Trade Union is responsible for tasks (5.1); (5.2); (5.3); (5.10); (5.11); - Central Lao Women Union is responsible for tasks (5.1); (5.2); (5.3); - Central Lao People's Revolutionary Youth Union is responsible for tasks (5.1); (5.2); (5.3); - Lao National Veteran Union is responsible for tasks (5.1); (5.2); (5.3); - Lao Red Cross is responsible for tasks (5.1); (5.2); (5.3);(5.5); (5.7); (5.8); <p>2. Ministries, ministerial equivalent state agencies, administration authorities of central and local levels, civil society organizations, associations of persons with disabilities and other relevant persons shall recognize and effectively implement this Policy.</p>
IV	<p>Stakeholders (providing detailed information of the following)</p> <p>Main stakeholders include Lao government, donor government, INGO, civil society including associations, community, private sector and businesses.</p>
	<p>A. Government Bodies (responsible for data collection and providing support services/ Interventions throughout the country)</p> <p>National Committee for Persons with Disabilities and the Elderly, Ministry of Labor and Social Welfare</p>
	<p>B. Non-Government Organizations (of and for persons with Autism)</p> <ul style="list-style-type: none"> ▪ Association for Autism (AfA) ▪ Intellectual Disability Association (IDA)
V	<p>Statistic data on Autism (including the situation and prevalence of Autism with the identified source of data)</p> <ul style="list-style-type: none"> ▪ Results of Population and Housing Census 2015, Page 237. Table P7.1A Prevalence of Disability among Population 5 Years old and Over by type of difficulty by sex and age group (Seeing, hearing, walking, remembering, self-caring, communicating) ▪ Stian H Thoresen et al.; A snapshot of intellectual disabilities in Lao PDR: Challenges for the development of services, Journal of Intellectual Disabilities, 2017, Vol. 21(3) 203–219 ▪ Members of Association for Autism ▪ Number of people that Association for Autism has been providing services to.
	<p>A. Social Welfare</p>

	<p>Currently the state only look after people with disabilities from the poor family registered with Social Welfare Department. For other people disabilities are not yet properly covered. The ministry of labor and social welfare wants to set up a central fund to support people with disabilities especially those from the poorest cities and families and have included this topic in the Disability Law. The Ministry of Labour and social welfare want to issue Disability Certificate, follow by the monthly allowance for those from the poorest families and cities first.</p> <p>With regards to the Disability Certificate, the government is still considering which Ministries will issue and responsible as we do not want too many confusing certificate with others existing ones.</p> <p>Some people with disabilities don't even have a chance to be recorded in the family book because the Head of the Village don't bother add them in. they may not live long enough to be in the family book.</p>
	<p>B. Health</p> <p>Besides initial screening at the Child Development Clinic at Children Hospital Vientiane the Center of Medical Rehabilitation under MoH offers limited services to children with autism. The Lao Friends Hospital for Children in Luang Prabang is able to offer diagnosis if a respective expert is available. The provision of service delivery is being prepared.</p>
	<p>C. Education</p> <p>Inclusive Education</p> <ul style="list-style-type: none"> ▪ According to the statistic of education sector in fiscal year 2014-2015 there are 12.274 children with disability, women 5.349 ▪ Persons with disabilities at school age have learned at primary and secondary school is about 6.379, women 2.692. In these number there are ID and Autistic students about 98 ▪ There are 142 blind and deaf students, women 59 at special schools ▪ At the university there are 10 peoples, women 3 ▪ Teachers were trained on inclusive learning and teaching ▪ Curriculums and materials for learning and teaching were created and improved such as Lao sign language and Braille.
	<p>D. Human Resources</p> <ul style="list-style-type: none"> ▪ Lack of psychiatrists and psychologists for diagnosis ▪ Lack of teachers in special education ▪ Lack of experts such as speech, occupational and physio-therapists ▪ Lack of social workers and carers
	<p>E. Other Resources</p>
VIA	<p>Programs and Services for persons with Autism (provided by governmental and non-governmental organizations)</p> <ul style="list-style-type: none"> ▪ Developmental Screening at the Child Hospital ▪ Rehabilitation Centre 2 years old ▪ Association for Autism 7 years old ▪ Vientiane Autism Centre 10 years old ▪ Pakse Autism Centre 2 years old ▪ Saphanthong Neau Primary School, Vientiane (inclusive school)

	<ul style="list-style-type: none"> ▪ Wat Mixay Primary School, Vientiane (inclusive school) ▪ Pia Wat Secondary School, Vientiane (inclusive school) ▪ Chao Anouvong Secondary School, Vientiane (inclusive school)
	<p>A. Early-Intervention</p> <ul style="list-style-type: none"> ▪ Vientiane Autism Centre ▪ Pakse Autism Centre
	<p>B. Health</p>
	<p>C. Education</p> <ul style="list-style-type: none"> ▪ Vientiane Autism Centre ▪ Pakse Autism Centre ▪ Intellectual Disability Association Vientiane
	<p>C. Employment</p> <p>The disability law and draft National Policy on Persons with Disabilities promote the full participation of persons with disabilities in employment. We have not had record on people with Autism in Lao PDR who have been employed at the moment.</p> <p>Currently, Asia Development with Disabled Persons (ADDP) is working collaboratively with Association for Intellectual Disability on the project call improving quality of life and vocational training for persons with intellectual disability between 2017-2019.</p> <p>Association for Autism (AfA) and Vientiane Autism Centre (VAC) set up a vocational training unit under VAC to train students to plant sun flowers sprout, make the key rings, painting, making post card and sport.</p>
	<p>E. Social Services (such as benefit system, incentives etc.)</p>
vo	<p>Challenges (including risks or obstacles and how they will be mitigated)</p> <ul style="list-style-type: none"> ▪ The existing legislations have not been improved yet and lack of specific law, including of National strategic plan on PWD development. ▪ The existing mechanism to coordinate and implement CRPD, decree on PWD has not expand to the some provinces and districts. ▪ The existing inclusive education system has been yet expanded to all schools at the rural area. ▪ The raising awareness on PWD right to the societies, authorities concerned as well as social organizations and communities is not wild enough. ▪ Financial supports that provided to NCDE and Ministries concerned is insufficiencies to administrate and manage the work. ▪ Technical staffs working on disability inclusive development directly are insufficiency in quality and quantity, especially knowledge and experiences of teachers, social worker, nurse, care giver, doctors and so on
VIII	<p>National Strategy (concerning people of disabilities including Autism)</p>
IX	<p>Conclusions and Recommendations</p>

	<p>The disability development work in Lao PDR seems to be the initiative of families, persons with physical disabilities, iNGO and donor government. Government has shown the great interest and support by developing the Disability Law and Policies which is a great sign. To further improve the situation, all stakeholders should work collaboratively especially the government being the lead in making policies to facilitate the development of disability services. Having the policies are great and placing disability development work as one of priority development will be even better. In this way, government can engage donor governments to channel the fund to support this development.</p> <p>Recommendations</p> <ul style="list-style-type: none"> ▪ Create a law on PWD, continue to create a National strategic plan and Action plan on disability development. ▪ Continue to improve and establish the mechanism at the provincial and districts level. ▪ Continue to raise awareness on PWD right to the societies trough out the media. ▪ Provide financial supports to NCDE and Ministries concerned. ▪ Recruit and upgrade the knowledge and experiences of technical staffs including of teachers and nurse who are working directly to PWD by training. ▪ Continue to provide an assistive device ▪ Promote vocational training and employment for PWD ▪ Continue to implement the strategy plan of inclusive education and rehabilitation strategy plan. ▪ Strengthen to coordinate and cooperate with sector concerned and , other countries , ASEAN countries and INGO, NGOs
X	Directory Support
Annex	
References	<p><u>National Reference</u></p> <ul style="list-style-type: none"> ▪ Lao Constitution No.63 date 8 December 2015 ▪ Law on Resistance and Prevent Violence against Women and Child No.56 date 23 December 2014 ▪ Law on Education No. 62 date 16 July 2015 (promote inclusive education system) ▪ National policy and strategy plan on inclusive education from 2010-2015 ▪ Law on Labour (Amended) No.43 date 24 December 2013 (promotion of vocational training and employment) ▪ Law on Hygiene, Disease Prevention and Health Promotion (Amended) No.8 date 21 December 2011 (promotion nutrition) ▪ Law on Health treatment (Amended) No.58 date 24 December 2014 (promote treatment and rehabilitation) ▪ Law on Construction No.5 date 26 November 2009 (promote accessibility) ▪ Law on Land Transportation(Amended) No.24 date 12 December 2012 (promote accessibility)

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- The Convention on the Elimination of All Form of Discrimination against Women and its Optional Protocol (CEDAW)
- Incheon Strategy to Make the Right Real for Person with Disability in Asia and the Pacific
- ASEAN Enabling Master plan 2025: Mainstreaming the Rights of Persons with Disabilities

Website(link):

<https://www.laoofficialgazette.gov.la/>

<http://www.na.gov.la/>

Remark:

1. The template has been agreed upon the “Workshop on the development of Methodology for Mapping of Country Profile on Autism “ under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23-25 July 2018 at APCD Training Center, Bangkok.
2. The Autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.

Country Profiles on Autism



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CHAPTER I:

INTRODUCTION

a) Country Background

Malaysia is a Federation comprising thirteen states and three federal territories. Being a continental state with numerous offshore islands, Malaysia comprises Peninsular Malaysia (West Malaysia) and East Malaysia. Peninsular Malaysia borders Thailand to the north and Singapore to the south. To the west of Peninsular Malaysia is located the island of Sumatra, which is separated from Peninsular Malaysia by the Straits of Malacca. East Malaysia is located on the island of Borneo which shares its borders with Indonesia and Brunei.

As a consequence of its geographical location and historical background, Malaysia is today ethnically and culturally diverse with the presence of three main races – Malay, Chinese and Indian. In addition, Malaysia's population consists of a myriad of about 214 other ethnic and sub-ethnic groups. Malaysia is also a multi-religious country and home to four major religions of the world, namely, Islam, Buddhism, Hinduism and Christianity. Other religions include Taoism, Sikhism and the Baha'i Faith. In view of such diversity, the preservation of national unity is of prime importance to Malaysia.

The Federal Constitution of Malaysia, the supreme law of Malaysia, provides for the legal framework and system of government as follows:

- (a) The establishment of Malaysia as a Federation;
- (b) The division of powers between the Federal and the State;

- (c) A constitutional monarchy; and
- (d) A Westminster type of parliamentary government which provides for the separation of powers as follows:
 - i. Legislative authority, the power to make law vested in Parliament (Part IV, Chapter 4 of the Federal Constitution);
 - ii. Executive authority, the power to govern which is vested in the *Yang di-Pertuan Agong* (the Supreme Head of the Federation) and exercisable, subject to the Federal Constitution; and
 - iii. Judicial power which is vested in the judiciary (Article 121 of the Federal Constitution).

b) Demographic Data

Total Population of Malaysia

32.4 million (estimation)				
	Citizen		Non-Citizen	
	Year 2017	Year 2018	Year 2017	Year 2018
Male	14.53m	14.69m	2.01m	2.03m
Female	14.20m	14.37m	1.28m	1.29m

Source: Department of Statistics

Population by ethnicity

2017						
Ethnicity	Total	Citizens				Non-citizens
		Bumiputera	Chinese	Indian	Others	
Male	16,542.70	9,969.40	3,421.40	995.1	147.6	2,009.30
Female	15,479.80	9,811.50	3,243.90	1,006.00	140.2	1,278.30
Total	32,022.60	19,780.90	6,665.30	2,001.10	287.7	3,287.50

Source: Department of Statistics

2018						
Ethnicity	Total	Citizens				Non-citizens
		Bumiputera	Chinese	Indian	Others	
Male	16,542.70	9,969.40	3,421.40	995.1	147.6	2,009.30
Female	15,479.80	9,811.50	3,243.90	1,006.00	140.2	1,278.30
Total	32,022.60	19,780.90	6,665.30	2,001.10	287.7	3,287.50

Source: Department of Statistics

Population by Age Group

Age Group	Year 2017	Year 2018
0-14 years	7.73m	7.71m
15-64 years	22.29m	22.58m
65+years	2.00m	2.10m

Source: Department of Statistics

Life Expectancy at Birth

Sex	2016	2017	2018
Male	72.1	72.3	72.7 years
Female	77.0	77.2	77.6 years

Source: Department of Statistics

Life Expectancy at Age 65 Years in 2018

Male	15.0 years
Female	17.2 years
A women at age 65 years old in 2018 is expected to live for another 17.2 years more	

Source: Department of Statistics

Dependency Ratio

	Young Age	Old Age	Total
Year 2017	34.7 persons	9.0 persons	43.6 persons
Year 2018	34.1 persons	9.3 persons	43.4 persons
In year 2018, 43.4 persons in young and old age population were supported by 100 persons in working age population (15-64 years)			

Source: Department of Statistics

Employment

	Year 2016	Year 2017	Year 2018
Total Labour Force ('000)	14,667.8	14,952.6	15,449.9
Employed ('000)	14,163.7	14,450.0	14,933.4
Unemployed ('000)	504.1	502.6	516.5
Unemployment Rate (%)	3.4	3.4	3.3
Labour Force Participation Rate (%)	67.7	68.0	68.6

Source: Department of Statistics

Crude Birth Rate

	Year 2015	Year 2016	Year 2017
Crude Birth Rate (per 1,000 population)	16.7	16.1	15.9
Crude Death Rate (per 1,000 population)	5.0	5.1	5.3
Crude Rate of Natural Increase (per 1,000 population)	11.7	10.9	10.6
Infant Mortality Rate (per 1,000 live birth)	6.9	6.7	6.9

Source: Department of Statistics

Well-Being Index

Indicator	Year 2014	Year 2015	Year 2016
Composite Index	122.1	121.8	122.8
Economic Well-being	127.9	129.7	130.3
Transport	131.9	134.2	135.3
Communication	126.9	130.3	130.3
Education	129.1	129.6	127.9
Income & Distribution	131.2	133.0	134.2
Working Life	120.4	121.3	123.8

Indicator	Year 2014	Year 2015	Year 2016
<i>Social Well-being</i>	118.9	117.4	118.6
<i>Housing</i>	135.3	136.7	137.4
<i>Leisure</i>	130.3	131.4	132.4
<i>Governance</i>	129.2	122.7	124.2
<i>Public Safety</i>	128.9	132.1	131.3
<i>Social Participation</i>	114.4	118.5	125.3
<i>Culture</i>	117.8	110.6	109.3
<i>Health</i>	109.9	108.0	107.8
<i>Family</i>	97.6	97.5	97.4
<i>Environment</i>	106.7	99.3	102.1

Source: Ministry of Economic Affairs

CHAPTER II:

EXISTING GOVERNMENT STRUCTURE AND MECHANISMS FOR PERSONS WITH DISABILITIES

1. Persons with Disabilities Act 2008

Persons with Disabilities Act 2008 [Act 685] was enacted in 2008 with the objectives of, among others, to uphold the rights of persons with disabilities (PWDs) and their access to public facilities, services and buildings, public transportation, education, employment, information and communication technology (ICT), health as well as habilitation and rehabilitation on an equal basis. In the process of enacting the legislation, provisions outlined under the Convention on the Rights of the Persons with Disabilities (CRPD) were harmonized in the Act. Thus, this rights-based Act contains specific provisions that aims to ensure the rights, interests and welfare of PWDs are protected.

2. Policy and Plan of Action for Persons with Disabilities

Policy for PWDs and its Plan of Action (POA) were approved on 21st November 2007. These frameworks are used as a foundation to ensure PWDs enjoy their full and effective participation in the society on an equal basis with others. Besides, it recognises that PWDs are free from any physical, social, economic, cultural as well as attitudinal barriers.

Malaysia has on November 2012 expressed its support and commitments alongside the other United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP) member states for the implementation of Incheon Strategy to Make the Right Real for PWDs in Asia and the Pacific 2013-2022. In ensuring that the POA stays relevant and adopting the Incheon Strategy, the

Ministry of Women, Family and Community Development (MWFCD) has undertaken steps to review and improve the POA and its implementation policy by conducting a series of consultations with its stakeholders and civil society. As a result, the revised POA has been approved by the Cabinet for a new implementation period covering 2016 to 2020.

The revised POA comprises of 10 strategic thrusts namely improving accessibility; empowering economic state; improving access to education; improving access to health; strengthening social services; encourage participation in the planning and decision making processes; improving access towards disaster management; research and development; advocacy and implementing CRPD.

The POA provides guidelines to all relevant stakeholders among government agencies, non-governmental organisations (NGOs), private organisations, academia, health service providers, social workers as well as volunteers on planning programmes and prioritising financial allocation for PWDs.

3. National Council for Persons with Disabilities

The National Council for Persons With Disabilities was established in August 2008 under section 3(1) of the PWDs Act 2008¹. Besides serving as the focal point for the issues pertaining to PWDs, the functions of the Council are to monitor the implementation of the Policy and its Plan of Action; to make recommendations to the

Government on all aspects of PWDs including matters relating to support, care, protection, rehabilitation, development and well-being of PWDs; make recommendations to the Government on changes to the existing laws and to propose new laws in order to secure full and effective participation of PWDs in the society and to facilitate accessibility.

The Council, which is chaired by the Minister of Women, Family and Community Development, has a multi-sectoral representations of Ministries, agencies, experts on PWDs, NGOs and PWDs themselves. For effective implementation of policy decisions by the Council, six subcommittees are set up and led by various agencies, as follows:

- i. Education – led by the Ministry of Education focusing on providing and access to education for PWDs;
- ii. Employment – led by the Ministry of Human Resources which oversees the creation of employment opportunities and career pathways for PWDs;
- iii. Registration of PWDs – led by the Department of Social Welfare that looks into issues related to registration of PWDs including formulating guidelines on categorisation, method and terms for registration of PWDs;
- iv. Universal Design and Built Environment – led by the Ministry of Women, Family and Community Development that focuses on accessibility matters for PWDs specifically the built environments and public spaces;

- v. Transportation – led by the Ministry of Transport which looks into accessibility issues for PWDs in public transportation systems; and
- vi. Quality Life Care – led by the Ministry of Health concentrating on issues pertaining healthcare, treatment, rehabilitation, habilitation, early diagnosis and intervention to PWDs.

4. Convention on the Rights of Persons with Disabilities

Malaysia ratified the United Nations Convention on the Rights of Persons with Disabilities (CRPD) on the 19th of July 2010, with reservation on two (2) articles namely Article 15 and 18. With this ratification, Malaysia reaffirms its commitment towards building a stronger policy framework to mainstream the PWDs in all aspects of life to ensure effective participation of PWDs in the society. Malaysia did not sign the Optional Protocol to CRPD, which basically provides for an individual or a group of individual to submit its complaints and an inquiry procedure.

5. Department for the Development of PWDs

The Department for the Development of PWDs or in short JPOKU, has been in operation since 1 May 2009. JPOKU plays a significant role in enhancing well-being of PWDs in the country. JPOKU provides care facilities and services; protection, rehabilitation, trainings and employment opportunities; as well as gives emphasis on active

participation of PWDs in the local communities through integration and developmental programs.

As stipulated under Section 9 of the Act, Director General of Social Welfare Department is the Secretary to the Council, while JPOKU is the designated secretariat for the Council as per Section 10. Details on the services offered by JPOKU are as follows:

No.	Services
1.	Management of Institutions and Accessibility
2.	In charge of care, rehabilitation, trainings and protection of residents in all Government's institutions for PWDs including appointment of Visitors Board members.
3.	Plan and execute accessibility advocacy programs as well as conducting audit access in collaboration with other relevant agencies.
4.	Social development and community based rehabilitation
5.	Responsible for all matters pertaining to registration of PWDs
6.	Manage and monitor implementation of community based rehabilitation programs
7.	Plan and monitor the PWDs Self-Advocacy Group, parents support groups and other support groups
8.	Career development programs and Job Coach for PWDs in public and private sectors
9.	Provide Disability Equality Trainings and implement Independent Living programs

CHAPTER III:

SITUATION OF AUTISM IN MALAYSIA

a) Definition of Persons with Disabilities

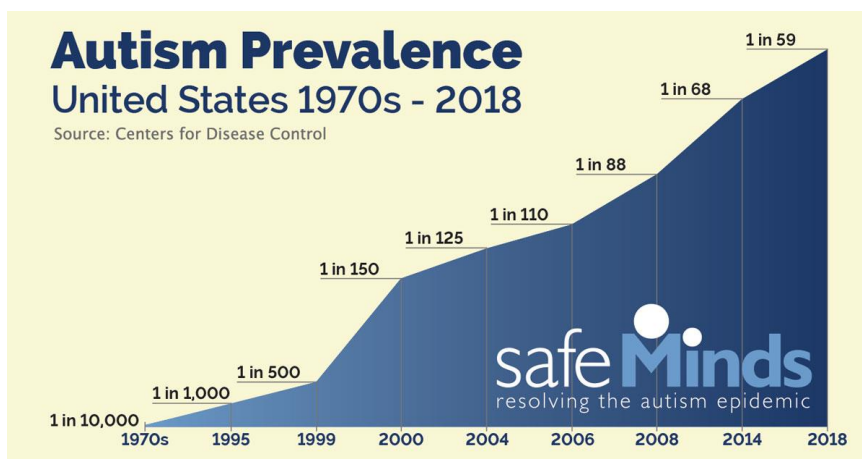
In line with CRPD, Malaysia did not specifically define what or who constitutes PWDs. The Persons with Disabilities Act 2008 refers to “persons with disabilities include those who have long term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society”. MWFCD categorises PWDs into seven (7) groupings namely: 1) Physical; 2) Hearing; 3) Speech; 4) Visual; 5) Learning; 6) Mental; and 7) Multiple.

b) Definition and scope of Autism

Ministry of Health’s definition of Autism Spectrum Disorder (ASD), according to the Clinical Practice Guidelines: Management of Autism Spectrum Disorder in Children and Adolescent (2014), is a neurodevelopmental disorder characterised by impairments in communication, behaviour and social functioning beginning in childhood. There is no local epidemiological study on ASD prevalence in Malaysia. However, in a feasibility study on the use of Modified Checklist for Autism in Toddlers (M-CHAT) among children of 18 to 36 months of age in child health clinics by the Ministry of Health, the prevalence of ASD in Malaysia is approximately 1.6 in 1,000.

In the USA, the overall prevalence of ASD is 14.7 per 1,000 (one in 68) children aged 8 years for year 2014 to 2016 and the prevalence

shows an increasing trend over the years. For year 2018, the prevalence rate is 16.8 per 1,000 or one in 59 children has been identified with ASD in 2014². The summary of prevalence rate for ASD in the US is as the illustration below:



Source: Centers for Disease Control & Prevention, US

According to the American Psychiatric Association (APA), the first Diagnostic Statistical Manual (DSM) categorized autism as a childhood subtype of schizophrenia³ (American Psychiatric Association, 1952) though autism was eventually separated from schizophrenia and have its own diagnosis. Over time autism evolved into a diagnostic spectrum by the time the DSM-5 was published in 2013. Autism is becoming more prevalent, and the diagnostic criteria and definition are likely to continue to change in the future. According to DSM-5 2013, diagnostic criteria for Autism Spectrum Disorder require the individual to demonstrate characteristics in two categories

which are presence of restricted or repetitive patterns of behaviour and impairment in social communication and interaction. This newest category is the results of combination of three categories previously in DSM-IV. The presence of restricted or repetitive patterns of behaviour may include the preoccupation with objects or topics of interest, inflexibility, repetitive movements or speech and hyper- or hypo-reactivity to sensory stimulation. Meanwhile, impairment in social communication and interaction may exhibit deficit in social-emotional reciprocity, nonverbal communication and difficulty in developing peer relationships. All the symptoms must be present in the early developmental period. However, in some cases it may not be fully manifested until the child is older and is placed in social situations that exceed his or her social abilities. In term of severity, a clinician will refer to the characteristic as documented in DSM-5 and rate it based on the three levels as below:

- a) Level 1: requiring support;
- b) Level 2: requiring substantial support; and
- c) Level 3: requiring very substantial support

c) Information System Management for PWDs

MWFCD through JPOKU has established a database to capture the details of PWDs who are registered with the Department. The purposes of the Information Management System for PWDs or SMOKU that was developed in 2011 are to facilitate the registration process and enables the tabulation of registered PWDs according to state, category, age group, sex, district and parliamentary divisions.

SMOKU is also being utilised as a tool to manage information of PWDs particularly for targeted programs at the district welfare offices such as job matching.

JPOKU started to extract data specifically for registered PWDs diagnosed with ASD from 2011. As of December 2018, the number of registered autistic individuals⁴ in Malaysia stands at 21,287.

Data from the Ministry of Health (MOH) obtained for 2015-2017⁵ however showed that the number of new cases of children aged 0 to 18 year olds who were diagnosed and received treatments for ASD in public health institutions has been on the rise. In 2015, there are 305 cases as compared to 473 cases in 2016, while in 2017, 515 cases were reported.

In comparison, the Ministry of Education (MOE) summarised that 67,537 out of 83,598 students⁶ in the three (3) types of special education schools were in the category of learning disabilities. For students with autism, the highest number of them totalling 8,412 are studying in the Special Education Integration Programme while 609 students are under the Inclusive Education Programme. Only 84 of the students are in the Special Needs School. Details of the statistics as well as the programmes offered are explained in respective sections.

CHAPTER IV:

METHODOLOGY

The following activities were undertaken to meet the objectives of this exercise:

- (i) Identify existing data on PWDs and autism from various sources such as Ministry of Health, Ministry of Education, Ministry of Human Resources, Department of Welfare, GENIUS and National Autism Society of Malaysia (NASOM);
- (ii) Review existing policies and laws;
- (iii) Identify gaps; and
- (iv) Provide recommendations.

A workshop to collect and collate data from stakeholders and NGOs was organised by MWFCD on 24-25 January 2019. Continuous and on-going process of gathering data from various government agencies at federal and state level, private sector and NGOs was conducted after the workshop.

The data presented in this document does not represent the whole actual situation of persons with disabilities and specifically persons with autism in the country as the data collection exercise was not comprehensive. Thus, the data contained in this document is for general information and referral purposes only, with no warranties of any kind, express or implied, about the accuracy, validity and reliability with respect to the document or the data in it for any purpose other than stated above.

CHAPTER V:

LAW AND POLICY

a) International Policy and Framework

No.	POLICY/Framework	INTRODUCTION / RATIFICATION / SIGNING
1.	UN International Decade of Disabled Persons 1983-1992	1982
2.	Jomtein World Conference on Education for All, UNESCO (1990) Article 1: Meeting Basic Learning Needs Every person – child, youth and adult – shall be able to benefit from educational opportunities designed to meet their basic learning needs	1990
3.	Salamanca Statement 1994: School should accommodate all children regardless of their physical, intellectual, social, emotional, linguistic or other conditions	1994
4.	UN Convention on the Rights of Children	1995
5.	UN Convention on the Elimination of All Forms of Discrimination Against Women CEDAW	1996
6.	Dakar Framework for Action (2000) Article 7(i): Expanding and improving comprehensive early <i>childhood care and education for the most vulnerable and disadvantaged children</i>	2000
7.	Biwako Millennium Framework for Action 2002: Towards an Inclusive, Barrier Free & Right-based Society for Persons with Disabilities	2002
8.	Madrid International Plan on Actions on Ageing	2002
9.	UN Convention on the Rights of Persons with Disabilities and Optional Protocol	2006
10.	Bali Declaration on the Enhancement of The Role and Participation of The Persons with Disabilities in ASEAN Community and Mobilisation Framework of the ASEAN Decade of Persons with Disabilities (2011-2020)	2011
11.	Incheon Strategy to “Make the Right Real” for Persons with Disabilities in Asia and the Pacific	2012
12.	United Nations General Assembly Resolution 67/82 [2012]: Addressing the socioeconomic needs of individuals, families and societies affected by autism spectrum disorders, developmental disorders and associated disabilities.	2012
13.	United Nations General Assembly Resolution 62/139 [2016]: World Autism Awareness Day	2016
14.	ASEAN Enabling Masterplan 2025: Empowering the Rights of Persons with Disabilities	2018
15.	UN Sustainable Development Goals 2030 - Goal 1: Reduce poverty, enhance work and employment prospects – for PWDs, including those with significant disabilities	

b) National Legal and Policy Framework

No.	Act/Plan of Actions	INTRODUCTION / RATIFICATION / SIGNING
1.	Rules of the Rehabilitation Centre for Mentally Retarded 1977	1977
2.	Rules for Sheltered Workshops 1979	1977
3.	Uniform Building bylaw	1984
4.	1% Employment of PWDs in the Public Sector Policy	1988
5.	Education Act 1996	1996
6.	Child Act 2001	2001
7.	Persons with Disabilities Act 2008	2008
8.	Persons With Disabilities (Registration and Issuance Kad OKU) Regulations 2010	2010
9.	National Family Policy Malaysia	2010
10.	Education (Special Education) Regulations 2013	2013
11.	Malaysia Education Development Plan 2013-2025	2013
12.	Malaysian Standard (MS1184:2014)	2014
13.	Eleventh Malaysia Plan (2016-2020) - Chapter 3, Strategy B4 & B6	2015
14.	Policy and Persons with Disabilities Plan of Action 2016-2022	2015
15.	Zero Reject Policy	2018

c) Stakeholders

Sector	Agencies
i. Government Bodies (based on PWDs Act 2008)	a. Ministry of Women, Family & Community Development
	b. Department of Social Welfare
	c. Ministry of Finance
	d. Attorney General
	e. Ministry of Education
	f. Ministry of Transport
	g. Ministry of Human Resources
	h. Ministry of Health
ii. Government Bodies (others)	a. Ministry of Housing and Local Government
	b. Ministry of Economic Affairs
	c. Ministry of Youth and Sports
	d. Ministry of Rural Development
	e. Ministry of Works
	f. Ministry of Federal Territories
	g. Ministry of Communication & Multimedia
	h. Ministry of Foreign Affairs
	i. Ministry of Primary Industries

Sector	Agencies
	<ul style="list-style-type: none"> j. Ministry of Tourism, Arts & Culture k. Ministry of Energy, Science, Technology, Environment and Climate Change
iii. Government Linked Companies (non-exhaustive list)	<ul style="list-style-type: none"> a. Petronas b. Danajamin
iv. Private Sector (non-exhaustive list)	<ul style="list-style-type: none"> a. Gamuda Foundation Enabling Academy b. McDonalds c. Ronald McDonalds House Charities d. SEED Autism Services e. Early Autism Project f. Oasis Place g. NurKidz Johor h. Starbucks i. MYDIN j. AEON
v. Non-Government Organisations (non-exhaustive list)	<ul style="list-style-type: none"> a. National Autism Society of Malaysia b. Persatuan Autism Muslim Malaysia c. Akademi Remaja Islam Autism Malaysia d. Yayasan Faqeh e. Persatuan CHILD Sabah f. Yayasan Sultan Idris g. Asia Community Service h. Wings Malacca i. Malaysian Care j. Persatuan Kanak-Kanak Istimewa Kajang k. Persatuan Kenner l. Rotary Club Bangsar m. United Voice n. Daybreak o. Beautiful Gates Foundation p. Cheshire Home q. National Association of Learning Disabilities Malaysia (LD Hope) r. IMPIAN s. KAK Persatuan Autism Kelantan t. PIANIS u. IDEAS Autism Centre v. A-HEART (Universiti Malaysia Perlis) w. Persatuan Mengasih x. Persatuan Autism Sibu, Sarawak y. Persatuan Autism Miri, Sarawak

CHAPTER VI:

STATISTICAL DATA ON PERSONS WITH DISABILITIES AND / OR PERSONS WITH AUTISM

In this section, the statistics presented will encompass **data on PWDs as a whole, as Malaysia does not have a comprehensive and coordinated data on ASD.**

a) Department of Social Welfare (through JPOKU)

(i) Number of Registered PWDs in Malaysia

(a) Registration according to the 7 categories

Category	Number of PWDs
Hearing	38,434
Visual	47,876
Speech	2,982
Physical	204,711
Learning	184,307
Mental	46,107
Multiple	25,137
Total	549,554

Source: SMOKU @ June 2019

(b) Number of Registered PWDs by age

Age	Number of PWDs
Not mentioned	9
Age > 6	13,116
Age 7-12	60,866
Age 13 - 18	57,370
Age 19 - 21	25,531
Age 22 - 35	92,571
Age 36 - 45	61,599
Age 46 - 59	94,266
Age > 60	80,452
Total	485,780

Source: SMOKU @ 31 December 2018

(c) Number of Registered PWDs with ASD according to States

State	Number of PWDs
Selangor	4,649
Johor	2,299
Sabah	2,053
Kuala Lumpur	1,967
Perak	1,840
Kedah	1,509
Pulau Pinang	1,460
Sarawak	1,433
Kelantan	1,043
Pahang	1,010
Negeri Sembilan	743
Melaka	610
Terengganu	404
Perlis	142
Labuan	125
Total	21,287

Source: SMOKU @ 31 December 2018

(d) Comparison on the number of Registered PWDs with ASD in year 2016 until 2018

Age Range	2016	2017	2018
0-6	210	715	1,392
7-12	1,872	1,901	1,400
13 - 18	205	199	160
Total	2,287	2,815	2,952

Source: SMOKU @ 31 December 2018

(e) Number of Registered PWDs with ASD by age

No	Age category	Number of persons with autism
1	Less than 6 years old	3,500
2	7 - 12 years old	10,524
3	13 – 18 years old	2,660
4	19 – 21 years old	939
5	22 - 35 years old	2,404
6	36 - 45 years old	538
7	46 - 59 years old	233
8	60 years old and above	37
	Total	20,835

Source: SMOKU @ April 2019

(ii) Institutions for PWDs under JPOKU

(a) Child care centres for PWDs children aged 5 and below

No.	Child care centres based on locations	Category	Number of PWDs (@ March 2019)
1.	ANISD Child Care Centre (Putrajaya)	Down syndrome	22
2.	SEMANGAT MAJU Nursery (Ipoh, Perak)	Learning disabilities	21
3.	ISTIKA JAYA Nursery (Puchong, Selangor)	Hearing disability	20
4.	AUTISME Nursery (Sibu, Sarawak)	ASD	30
5.	MESRA CHESHIRE Nursery (Likas, Sabah)	Physical disability	20
6.	ST. NICHOLAS Nursery (Pulau Pinang)	Visual disability	3

Source: Department of Social Welfare

(b) Care Centres for PWDs in Malaysia (*Taman Sinar Harapan*)

No.	Taman Sinar Harapan	Number of PWDs	Number of PWDs with autism
1	Taman Sinar Harapan Ziyad Zolkefli, Cheras, Kuala Lumpur	70	0
2	Taman Sinar Harapan Kuala Kubu Bharu, Selangor	204	36
3	Taman Sinar Harapan Tuanku Ampuan Najihah, Seremban, Negeri Sembilan	64	5
4	Taman Sinar Harapan Tampoi, Johor Bahru, Johor (for males)	101	1
5	Taman Sinar Harapan Jubli, Johor Bahru, Johor (for females)	123	0
6	Taman Sinar Harapan Bukit Besar, Kuala Terengganu, Terengganu	73	4
7	Taman Sinar Harapan Rizuan Puzi, Jitra, Kedah	64	14

Source: SMOKU @ August 2019

(c) Sheltered Workshops for PWDs (*Bengkel Daya*)

No	<i>Bengkel Daya</i>	Number of PWDs
1	<i>Bengkel Daya</i> Klang, Selangor	58
2	<i>Bengkel Daya</i> Sungai Petani, Kedah	32

Source: SMOKU @ August 2019

(d) Industrial Training & Rehabilitation Centre (PLPP)

No.	PLPP	Number of PWDs
1.	PLPP Bangi, Selangor	157

Source: SMOKU as of August 2019

(iii) Community-Based Rehabilitation Centres (CBR) for PWDs in Malaysia

(a) No. of CBR in Malaysia

NO.	State	Number of CBRs	PWDs		SUPERVISORS	WORKERS
			@ CENTRE	@ HOME		
1	Perlis	9	298	156	9	62
2	Kedah	42	1117	425	42	235
3	P.Pinang	25	818	228	25	205
4	Perak	41	805	291	41	126
5	Selangor	56	1973	391	56	287
6	Kuala Lumpur	14	538	7	14	84
7	N.Sembilan	44	913	245	44	189
8	Melaka	18	397	109	18	86
9	Johor	73	1883	616	73	361
10	Pahang	52	1089	305	52	226
11	Terengganu	47	1090	460	47	199
12	Kelantan	45	977	292	45	163
13	Sarawak	55	1889	366	55	326
14	Sabah	37	1836	346	37	206
15	Labuan	2	66	11	2	10
TOTAL		560	15,689	4,248	560	2765
			19,997			

Source: Department of Social Welfare @ September 2019

(b) No. of CBR in Malaysia since year 2011 to 2018.

Year	No. of CBR	No. of PWDs
2011	428	18,943
2012	486	21,138
2013	486	21,138
2014	488	21,318
2015	508	21,089
2016	537	20,146
2017	544	20,334
2018	554	20,436
2019	560	19,997

Source: Department of Social Welfare @ September 2019

(iv) Welfare aids to PWDs in year 2018

(a) Types of welfare aid for PWDs

No.	Types of welfare aid	Total PWDs recipients	Total value (RM)
1.	Allowance for Disabled Employees (RM400/month)	83,195	316,371,367.00
2.	Aid for Care of Chronically Ill and Bedridden PWDs (RM350/month)	24,976	81,154,888.00
3.	Aid for PWDs who are unable to work (RM250/month)	66,492	155,113,534.00
4.	Aid for Support Devices	638	1,704,225.00
5.	Apprentice Training Aid (RM200/month)	96	153,300.00
6.	Special Allowance for PWDs in CBR (RM150/month)	20,573	37,031,400.00

Source: e-Bantuan System @ August 2019

(v) Grants for Entrepreneurship programs to PWDs

(a) No. of PWDs receiving grants for entrepreneurship programs according to government agencies 2016-2018

Agency	Year	Male	Female	Total
MOA -FAMA	2016	5	6	11
	2017	0	0	0
	2018	0	1	1
MOA -LKIM	2016	0	0	0
	2017	0	1	1
	2018	0	0	0
KKLB	2016	14	7	21
	2017	16	9	25
	2018	27	12	39
MED	2016	0	0	0
	2017	0	0	0
	2018	18	10	28

Source / Notes:

MOA – Ministry of Agriculture

FAMA – Federal Agricultural Marketing Authority

LKIM – Fisheries Development Authority of Malaysia

KKLB – Ministry of Rural Development (new acronym – KPLB)

MED – Ministry of Entrepreneurs Development

b) Ministry of Health

- (i) Cases of children aged 0-18 years' old who were diagnosed and receive treatments for ASD in public health institutions from year 2015 to 2017

Year	Age						Total
	0 - < 1	1 - 2	3 - 4	5 - 6	7 - 12	13 - 18	
2015	0	50	144	59	46	6	305
2016	0	92	185	124	68	4	473
2017	0	105	197	140	62	11	515

Source: MOH

- (ii) Cases of children aged 0-18 years' old who were diagnosed and receive treatments for ASD in public health institutions by state from year 2015 to 2017

State	Year	Age						Total
		0 - < 1	1 - 2	3 - 4	5 - 6	7 - 12	13 - 18	
Perlis	2015	0	0	1	3	3	0	7
	2016	0	0	0	2	0	0	2
	2017	0	0	5	2	1	0	8
Kedah	2015	0	1	4	4	1	0	10
	2016	0	0	7	7	2	2	8
	2017	0	1	8	1	5	0	15
Pulau Pinang	2015	0	2	15	5	9	1	32
	2016	0	4	12	22	18	0	56
	2017	0	1	17	13	9	1	41
Perak	2015	0	4	4	8	4	1	21

State	Year	Age						
		0 - < 1	1 - 2	3 - 4	5 - 6	7 - 12	13 - 18	Total
	2016	0	11	28	17	16	1	73
	2017	0	26	11	22	10	2	71
Kuala Lumpur	2015	0	0	0	0	0	0	0
	2016	0	1	2	0	1	0	4
	2017	0	2	2	1	0	0	5
Putrajaya	2015	0	0	3	1	0	0	4
	2016	0	0	2	0	0	0	2
	2017	0	0	2	2	2	0	6
Selangor	2015	0	6	35	4	6	2	53
	2016	0	19	21	14	1	0	55
	2017	0	22	32	13	2	0	69
Negeri Sembilan	2015	0	4	4	0	0	0	8
	2016	0	1	5	5	2	0	13
	2017	0	0	5	4	1	1	11
Melaka	2015	0	0	3	1	1	0	5
	2016	0	0	8	1	1	0	10
	2017	0	2	1	5	2	0	10
Johor	2015	0	1	14	11	6	1	33
	2016	0	1	13	18	9	0	41
	2017	0	6	25	20	10	4	65
Pahang	2015	0	3	6	1	0	0	10
	2016	0	5	10	2	2	0	19
	2017	0	4	7	2	2	0	15

State	Year	Age						
		0 - < 1	1 - 2	3 - 4	5 - 6	7 - 12	13 - 18	Total
Terengganu	2015	0	0	0	3	0	0	3
	2016	0	2	4	3	3	0	12
	2017	0	0	5	3	0	1	9
Kelantan	2015	0	0	0	0	0	0	0
	2016	0	4	3	0	1	0	8
	2017	0	0	6	0	2	0	8
WP Labuan	2015	0	0	2	1	2	0	5
	2016	0	0	8	8	2	0	18
	2017	0	1	11	16	0	1	29
Sabah	2015	0	3	11	5	0	0	19
	2016	0	0	8	8	2	0	18
	2017	0	1	11	16	0	1	29
Sarawak	2015	0	26	42	12	14	1	95
	2016	0	35	51	15	8	1	110
	2017	0	39	51	22	10	1	123

Source: MOH

c) Ministry of Education

(i) Programs or school options for PWDs

Programs	Pre-School (No. of PWDs)	Primary School (No. of PWDs)	Secondary School (No. of PWDs)	Total
Special Education Integration Programme (PPKI) <i>(Mainstream schools with specific classes dedicated to students with special needs)</i>	967	38,710	29,197	68,874
Inclusive Education Programme (PPI) <i>(Mainstream schools that integrate one to five students with special needs into mainstream classes)</i>	247	8,221	7,740	16,208
Special Needs School (SPK) <i>(Special schools where all students have disabilities)</i>	139	1,254	1,099	2,492
Total				87,574

Source: MOE @ June 2019

(ii) Enrolment of PWDs according to categories

Category	PPI			PPKI			SPK			Total
	Pre	Primary	Secondary	Pre	Primary	Secondary	Pre	Primary	Secondary	
Physical	71	2,283	2,359	41	1,187	859	5	12	9	6,827
Multiple	5	208	152	38	1,174	591	6	73	9	2,256
Hearing	24	559	648	38	668	1,163	55	647	261	4,063
Visual	17	685	930	6	280	350	14	174	134	2,590
Speech	18	103	75	10	289	89	2	11	2	599
Learning	111	4,383	3,576	834	35,112	26,145	57	337	684	71,239
Total	247	8,221	7,740	967	38,710	29,197	139	1,254	1,099	87,574
	16,208			68,874			2,492			

Source: MOE @ June 2019

(iii) Number of schools, teachers and Students Management Assistant according to school options / programs

Category	Level	School	Teachers	Students Management Assistants
PPI	Pre	4,281		
	Primary			
	Secondary	2,045		
	Total	6,326		
PPKI	Pre	1,566	183	177
	Primary		8,217	3,711
	Secondary	841	5,846	2,147
	Total	2,407	14,246	6,035
SPK	Pre	28	31	269
	Primary		784	
	Secondary	6	467	94
	Total	34	1,282	363

Source: MOE @ June 2019

(iv) Students with autism according to programs and states

State	PPKI	PPI	SPK
Johor	1,271	47	26
Kedah	539	44	16
Kelantan	299	15	3
Melaka	410	28	2
Negeri Sembilan	372	21	-
Pahang	463	36	7
Perak	994	37	7
Perlis	61	2	15
Pulau Pinang	580	85	30
Sabah	894	66	6
Sarawak	860	49	21
Selangor	2,493	212	9
Terengganu	195	14	2
WP Kuala Lumpur	875	56	4
WP Labuan	85	5	-
WP Putrajaya	150	8	-
Subtotal	10,541	725	148
TOTAL	11,414		

Source: MOE @ June 2019

d) Public Service Commission (Federal Government posts)

(i) Employment of PWDs in the public sector for 2018

Categories	No. of Application	No. Called for Interview	No. Present for Interview	Successful Candidates
Physical	2,160	555	405	104
Mental	124	17	10	1
Multiple	101	8	7	1
Hearing	378	28	21	5
Visual	702	28	26	2
Speech	96	10	6	1
Learning	269	6	6	0
Total	3,830	652	481	114

Source: Public Service Commission @ December 2018

(ii) Employment of PWDs in the public sector for 2019 (June)

Categories	No. of Application	No. Called for Interview	No. Present for Interview	Successful Candidates
Physical	2,016	195	147	35
Mental	108	8	6	1
Multiple	86	4	3	0
Hearing	359	22	21	4
Visual	615	29	22	3
Speech	84	6	4	1
Learning	256	3	3	0
Total	3,524	267	206	44

Source: Public Service Commission @ June 2019

e) Education Services Commission

POSTS UNDER EDUCATION SERVICES	EDUCATION SERVICE OFFICER (PPP)		HIGHER EDUCATION OFFICER (PPPT)		SUPPORT STAFF (AKP)	
	No of application received	No of appointment offers issued	No of application received	No of appointment offers issued	No of application received	No of appointment offers issued
Disability Category						
Physical	49	3	54	0	274	4
Mental	0	0	0	0	0	0
Multiple	0	0	1	0	24	0
Hearing	8	1	5	0	59	0
Visual	6	0	3	0	93	0
Speech	0	0	3	0	10	0
Learning	3	0	4	0	21	0
Total	66	4	70	0	481	4

Source: Education Service Commission January - September 2019

f) Ministry of Human Resources

(i) Employment of PWDs in private sector [according to Malaysia Standard Classification of Occupation (MASCO) 2008]

Masco Code	Job Categories (MASCO 2008)	Placement	
		2018	August 2019
1	Management	16	0
2	Professional	24	2
3	Technicians and Associate Professionals	8	1
4	Clerical	30	1
5	Sales and Services	284	82
6	Skilled workers of Agriculture, Forestry and Fisheries	14	12
7	Handyman And Related Works	8	52
8	Operators, plants, machines and installers	124	170
9	General Workers	217	125
10	Army	0	0
TOTAL		725	445

Source: MOHR @ August 2019

g) Other Sources

(i) GENIUS Kurnia

(a) Number of students enrolled at GENIUS Kurnia Center

Program Year	Mode A (Pre School)	Mode B (Early Intervention)	Total (Student)
Nov 2015-2016	82	300	382
2017	167	232	399
2018	184	288	472

Source: GENIUS Kurnia

(b) Enrolment according to types of classes

Type of Class	Year 2017 (No.)	Year 2018 (No.)	Year 2019 (No.)
Mainstream Class	18	19	32
Special Education Class	45	81	89
Total	63	100	121

(ii) The National Autism Society of Malaysia (NASOM)

(a) Enrolment of PWDs in NASOM centres

(b) No.	Year	Opening Balance	Closing Balance	No. of Centre
1	2011	416	551	20
2	2012	551	473	20
3	2013	473	492	20
4	2014	492	521	20
5	2015	521	478	20
6	2016	478	509	20
7	2017	509	466	20
8	2018	466	394	15
9	2019	394	478	15

Source: NASOM @ October 2019

CHAPTER VII:

INTERVENTION & SOCIAL SUPPORT; HEALTH, EDUCATION & EMPLOYMENT EFFORTS

a) Intervention & Social Support

(i) Department of Social Welfare

(a) Registration for PWDs

Registration for PWDs is on voluntary basis for Malaysian citizen as Malaysia has yet to impose regulation on this matter. The main purpose for this exercise is for data collection on PWDs in the country, in which planning for services, intervention and programs rendered would be directed to the specific needs of PWDs according to location and other information collected.

In order for a PWD to be registered, JPOKU stipulated that the diagnosis is to be endorsed by registered medical practitioner via the registration form, as provided for under the Regulations for Persons with Disabilities (Registration and Issuance of Card) 2010). Categories of registration are based on the seven (7) categories of disabilities that the Ministry has endorsed, namely physical disabilities; vision impaired; hearing disabilities; speech disabilities, learning disabilities; mental as well as multiple disabilities. A PWD registration card will be issued and it is recognised by authorities and private sector, in which PWDs are able to gain benefits from services provided.

In response to growing needs as conveyed by disabled persons' organisations (DPOs) and NGOs, JPOKU has revised the appearance of the card by inserting sub-categories of the learning disabilities as per diagnosis.

Launched by the Deputy Prime Minister and Minister of Women, Family and Community Development on 7 March 2019, six (6) sub-categories were identified as follows:

- i. Global Developmental Delay (GDD);
- ii. Down syndrome;
- iii. Intellectually challenged;
- iv. Autism;
- v. Attention Deficit Hyperactivity Disorder (ADHD); and
- vi. Specific learning disability.

(b) Disability Equality Training

Disability Equality Training (DET) aims to convey and communicate issues on disabilities using participatory approach from the social model perspective. DET also endeavours to alter views, attitudes and perceptions of general society towards disability as well as having better grasp on the differences between disability and impairment. This would lead to increase in sensitivity and empathy, and looking at disability in positive light.

According to the website of DET Forum, a non-profit organisation with membership of more than 270 facilitators, DET training courses are designed and delivered by the people who have direct experience of discrimination i.e. qualified disabled trainers who experience disability as a form of social oppression and therefore truly understand the reality of living in a disabling society.

(c) Disability Related Service Training Programs

Disability Related Service Training (DRST) programs concentrate on ways to manage or deal with PWDs of each category through handling simulation with PWDs of vision, physical and hearing in order to identify their needs effectively.

In 2018, DET trainers from JPOKU managed to conduct trainings in 20 locations / institutions as the following table:

No.	Institutions/Agencies/ Target Group	Dates	Venue	No. of Participants
1.	DET to staff of PWDs institutions in Northern Zone	9 April 2018	Sheltered Workshop, Sg. Petani, Kedah	30
2.	DET @ Ministries (Agriculture, Human Resources, Finance)	16 July 2018	MWFCD	30
3.	DET @ Ministries (Water, Energy, Land; Federal Territories, Plantation & Commodities)	17 July 2018	MWFCD	30
4.	DET @ Ministries (Education, Home, Housing & Local Authorities)	18 July 2018	MWFCD	30
5.	DET @ Ministries (Education, Home, Youth & Sports)	19 July 2018	MWFCD	30
6.	DET @ CBR Northern Zone	30 July to 1 Aug 2018	Langkawi, Kedah	30
7.	DET @ community	6 Aug 2018	Labuan	30
8.	DET to staff of PWDs institutions	27 Aug 2018	MWFCD	70
9.	Engagement with supervisors and workers/volunteers of CBR Sarawak	2 Sept 2018	Sarawak	270

No.	Institutions/Agencies/ Target Group	Dates	Venue	No. of Participants
10.	DET: Empowering PWDs Officers in Public Sector	12-14 Sept 2018	Langkawi, Kedah	30
11.	Engagement with supervisors and workers / volunteers of CBR Sabah	23 Sept 2018	Kota Kinabalu, Sabah	30
12.	DET: Empowering PWDs Officers in Public Sector (DSW)	26-28 Sept 2018	Sheltered Workshop, Klang, Selangor	30
13.	DET @ community of Teluk Panglima Garang	13 Oct 2018	Sayangku CBR	30
14.	DET @ community of Jempol, Negeri Sembilan	20 Oct 2018	Rural Transformation Centre (RTC) Jempol	30
15.	UNICEF Facers Disability Training 2018	12 Jan 2018	UNICEF Malaysia Fundraising Office	25
16.	DET @ Sony EMCS (Malaysia) Sdn. Bhd.	25-26 April 2018	Sony EMCS (Malaysia) Sdn. Bhd., Bangi, Selangor	30
17.	DET @ Induction Program SOCSO 2018	12 July 2018	TH Hotel, Kelana Jaya, Selangor	150
18.	DET @ SOCSO Seberang Perai, Penang	18 Sept 2018	Social Security Organisation (SOCSO), Seberang Jaya, Pulau Pinang	30
19.	DET @ SOCSO Kedah	19 Sept 2018	SOCSO, Alor Setar, Kedah	30
20.	DET @ SOCSO Perak	221 Sept 2018	SOCSO Ipoh, Perak	30
21.			TOTAL	995

Source: JPOKU

For 2019, JPOKU has planned the DET programs for approximately 540 people, with main focus of creating

awareness towards PWDs to the staff of DSW, subsequently public agencies, communities and education institutes.

(d) Child care centres for PWDs

These centres, accommodating children 4 years and below, is a Government – NGOs initiative that started in 2013. The Government through DSW provides yearly funding to six (6) NGOs who runs the child care centres. From the year 2015 onwards, operational grant is given based on the current staff employed and number of children under its care. Each of the six (6) centres is focusing on specific categories of syndrome down, autism, visual, hearing, physical and learning disabilities.

To date, six (6) NGOs are appointed by the Government to run the centres as follows:

- i. Down Syndrome Association of Malaysia;
- ii. Perak Association for Intellectually Disabled;
- iii. Malaysia Federation of the Deaf;
- iv. St Nicholas' Home, Penang;
- v. Autism Society Sibul, Sarawak; and
- vi. Sabah Cheshire Home.

(e) Care Centres for PWDs (*Taman Sinar Harapan*)

Taman Sinar Harapan (TSH) institutions are set up to provide care, protection and rehabilitation services, specifically for those with learning disabilities. TSH is also gazetted as one of the ‘places of safety’ stipulated under the Child Act 2001. To date, there are seven (7) TSH in Malaysia, in which each centre caters to PWDS of different age groups as shown in the following table:

No.	Taman Sinar Harapan according to locations	Categories of residents according to age groups
1.	Taman Sinar Harapan Ziyad Zolkefli, Cheras, Kuala Lumpur	Below 14 years old
2.	Taman Sinar Harapan Kuala Kubu Bharu, Selangor	Bedridden PWDs aged 15 years old and above
3.	Taman Sinar Harapan Tuanku Ampuan Najihah, Seremban, Negeri Sembilan	Below 14 years old
4	Taman Sinar Harapan Tampoi, Johor Bahru, Johor (for males)	15 to 35 years old
5	Taman Sinar Harapan Jubli, Johor Bahru, Johor (for females)	15 to 35 years old
6	Taman Sinar Harapan Bukit Besar, Kuala Terengganu, Terengganu	Below 14 years old
7	Taman Sinar Harapan Rizuan Puzi, Jitra, Kedah	Bedridden PWDs up to 14 years old

There are two (2) entry methods into TSH, one is on voluntary basis with permission from the Director General of DSW (provided under the Rules for Rehabilitation Centre for the Mentally Handicapped 1977), and second is obtained through Court Order under the Child Act 2001. The residents are permitted to stay up to three (3) years or until they are of 18 years of age. Objectives of TSH are as follows:

- i. Provide care, protection and rehabilitation services to PWDs of Learning Disabilities;
- ii. Continuous Activity Daily Living trainings for self-care;
- iii. Pre-vocational trainings towards independent living;
- iv. Opportunities for social activities and interactions with other residents and communities; and
- v. Trainings of social skills and societal activities to be able to integrate into communities.

(f) Sheltered Workshop (*Bengkel Daya / Terlindung*)

Sheltered workshops offers economic and employment opportunities for PWDs with mild learning disabilities as well as physical disabilities who are not competent enough for available jobs in the labour market. Regulated by the Rules for Sheltered Workshops (1979), these workshops provide paid jobs at their own pace and working hour flexibility to PWDs. Current working units in both sheltered workshops are as follows;

Sheltered Workshop, Klang, Selangor	Sheltered Workshop, Sungai Petani, Kedah
Sewing	Sewing
Handicraft	Bakery
Bakery	Laundry
Laundry	Scented candles
Catering	Agriculture
Agriculture	

Main objectives of these workshops are to boost the level of capabilities, abilities, skills and knowledge of PWD workers as well as to create an income source for the PWDs to be able to live independently.

(g) Industrial Training and Rehabilitation Centre (*Pusat Latihan Perindustrian dan Pemulihan*)

Targeted for physically disabled people aged 14 to 40 years old, the Industrial Training and Rehabilitation Centre (PLPP) is the only institution under DSW which provides a combination of industrial training, including vocational and non-vocational) as well as rehabilitation services. Established in 1999, the centre now accommodates a total of 111 PWD students.

The objectives of PLPP are:

- i. Rehabilitation services as early intervention measures; and
- ii. Empower and equip the physically disabled persons with necessary skills to their optimum capacity in order to prepare them for the work force.

Amongst the services provided in the centre are physiotherapy, occupational therapy, counselling, job placement / job coach and driving lessons. Breakdown on the training programmes provided in PLPP according to two (2) types of certification awarded is in the following table:

PLPP Certificate (course)	Malaysia Skills Certificate
1) Electrical	a) Ladies Dress Making – Level 1
2) Wheelchair production	b) Office Administration – Level 2
3) Prosthetics and orthotics	
4) Batik craft	
5) Art	

(h) Community Based Rehabilitation

Community Based Rehabilitation (CBR), which was first introduced in Malaysia through a pilot project in the state of Terengganu, was adapted from the World Health Organisation (WHO). This approach is meant to enhance the quality of life for people with disabilities and their families; meet their basic needs; and ensure their inclusion and participation. Malaysia follows the WHO's CBR Matrix which contains five (5) key elements of health, education, livelihood, social and empowerment. CBR for Malaysia is a strategy within the community for the rehabilitation, equalisation of opportunities and social integration of all PWDs, including children. It aims to reduce the impact of disability and provide the support services for families of persons and children with disabilities. The basic idea of CBR is applying a multi-sectoral approach that encompasses combined efforts of PWDs, their families and communities, and relevant government and non-government parties in delivering services on health, education, vocational, social and others.

Among services provided at the CBR centres are early detection and intervention programmes, registration of PWDs, rehabilitation, resource and referral centre, and advocacy. Activities organised including therapies; motor skills; language and social development; basic daily life skills; reading, writing and arithmetic (3R); games, sports and culture; horse and music therapies; vocational training to prepare the PWDs for employment; and independent living (IL) training.

Operationalisation of CBR is based on three (3) models: centre based, home based and combination of both. CBR in Malaysia applies the combination of centre and home based. PWD trainees who are able to go to the centres will undergo rehabilitation sessions at least for four (4) days in a week. The CBR workers / volunteers will attend to PWD trainees, who are not able to be physically present at the centres, by conducting scheduled rehabilitation sessions at home at least once a week.

CBR centres are subsidised by the Government, in which total expenditure spent for activities and programs related to CBR in the year 2018 amounting to almost RM92 million for 554 centres with 20,573 PWD trainees. The details of annual grants and allocation for CBR are as follows:

No.	Expenses covered by Government	Allocation (RM)
1.	Special Allowance for PWDs (maximum 30 trainees)	150.00/ month
2.	Allowance for CBR Supervisor	1,200.00/month
3.	Employee Provident Funds contribution	624.00/month
4.	Allowance for CBR workers/ volunteers (maximum 5 person)	800.00/month
5.	Rental of premise (maximum)	3,000.00/month
6.	Utilities (maximum)	1,000.00/month
7.	Programs / Activities (maximum)	30,000.00/year
8.	Rehabilitation equipments (one-off for new CBR)	50,000.00

The basic yearly amount to start a CBR centre is estimated around RM252,000.00. In line with the spirit of community based approach, any other expenses incurred is under the responsibility of the Committee appointed to manage the centre. The Committee comprises of CBR supervisors and workers / volunteers from the local communities that are passionate and committed in contributing to the general well-being of the PWD trainees.

Starting from 2017, all Government CBR centres are instructed to register as a non-governmental organisation (NGO) with the Registrar of Societies in an effort to streamline the function and enhance the quality of management of CBR. With the status of NGO, CBR centres are expected to be more proactive in sourcing for funds to complement the grants given by the Government. Furthermore, sponsors or donors towards NGOs are eligible for tax exemption. As of now, there is no CBR centre in the country that focuses only on ASD.

(i) Home Help Services

Aimed to strengthen community-based initiatives, Home Help is one of the social support programs by DSW dedicated for older persons and PWDs, focusing on bedridden older persons and PWDs, those who are living alone or with families who are unable to properly care for them. Besides providing social support, volunteers from community also offer rehabilitation, care and integration services to these older persons and PWDs. Types of Home Help services provided including preparing meals, recreational activities, house chores and trips to clinic/hospital for treatment and medicine collection. Total number of volunteers involved and PWDs engaging this service for 2016 to June 2019 is as follows:

State	No. Volunteer	No. PWDs
Johor	115	108
Kedah	322	301
Kelantan	312	111
Melaka	114	55
Negeri Sembilan	120	73
Pahang	308	210
Pulau Pinang	100	47
Perak	115	115
Perlis	80	80
Selangor	240	170
Terengganu	216	90
Sabah	187	150
Sarawak	330	310
Kuala Lumpur	37	38

WP Labuan	24	25
Total	2,620	1,883

Source: National Information System on Social Issues (MANIS)

(ii) National Autism Society of Malaysia (NASOM)

NASOM was founded in 1987 by a group of concerned parents of children with ASD as well as professionals.

The non-profit NGO has established 20 centres according to regions in Malaysia with the details as in the following table:

No.	NASOM Centres	Services provided
Central Region		
1.	NASOM One Stop Centre, Shah Alam, Selangor	Assessment /Diagnosis/Creative Arts/Therapy/Intensive Intervention Program on Autism
2.	NASOM Gombak, Selangor	Early Intervention Program
3.	NASOM Taman Supreme, Cheras, Kuala Lumpur	Vocational Centre
4.	NASOM Jalan Ipoh, Kuala Lumpur	Vocational Centre
5.	NASOM Teluk Pulai, Klang, Selangor	Early Intervention Program
6.	NASOM Seremban, Negeri Sembilan	Early Intervention Program
7.	NASOM OUG Kuala Lumpur	Early Intervention Program
8.	NASOM Bandar Puteri, Klang, Selangor	Residential and Vocational Centre
9.	NASOM Titiwangsa, Kuala Lumpur	Early Intervention Program
Northern Region		
10.	NASOM Penang	Early Intervention Program & Vocational Program
11.	NASOM Alor Setar, Kedah	Early Intervention Program
12.	NASOM Ipoh, Perak	Early Intervention Program
13.	NASOM Butterworth, Penang	Early Intervention Program
Southern Region		
14.	NASOM Melaka	Early Intervention Program
15.	NASOM Muar, Johor	Early Intervention Program

16.	NASOM Segamat, Johor	Early Intervention Program
East Coast Region		
17.	NASOM Kuantan, Pahang	Early Intervention Program
18.	NASOM Kerteh, Terengganu	Early Intervention Program
19.	NASOM Kota Bharu, Kelantan	Early Intervention Program
East Malaysia / Sabah & Sarawak		
20.	NASOM Miri, Sarawak	Early Intervention Program

Core objective of NASOM is to offer lifespan services to people with autism through various results oriented services and programmes that put emphasis on the acquisition of skills and changes in behaviour. Other objectives are as follows:

- (i) to identify and promote the treatment, education, welfare and acceptance of people with autism;
- (ii) to provide assistance and advice to families of people with autism; and
- (iii) to participate actively in the study, research and development of methodologies, therapies and treatment of autism and related disorders

The table below explains further on the intervention and social support programmes provided by NASOM:

No.	Programs	Details
1.	Early intervention programme (EIP)	A highly individualized program for autistic children up to the age of 13, where they're taught self-help skills, elementary academic & learning skills, and effective & communication skills.
2.	Assessment and Diagnosis	<ul style="list-style-type: none"> • Screening and diagnosis • Assessment and evaluation • Consultation and counselling • Information and referrals
3.	Pre-vocational programme	Provides vocational training to children above 14 years of age and who are not enrolled into a formal school.
4.	Therapy programme	<ul style="list-style-type: none"> • Speech • Behavioral

No.	Programs	Details
		<ul style="list-style-type: none"> • Educational • Occupational • Sensory
5.	Mainstreaming programme	JV between NASOM and MOE. NASOM provides teacher aides who help the children assimilate into the classroom and school activities.
6.	Vocational programme	NASOM has 3 centers modelled to equip our service users with skills in baling, food preparation, laundry, housekeeping services, sewing, handicraft and data entry services.
7.	Residential programme	NASOM provides a residential program for people with autism and opportunity to live independently in a community settling.
8.	Transition Programme <ol style="list-style-type: none"> i. Transition to school ii. Transition to adulthood iii. Transition to employment iv. Residential programme 	Specially designed to prepare them for formal school. Taught basic academic skills, group learning and other necessary skills needed in a formal school setting.

NASOM also provides assistance in areas such as:

- a) Organising events;
- b) Fund raising;
- c) Support groups;
- d) Family Counseling;
- e) Training;
- f) Collaboration with corporate partners;
- g) Autism research in collaborations with academic institutions; and
- h) Movies content in supporting the cause for autism.

Number of participants of programs conducted in NASOM Centres as of October 2019

PROGRAM	Intensive Intervention Program		EIP		Pre - Vocational		Mainstream		Vocational		Residential		Transition		Total Student
	(1-10 years)	(1-10 years)	(1 - 10 years)	(1 - 10 years)	(11 - 13 years)	(11 years & above)	(14 years & above)	(14 years & above)	(14 years & above)	(14 years & above)	(14 years & above)	(8 years & above)	(8 years & above)		
CENTRE	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	
NASOM Alor Star			5	20	2	1			1	2					31
NASOM Bandar Puteri									3	6	1	2			12
NASOM Butterworth			2	21	1					5					29
NASOM Ipoh			3	5		3				3					14
NASOM Jalan Ipoh									1	11					12
NASOM Kuantan			4	31	2	8				4					49
NASOM Malacca			3	14	4	8			2	5					36
NASOM Penang	1	5	6	19	1	1				7					40
NASOM Gombak			6	43		1									50
NASOM OUG			2	19	4	3	1							1	30
NASOM Supreme Garden			1	11											12
NASOM Teluk Pulai	5	16	1	20	3	14	1	1					1	10	72

NASOM Titiwangsa			7	32	2	10	1	1	1	5						58
NASOM Keroh			3	11												14
NASOM Setia Alam	2	17														19
TOTAL	46		289		68		5			55	3		12			478

Source: NASOM

b) Health⁷

(i) Ministry of Health

A study done by MOH in year 2005 showed that the prevalence rate of ASD among toddlers (18 months to 3 years) was 1.6 per 1,000 children. For year 2017, a total of 451,158 children aged 18 months were screened for ASD and 1,551 (0.34%) were suspected of ASD, while 622 (0.27%) from 230,457 screened children aged 3 years old were suspected of ASD. These children were then given early intervention and referred for confirmation of diagnoses. Data collected and monitored at the national level shows an upward trend in the number of children detected with ASD yearly. With the increase of trained health personnel doing prompt early screening as well as increase in awareness among parents has contributed to more cases of detection of early signs of ASD in younger children.

Intervention and social support programmes by the Ministry of Health (MOH) are as follows:

⁷ References (for Health section)

1. American Psychological Association, Division 12, Society of Clinical Psychology <http://www.apa.org/divisions/div12/abouttcp.html>
2. Helping children with autism: Evidence-base assessment and treatment- a guide for health professional <http://autism.ahpa.com.au>
3. Psychologists Working in Early Intervention Services http://www.brothersofcharity.ie/southern_services/psychology_early_intervention.pdf
4. Malaysian Society of Clinical Psychology <http://www.malaysiaclinicalpsychology.com>

- a) Autism Spectrum Disorder (ASD) Screening Program through the existing child health services throughout the country. To ensure the continuity of child health care and to provide good health services for children, MOH has introduced a new home-based Child Health Record Book (*Buku Rekod Kesihatan Bayi dan Kanak-kanak 0-6 tahun*) that contains screening for growth and development. Autism screening M-CHAT (Modified Checklist for Autism in Toddlers) was introduced as a screening tool and was incorporated into this new home based Child Health Record. The implementation of this record book was done in phases and completely expended to all states in Malaysia by the end of 2012. Screening using M-CHAT to children attending Health Clinic was made compulsory to all children age 18 months and 3 years old. This was to ensure the early detection of disability, particularly the autism and to evaluate their health status. This record book also serves as a guideline to parents about knowledge and advice in all aspect of child care.
- b) The children suspected for ASD were then referred to the respective multidisciplinary team for further evaluation and early intervention. Early intervention involves multidisciplinary team management from hospital and primary health care, with the support and involvement of the caregivers, school teachers and other related agencies. The benefits of the early identification of ASD are recognized by parents and professionals alike. While there is as yet no suitable test for the universal screening of pre-school children for ASD, the Identification of ASD can nevertheless be improved by the increased recognition of

alerting signals to identify those children for whom further assessment is needed.

In hospital setting, assessment and diagnosis for ASD will be conducted by general paediatrician or Child and Adolescent Psychiatrist or Developmental Paediatrician. They will do the diagnostic evaluation based on Diagnostic and Statistical Manual of Mental Disorders (DSM-5). In selected cases, standardised diagnostic tools such as the Autism Diagnostic Observation Schedule (ADOS) are offered. Medical follow-up is mandatory to look into:

(i) Parenting and child behaviour support

Parenting and child behaviour support or family support programme serves as a guide to easy access of information and support for family in relation to their needs. However, this service is lacking in many areas and not easily accessible due to lack of awareness within various ministries. Comprehensive information should be readily available at clinics and hospitals to support families when patients are diagnosed and require follow ups. The objectives of this program are:

- To support for parents with ASD Children; and
- To expand the current services within the multiple agencies (various ministries and NGOs).

(ii) Issues /medical comorbidities which may need medication such as seizures, ADHD, severe aggressive behaviours and sleep disorders.

(iii) Monitoring of child's developmental progress

Apart from that, intervention services by allied health will look into:

(i) Speech and language therapy

Speech Language Therapy benefits most children with ASD as they have some form of speech, language and communication impairments. Children who are first seen by speech-language therapists (SLTs) will be assessed formally and/ or informally for the purpose of obtaining complete information on their speech, language and communication skills. Intervention can be conducted individually or as a group. The various types of communication interventions for ASD children include the Responsive Education and Prelinguistic Milieu Teaching (RPMT), Augmentative and Alternative Communication (AAC), Video Modelling and Social Communication Intervention (SCI). Early intervention, regular sessions, individualized goals and family involvement will result in better outcomes. SLTs play an important role in enhancing the children's functional communication skills thus allowing them to be able to participate better socially and independently.

(ii) Occupational therapy – to support behaviour, ADL and school function

The aim of Occupational Therapy is to enable the individual to gain maximum independence, self- regulation and quality of life. The main focus may be on age appropriate play,

learning, and independence in basic living skill. An occupational therapist will evaluate the child`s development as well as the social, psychological and environmental factors that may be involved. Often, children with ASD may encounter sensory difficulties such as sensory registration, sensory modulation and praxis. Children who find challenges in sensory modulation especially over responsiveness to certain sensory input (tactile, vestibular, proprioception, auditory, gustatory, olfactory and visual), tend to react negatively and avoid ordinary stimuli. Besides that, some ASD children may have motor planning problems which include lack of ideation, imaginative play and difficult to generalise from one familiar activity to a new situation that has similar features.

These sensory issues may affect their daily occupational performance, hence, occupational therapist may adopt primarily sensory integration framework to help these children to process the information and be more productive and play in an appropriate way. The occupational therapist will then prepare strategies and adaptive as well as social, play, gross motor (posture, coordination, motor planning), fine motor (prewriting/ handwriting, in hand manipulation), cognitive skills (attention span, processing), managing behaviour, techniques for learning tasks to be practiced at home, in school and other settings.

(iii) Clinical psychologists

The psychological services look into the context of psychological needs, family and other social contexts such as social-emotional adjustments, cognitive development, behavioural adaptation and the health status of infants, toddlers, children and adolescents. The clinical psychologist employs a wide range of skills and procedures in examining the different phases of the service provision which includes early intervention particularly in assessment, intervention and the transition into the school systems after early intervention. In terms of assessment, they would conduct clinical interviews with significant people in the child's life such as the parents, other caregivers, and teachers, as well as conducting clinical observation in different settings. In addition, the clinical psychologist often conducts other general assessments in order to understand the cognitive skills, developmental level, adaptive functioning skills (e.g. communication skills, daily living skills, socialization, motor skills, emotional coping skills, play skills and etc) in order to understand the child's difficulties, intellectual abilities as well as how they cope with daily life. The formal assessment is essential in making recommendations in appropriate educational preschool placements, drafting individualized educational program (IEP) in early intervention, additional intervention and on-going developmental progress and follow-up with other health professionals. Furthermore, the clinical psychologist works in providing family assessments in order to identify the specific family needs (e.g. levels of

family adjustment, coping and stress, individual parenting styles, family relationship quality, family expectations, etc). This would help in assisting and monitoring the provision of sufficient family support to maximize the growth, learning and development of a child with ASD.

The clinical psychologist conducts behavioural modification strategies to reduce specific inappropriate behaviour by understanding the function of the behaviour while promoting new appropriate behaviour and skills. The clinical psychologist also conducts skills training for emotional regulation, socialization skills and other specific skills to enhance ASD children's resilience so as to cope better with their daily life. At the same time, it also promotes mental health well-being and reduces the risks of new issues surfacing such as depression and anxiety.

Education materials such as poster and pamphlet were distributed not only to all health facilities but also to the universities and NGOs in order to promote the early detection programmes as well as to inform the community regarding signs of ASD. MOH has also come up with a reference material that is used during the intervention, naming A Series of Six Manuals on the Management of Children with Disabilities: Manual on the Management of Children with Personal and Social Problem. This manual can be accessed from the Family Health Development Division official website: <http://fh.moh.gov.my>.

c) EDUCATION

(i) Ministry of Education

Special Education Service Centres are established under MOE with specific functions as follows;

- a. Provides habilitation, rehabilitation, advisory services and expert assistance services to help minimize the impact of disability in children and children with special needs;
- b. To enable children with special needs to undergo learning processes at schools and provide assistance in acquiring better quality of life through programs / activities conducted such as:
 - i. Screening and detection;
 - ii. Early intervention programs;
 - iii. Filters, therapies and rehabilitation;
 - iv. Dissemination of information on special education;
 - v. Counselling and consultation; and
 - vi. Establish collaborative network of agencies

Currently, there are 13 service centres in each state with a total of 26 personnel which offer services of audiology, occupational therapy, peripatetic, psychology and speech therapy. Attachment of personnel for each centre is as follows:

No.	States	Personnel
1	Penang	<ul style="list-style-type: none">• Audiologist• Peripatetic
2	Kedah	<ul style="list-style-type: none">• Occupational therapist• Peripatetic
3	Perlis	<ul style="list-style-type: none">• Speech therapist• Peripatetic
4	Kelantan	<ul style="list-style-type: none">• Psychologist• Peripatetic

No.	States	Personnel
5	Terengganu	<ul style="list-style-type: none"> • Psychologist • Peripatetic
6	Perak	<ul style="list-style-type: none"> • Psychologist • Peripatetic
7	Putrajaya	<ul style="list-style-type: none"> • Clinical psychologist • Speech therapist • Occupational therapist • Audiologist
8	Selangor	<ul style="list-style-type: none"> • Audiologist
9	Malacca	<ul style="list-style-type: none"> • Audiologist
10	Johor	<ul style="list-style-type: none"> • Speech therapist • Peripatetic
11	Pahang	<ul style="list-style-type: none"> • Audiologist • Speech therapist
12	Sabah	<ul style="list-style-type: none"> • Occupational therapist • Peripatetic
13	Sarawak	<ul style="list-style-type: none"> • Occupational therapist • Psychologist

Other forms of support committed by MOE for special needs students throughout the education systems are as the following:

Special Student Allowance for RM150.00 per month

- a. Dormitory food charge is excluded;
- b. Extension of study period to a maximum of two years;
- c. Supplementary of one year schooling for students attending vocational schools;
- d. Access to additional support such as extra time during public exams and computer usage;
- e. Support services from specialised field officers from the service centre; and
- f. Availability of Students Management Assistant.

(ii) GENIUS Kurnia

(a) Early Intervention Programs and Family Support

Intervention programs and family support are aimed at providing autistic children before pre-school programs at the GENIUS Kurnia Centre. The program offers services in two-hour sessions weekly with families with children aged 2 years up to 6 years. These children are taught to use the toilet independently, control their meltdowns, carry out simple tasks, follow step-by-step instruction and communicate well with others.

Since the session is only once a week, the child's parents should commit to continuing early home-based interventions to ensure that children can enter pre-school programs. The capacity of early intervention programs and family support was 150 children. The intervention is one-to-one, an interventionist to every child.

(b) Pre-school Program

This is a full-time educational program in which classes start from 8.30 am to 4.00 pm. The program aims to provide autistic children with the skills to enter mainstream or special education classes in schools. Through this program, pre-

school children will master the emotional, communication, spiritual, and academic societal skills.

Academic skills consist of literacy, numeracy and writing. Additionally, children will be exposed to enrichment activities such as swimming, music, gardening, sports, cooking, dancing and art education. The maximum capacity for this preschool program is 150 children.

(c) Community Education Program

Community education programs are intended to expose to parents, educators / therapists and communities about autism as well as effective intervention strategies. Among the community education activities are weekend workshops, general talks, programs for autism teenagers entitled “Yes I Can” and online education, iKurnia.

i. Weekend Workshop / Onsite Training

A series of workshops is held on weekends to enhance knowledge and skills in managing and educating children with autism. These workshop are specifically organised for parents, but teachers, professionals, and therapists are welcomed. In depth explanation on various topics on autism will be given by GENIUS Kurnia’s interventionists

and guest speakers. Through this workshop, GENIUS Kurnia provides a greater exposure to those involved in managing daily activities with autistic children.

Objectives of the workshops are to empower the parents and teachers with information and knowledge about autism to enable them to provide appropriate care and instruction for the development of children with autism. Other than that, to increase parents and teacher's awareness of autism and the challenges that need to be addressed to manage children with autism. List of the Weekend Workshops to be conducted for the year 2019 is as follows:

No.	Workshops	Date
1.	Understanding Autism & Sensory Issues	27 January 2019
2.	Behaviour Management	24 February 2019
3.	Physical & Psychology Health Care for Children with Special Needs	10 March 2019
4.	Toilet Training & Adaptive Skills	24 March 2019
5.	Early Communication Skills	28 April 2019
6.	Advanced Communication Skills	30 June 2019
7.	Work Task System & Social Stories	14 July 2019
8.	Autism Friendly Holidays : A travel guide	28 July 2019
9.	Pre writing skills	4 August 2019
10.	Play and Social skills	25 September 2019
12.	Literacy and Numeracy skills	20 October 2019

ii. Ausome Café

Ausome Café is one of the self-care programs for teenagers with autism (*Yes I Can*) designed to train them to live independently. Labor for Ausome Café is the teenagers with autism aged 18 to 28 years old where their parents are involved in the Malaysian Autism Association as well as making this association as a party that introduces the teenagers into the program.

Selayang Community College has partnered with GENIUS Kurnia to provide instructors to train the teenagers with autism on how to manage and operate a café especially in terms of handling and preparing food. The training designed are appropriate with the level of the teenager with autism. Ausome Café has been registered as Partnership Liability Company (PLT) on 7 January 2019.

Operation hours:	Monday–Thursday
Time:	10am – 2pm
Venue:	Foyer, Pusat GENIUS Kurnia

iii. iKurnia

iKurnia is the first free online course on autism in Malay language developed by GENIUS Kurnia's own team. This course aims to provide information and training on the latest, accurate and evidence-based practice to parents, teachers, therapists, and the community. iKurnia consists of iKurnia MOOC (online course) and iKurnia LIVE (e-workshop).

iKurnia's development is the creativity and expertise of internal GENIUS Kurnia's staff. It is offered on the OpenLearning, Udemy and Youtube platforms. iKurnia encourages flexible learning; participants can access this course anywhere and anytime as long they have internet access.

iKurnia MOOC consists of two (2) courses which are iKurnia: Basics of Autisme which provides basic information on autism, and iKurnia: Intervention Basics that provides information on early intervention in helping children with autism. Topics such as toilet training, behaviour modification, requesting skills, and structured teaching are included. iKurnia LIVE is a live broadcast of weekend workshop and public talks at GENIUS Kurnia. Recorded broadcasts are available on GENIUS

Kurnia Youtube channel. Trainings and workshops covered various topics on autism.

(iv) School Teachers Training

A training for teachers is held for two (2) days at GENIUS Kurnia Centre on the topics of Autism Teaching Strategies. PERMATA Kurnia helps schools in terms of autism training to teachers of the Special Education Integration Programme and covers teachers from selected school in Selangor, Kuala Lumpur and Putrajaya.

The objectives of the training are to impart knowledge to school teachers about autism and to enhance understanding of the needs of students with autism. In addition, it provides knowledge to teachers on teaching and learning and interventions that can be used to help students with autism and provide skills to teachers to collaborate effectively with parents for the development of children's education.

(v) Nationwide Training

National Tour Series Autism Education Workshop is also organized by GENIUS Kurnia, which was held on February to November 2015 at 11 states. The 7-day workshops are

one of the efforts to publicize the services provided by GENIUS Kurnia and to disseminate knowledge to teachers, staff of the Ministry of Health Malaysia and parents about the methods in handling autistic children.

List of the training are as follows:

Bil.	Tarikh	Tempat
1.	9 February – 15 February 2015	Padang Serai, Kedah
2.	23 February – 1 March 2015	Kepala Batas, Pulau Pinang
3.	23 March – 29 March 2015	Siputeh, Perak
4.	18 May – 24 May 2015	Kajang, Selangor
5.	8 June – 15 June 2015	SEAMEO SEN, Melaka
6.	26 July – 1 August 2015	Institut Tadbiran Awam, Johor
7.	10 August – 16 August 2015	Pusat Latihan Felda Chini, Pahang
8.	6 September – 12 September 2015	Marang, Terengganu
9.	4 October – 10 October 2015	Pengkalan Chepa, Kelantan
10.	19 Oktober – 25 Oktober 2015	Tawau, Sabah
11.	20 November – 22 November 2015	Kuching, Sarawak

The objectives of this workshop is to:

- i. Increase understanding and awareness of participants about the impact of autism to the development of children with autism and the need for support to their parents;
- ii. Distribute information to parents of autism children on support resources for their children in Malaysia, particularly from government bodies;
- iii. Provide space for participants to build their own network of children involved in the education of autism children;

- iv. Relate knowledge on the characteristics of autism and emphasise ways to manage children with slightly different autism to all workshop participants;
- v. Enlighten the staff of Ministry of Health Malaysia about ASD and to increase knowledge in one of the medical fields; and
- vi. Provide a new idea to teachers, staff of the Ministry of Health Malaysia and parents on the setting of learning sessions that are different from ordinary children.

Benefits of Nationwide Training Program to Participants:

- i. Teachers of the Ministry of Education Malaysia get exposure and information related to education planning for autism students;
- ii. Staff of Ministry of Health Malaysia get exposure and related information in designing intervention for autistic children. Officials can also share better information and effective strategies in managing autistic children's behavior; and
- iii. Parents across the country get exposure and information related to home-based intervention planning for autistic children and methods of controlling autistic children.

Summary of the initiatives by GENIUS Kurnia is as per the table below:

No.	Subject	Year		
		2016	2017	2018
1.	Workshop			
1.1	Parents and teachers workshop	21 workshops (1,495 participants)	10 workshops (1,928 participants)	10 workshops (1,610 participants)
1.2	Public Talks	6 workshops (791 participants)	7 workshops (733 participants)	2 workshops (250 participants)
2.	Attachments Programs	4 organisations	6 organisations	10 organisations
3.	Others			
3.1	Nationwide workshops	11 locations involving 1,319 participants in 2015		
3.2	Teachers training	-	5 trainings (375 participants)	6 trainings (250 participants)
3.3	Off-site training	12	10	6
3.4	iKurnia : Asas Austime	-	1,546 participants	4,899 participants
3.5	iKurnia : Asas Intervensi	-	485 participants	924 participants
3.6	LIVE	-	19,000 views	28,619 views
3.7	Booth	2	10	4
3.8	Local training	13 organisations	23 organisations	30 organisations
3.9	International training	8 organisations	4 organisations	2 Organisations
3.10	Collaborations & Volunteering	12 organisations	9 organisations	15 organisations

(iii) National Youth Training Institute (Institut Kemahiran Belia Negara)

The National Youth Training Institute (IKBN) under the Ministry of Youth & Sports will begin its enrolment for school leavers with autism on technical and vocational skills training for the 2020 intake. 40 places for autistic students are offered for courses on hospitality and information and communications technology (ICT) in two (2) IKBN. The students will undergo six (6) months of training and upon completion, they will be awarded with the Malaysian Skills Certificates.

The trainers for these two (2) courses will need to attend special training sessions with NASOM, specifically to learn on how to deal with autistic persons. Employment opportunities as per the Ministry's assurances would be with Rimau Café, located in the Ministry's building, and its corporate partners. Rimau Café employs autistic youth since its inception in early 2018 and aims to provide training on hospitality based on the concept of Authentic Learning.

d) Employment

(i) Public Service Department

The Policy of 1% Employment Opportunities for PWDs in the Public Service was introduced in 1988 and implemented through two (2) Service Circulars in 2008 and 2010, outlining affirmative actions to be taken by Ministries, agencies and Appointment Authorities in ensuring PWDs are given the opportunities to serve in the public service. According to the data compiled at the Public Services Department, the latest percentage shows that PWDs employed is still very low at 0.33%.

To complement the implementation of the policy, MWFCD through JPOKU has prepared a Guideline on Job Matching for PWDs in Public Sector. This document serves to guide Heads of the Service and Appointment Authorities in identifying positions that are suitable and compatible with the ability, skills and qualification of PWDs.

MOE in its most recent announcement has pledged their commitment to increase enrolment of four (4) groups including PWDs in higher education institutions nationwide. A special lane is to be set up for these four (4) categories, and enrolment is still based on merit in which the PWDs will compete with each other.

Department of Social Welfare

(a) Supported Employment through Job Coaches Services

Supported Employment is an innovative approach firstly initiated in the United States around 1980s that promotes employment among PWDs. A change from working in isolation and placed in sheltered workshops, supported employment encourages PWDs to work in an open and competitive environment. Job Coach is an important source of human resources expert in promoting this approach by providing professional support and advices to PWDs and future employers. Job coaches are responsible to help PWDs to get a job according to their eligibility, ability, skills and knowledge. In order to obtain and sustain their job at the workplace, job coaches will supervise PWDs at their workplace and advice the employers regarding facilities needed by PWDs such as transportation, accommodation and working environment. Apart from that, job coaches also play an important role to ensure acceptance of PWDs from co-workers.

There are three (3) components involved as follows:

(i) Paid Work

The PWDs should receive the same wages or salaries as well as employment benefits as other workers. They should also be given a fair chance and also rewards in completing their given tasks.

(ii) Continuous Support

Sustaining PWDs in employment through continuous support is the most important achievement of supported employment.

(iii) Integration in the workplace

Participation and integration are key features in successful Supported Employment.

This approach has been introduced in Malaysia through the DSW-JICA Project to Support Participation of PWDs in 2009. The outcome of this project is the establishment of the Job Coach Services Program to ensure support for PWDs who are ready to enter the work force. As a result, there is quite a number of companies that adopted supported employment and job coach to employ PWDs such as Mydin Holding Berhad, Hotel Intercontinental, QSR Brands (M) Holdings Sdn Bhd, AEON Co (M) Bhd and Omron (M) Sdn Bhd.

The aim of this program is to promote the integration of PWDs in the community through employment. Implemented since 2012, 778 PWDs with Learning Disabilities have been supported. Out of that, eight (8) of them are persons with ASD.

The table below provides the number of PWDs employed with the help of Job Coaches under the programme by DSW:

Year	No. of PWDs Employed with Job Coach Support	No. of Companies or agencies	No. of Job Coaches	Learning	Blind	Physical	Multiple	Deaf	Speech	Mental
2012	7	5	4	5	0	0	2	0	0	0
2013	94	41	17	61	29	3	0	1	0	0
2014	260	142	64	156	51	28	10	12	2	1
2015	70	53	24	38	22	2	4	4	0	0
2016	145	97	76	107	4	14	3	13	3	1
2017	222	102	88	154	6	24	16	14	1	7
2018	158	103	56	104	4	15	7	23	0	5
2019	217	71	41	153	9	25	10	15	0	5
Total	1173	614	370	778	125	111	52	82	6	19

Source: Department of Social Welfare

The details in the table are referring to number of participants (cumulative from 2010 – 2018) from various Government agencies, private companies as well as NGOs who have completed the Job Coach Training, which consists of Basic and Introductory Courses. These agencies, companies and organisations do not necessarily adopt the Job Coach approach in total but are using the elements of Job Coach for in-house training, monitoring and administration purposes.

Organisation/Agency	No. of Participants
CBR Programme	948
Private Companies	303
Department of Social Welfare (Head office and branches (State and District))	365
NGOs	301
Department of Education (Special Ed & Polytechnic)	134
Department of Labour (Head office and JobsMalaysia)	98
Students and Researchers	36
Social Security Organisation (SOCSO)	17
Ministry of Health	67
Islamic Council	3
Department of Youth & Sports	1
Total	2,264

The total of certified Job Coach Trainers is 48, with the following details:

No.	Organization/Agency	Job Coach Trainer
1.	DSW	18
2.	NGO	12
3.	Private Companies	5
4.	Government Agencies	13
Total		48

(b) Job Matching and Placement System for Persons with Disabilities

The Labour Department has also introduced an online job registration and matching system. The System allows job matching of the right candidates among persons with disabilities with the right job.

(c) Self-employment

To encourage PWDs to be economically independent through self-employment, the Government through the Ministry of Human Resources has introduced the Entrepreneur Assistance Scheme for PWDs (SBGP-OKU). The program is tailored to assist disabled entrepreneurs in enhancing their businesses and employ other disabled persons as workers. The scheme offers an amount up to a maximum of RM100,000 depending on their eligibility and fulfilment of conditions and requirements. The assistance is given in the form of equipment needed for the enhancement of the business, renovation of business premises and promotion/marketing.

Recipients of SBGP-OKU for 2015 - 2019 (October) are as follows:

Year	Total
2015	30
2016	62
2017	50

2018	59
2019 (October)	50
Total	251

To encourage PWDs to venture into small businesses, DSW provides launching grant up to a maximum of RM2,700. Additional grant would be considered for business expansion on case to case basis.

(d) Employment Incentive

The Government through DSW gives allowance as an incentive to encourage PWDs to work. PWDs with a monthly income of RM1,200.00 are given RM300.00 per month.

As an incentive to encourage employers to employ persons with disabilities in the private sector, employers are given several tax incentives such as follows:

- (i) double deduction of remuneration paid to disabled workers;
- (ii) double deduction for expenses spent for training of non-employee disabled persons; and
- (iii) tax relief on expenditure for any equipment provided to assist disabled workers (including any alteration or renovation at workplace).

(ii) Others

(a) Royal Malaysian Police

The Royal Malaysian Police (RMP) has launched its own Standard Operating Procedure (SOP) in handling persons with autism during the 212th Police Day celebration on 25 March 2019. In a very isolated case, an autistic adult was arrested in September 2018 for allegedly molesting a girl at a restaurant. The public has voiced their strong concern through an online petition that calls for RMP to review their SOP in dealing with PWDs. RMP has been very receptive to the idea and the Inspector General of Police (IGP) has instructed that a specific SOP for persons with autism to be ready for implementation in six (6) months. The SOP was drafted and refined via a few consultation processes that involved related Government Ministries and agencies, NGOs as well as academicians.

As awareness on autism has heightened within the police force, the IGP also announced the setting up of a few centres for autistic children of the police personnel. To date, there are approximately 500 autistic children within RMP's family. Located within the premises of RMP, this move shall be seen as an encouraging sign of action taken in providing supportive work environment for parents of PWDs children within a public agency.

(b) Initiatives by The Private Sector

(i) Enabling Academy by Yayasan Gamuda

Gamuda initially started the Project Differently Abled in 2013 with the aims of providing gainful and sustainable employment to young adults on ASD and at the same time to cultivate an open-minded and diversified work culture in the company. Realising the impactful outcomes on workers, families and the company itself, the Enabling Academy was established in 2016 under the auspices of Yayasan Gamuda. The objectives of the academy are to promote sustainable professional employment for ASD young adults in collaboration with partner companies, as well as providing employment transition programme through pre-employment training and job placement support. The three (3) month course would focus on soft skills development in terms of personal and career development, and mock office experience with stimulated-based learning in corporate work environment. Other supports provided are individualised training with the involvement of job coaches and familiarisation sessions by co-workers. The academy also conducted job coach introductory workshops and awareness talks for partner companies.

29 individuals in three batches has successfully graduated since 2017, in which 23 of them were employed by various partner companies. Retention rate for first and second batches after six months was 70.6% and this is comparable with Japan's employment transition program of the same duration which stands at 71.5%.

(ii) McDonalds and Ronald McDonald House Charities Malaysia

McDonalds as one of the leading franchise employers in Malaysia has been giving back to PWDs community by providing in-house trainings and employment opportunities to PWDs. As of December 2018, a total of 170 restaurant crews are PWDs from learning disabilities category (55%); followed by hearing disabled (30%); multiple disabilities (8%), physical (5%) and visually impaired (2%). 95% of these workers are on part time basis with years of service averaging from 2 to 25 years with McDonalds. 60% of the PWDs crew works in the central region, while 20% of them in the northern region and 10% respectively in the East Coast and southern region.

Being affiliates of the McDonalds Corporation, Ronald McDonald House Charities (RMHC) Malaysia is the charity wing of the corporation. The non-profit organisation, established in February 1990 aspires to create, find and support programs that impacted the health and well-being of under-privileged children in Malaysia. More than 20,000 children were the direct beneficiaries of RMHC's health, education and welfare programs that were organised with funding of more than RM16 million.

The Ronald McDonald Sensory Room, as one of RMHC's main programs, is developed via partnerships with educational centres for special needs children. The sensory room is designed for children with learning disabilities to acquire cognitive skills and build self-confidence. Among the benefiting effects of the rooms

that are fitted with multi-sensory equipment are to stimulate the primary senses of sight, sound, touch and smell, in an atmosphere of trust, relaxation and fun so as to maximise the children's response. To date, 30 sensory rooms have been set up in various facilities and welfare homes for children throughout Malaysia and three (3) specifically in NASOM's centres. More than RM2 million was spent for more than 5,000 special needs children.

(c) Initiative by State Government

The State Government of Selangor has mandated the Menteri Besar Selangor (Incorporated) (MBI) to spearhead the Smart Selangor program in transforming Selangor as the Regional Smart State. One of the initiatives under Smart Selangor is the Early Intervention Programme (EIP), which is a collaboration between MBI and Association of Selangor Child Care Centers (*Persatuan Taska Negeri Selangor*). Early intervention under EIP is focusing on educational guidance and support to children with risk or having developmental delays which will affect their growth and learning abilities. The objective of this programme is to create awareness amongst parents, family members and society on developmental delays in children in the state of Selangor. EIP also caters for low income families to have their children in the ages of 1 to 3 years old undergo screening tests in order to identify and track their developmental progress, with participation from children developmental experts and health therapists of various disciplines. The programme also put emphasis on empowering childcare

providers with required knowledge and skills in assisting children with developmental delays. Shadow Teacher concept is introduced, in which an educational assistant will be attached with a special needs child, and equipped with teaching methods and appropriate support needed by the child.

Since its inception in 2016, EIP has benefitted more than 7,000 babies, children, parents and families by way of early screenings, Smart Parenting Workshops and Spin-off programmes in collaboration with local authorities. 32 out of 40 participants have successfully completed the pilot project of Shadow Teacher 2018 and were given certification by the Skills Development Department under the Human Resources Ministry. Further information on EIP by Selangor State Government can be obtained at www.eipepic.my.

CHAPTER VIII:

CHALLENGES

While the Government has yet to conduct studies on gap analysis for PWDs as a whole, it acknowledges the challenges and setbacks faced by PWDs in achieving inclusivity as well as increased overall well-being in life. For the purpose of this document, Malaysia recognises two (2) crucial shortcomings that should be addressed by all parties from government to private sector, community as well as families and PWDs themselves.

a) Lack of smooth and seamless integration of PWDs from birth and diagnosis, early intervention measures, education, employment as well as a solid support system.

The Government has outlined programs and welfare assistance for PWDs through the Plan of Action for PWDs and other POAs or programs of other government agencies. But all of these are conducted and managed in a solitary way in which no clear pathway is being established to facilitate integration of PWDs into the society. It is imperative that early diagnosis to be carried out in order to obtain effective outcome of intervention measures. This is also to ensure higher percentage of PWDs enter the formal mainstream education system with a higher probability of successful employment opportunities afterwards.

Amongst the factors identified through a 2-day consultation session with stakeholders in January 2019 that partly contributed to failures in integrating PWDs, specifically persons with autism into society are as follows:

(i) Level of awareness

- (a) Awareness and education of the parents / guardians on the importance of early screening / diagnosis / detection for early intervention is considered low. This might be attributed to the denial syndrome of parents as well as fear of the stigma by society.
- (b) Awareness and acceptance of society towards PWDs as a whole is deemed not very positive. However, more parents with autistic children in Malaysia are now willing to share their life journey through social media in an effort to boost understanding of the public on autism.

(ii) Infrastructure and human resources

- (a) Lack of comprehensive capacity building programs to ensure adequate and competent workforce at all levels of care in the management of ASD in medical facilities, which requires a multidisciplinary team and dedicated trained manpower. Due to constraints in budget, such trainings were only conducted by zone throughout Malaysia in year 2015. Complete training on management of ASD involve Family Medicine Specialists, Medical Officers, nurses and personnel of allied health.
- (b) Public health infrastructure for screening, early diagnosis, treatments, therapies and intervention programs particularly in rural areas are lacking.

- (c) Limited number of therapists in public health clinics to carry out early intervention in primary health care. As of December 2018, there are 341 out of 1,498 Physiotherapists (30%); 260 out of 1,357 Occupational Therapists (30%) and 2 out of 133 Speech Therapists (5%) are assigned to public health clinics all over Malaysia. There are 144 public hospitals and 1,085 public clinics in Malaysia as of 2017.

- (d) Cost of private education and intervention programs including treatments and therapies in private centres, ranging from RM20k to RM100k a year, is high and beyond the reach of the vast majority of Malaysian families.

(iii) Social support system

- (a) There is a noticeable lack of coordinated support system for both persons with autism as well as their parents or guardians, from the government to NGOs and community.

- (b) In terms of education and employment opportunities for PWDs, there is a serious absence of employment transition programs to facilitate PWDs graduates to enter the work force.

b) Limited capacity and capabilities of JPOKU

The Department for the Development of PWDs is currently under DSW, a department under a department, with a Director heading the entity. This existing set-up seems to limit the capacity and capabilities of JPOKU to effectively address social issues of PWDs in general.

Since there is no specific policies or budget for PWDs with learning disabilities including autism, the programs as well as welfare aids are provided generally to PWDs without taking into consideration specific needs of each category and sub-category of PWDs.

CHAPTER IX:

CONCLUSION AND RECOMMENDATIONS

In continuing Malaysia's endeavours towards enhancing the overall well-being of PWDs, the Government is currently pursuing a few initiatives for PWDs as the following details:

a) Research and Development

A few research projects are in the pipeline, as well as newly proposed research which are still in the funding application stage. Evidenced-based decision making should be the crux of planning policies and targeted programs / aid for this vulnerable group of people.

(i) Research on Employment Opportunities for PWDs in Malaysia

The Government lacks specific data on the current situation of the labour force that should cater to creating employment opportunities for PWDs. One of the main grouses received is the shortage of jobs available for PWDs due to employers' unwillingness to accommodate them. Expected main outcomes of the research are data collection and analysis on the supply side (employers) and demand (PWDs) side; identify support and benefits that both parties require in order for PWDs to sustain employment as well as proposing development of an integrated database on employment for PWDs.

(ii) Research on Support System for Carers of PWDs in Malaysia

The main objectives of this research are to identify current support and aid that is available for carers by the Federal and state governments; private sector; NGOs and community and to subsequently ascertain the support that is actually needed by these carers. The research is also expected to come up with a mechanism and plan of action to establish a comprehensive support system for carers of PWDs.

(iii) Research on Autism Prevalence in Malaysia

GENIUS Kurnia was granted a research grant to conduct a national autism prevalence study in Malaysia from January 2019 to December 2021. The study involves collaboration with Autism Speaks as the international advisor and local advisors from MOH, MOE, MARA University of Technology (UiTM) Malaysia, as well as Monash University of Malaysia.

The main objective of the study is to update national statistics on the number of children with autism in Malaysia. The outcome of this research will include the development of a more sensitive and appropriate national autism screening and diagnosis tools to be used in Malaysia, such as the Malay version of the Social Responsiveness Scale (SRS) and Autism Diagnostic Observation Schedule (ADOS-2), development of *Prosedur Piawai Diagnosis Autisme* (PPDA), and development of the Autism Registry in Malaysia. Apart

from that, the study will become the foundation of transdisciplinary collaboration between the three main service providers for children with autism under Education, Health and Welfare. Therefore, it will assist in designing appropriate and best service management for children with autism comprehensively and systematically in Malaysia.

(iv) Proposed Study on Revision of Category of PWDs and Study on Effectiveness of the CBR Programs in Malaysia

JPOKU has submitted applications for both under the research grant of 11th Malaysia Plan year 2020. It is timely that the categories of PWDs are to be reviewed and standardised among the main stakeholders. The rise of rare diseases among Malaysians is also one of the reasons for this revision of the PWDs category. The study on CBR programs is necessary as there is no known impact study being done to ascertain the effectiveness of the current programs undertaken and to plan the way forward. It is likely that one of the main outcomes from this study is the need for the setting up of a standardised national syllabus to be applied at CBRs.

b) Acts and policies

(i) National Population and Housing Census 2020

The Department of Statistics Malaysia (DOSM) will be conducting the next National Population and Housing Census,

a 10-year exercise, in 2020. Amongst the new features of the census questionnaire is a dedicated sections targeting older persons and PWDs. This is being done in order to precisely capture information on those whose status as PWDs is already verified, as well as to identify conditions of disabilities in the household, DOSM is applying the Washington Group on Disability Statistics methods in designing the questions. A few consultation sessions have been conducted by DOSM to engage stakeholders, including MWFCD with the purpose of finalising the census questions. It is hoped that through this census exercise, the accurate data on the total PWDs population in Malaysia could be acquired since registration of PWDs is not compulsory.

(ii)Zero Reject Policy

In MOE's continuous effort to realise the rights to education for PWDs, the Zero Reject Policy is being revived for a more thorough implementation in public schools. Based on the Education Act 1966, all special needs students have the basic rights to obtain compulsory education from primary to secondary level in accordance to their disabilities and to be accepted to the special education schools, inclusive or integration programmes. MOE is also in the midst of finalising the Education Plan of Action for Special Needs Students for better implementation, coordination and monitoring programs related to these students.

(iii) GENIUS Kurnia

Besides the sole GENIUS Kurnia premise in Sentul, Kuala Lumpur, there are three (3) more branches projected to be operationalised in near future. An Integration Branch of Permata Negara, in which Permata Kurnia as one of its subdivisions, is anticipated to be opened in September 2019 in Putrajaya, the administrative capital of Malaysia. Another two (2) branches of Permata Kurnia will be ready for admission of children with autism in Melaka and Kedah in the year 2021. Besides running their own program and syllabus, Permata Kurnia also is providing trainings for Special Education and mainstream teachers in areas of Kuala Lumpur, Selangor and Putrajaya at the moment.

c) Recommendations

In ensuring that matters pertaining to PWDs are managed in a more coordinated and comprehensive manner, there is an urgent need for the Government to establish a working committee at the national level that will be exploring and charting a roadmap for PWDs. This committee will focus more on outlining holistic approaches to achieve inclusivity of PWDs in society. To execute the roadmap, the setting up of a shared database amongst main stakeholders should be the main priority of the working committee. Besides guiding the policy making and planning of targeted programs, the database will also eliminate the needs for PWDs to register with the DSW. The governance, structure and details of the working committee should complement the implementation of the Plan of Action for PWDs as well as CRPD.

CHAPTER X:

DIRECTORY OF

SUPPORT

Directory of District Offices of Department of Social Welfare

Pahang

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Bentong, Wisma Sri Bentong, 28700 Bentong, Pahang.	Tel: 09-2221732 Fax: 09-2224732
2.	Pejabat Kebajikan Masyarakat Daerah Bera, No. 2, Jalan Sri Kerayong 3, Bandar Baru Kerayong, 28200 Bandar Bera, Pahang.	Tel: 09-2505800 Fax: 09-2505685
3.	Pejabat Kebajikan Masyarakat Daerah Cameron Highlands, Bangunan Annex Bunks, 39000 Tanah Rata, Cameron Highlands.	Tel: 05-4911866 Fax: 05-4915207
4.	Pejabat Kebajikan Masyarakat Daerah Kuala Lipis, No. 3C, Tingkat Bawah & 1, Bangunan Koperasi Guru Pahang Barat, Kompleks Lipis Inn Plaza, 27200 Kuala Lipis, Pahang.	Tel: 09-3121280 Fax: 09-3121836
5.	Pejabat Kebajikan Masyarakat Daerah Raub, No. 3 & 3A, Jalan Perdagangan 1, Pusat Perdagangan Raub 27600 Raub, Pahang.	Tel: 09-3551113 Fax: 09-3561437
6.	Pejabat Kebajikan Masyarakat Daerah Rompin, No. 8 & 9, Taman Cemara, Jalan Cemara Utama, Rompin Jaya, 26800 Kuala Rompin, Pahang.	Tel: 09-4145278 Fax: 09-4146961
7.	Pejabat Kebajikan Masyarakat Daerah Kuantan, Bangunan Kompleks Penyayang, Jalan Pintasan Indra Mahkota, 25200 Kuantan, Pahang.	Tel: 09-5724220/21/23 Fax: 09-5724222
8.	Pejabat Kebajikan Masyarakat Daerah Pekan, Tingkat Bawah, Bangunan Kompleks Kerajaan, 26600 Pekan, Pahang.	Tel: 09-4222090 Fax: 09-4228534
9.	Pejabat Kebajikan Masyarakat Daerah Temerloh,	Tel: 09-2961760 Fax: 09-2967760

No.	Address	No.Tel./Fax
	Tingkat 1, Bangunan Persekutuan, Jalan Merdeka, 28000 Temerloh, Pahang.	
10.	Pejabat Kebajikan Masyarakat Daerah Maran, Tingkat 1, Wisma Persekutuan, 26500 Maran, Pahang.	Tel: 09-4771349 Fax: 09-4773149
11.	Pejabat Kebajikan Masyarakat Daerah Jerantut, No. 5, Jalan Inderapura 1, Bandar Inderapura, 27000 Jerantut.	Tel: 09-2662234 Fax: 09-2669061

Johor

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Mersing, Majlis Daerah Jalan Ibrahim, 86800 Mersing, Johor.	Tel: 07-7991262 Fax: 07-7996788
2.	Pejabat Kebajikan Masyarakat Daerah Kluang, JKR 183, Jalan Mengkibol, 86000 Kluang, Johor.	Tel: 07-7722434 Fax: 07-7733304
3.	Pejabat Kebajikan Masyarakat Daerah Kota Tinggi, Aras 3, Bangunan Sultan Iskandar, Jalan Lombong, 81900 Kota Tinggi, Johor.	Tel: 07-8835536 Fax: 07-8834252
4.	Pejabat Kebajikan Masyarakat Daerah Batu Pahat, No. 52A, 52B, 54A & 54B, Jalan Penjaja 3, 84300 Batu Pahat, Johor.	Tel: 07-4341377 Fax: 07-4327892
5.	Pejabat Kebajikan Masyarakat Daerah Johor Bharu, Tingkat 6, Bangunan KWSP, Jalan Dato' Dalam, 80000 Johor Bharu.	Tel: 07-2232606/07 Fax: 07-2241466
6.	Pejabat Kebajikan Masyarakat Daerah Kulai Jaya, No. 437, Tingkat 1,2,3,4 Jalan Kenanga, 29/11 Taman Indapura, 81000 Kulai Jaya, Johor.	Tel: 07-6622990 Fax: 07-6622770
7.	Pejabat Kebajikan Masyarakat Daerah Muar, Wisma Kebajikan, Jalan Othman, 84000 Muar, Johor.	Tel: 06-9521454 / 06-9521457(D/L) Fax: 06-9525862
8.	Pejabat Kebajikan Masyarakat Pejabat Tangkak, No. 1A, Taman Emas, Lot 870, Jalan Sialang, 84900 Tangkak, Johor.	Tel: 06-9788588(D/L) / 06-9787725 / 06-9788599 Fax: 06-9787611
9.	Pejabat Kebajikan Masyarakat Daerah Pontian, JKR 1026, Jalan Ismail, 82000 Pontian, Johor.	Tel: 07-6871714 Fax: 07-6871718
10.	Pejabat Kebajikan Masyarakat Daerah Segamat, Jalan Awang, 85000 Segamat, Johor.	Tel: 07-9311331 Fax: 07-9312598

Kelantan

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Jajahan Bachok, Lot PT 192, Kedai Beris, Kubur Besar, 16150 Bachok Kelantan.	Tel: 09-7640806 Fax: 09-7640807
2.	Pejabat Kebajikan Masyarakat Jajahan Gua Musang, Tingkat Bawah, Bangunan Wisma Persekutuan, 18300 Gua Musang, Kelantan.	Tel: 09-9122341 Fax: 09-9123353
3.	Pejabat Kebajikan Masyarakat Jajahan Jeli, Jalan Besar, 17600 Jeli, Kelantan.	Tel: 09-9440124 Fax: 09-9441053
4.	Pejabat Kebajikan Masyarakat Jajahan Kuala Krai, Tingkat Bawah, Bangunan Kerajaan Persekutuan, 18000 Kuala Krai, Kelantan.	Tel: 09-9666138 Fax: 09-9600964
5.	Pejabat Kebajikan Masyarakat Jajahan Machang, 18500 Machang, Kelantan.	Tel: 09-9751380 Fax: 09-9752242
6.	Pejabat Kebajikan Masyarakat Jajahan Pasir Puteh, 16800 Pasir Puteh, Kelantan.	Tel: 09-7866206 Fax: 09-7861384
7.	Pejabat Kebajikan Masyarakat Jajahan Tumpat, 16200 Tumpat, Kelantan.	Tel: 09-7257295 / 09-7254943(D/L) Fax: 09-7252297
8.	Pejabat Kebajikan Masyarakat Jajahan Kota Bharu, PT 423-425, Seksyen 17, Bandar Kota Bharu, 15050 Kota Bharu, Kelantan.	Tel: 09-7482124 Fax: 09-7432690
9.	Pejabat Kebajikan Masyarakat Jajahan Pasir Mas, Jalan Pasir Pekan, 17000 Pasir Mas, Kelantan.	Tel: 09-7908644 Fax: 09-7913299
10.	Pejabat Kebajikan Masyarakat Jajahan Tanah Merah, Lot PT 10515, Taman Perwira, Jalan Jedok, 17500 Tanah Merah, Kelantan.	Tel: 09-9580600 / 09-9580603 Fax: 09-9580602

Melaka

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Melaka Tengah, No. 36-1, Jalan KC 2, Kota Cemerlang, 75450 Ayer Keroh, Melaka.	Tel: 06-2324797 Fax: 06-2318867
2.	Pejabat Kebajikan Masyarakat Daerah Alor Gajah, Kompleks Penyayang Alor Gajah, Jalan Lesung Batu, 78000 Alor Gajah, Melaka.	Tel: 06-5561267 Fax: 06-5564134
3.	Pejabat Kebajikan Masyarakat Daerah Jasin, JC 170 & JC 171, Jalan Bunga Raya, Taman Bandar Baru, Jasin Bestari, 77200 Bemban, Melaka.	Tel: 06-5291285 Fax: 06-5293311

Negeri Sembilan

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Seremban, Kompleks Pentadbiran Daerah Seremban, Persiaran S2A2, Seremban 2, 70300 Seremban, Negeri Sembilan.	Tel: 06-6015798 Fax: 06-6015836
2.	Pejabat Kebajikan Masyarakat Daerah Jelevu, No. 2B, Tingkat 1, Bangunan Pusat Komersial Majlis Daerah Jelevu 71600 Kuala Klawang, Jelevu, Negeri Sembilan.	Tel: 06-6136428 Fax: 06-6136675
3.	Pejabat Kebajikan Masyarakat Daerah Jempol, Di Halaman Kompleks Pejabat Kerajaan, 72120 Bandar Sri Jempol, Negeri Sembilan.	Tel: 06-4581400 Fax: 06-4584637
4.	Pejabat Kebajikan Masyarakat Daerah Port Dickson, Bangunan Pejabat RISDA, Jalan Lama, 71000 Port Dickson, Negeri Sembilan.	Tel: 06-6471920 Fax: 06-6477527
5.	Pejabat Kebajikan Masyarakat Daerah Rembau, Tingkat 2, Kompleks Pentadbiran Daerah Rembau, 71300 Rembau, Negeri Sembilan.	Tel: 06-6851472 Fax: 06-6853451
6.	Pejabat Kebajikan Masyarakat Lorong PARR, Jalan Hj. Ahmad Zainuddin, Daerah Tampin, 73000 Tampin, Negeri Sembilan.	Tel: 06-4411646 Fax: 06-4431450
7.	Pejabat Kebajikan Masyarakat Daerah Kuala Pilah, No. 54 & 55, Pusat Komersial Melang, 72000 Kuala Pilah, Negeri Sembilan.	Tel: 06-4811163 Fax: 06-4817961

Perak

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Kinta, Jalan Selibin, 30100 Ipoh, Perak.	Tel: 05-2410986 / 05-2411767 Fax: 05-2410573
2.	Pejabat Kebajikan Masyarakat Daerah Kampar 2219, 2219A & 2219B, Jalan Timah, 31900 Taman Bandar Baru, Kampar Perak.	Tel: 05-4653133 Fax: 05-4653133
3.	Pejabat Kebajikan Masyarakat Daerah Batang Padang, No. 8 & 9, Pusat Perniagaan Tapah, Jalan Bidor, 35000 Tapah, Perak.	Tel: 05-4011069 Fax: 05-4016617
4.	Pejabat Kebajikan Masyarakat Daerah Hilir Perak, Lot 176 & 177, Jalan Intan 3, Bandar Baru Teluk Intan, 36000 Teluk Intan, Perak.	Tel: 05-6221986 Fax: 05-6219628
5.	Pejabat Kebajikan Masyarakat Daerah Bagan Datuk, No. 19A, Batu 10, Taman Desa Bernam Baru 36400 Hutan Melintang, Perak.	Tel: 05-6413021 Fax: 05-6413034
6.	Pejabat Kebajikan Masyarakat Daerah Hulu Perak, Tingkat 1, Kompleks Pejabat Kerajaan Negeri, Jalan Sultan Abdul Aziz, 33300 Gerik, Perak.	Tel: 05-7912314 Fax: 05-7912251
7.	Pejabat Kebajikan Masyarakat Daerah Kuala Kangsar, Jalan Raja Chulan, 33000 Kuala Kangsar, Perak.	Tel: 05-7761198 Fax: 05-7774529
8.	Pejabat Kebajikan Masyarakat Daerah Larut/Matang/Selama, Tingkat Bawah, Wisma Persekutuan, Jalan Istana Larut, 34000 Taiping, Perak.	Tel: 05-8073302 Fax: 05-8089763
9.	Pejabat Kebajikan Masyarakat Daerah Manjung, No. 69 & 71, Persiaran PM 3/3, Pusat Bandar Seri Manjung, Seksyen 3, 32040 Seri Manjung, Perak.	Tel: 05-6883110 Fax: 05-6884786

No.	Address	No.Tel./Fax
10.	Pejabat Kebajikan Masyarakat Daerah Kerian, No. 15 & 17, Jalan Bestari, Pusat Bandar Fasa II, 34200 Parit Buntar, Perak.	Tel: 05-7162645 Fax: 05-7161091
11.	Pejabat Kebajikan Masyarakat Daerah Perak Tengah, Aras 2, Kompleks Pentadbiran Daerah, Seri Iskandar, 32600 Bota, Perak.	Tel: 05-3712082 Fax: 05-3712082

Perlis

No.	Address	No.Tel./Fax
1.	Jabatan Kebajikan Masyarakat Negeri Perlis Tingkat Bawah, Kompleks Pejabat Kerajaan Negeri, 01000 Kangar, Perlis	Tel: 04-9731957 Fax: 04-9791401

Sabah

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Bahagian Kota Kinabalu Tingkat Bawah lot G-03 Tingkat 8 Lot 8-05 & 8-13 Menara Maa Lorong Api-Api Centre 88000 Kota Kinabalu	Tel: 088-269821
2.	Pejabat Kebajikan Daerah Kota Belud Lot 13 Blok C Kompleks Allapbana Wdt 4 89159 Kota Belud	Tel : 88976633
3.	Pejabat Kebajikan Daerah Putatan Lot3 Blok H Tingkat Bawah & Tingkat 1 Plaza Platinum Putatan 88869 Putatan	Tel: 088-734676
4.	Pejabat Kebajikan Daerah Penampang Bangunan Urusetia Pejabat Daerah Penampang P/S 320 89507 Penampang	Tel :088-702872
5.	Pejabat Kebajikan Daerah Ranau Wdt 108 89309 Ranau	Tel:088-870509
6.	Pejabat Kebajikan Daerah Tuaran Peti Surat 286 Tingkat Bawah Kompleks Mdt 89209 Tuaran	Tel: 088-788630
7.	Pejabat Kebajikan Daerah Tamparuli Wdt 4 89257 Tamparuli Sabah	Tel:088-782420
8.	Pejabat Kebajikan Daerah Papar Blok E Lot 30 Century Plaza Papar Peti Surat 352 89608 Papar	Tel:088-913090
9.	Pejabat Kebajikan Bahagian Keningau Peti Surat 112 89007 Keningau	Tel: 087-331224
10.	Pejabat Kebajikan Daerah Sook Bangunan Pejabat Daerah Kecil Sook Tingkat Bawah P/S 1455 89008 Keningau	Tel: 087-365614

No.	Address	No.Tel./Fax
11.	Pejabat Kebajikan Daerah Tambunan Wdt 12 89650 Tambunan	Tel:087-774324
12.	Pejabat Kebajikan Daerah Kemabong Peti Surat 352 89908 Tenom	Tel:087-733727
13.	Pejabat Kebajikan Daerah Nabawan Peti Surat 32 89957 Nabawan	Tel:087-366209
14.	Pejabat Kebajikan Daerah Tenom Peti Surat 190 89908 Tenom	Tel:087 736653
15.	Pejabat Kebajikan Bahagian Beaufort Tingkat 1 Bangunan Tabung Haji Ps 143 89807 Beaufort	Tel:087-225940
16.	Pejabat Kebajikan Daerah Kuala Penyu Wdt 14 89747 Kuala Penyu	Tel:087-884200
17.	Pejabat Kebajikan Daerah Menumbok 89767 Menumbok	Tel:087-831193
18.	Pejabat Kebajikan Daerah Sipitang Kedai Lppb Lot 12 Fasa 2 Peti Surat 124 89867 Sipitang	Tel:087-821486
19.	Pejabat Kebajikan Daerah Membakut Blok E Lot 30 & 31 Bangunan Kedai Membakutjaya 89728 Membakut Sabah	Tel:087-889864
20.	Pejabat Kebajikan Bahagian Tawau Tb14459 Kot A10-3 Grd 1st & 2nd Floor Km3 Jalan Air Panas Peti Surat 544 91008 Tawau	Tel:089-71314311
21.	Pejabat Kebajikan Daerah Kunak P/S 92 91207 Kunak	Tel:089-851208
22.	Pejabat Kebajikan Daerah Tungku P/S No 61424 91122 Lahad Datu	Tel:089-781622
23.	Pejabat Kebajikan Daerah Semporna Bangunan Urusetia Blok A2 Tingkat Bawah Wdt No 16 91308 Semporna	Tel:089-781748

No.	Address	No.Tel./Fax
24.	Pejabat Kebajikan Daerah Lahad Datu Aras Bawah Bangunan Urusetia Peti Surat 61424, 91122 Lahad Datu	Tel;089-881044
25.	Pejabat Kebajikan Bahagian Sandakan Wisma Urusetia Negeri Batu 7 90000 Sandakan	Tel:089-668494
26.	Pejabat Kebajikan Daerah Telupid P/S No.20 89300 Telupid Sabah	Tel:089-521150
27.	Pejabat Kebajikan Daerah Beluran Pejabat Daerah Kecil Paitan P/S 54 90107 Beluran	
28.	Pejabat Kebajikan Daerah Tongod P/S 142 89300 Telupid	Tel:087-748837
29.	Pejabat Kebajikan Daerah Kinabatangan Wdt 03 90200 Kota Kinabatangan	Tel:089-561873
30.	Pejabat Kebajikan Bahagian Kudat P/S 242 89058 Kudat	Tel:088-611798
31.	Pejabat Kebajikan Daerah Kota Marudu P/S 320 89108 Kota Marudu	Tel:088-661335
32.	Pejabat Kebajikan Daerah Pitas P/S 71 89108 Pitas	Tel:088-611785
33.	Pejabat Kebajikan Daerah Matunggong Tingkat Bawah Bangunan Urusetia Kecil Mantunggong Pos Mini Matunggong No.21 89058 Kudat	Tel:088-613798

Sarawak

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Bahagian Kuching, Aras 8, Majma Tuanku Abdul Halim Muadzam Shah, Lorong P.Ramlee 5 93400 Kuching, Sarwak	Tel: 082-507999/111 Fax: 082-507800
2.	Pejabat Kebajikan Masyarakat Bahagian Sibul, Wisma Sanyan, Tingkat 6, No. 1, Jalan Sanyan, 96000 Sibul, Sarawak.	Tel: 084-330675/332980 Fax: 084-348554
3.	Pejabat Kebajikan Masyarakat Bahagian Miri, Peti Surat 63, Jalan Puchong, 98007 Miri, Sarawak.	Tel: 085-419072 Faks: 085-432960
4.	Pejabat Kebajikan Masyarakat Bahagian Kota Samarahan, Tingkat Bawah, Bangunan Residen, 94300 Kota Samarahan, Sarawak.	Tel: 082-671191 Fax: 082-671710
5.	Pejabat Kebajikan Masyarakat Bahagian Sri Aman, Kompleks Penyayang, Blk 4 & 717 SL 78, Jalan Longround Sri Jaya Park 95000 Sri Aman	Tel: 083-321730 Fax: 083-322344
6.	Pejabat Kebajikan Masyarakat Bahagian Bintulu, Tingkat 2, Lot 2339-2341, BDA Shahida Commercial Centre, 97000 Bintulu, Sarawak.	Tel: 086-336494 Faks: 086-313675
7.	Pejabat Kebajikan Masyarakat Bahagian Sarikei, Wisma Negeri, Jalan Bangunan Kerajaan, 96100 Sarikei, Sarawak.	Tel: 084-651005 Fax: 084-657913
8.	Pejabat Kebajikan Masyarakat Bahagian Kapit, Tingkat 2, Bangunan Pejabat Kerajaan Negeri, 96800 Kapit, Sarawak.	Tel: 084-796152 Fax: 084-798518
9.	Pejabat Kebajikan Masyarakat Bahagian Limbang, Tingkat 5, Bangunan Limbang Plaza, 98700 Limbang, Sarawak.	Tel: 085-211930 Fax: 085-215292
10.	Pejabat Kebajikan Masyarakat Bahagian Betong, Tingkat Bawah, Blok C, Kompleks Pejabat Kerajaan Negeri,	Tel: 083-472216/471953/471969 Fax: 083-471796

No.	Address	No.Tel./Fax
	Kawasan Bandar Baru Betong, Jalan Setia Raja, 95700 Betong, Sarawak.	
11.	Pejabat Kebajikan Masyarakat Bahagian Mukah, Aras 1, Pusat Pentadbiran Baru Mukah, Lot 722-800 Jalan Wawasan, 96400 Mukah, Sarawak.	Tel: 084-873801 / 084-873871(D/L) Fax: 084-871930

Selangor

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Klang, Tingkat 1, Sayap Kanan, Wisma Persekutuan Klang, Persiaran Bukit Raja 1/KU 1, Bandar Baru Klang, 41150 Klang, Selangor.	Tel: 03-33413703 / 03-33413821 / 33413704(D/L) Fax: 03-33413748
2.	Pejabat Kebajikan Masyarakat Daerah Hulu Selangor, Lot 18, Seksyen 9, Jalan Rasathurai, 44000 Kuala Kubu Bharu, Selangor.	Tel: 03-60641430 Fax: 03-60645980
3.	Pejabat Kebajikan Masyarakat Daerah Petaling, Kompleks Pejabat Daerah/Tanah Petaling, Lot 37026, Persiaran Atmosfera, Seksyen U5, 40150 Shah Alam, Selangor.	Tel: 03-78422584 / 7 Fax: 03-78423190
4.	Pejabat Kebajikan Masyarakat Daerah Subang Jaya, No. 12, Jalan SS 15/4, 47500 Subang Jaya, Selangor.	Tel: 03-56343095 Fax: 03-56387479
5.	Pejabat Kebajikan Masyarakat Daerah Shah Alam, Tingkat 23, Bangunan Darul Ehsan, No. 3, Jalan Indah, Seksyen 14, 40000 Shah Alam, Selangor	Tel: 03-55102015 / 55100415 Fax: 03-55101872
6.	Pejabat Kebajikan Masyarakat Daerah Sepang, Kompleks Pentadbiran Daerah Sepang, Salak Tinggi, 43900 Sepang, Selangor.	Tel: 03-87061026 / 87065771 Fax: 03-87063735
7.	Pejabat Kebajikan Masyarakat Daerah Sabak Bernam, No. 16, 17 & 18, Jalan Gemilang 1, Taman Gemilang 2, 45300 Sungai Besar, Selangor.	Tel: 03-32242304 / 32244873 Faks: 03-32244140
8.	Pejabat Kebajikan Masyarakat Daerah Kuala Langat, No. 30, 32 & 34, Jalan Cemerlang 2, Pusat Perdagangan Banting, 42700 Banting, Selangor	Tel: 03-31871317/31803907/31813908 Fax: 03-31813118
9.	Pejabat Kebajikan Masyarakat Daerah Gombak, Lot 21-1 & 21-2, Jln. PPS 1, Pusat Perdagangan Selasih,	Tel: 03-61785731/61785931/61787331 Fax: 03-61785817

No.	Address	No.Tel./Fax
	68100 Batu Caves, Selangor.	
10.	Pejabat Kebajikan Masyarakat Daerah Hulu Langat, Lot 2-58, Kompleks Perhentian Kajang, Jalan Reko, 43000 Kajang, Selangor.	Tel: 03-87378007/87395070 Fax: 03-87379007
11.	Pejabat Kebajikan Masyarakat Daerah Kuala Selangor, Jalan Persiaran Pendidikan, 45000 Kuala Selangor, Selangor.	Tel: 03-32891495 Fax: 03-32896903

Terengganu

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Dungun, JKR 603, Bangunan Perpustakaan Lama, Jalan Tembesu, 23000 Dungun, Terengganu.	Tel: 09-8481205 Fax: 09-8481613
2.	Pejabat Kebajikan Masyarakat Daerah Besut, Tingkat 1, Bangunan Persekutuan, 22200 Kg. Raja, Besut, Terengganu.	Tel: 09-6956042 Fax: 09-6957003
3.	Pejabat Kebajikan Masyarakat Daerah Hulu Terengganu, 21700 Kuala Berang, Terengganu.	Tel: 09-6811315 Fax: 09-6811592
4.	Pejabat Kebajikan Masyarakat Daerah Kemaman, Aras 1, Bangunan Persekutuan, 24000 Bandar Kemaman, Chukai, Terengganu.	Tel: 09-8591686 Fax: 09-8583096
5.	Pejabat Kebajikan Masyarakat Daerah Marang, 21600 Marang, Terengganu.	Tel: 09-6182350 Fax: 09-6185487
6.	Pejabat Kebajikan Masyarakat Daerah Setiu, 22100 Bandar Permaisuri, Setiu, Terengganu.	Tel: 09-6099373 Fax: 09-6090371
7.	Pejabat Kebajikan Masyarakat Daerah Kuala Terengganu, Lot 4997, Tingkat Bawah, Mezzanine Satu dan Dua, Wisma Toh Si Cheng Gi She, Jalan Air Jernih, 20300 Kuala Terengganu, Terengganu.	Tel: 09-6312002 Fax: 09-6316517

Putrajaya

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Cawangan Putrajaya Aras 4, No. 55 Persiaran Perdana Persint 4, 62100 Putrajaya.	Tel: 03-83232598 Fax: 03-83232520

Kedah

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Kubang Pasu, Lot 2707, Jalan Kodiang, 06000 Jitra, Kedah.	Tel: 04-9171305 Fax: 04-9162617
2.	Pejabat Kebajikan Masyarakat Daerah Baling, 09100 Baling, Kedah.	Tel: 04-4700900 Fax: 04-4702225
3.	Pejabat Kebajikan Masyarakat Daerah Bandar Baru, JKR 589, Jalan Selama, 09800 Serdang, Kedah.	Tel: 04-4076131 Fax: 04-4077254
4.	Pejabat Kebajikan Masyarakat Daerah Kuala Muda, Kompleks Penyayang Sungai Petani, 08000 Sungai Petani, Kedah.	Tel: 04-4204900 Fax: 04-4212230
5.	Pejabat Kebajikan Masyarakat Daerah Kulim, 09000 Kulim, Kedah.	Tel: 04-4907403 Fax: 04-4957327
6.	Pejabat Kebajikan Masyarakat Daerah Pulau Langkawi, No. 12 & 13, Kompleks Perniagaan Kelibang, Jalan Padang Mat Sirat, 07000 Kuah, Langkawi.	Tel: 04-9666325 Fax: 04-9672579
7.	Pejabat Kebajikan Masyarakat Daerah Padang Terap, No. 7 & 8, Jalan Sapura 1, Taman Desa Sapura, 06300 Kuala Nerang, Kedah.	Tel: 04-7866466 Fax: 04-7865801
8.	Pejabat Kebajikan Masyarakat Daerah Pendang, No. 1/1A, Wisma Hj. Salleh, Darsvill Park, Seberang Pendang, 06700 Pendang, Kedah.	Tel: 04-7596235 Fax: 04-7592896
9.	Pejabat Kebajikan Masyarakat Daerah Sik, No. 1A, 1B & 2B, Bangunan Melati, 08200 Sik, Kedah.	Tel: 04-4690230/1 Fax: 04-4690232
10.	Pejabat Kebajikan Masyarakat Daerah Yan, No. 1&2, Taman Desa Murni, Jalan Jenun, 08800 Guar Chempedak, Kedah.	Tel: 04-4619510 Fax: 04-4687780
11.	Pejabat Kebajikan Masyarakat Daerah Kota Setar,	Tel: 04-7202370 Fax: 04-7349728

No.	Address	No.Tel./Fax
	Bangunan JKR, Tingkat Bawah, Jalan Sultan Badlishah, 05564 Alor Setar, Kedah.	
12.	Pejabat Kebajikan Masyarakat Daerah Pokok Sena No. 197 & 198, Taman Angsana, 06400 Pokok Sena, Kedah	Tel: 04-7821915/16 Fax: 04-7821581

Pulau Pinang

No.	Address	No.Tel./Fax
1.	Pejabat Kebajikan Masyarakat Daerah Timur Laut, Kompleks Masyarakat Penyayang, Jalan Utama, 10460 Pulau Pinang.	Tel: 04-2264531/04-2281049 Fax: 04-2272537
2.	Pejabat Kebajikan Masyarakat Daerah Seberang Prai Utara, Aras 3, Zon A, Wisma Persekutuan Seberang Perai Utara, Jalan Bertam, 13200 Kepala Batas, Pulau Pinang	Tel: 04-5758715/6 Fax: 04-5758710
3.	Pejabat Kebajikan Masyarakat Daerah Barat Daya, Kompleks Pasar Awam, Bangunan MPP, 11000 Balik Pulau, Pulau Pinang.	Tel: 04-8668442 Fax: 04-8663536
4.	Pejabat Kebajikan Masyarakat Daerah Seberang Prai Selatan, Tingkat 1, Blok B, Pentadbiran Kerajaan Sungai Jawi, 14200 Sg. Jawi, Seberang Prai Selatan, P. Pinang.	Tel: 04-5821798 Fax: 04-5825191
5.	Pejabat Kebajikan Masyarakat Daerah Seberang Prai Tengah, Tingkat 2, Wisma Hock Teik, No. 1778, Jln. Ciku, 14000 Bukit Mertajam.	Tel: 04- 5382584/5385659/5385705/7 Fax: 04-5383670

List of NGOs providing services for people with autism and PWDs

The list below is a compilation of non-profit organisations as well as Government's institutions that are providing services mainly intervention programs to people with autism and other categories of PWDs. This list is taken from the website of Malaysian CARE (www.malaysiancare.org), a social work NGO in Malaysia. The listing is only for reference purposes and except for Government's institutions, does not indicate the Government's endorsement towards the NGOs listed.

Kuala Lumpur

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	Association of Families Support Group Cheras (Persatuan Kumpulan Sokongan Keluarga Cheras)	No. 30, Jalan Damai Rasa 2, Alam Damai, 57000 Cheras, Kuala Lumpur	Khor Sor Li, Coordinator	Phone: 014-6672012 03-91002017	fsgcheras@gmail.com ail.com	Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
2.	B'hive Playgroup	Wisma FGA (Full Gospel Assembly), Lot 689, Taman Goodwood,	Eileen Chan	Phone: 016-2719960 Fax: 03-79817426	bleichan165@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy,	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		Jalan Kuchai Lama, Off Jalan Kelang Lama, 58200 Kuala Lumpur				Developmental Delay, Down Syndrome, Intellectual Disability	
3.	Beacon Life Training Center	16-1, Jalan 6/62A, Bandar Menjalara, 52200 Kuala Lumpur	Aly Cheah, Principal/Founder	Phone: 012-3952063	cheahalystel@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
4.	Bloomers Training House	1-1, 2-1, No. 86A, Jalan Mutiara Barat 6, Taman Taynton View, 56000 Cheras, Kuala Lumpur	Choon Lai Fong, Managing Director	Phone: 010-7913511 03-95452683	bloomershousel@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
5.	Central Welfare Council Peninsular Malaysia (Majlis Pusat Kebajikan Semenanjung Malaysia)	2-A, Lorong Syed Putra Kiri, Off Jalan Syed Putra, 50460 Kuala Lumpur	Dato' Hajah Maskidas Junaidah, President	Phone: 03-22743714 Fax: 03-22734279			Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
6.	Fcc Teach (M) Sdn Bhd	94A, Jalan Pandan Indah 4/6B, Pandan Indah, 52300 Kuala Lumpur	Pastor Peter Chin, Director	Phone: 03-42804635 012-6858087	peesea.pc@hotmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Dyslexia	Non-Profit
7.	Full Gospel Assembly Parents Support Group For Children With Special Needs (Psg)	Wisma FGA (Full Gospel Assembly) Lot 689, Taman Goodwood, Jalan Kuchai Lama, Off Jalan Kelang Lama, 58200 Kuala Lumpur	Chew Wai Sze, Head of PSG	Phone: 03-79814755 Fax: 03-79817426	psg.fgakl@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
8.	National Autism Society Of Malaysia (Nasom), Jalan Ipoh	No. 2, Jalan 7/18B, Taman Batu Permai, Off Jalan Ipoh, 51200 Kuala Lumpur	Kartini Bt. Abu	Phone: 03-62574385 Fax: 03-62574385	kjalajpoh@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
9.	National Council For The Mentally Handicapped (Majlis Kebangsaan Bagi Orang-Orang	c/o Wisma Harapan, 522 Jalan Sultan Abdul Samad,	T. Kamaraj. Honorary General Secretary	Phone: 03-22741475 Fax: 03-22734933		Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
	Terencat Akal (Malaysia)	50470 Brickfields, Kuala Lumpur				Autism Spectrum Disorder (ASD), Down Syndrome, Developmental Delay	
10.	Persatuan Kebajikan Sri Eden Selangor Dan Kuala Lumpur	No. 43, Jalan Tiram, Taman Mutiara Barat, Cheras, 56000 Kuala Lumpur	Aimee Chan, Principal	Phone: 03-91308081 Fax: 03- 1308081	srieden@ymail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
11.	Pertubuhan Pusat Penyayang Langkah Awal (Association Of Early Steps Care Centre)	No. 5, Jalan Mutiara Barat 1, Taman Mutiara Barat, 56000 Kuala Lumpur	Jacklyn Ong, Chairperson	Phone: 03-91339966 Fax: 03- 91315907	earlystepsccc@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
12.	Pusat Jagaan Harian Melawati (Pjhm)	PJHM (Vocational & Job Training Centre)	Dr. Madhya Zhengan, Director/ Consultant Mr. Jason Wasu, Chairman	Phone: 014-2214187		Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		For Adults & Adolescents with Autism & Learning Difficulties, No 311-A Lorong Kedah, Melawati Square, 50100 Taman Melawati, Kuala Lumpur				Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	
13.	Pusat Pembangunan Potensi Cads (Cads Enhancement Centre)	JKR 2925, Jalan Persiaran Ledang, Off Jalan Duta, 50480 Kuala Lumpur	Azura Aziz, Principal	Phone: 03-20951218 Fax: 03-20951219	cadscentre@cadre4cads.my cadscentre2011@gmail.com	Cerebral Palsy, Dyslexia, Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome	Non-Profit
14.	S.P.I.C.E.S. (Support For Parents, Infants & Children Through Early Services)	B-0-10, Vista Wira 2, Jalan 4/27A, Section 2, Wangsa Maju, 53300 Kuala Lumpur	Wong Hui Min, Administrator/Teacher	Phone: 0341498032 Fax: 03-41498376	info@spices.org.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome	Non-Profit
15.	Selangor And Federal Territory Association For The Mentally Handicapped	Wisma Harapan, 522, Jalan Sultan Abdul Samad, 50470 Brickfields,	T. Kamaraj, Manager	Phone: 03-22741457 03-22741475 Fax:	wismaharapanki@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		Kuala Lumpur		03-22734933		Autism Spectrum Disorder (ASD), Down Syndrome, Intellectual Disability	
16.	Selangor Association For Mentally Handicapped (Samh) Jinjang North	c/o Canossa Welfare Centre, Lot 7645, Jalan Sekolah, Jinjang North, 5200 Kuala Lumpur		Phone: 03-62500760		Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Dyslexia, Autism Spectrum Disorder	Non-Profit
17.	Selangor Association For Mentally Handicapped (Samh) Jinjang South Sheltered Workshop	Lot 2 & 3, Jalan Jambu Gajus 2, Jinjang Selatan, 52000 Kuala Lumpur	Zainab	Phone: 03-62587564 Fax: 03-62587564		Developmental Delay, Down Syndrome	Non-Profit
18.	D Garden Chrysalis Sdn Bhd	40-1, Jalan Damai 1, Alam Damai, 56000 Cheras, Kuala Lumpur	Pastor Peter Chin, Director	Phone: 03-91053193		Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome	Profit / Business

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
19.	Care Speech And Language Therapy Centre	Suite B-13A-6, Tower B, Level 13A, Megan Avenue 2, 12, Jalan Yap Kwan Seng, 50450 Kuala Lumpur	Jennifer Peters, Consultant Speech Pathologist/ Director	Phone: 03-21616618 Fax: 03-21617617	enquiries@care.speech.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Hearing Impairment, Intellectual Disability	Profit / Business
20.	Kits4kids Malaysia – Kits4kids@KI.Bangsar	No. 9, Level 1 & 2, Lorong Maarof, 59000 Kuala Lumpur	Isabelle Chu, Managing Director	Phone: 016-3608815 03-22023309 Fax: 03-20938815	enquiryki@kits4kids.org	Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Profit / Business
21.	Fga S.T.A.N.I.D. Production Workshop	Room 7, Level 4, Wisma FGA, 11 Jalan Peria, Taman Goodwood, Jalan Kuchai Lama, Off Jalan Kelang Lama, 58200 Kuala Lumpur	Anna Lum Ho Lin Mur, Trainer	Phone: 01223235702 017 - 638972 Fax: 03-79817426	holinmur@gmail.com	Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	
22.	Institut Masalah Pembelajaran &	No. 4, Persiaran Titiwangsa,	Chitra Jayarajah, Acting Principal	Phone: 03-40220308	impianautism@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit	Non Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
	Autisme Malaysia (Impian)	Taman Tasik Titiwangsa, 53200 Kuala Lumpur	Datin Dr. Mangalaveni Karthigasu, Chairperson	Fax: 03-40322308		Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	

Selangor

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	Asperger Development Malaysia Berhad	No. 11C (3rd floor), Jalan 52/10, 47800 Petaling Jaya, Selangor	Loong Sook Leng, Secretary	Phone: 017 - 3990063	loongsl@yahoo.com	Autism Spectrum Disorder (ASD)	Non-Profit
2.	Beautiful Gate Foundation For The Disabled – Puchong	No. 17, Jalan TPP 1/36, Taman Perindustrian Puchong, 47100 Puchong, Selangor	Ng Chung Chiat, Manager	Phone: 03 - 80600072 Fax: 03 - 80520642	puchong@beautifulgate.org.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Dyslexia, Intellectual Disability	Non-Profit
3.	Bethel Early Intervention Centre	No. 5, Jalan Kenari 10, Bandar Puchong Jaya, 47100 Puchong Jaya, Selangor	Agnes Christian, Coordinator	Phone: 03 - 80753078 Fax: 03 - 79578548	stpauldte@yahoo.com, dapo1818@hotmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
4.	Bridges Eip	Heritage Centre, No. 3, Jalan 13/6, Seksyen 13, 46200 Petaling Jaya, Selangor	Rachel Tsan, Manager	Phone: 03 - 79552473	bridgeseip@hotmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
5.	Centre For Comprehensive Cognitive-Occupational Therapeutic (Cencot)	No. 130, Jalan Tiong, Taman Orkid, 41050 Klang, Selangor	Dr. Madhya Zhengang, Director	Phone: 012- 3076830	madhya_zhengan@yahoo.com, pjhm2012@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia,	Non-Profit
6.	Challenges Foundation	Room 7, Level 1, Bangunan Secita 4A, Jalan SS5D/6, Kelana Jaya,	Mary Wong Mei Li, Trustee	Phone: 03-8875747 Fax: 0378875747	challengesfoundation2016@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		47301 Petaling Jaya, Selangor				Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Hearing Impairment, Intellectual Disability, Others, Physical Impairment, Visual Impairment	
7.	Creative Arts Centre (Nasom)	Unit 25-4, Setia Avenue, Jalan Setia Prima SU13/F, Setia Seksyen U13, Setia Alam, 40170 Shah Alam, Selangor	Nor Huda Zakaria	Phone : 0333590988 0333593987 Fax: 0333432279	cac@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
8.	Dignity & Services	Leisure Commerce Square, Block A2, Unit 126, Level 1, Jalan PJS 8/9, Bandar Sunway,	Helen Teh, Executive Director	Phone: 0378653151 Fax: 0378653151	dns.dignityandservices@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD),	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		46150 Petaling Jaya, Selangor				Developmental Delay, Down Syndrome, Intellectual Disability	
9.	Emmanuel Care Centre	Block D2, 5-4, Jalan PJU 1/39, Blok D, Dataran Prima, 47301 Petaling Jaya, Selangor	Amy Kyo, Head Teacher	Phone: 0378065660 0378065661 Fax: 0378065662	eccemcpi@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
10.	Enabling Academy	No. 53-61, Jalan SS22/23, Damansara Jaya, 47400 Petaling Jaya, Selangor	Yeo Swee Lan, Manager	Phone: 0377108800	enablingacademy@gmail.com amuda.com.my	Autism Spectrum Disorder (ASD)	Non-Profit
11.	First Light Resource (A Collaboration Between Nasom & Sp Setia Foundation)	Unit 25-4, No. 2, Jalan Prima SU13, Setia Alam, 40170 Shah Alam, Selangor	Nurul Asma, Coordinator	Phone: 0333415335	fristlight@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
12.	Generation Impact Berhad (Genpact)	No. 35-2, Jalan Bacang 17, Taman Seri Jarom, 42600 Jenjarom, Selangor	Laynah Tan, Administrator	Phone: 0331911030 0166683482	genpact08@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay	Non-Profit
13.	Impian Residential Care Home	No. 1, Jalan 10/10C, Seksyen 10, 46000 Petaling Jaya, Selangor	Dr. Madhya Zhengan, Director	Phone: 0142214187	pjhm2012@gmail.com madhya_zhengan@yahoo.com	Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Hearing Impairment, Intellectual Disability, Physical Impairment	Non-Profit
14.	Lifepoint Social Club	No. 14, Jalan SS 13/3A, 47500 Subang Jaya, Selangor	Mrs. Teoh	Phone: 0162633258 (after 2pm) Fax: 0356379519	irenekee123@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
						Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	
15.	Lovely Disabled Home	No. 1, Jalan SS2/5, 47300 Petaling Jaya, Selangor	Nichole Yap Siew Han, Secretary	Phone : 0378739622 Fax: 0378745870	Email: admin@lovelydisabledhome.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Hearing Impairment, Intellectual Disability	Non-Profit
16.	Makasih Family Support & Resource Center C/O City Discipleship Presbyterian Church	W-10-3, Subang Square Business Centre, Jalan SS15/4G, 47500 Subang Jaya, Selangor.	Pastor Yee Siew Meng, Ministry Leader Social Concern	Phone : 0356212844 Fax: 0356212846	makasih2u@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
			Joyce Tang			Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	
17.	Malaysian Music Therapy Association (Mmta)	c/o Music Therapy Department Absolute Music Performing Arts Center (AMPAC), No. D-2-23, 23, Jalan 1A/20B, Dataran Ara Damansara, 47301 Petaling Jaya, Selangor	Dr. Indra V. Selvarajah, President		malaysiammta@gmail.com indra_selvarajah@outlook.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability, Mental Health, Physical Impairment	Non-Profit
18.	Nasom One-Stop Centre	Unit 25A-5, Setia Avenue, Jalan Setia Prima SU13/F, Seksyen U13, Setia Alam,	Siti Mariyam, Manager Grace Liew, Senior Psychologist	Phone : 0333590988 0333593987 Fax: 0333432279	cac@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		40170 Shah Alam, Selangor					
19.	National Autism Society Of Malaysia (Nasom) – General Enquiries	E-01-03A, Block E, Jalan PJU1A/41B, NZX Commercial Centre, 47300 Petaling Jaya, Selangor	Siti Mariyam, Manager	Phone: 0378868233 0378868986 Fax: 0378869923	info@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
20.	National Autism Society Of Malaysia (Nasom), Klang	No. 5, Lorong Sepat 2, Taman Bertek, Telui Pulai, 41300 Klang Selangor	Rajeswary Karuppiah, Coordinator	Phone: 0333732991 Fax: 0333732991	klang@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
21.	National Autism Society Of Malaysia (Nasom), Petaling Jaya	No.10, Jalan Mewah 6/9, Seksyen 6, 46000 Petaling Jaya, Selangor	Ambiga, Coordinator	Phone: 0377816981 Fax: 0377816981	pj@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
22.	Persatuan Kanak-Kanak Istimewa Ampang (Special Children Society Of Ampang)	386, Jalan 3, Taman Ampang Utama, 68000 Ampang, Selangor	Christine Wong, President	Phone: 0342568719 Fax: 0342575157	enquiry.scsoa@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Down Syndrome, Intellectual Disability	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
23.	Persatuan Kanak-Kanak Istimewa Kajang Selangor – Pkik Worklinik	No. 17, Seksyen 2/14, Taman Kajang Utama, 43000 Kajang, Selangor	Kong Lan Lee, Director	Phone: 0387366385 Fax: 0387335012	pkik507@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
24.	Persatuan Kanak-Kanak Istimewa Kajang Selangor (Pkik)	No. 17, Seksyen 2/14, Taman Kajang Utama, 43000 Kajang, Selangor	Kong Lan Lee, Director	Phone: 0387366385 Fax: 0387335012	pkik507@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
25.	Persatuan Orang Kurang Upaya Bangsa	No. 584, Jalan 17/17, Seksyen 17, 46400 Petaling Jaya,	Molly Heng, Secretary	Phone: 0379600560	bangsaria@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
	Ria Kuala Lumpur Dan Selangor	Selangor.				Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Hearing Impairment, Intellectual Disability, Physical Impairment, Visual Impairment	
26.	Persatuan Penjagaan Dan Latihan Kanak-Kanak Autistik Hua Ming Wpkl & Sel	No. 25, Jalan Sri Manja 12 (PJS 3/47), Taman Sri Manja, Batu 6 3/4, Off Jalan Klang Lama, 46000 Petaling Jaya, Selangor	Chan Shiu Sum, Principal	Phone : 0377702080 Fax: 0377703080	hmas@autism.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
27.	Pertubuhan Pendidikan Kanak-Kanak Istimewa Harmoni Cheras, Selangor	Lot 1101, Jalan Sekolah, Batu 11 Cheras, 43200 Kajang, Selangor	Chin Kee Fui, Teacher; Yong Yoon Yen, Principal	Phone: 0389347898 0129023957	tadikaharmoni@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD),	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
28.	Selangor Association For Mentally Handicapped (Samh) Cheras	No. 77, Jalan Pakis 2, Taman Cuepacs, Fern Grove, 43200 Cheras, Selangor	Nor Hayati, Head Teacher	Phone : 0390759530 Fax: 0390759530	wisma_harapan@ya.hoo.com	Developmental Delay, Intellectual Disability Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Dyslexia, Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome	Non-Profit
29.	Selangor Association For Mentally Handicapped (Samh) Klang	Lot 43416, Persiaran Tengku Ampuan Rahimah, 41200 Klang, Selangor	Rohani Ramli, Principal	Phone : 0333714176 Fax: 0333714176		Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Dyslexia, Autism Spectrum Disorder (ASD), Developmental Delay,	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
30.	Society For Persons With Learning Difficulties Dayspring Selangor	No. 4, Solok Limau, Taman Meru, 41050 Klang, Selangor	Lim Hock Lai, Chairman	Phone: 0333427467 Fax: 0333449184	dayspring Selangor@yahoo.com	Down Syndrome Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
31.	Special Needs Learning Centre	No. 10, Jalan 4/53, Section 4, 46250 Petaling Jaya, Selangor	Rita Anthony, Coordinator	Phone: 0377727779 0320780239 / 1570 Fax: 0320781560	snlcbukitnanas@gmail.com	Autism Spectrum Disorder (ASD)	Non-Profit
32.	Subang Jaya Assembly Of God Parent Support Group	No. 14, Jalan SS 13/3A, Subang Jaya, 47500 Selangor	Rev. Wong Yin Ming, Senior Pastor	Phone: 0356347706 Fax: 0356379519	sjaog@hotmail.com	Developmental Delay, Autism Spectrum Disorder (ASD)	Non-Profit
33.	United Voice	603, Jalan 17/12, 46400 Petaling Jaya, Selangor	Yeong Moh Foong, PR & IT Coordinator	Phone: 0379540701	unitedvoiceinfo@gmail.com il.com	Cerebral Palsy, Developmental Delay,	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
				Fax: 0379588069		Autism Spectrum Disorder (ASD), Dyslexia, Down Syndrome, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD)	
34.	Yayasan Kebajikan Yireh (Yireh.Love Foundation)	56-2&3, Jalan Puteri 1/2, Bandar Puteri, 47100 Puchong, Selangor	Wong Ming Chang, President (6012-2070364) Loke Hong Peng, Vice President (6012-3866181) How Chin Yet, Secretary (6012-2140210) Lau Thim Khoon, Vice	Phone: 0389992140 Fax: 0389992140	yireh.lovefoundation@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
35.	Bengkel Daya Klang	Persiaran Tengku Ampuan Rahimah, KM 4 Jalan Batu Unjur, 41200 Klang, Selangor	Secretary (6012-2181191) Muhammad Azhar Bin Salleh, Assistant Manager	Phone: 033322159 0197769594 Fax: 0333221531	bd_klang@jkm.gov.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Cerebral Palsy, Down Syndrome, Hearing Impairment, Intellectual Disability, Physical Impairment	Government
36.	Taman Sinar Harapan Cheras	KM 18, Jalan Cheras, 43000 Kajang, Selangor	Principal	Phone: 0389255664 0389255697 Fax: 0387373560	tsh_cheras@jkm.gov.my	Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Down Syndrome, Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay	Government: Homes

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
37.	Glen Stream (M) Sdn Bhd	41-B, Jalan SS2/75, 47300 Petaling Jaya, Selangor	Anna Wong Mei Leng, Director/ Founder	Phone: 0378737413 0123723776 Fax: 0378737413	annawong@senses-at-play.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Profit / Business
38.	Kits4kids Malaysia – Kits4kids@Kota Damansara	No. 33-2, 1st Floor, Jalan Cecawi, 6/19A, Kota Damansara, 47810 Petaling Jaya, Selangor	Isabelle Chu, Managing Director	Phone: 0361563831 Fax: 0320938815	Email enquirykl@kits4kids.org	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Profit / Business
39.	Kits4kidsmalaysia – Kits4kids@Kajang	No. 28-1, Jalan Prima Saujana 1/1A,	Isabelle Chu, Managing Director	Phone: 0387416815	enquirykl@kits4kids.org ,	Attention Deficit Disorder (ADD) / Attention Deficit	Profit / Business

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		Taman Prima Saujana, Seksyen 1, 43000 Selangor			chuyuetwei@kits4kids.org	Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	
40.	Pusat Latihan Kanak- Kanak Istimewa Pelita	No. 1, USJ 12/1A, 47630 Subang Jaya, Selangor	Joyce George, Owner	Phone : 012 2905304		Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Profit / Business
41.	Speech Beacon	29, Jalan Wawasan 2/5, Taman Wawasan, Pusat Bandar Puchong,	Lee Kong Meng, Director	Phone : 0380901497 Fax: 0380901497	info@speechbeacon.com	Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome,	Profit / Business

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		47160 Puchong, Selangor				Intellectual Disability	
42.	Turning Point Integrated Wellness Sdn Bhd	10-2 & 10-3, Jalan Puteri 2/4, Bandar Puteri, 47100 Puchong, Selangor	Wilson Tee Eng Kau, CEO	Phone: 0380638981 0380514518 Fax: 0380637981	consult@turningpoint.org.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Dyslexia, Intellectual Disability	Profit / Business
43.	Ideas Autism Centre (Iac)	No. 9, Jalan Bukit Templer, Taman Bukit Templer, 48000 Rawang, Selangor	Tricia Yeoh, IDEAS Chief Operating Officer (0362018896/8897) Sharifah Salleh, IDEAS Autism Centre Principal (603 - 60917330)	Phone: 0360917330 0360218896 (IDEAS office) Fax: 0360917330, 0362012001 (IDEAS office)	tricia@ideas.org.my sharifahsalleh@ideas.org.my	Autism Spectrum Disorder (ASD)	

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
44.	Shine Guidance Centre	Jaya One, 11-99-2, Block H, No. 72A, Jalan Universiti, 46200 Petaling Jaya, Selangor	Josephine Chan, Administrator	Phone: 0379608809 0379609809 Fax: 0379606809	josephine@shine.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	
45.	Teo Therapeutic Centre	28, Jalan SS2/100 47300 Petaling Jaya Selangor	Teo Lee Fun	Phone: 0377274503 0123155326		Cerebral Palsy, Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Dyslexia, Developmental Delay, Down Syndrome, Autism Spectrum Disorder (ASD)	
46.	The Vineyard	No. 59, Jalan BU 4/7, Bandar Utama,	Emily Lee, Teacher	Phone: 0377288184		Autism Spectrum Disorder (ASD),	Home Schools

No	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		47800 Petaling Jaya, Selangor		0123316923		Dyslexia	
47.	Touch 'N Grow Community Support	No. 1, Jalan Anggerik Eria 31/107, Kota Kemuning, 40460 Shah Alam, Selangor	Chu Ooi Lin, Principal	Phone: 0351212973 0123122403	chuooolin@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Dyslexia	Home Schools

Perak

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
1.	Beautiful Gate Foundation For The Disabled – Kampar	1603, Jalan Intan, Taman Bandar Baru, 31900 Kampar, Perak	Ps. Rachel Tan	Phone 05 - 4658162 Fax: 05 - 4658162	kampar@beautifulgate.org.my	Autism Spectrum Disorder (ASD), Cerebral Palsy, Down Syndrome, Dyslexia, Intellectual Disability, Physical Impairment	Non-Profit
2.	Bethany Home	Simpang Empat, 36400 Hutan Melintang, Perak	Rev. Karthik Sibanyanam, Director	Phone: 05 - 6411276 Fax: 05 - 6412633	2bethanyhome@gmail.com , director@bethanyhome.org.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Hearing Impairment, Intellectual Disability, Physical Impairment	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
3.	Child Society	236, Jalan Taman Kerjasama, Taman Kerjasama, 34000 Taiping, Perak	Dolly Tan, Head Teacher	Phone: 05 - 8060667 05 - 8060667	child.society@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
4.	Child Society	236, Jalan Taman Kerjasama, Taman Kerjasama, 34000 Taiping, Perak	Dolly Tan, Head Teacher	Phone: 05 - 8060667 05 - 8060667	child.society@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
5.	Kilang Perlindungan Semangat Maju (Perak	No. 5, Persiaran Bercham 11,	Ahmad Jais, Supervisor	Phone: 05 - 5498271		Attention Deficit Disorder (ADD) / Attention Deficit	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
	Association For Intellectually Disabled)	Off Jalan Bercham, Kawasan Perindustrian Ringan Bercham, 31400 Bercham, Ipoh, Perak		Fax: 05 - 5498271		Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	
6.	National Autism Society Of Malaysia (Nasom), Ipoh	No. 6 & 8, Taman Tingkat Ipoh 1, Ipoh Garden South, 31400 Ipoh, Perak	Salina Bt. Safii, Coordinator	Phone: 05 - 5483570 Fax: 05 - 5483570	ipoh@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
7.	New Horizons Society For Services To Children With Disabilities – Canning Centre	3, Jalan Kucing, Taman Canning, 31400 Ipoh, Perak	Michelle Cheng, Chairperson	Phone: 05 - 5460949 Fax: 05 - 5496627	nhsociety@hotmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
8.	Persatuan Daybreak Untuk Kebajikan Orang-Orang Cacat Kinta, Perak	Lot 75242, Jalan Pulai, RPT Pengkalan Pegoh, 31500 Lahat, Perak	Michael Fernando (General Manager)	Phone: 05 - 3235908 05 - 3235909 Fax: 05 - 3235910	info@daybreak.org.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Hearing Impairment, Intellectual Disability, Physical Impairment	Non-Profit
9.	Persatuan Kebajikan Bagi Orang Istimewa Kampar	6019 & 6020, Jalan Angkasa 1, Taman Angkasa, 31900 Kampar, Perak	Liew Keng Foo, Chairman; Carol Shahila, Rehabilitation Manager	Phone: 05 - 4661568 Fax: 05 - 4661568	kamparcentre@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome,	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
10.	Persatuan Kebajikan Orang-Orang Kurang Upaya Daerah Perak Tengah	JKR 107, Jalan Haji Wahab, 32800 Parit, Perak	Tuan Haji Mokhtar B. Mat Deris, Chairman	Phone: 05 - 3773776		Intellectual Disability, Physical Impairment Developmental Delay, Cerebral Palsy, Autism Spectrum Disorder (ASD), Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Down Syndrome, Intellectual Disability, Physical Impairment	Non-Profit
11.	Ohana Association Ipoh, Perak	164, Jalan Perajuri 7, Taman Ipoh Timur, 31400 Ipoh, Perak	Emily Loo, Centre Manager	Phone: 0195582633	ohanaipoh@hotmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD)	Non-Profit
12.	Ray Of Hope	24 & 26, Persiaran	Datin Mary Yeoh, AMP & Chairman	Phone: 05-5488796	ray.of.hope.ngo@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
		Bercham Selatan 31, Taman Sri Kurau, Bercham, 31400 Ipoh, Perak		05-5456832 Fax: 05-5488796		Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	
13.	Sekolah Semangat Maju Batu Gajah (Perak Association For The Intellectually Disabled)	49, Jalan Sulaiman, 31000 Batu Gajah, Perak	Aida Hayati, Head Teacher Dr. Chew Teik Chye, Chairperson	Phone : 05-3657098 Fax: 05-3657098	aidahayatingahrabu@yahoo.com.my	Cerebral Palsy, Developmental Delay, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Down Syndrome, Intellectual Disability	Non-Profit
14.	Sekolah Semangat Maju Sitiawan (Perak Association For The Intellectually Disabled)	No. 75, Jalan Datuk Ahmad Yunus, 32000 Sitiawan, Perak	Head Teacher	Phone : 05-6922773 Fax:	ssm_sitiawan@yahoo.com	Cerebral Palsy, Developmental Delay, Attention Deficit Disorder (ADD) / Attention Deficit	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
				05-6922773		Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Down Syndrome, Intellectual Disability	
15.	Yayasan Sultan Idris Shah	Lot 158413, Lorong Bercham 11, Bercham, 31400 Ipoh, Perak	K. Regina, Administrator	Phone: 05-5481905 05-5486750 Fax: 05-5481066	ysisipoh@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability, Physical Impairment	Non-Profit
16.	Ct Training And Development	No. 1, Jalan Camay, Camay Park, 31650 Ipoh, Perak	Carol Thong, Principal	Phone: 0126738422	carolthong_cc@hotmail.com	Autism Spectrum Disorder (ASD), Developmental Delay, Dyslexia	

Melaka

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	National Autism Society Of Malaysia (Nasom), Melaka	Bistari Negeri Melaka, No. 28 & 48, Jalan Bukit Peringgii, 75400 Melaka	INorhaya Sulaiman, Coordinator	Phone: 06 - 2882518 Fax: 06 - 28822518	[152]@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
2.	Persatuan Kebajikan Insan Istimewa Melaka	55, Jalan SP 4, Taman Semabok Perdana, 75050 Semabok, Melaka	Parames Anand, Director	Phone: 06 - 2865572 Fax: 06 - 2865570	joyworkshopmelaka@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
3.	Pusat Kanak-Kanak Terencat Akal Bahagia (Happiness Centre For The Mentally Disabled Children)	4803-C, Taman Anggerik, Jalan Limau 1, Klebeng Kecil, 75200 Melaka	Nancy Elizabeth, Administrator	Phone: 06 - 3364561 06 - 3358487 Fax:	pkktab_happiness@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD),	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
				106 - 3364564		Cerebral Palsy, Developmental Delay, Down Syndrome, Hearing Impairment, Intellectual Disability, Physical Impairment, Visual Impairment	
4.	The Salvation Army Hopehaven Centre For Special Children	321, Jalan Parameswara, 75000 Melaka	Elaine Wong, Supervisor	Phone: 062832101 06 2882693 Fax: 062832101	hopehaven_centre@smm.salvationarmy.org	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non Profit
5.	Wings Melaka	440-C, Jalan Tengker, 75200 Melaka	Joyce Lim Yee Lin, Administrator	Phone: 06-862926 Fax: 062862926	contact@wingsmelaka.org.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
6.	Intowork Melaka	55-1, Jalan SP 4, Taman Semabok Perdana, 75050 Semabok, Melaka	Parames Anand, Director	Phone: 0628665572 Fax: 0628665570	intoworkconsultants @yahoo.com	Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability Autism Spectrum Disorder (ASD), Cerebral Palsy, Down Syndrome, Intellectual Disability	Profit / Business

Johor

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	Kiwanis Special Children Centre (Managed By Kiwanis Club Of Batu Pahat)	No. 2, Jalan Jujur, Peserai, 83000 Batu Pahat, Johor	Shium Tiam Teck, Centre Chairman Grace Slow, Centre Administrator	Phone: 07 - 4138398 07 - 4138398	ttshium@yahoo.com	Down Syndrome, Intellectual Disability, Autism Spectrum Disorder (ASD), Cerebral Palsy,	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
2.	Muar Lions Autism Centre	No. 99, Jalan Puding, Taman Mutiara, Sg. Abong, 84000, Muar, Johor	Khoo Siew Lan	Phone: 06 - 9510622 011- 10937355	muarlionsautism@gmail.com	Developmental Delay, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD) Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
3.	National Autism Society Of Malaysia (Nasom), Muar	No. 190, Jalan Mulia 9, Taman Mulia, 84000 Muar, Johor	Zalifah, Coordinator	Phone: 06 - 9533544 Fax: 06 - 9533544	muar@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
4.	Persatuan Bagi Kanak-Kanak Kerencatan Akal Johor	Lot 5042, Jalan Indah Permai 9, Taman Saleng Indah, 81400 Senai, Johor	Hajah Wan Nur Hanizah Bt. Kamaruddin,	Phone: 07 - 2247243 Fax: 07 - 2240962	pbkkaj_ski@yahoo.com	Intellectual Disability, Down Syndrome, Attention Deficit Disorder (ADD) /	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
			Hon. Secretary			Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay	
5.	Persatuan Kebajikan Orang-Orang Kurang Upaya Negeri Johor (Handicapped And Disabled Association State Of Johore)	No. 2, Jalan Lintang, 86000 Kluang, Johor	Andy Hong, Chairman	Phone: 07 - 7771057 Fax: 07 - 7771058	pkookunj@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Hearing Impairment, Physical Impairment, Visual Impairment	Non-Profit
6.	Persatuan Sindrom Down Negeri Johor	No. 1, Jalan Indah 10/8, Taman Bukit Indah, 81200 Johor Bahru, Johor	Kamarul Zaman B. Osman, President	Phone: 07 - 2327705 Fax: 07 - 2327705		Down Syndrome, Autism Spectrum Disorder (ASD)	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
7.	Pertubuhan Kebajikan Insan Istimewa Johor Bahru	No. 40 & 40A, Jalan Sultanah Rogayah, Taman Iskandar, 80050 Johor Bahru, Johor	Teh Leng Kiong, Founder	Phone: 07 - 3338044 Fax: 07 - 3339044	info@pkijb.org.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Visual Impairment	Non-Profit
8.	Pertubuhan Perkhidmatan Intervensi Awal (Ppia) – Early Intervention Centre	29-35, Jalan Susur Perdana Utama, Taman Bukit Perdana, 83000 Batu Pahat, Johor	Tan Geok Hwa, Administrative Executive Soh Yu Wei, Supervisor	Phone: 07 - 4352145 Fax: 07 - 43512145	ppiabatupahat@gmail.com ail.com	Intellectual Disability, Down Syndrome, Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Dyslexia, Autism Spectrum Disorder (ASD), Developmental Delay	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
9.	Pertubuhan Perkhidmatan Intervensi Awal (Ppia) – Job Training Programme Centre	29-35, Jalan Susur Perdana Utama, Taman Bukit Perdana, 83000 Batu Pahat, Johor	Chng Poh Yan, General Manager Chok Yu Bin, Administration Executive	Phone: 07 - 4352145 Fax: 07 - 4352145	ppiabatupahat@ail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
10.	Pertubuhan Perkhidmatan Intervensi Awal (Ppia) – Production Workshop	29-35, Jalan Susur Perdana Utama, Taman Bukit Perdana, 83000 Batu Pahat, Johor	Tan Geok Hwa, Administration Executive Jason Lim, Manager	Phone: 07 - 4352145 Fax: 07 - 4352145	ppiabatupahat@ail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit

Kelantan

No.	Name of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
	No Information available						

Pulau Pinang

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	Asia Community Service (ACS)	C0-23-UP, Kompleks Masyarakat Penyayang, Jalan Utama, 10450 Pulau Pinang	Khor Ai Na, CEO	Phone: 04 - 6585396 Fax: 04 - 6593780	acspenang@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
2.	Asia Community Service (ACS) – First Step Intervention Centre	227, Jalan Pemandar, 11700 Gelugor, Pulau Pinang	Khor Ai Na, CEO	Phone: 04 – 6585396 Fax:	acspenang@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
				04 - 6593780		Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	
3.	Asia Community Service (ACS) – First Step Seberang Jaya	No. 1, Lorong Sutura Prima 4, Taman Sutura Prima, Seberang Jaya, 13700 Pulau Pinang	Khor Ai Na, CEO Ch'ng Sim Oon, Centre Supervisor	Phone: 04 - 3984358	firststepsj@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
4.	Asia Community Service (ACS) – Jom! Mobile Toy Library	C0-23-UP, Kompleks Masyarakat Penyayang, Jalan Utama, 10450 Pulau Pinang	Khor Ai Na, CEO	Phone: 04 - 6585396 016 - 4487006 Fax: 04 - 6593780	acspenang@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
5.	Asia Community Service (ACS) – Stepping Stone Work Centre	No. 53, Jalan Baru, Mk 1, Pulau Betong, 11000 Balik Pulau, Pulau Pinang	Khor Ai Na, CEO	Phone: 04 - 8665349 04 - 6585396 Fax: 04 - 8665887	acspenang@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
6.	Association Of Resource And Education For Autistic Children	No. 279, Jalan Pekelling, 11700 Bukit Gelugor, Pulau Pinang	Jerry Lee, Administrator	Phone: 04 - 6564357 04 – 6598209	lionsreach@yahoo.com	Autism Spectrum Disorder (ASD)	
7.	Bold Association For Children With Special Needs, Penang	Room C0-3-GF, Kompleks Masyarakat Masyarakat, Penang, Jalan Utama, 10450 Pulau Pinang	Jess Cheah, Program Coordinator Dato Dr. Sharom Ahmat, President	Phone: 04 - 6598611 04 - 3984358 Fax: 04 - 6598611	boldspecial@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Dyslexia, Intellectual Disability	Non-Profit
8.	Malaysian Resources Centre For Hearing And Speech-Language	Pulau Pinang	Poh Boon Fong, President	Phone: 011- 16790202	marchesmalaysia@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
9.	National Autism Society Of Malaysia (Nasom), Butterworth	No. 8, Lorong Molek 3, Bagan Ajam, 13000 Butterworth, Pulau Pinang	Sabatiah Bt. Imam Abd Rahman, Coordinator	Phone: 04 - 3232252 Fax: 04 - 3232252	butterworth@nasom.org.my	Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Hearing Impairment, Intellectual Disability, Others, Visual Impairment	Non-Profit
10.	National Autism Society Of Malaysia (Nasom), Penang	No. 31 & 34, Jalan Pantai Jerejak 1, 11900 Bayan Lepas, Pulau Pinang	Gengespari, Coordinator	Phone: 04 - 6587034 Fax: 04 - 6587034	penang@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
11.	Persatuan Untuk Kanak-Kanak Terencat Akal Seberang Perai Utara	7067, Jalan Mak Mandin, Mak Mandin, 13400 Butterworth, Pulau Pinang	Ng Mo Yong, PJK PJM Chairman	Phone: 04 - 3236493 Fax: 04 - 3247872	pektasbw@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
12.	Shalom House	52 & 54, Jalan Thomas, 11600 Gelugor, Penang	Sheila Clemence, Person in charge & Alvin Manuel, Assistant Kelly Choong, Assistant	Phone: 04 - 6564146 012- 4211164	shalomhouse54@gmail.com	Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit

Pahang

No.	Name of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	National Autism Society Of Malaysia (NASOM), Kuantan	A631, Lorong Selamat 2, Off Jalan Teluk SisiK, 25050 Kuantan, Pahang	Mimisuraye, Coordinator	Phone: 09 - 5671070 Fax: 09 - 5671070	kuantan@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
2.	Siloam House	Lot 3415, Kg. Paya Pelantar, 28600 Karak, Pahang	Lim Saw Gaik, CEO	Phone: 012 - 2669520 Fax: 09 - 2311033	siloamhouse@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Intellectual Disability	Non-Profit

Perlis

No.	Name of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
	No Information Available						

Negeri Sembilan

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	Lovic Enterprise	No. 285, Lorong Biji Timah 10, Taman Makmur, Jalan Tun Dr. Ismail, 70200 Seremban, Negeri Sembilan	Janet Khoo, Person In Charge	Phone: 018 - 2548171	bykhoo21@yahoo.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Profit / Business
2.	National Autism Society Of Malaysia (Nasom), Seremban	Lot 5020, Jalan Dusun, Taman Dato Shah Bandar, 70400 Seremban, Negeri Sembilan	Rina, Coordinator	Phone: 06 - 7674400	seremban@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
3.	Persatuan Berdikari Seremban Negeri Sembilan	No. 380, Jalan Kenaga 1, Taman Bukit Chedang, 70300 Seremban,	Peter Yew	Phone: 06 - 7632005 Fax:	pbssbn@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD),	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		Negeri Sembilan		06 - 7632005		Autism Spectrum Disorder (ASD), Down Syndrome, Dyslexia, Intellectual Disability	
4.	Touch Community Society	6A, Jalan Merbok 2, Taman Bunga Blossom, 70100 Seremban, Negeri Sembilan	Thanaletchu my, Teacher	Phone : 06-6331822	touchcommunitysociety@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome	Non-Profit

Kedah

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	Majlis Kebajikan Kanak-Kanak Kedah	3218-A, Lorong Alor Semadom, Jalan Sultanah, 05350 Alor Star, Kedah	Zuridah Bt. Talib, Penyelia	Phone: 04 - 7303736 Fax: 04 - 7354639	Email pusatharian@gmail.com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability, Physical Impairment	Non-Profit
2.	National Autism Society Malaysia (Nasom), Alor Setar	2927R, Lorong Kenchana 2, Taman Muhibbah, Jalan Sultanah, 05350 Alor Setar, Kedah	Siti Maherah, Coordinator	Phone: 04 - 7344033 Fax: 04 - 7344033	kedah@nasom.org.my	Autism Spectrum Disorder (ASD)	Non-Profit
3.	Bengkel Daya Sungai Petani	Kompleks Kebajikan Daerah Kuala Muda, Jalan Pahlawan,	Nor Faida Bt. Razali	Phone: 04 - 4217233 019 - 2649751 Fax:	bd_sp@jkm.gov.my	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Down Syndrome, Hearing Impairment, Intellectual Disability,	Government

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
		08000 Sungai Petani, Kedah		04 - 4217236		Physical Impairment	

Terengganu

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types of Disabilities Served	Nature of Business
1.	Pusat Harian Down Syndrome	Lot PT 2420, Taman Adis Indah, Blok 17, Jalan Tok Adis, 21100 Kuala Terengganu, Terengganu	Anita Bhandal, Teacher / Administrator	Phone: 09 - 6309436 Fax: 09 - 6309436		Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non-Profit
2.	Taman Sinar Harapan Kuala Terengganu	Taman Sinar Harapan Kuala Terengganu Bukit Besar, 21100 Kuala Terengganu, Terengganu	Mohd. Fadhuli B. Wahab, Principal	Phone: 09 - 6221721 Fax: 09 - 6248328	tsh_kt@jkm.gov.my	Intellectual Disability, Down Syndrome, Autism Spectrum Disorder (ASD), Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Dyslexia, Developmental Delay, Cerebral Palsy	Government

Sabah

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
1.	Citacita Learning Centre Kota Marudu By Persatuan C.H.I.L.D Sabah	Kampung Goshen, Jalan Kiambalang, 89100 Kota Marudu, Sabah	Jacqueline Lingham, Co-Founder Belinda Ann Too, Project Manager	Phone: 019 - 8201621 013 - 8655832 Fax: 11088 - 288761	Info@Childsabah.Or g.My	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Down Syndrome, Dyslexia	Non-Profit
2.	Persatuan C.H.I.L.D. Sabah (Caring & Helping Individuals Learn & Develop)	Lot F 1-2-3, First Floor, Tanjung Aru Plaza, Off Jalan Mat Salleh, 88400 Tanjung Aru, Sabah	Jacqueline Lingham, Co-Founder	Phone: 016 - 8316952 Fax: 088 - 231788	Childsabah@Yahoo .Com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD)	Non-Profit
3.	Persatuan Rumah Amal Cheshire Sabah (Sabah Cheshire Home) – Early Intervention Centre, Sandakan	Batu 5, Jalan Sibuga, W.D.T. 780, 90000 Sandakan, Sabah	Meryhati Emus, Supervisor	Phone: 089 - 226716 089 - 227716 Fax: 089 - 271713		Autism Spectrum Disorder (ASD)	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
4.	Handprints Toy Library & Parents Resource Centre	Lot 29B & 29C, 1st Floor, Likas Square, 88400, Kota Kinabalu, Sabah	Gem Asildo, Ministry Assistant	Phone: 0164172 298	Handprintslib@Gmail.Com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
5.	Seri Mengasih Centre	PWD 75, Jalan Selangor, Tanjung Aru, 88100 Kota Kinabalu, Sabah	Onica Chua, Executive Director (6088 - 223221) Jenny Tham, Director Of Programmes & Services (6088 - 316221)	Phone : 088 - 223221 088- 316221 Fax: 088 - 244672	Serimengasih@Yahoo.Com.My	Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability, Physical Impairment	Non-Profit

Sarawak

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
1.	Association For Children With Special Needs Sibiu	Agape Centre, Alan Road, Upper Lanang, 96000 Sibiu, Sarawak	Philomena Lau Leh Ming, Centre Supervisor Lau Choon Ning, Assistant Supervisor	Phone: 084 - 217912 Fax: 084 - 213902	Acnsnibu11@Hotmail.Com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Intellectual Disability	Non-Profit
2.	Kuching Autistic Association (Persatuan Autisme Kuching)	Lot 5492, Block 225 KNLD, Lorong 15, Jalan Desa Wira, 93250 Kuching, Sarawak	Dr. Yao Sik Chi, President	Phone: 082 - 686363 Fax: 082 - 686362	Kaakch@gmail.Com	Autism Spectrum Disorder (ASD)	Non-Profit
3.	Methodist Care Centre, Sibiu	Agape Centre, Jalan Alan, 96000 Sibiu, Sarawak	Wong Kee Wei	Phone: 084 - 219914 Fax: 084 - 219914	Methodistcare@Hotmail.Com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay,	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
4.	Mrcs Sunflower Centre	Lot 312, Lorong 1 Krokop, Jalan Bulan Sabit, 98007 Miri, Sarawak	Liza Chai, Chairman/Head Of The Centre	Phone: 085- 420722 Fax: 085- 425421	Sunflower.Miri@Gmail.Com	Down Syndrome, Intellectual Disability, Physical Impairment Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability,	Non-Profit
5.	National Autism Society Of Malaysia (Nasom), Miri	123, Lorong 8, Jalan Taman Piasau Edar, Taman Piasau, 98000 Miri, Sarawak	Rubiah James Daim, Coordinator	Phone: 085 - 653712 019 - 8484156 Fax: 085 - 653712	Miri@Nasom.Org.M y	Autism Spectrum Disorder (ASD)	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
6.	Persatuan Bagi Kebajikan Kanak-Kanak Terencat Akal Sarawak (Perkata Sarawak)	Lot 1652, Block 10, Jalan Ong Tiang Swee, 93200 Kuching, Sarawak	Doreen Tie, Principal	Phone: 082 - 426301 Fax: 082 - 254561	Perkata@Ymail.Co m	Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Intellectual Disability	Non Profit
7.	Persatuan Bagi Rakyat Prihatin Dan Ibu Bapa Kanak Kanak Cacat, Bintulu (Perpikat Bintulu)	Lot 3805, Jalan Diwarta, 97000 Bintulu, Sarawak	Hii Ming Hua, President	Phone: 086 - 317879 086 - 314315 Fax: 086 - 314315	Perpikatbintulu@Ya hoo.Com	Visual Impairment, Hearing Impairment, Physical Impairment, Intellectual Disability, Down Syndrome, Developmental Delay, Cerebral Palsy, Autism Spectrum Disorder (ASD), Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD)	Non-Profit
8.	Persatuan Bagi Rakyat Prihatin Dan Ibu Bapa Kanak-Kanak Cacat, Bintulu	No. 140, Piasau Camp, Jalan Pantai, 98000 Miri, Sarawak	Chiong Bee Lan, Penyelia	Phone 60 85- 471196 6085- 656429	Pdkmiri@Yahoo.Co m.My	Visual Impairment, Hearing Impairment, Cerebral Palsy, Intellectual Disability, Attention Deficit Disorder (ADD) / Attention Deficit	Non-Profit

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
						Hyperactive Disorder (ADHD), Developmental Delay, Down Syndrome, Autism Spectrum Disorder (ASD)	

Labuan & Putrajaya

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
1.	Persatuan Bagi Orang-Orang Istimewa Labuan	Lot No. 98, Taman Kian Yap, Jalan Ranche-Ranche, 87000 Wilayah Persekutuan Labuan	Mohd Faizal Karim, Chairman	Phone: 087 - 415836 018 - 2090038 Fax: 087 - 419836	Faizalkarim@Gmail.Com	Attention Deficit Disorder (ADD) / Attention Deficit Hyperactive Disorder (ADHD), Autism Spectrum Disorder (ASD), Cerebral Palsy, Developmental Delay, Down Syndrome, Dyslexia, Hearing Impairment, Intellectual Disability, Visual Impairment	Non-Profit
2.	Bahagian Pendidikan Khas (Bpk)	Kementerian Pelajaran Malaysia		Phone: 0388830624/ 9190			Government

No.	Name Of Organization	Address	Contact Person	Phone / Fax	Email	Types Of Disabilities Served	Nature Of Business
		Aras 2, Blok E2, Pusat Pentadbiran Kerajaan Persekutuan, 62604 Putrajaya		Fax: 03 - 88886670			

LIST OF ABBREVIATIONS AND ACRONYMS

ADHD	Attention Deficit Hyperactivity Disorder
APA	American Psychiatric Association
ASD	Autism Spectrum Disorder
CBR	Community Based Rehabilitation
CRPD	Conventions on the Rights of Persons with Disabilities
DET	Disability Equality Training
DRST	Disability Related Service Training
DSM	Diagnostic Statistical Manual
DSW	Department of Social Welfare
FAMA	Federal Agricultural Marketing Authority
GDD	Global Developmental Delay
ICT	Information and Technology
IGP	Inspector General of Police
IKBN	National Youth Training Institute (Institut Kemahiran Belia Negara)
IL	Independent Living
JPOKU	Department for the Development of PWDs
KPLB	Ministry of Rural Development
LKIM	Fisheries Development Authority of Malaysia
MANIS	National Information System on Social Issues
MED	Ministry of Entrepreneurs Development
MOA	Ministry of Agriculture
MOE	Ministry of Education
MOH	Ministry of Health
MWFCD	Ministry of Women, Family and Community Development
NASOM	National Autism Society of Malaysia
NGO	Non-Government Associations
PLPP	Industrial Training and Rehabilitation Centre (<i>Pusat Latihan Perindustrian dan Pemulihan</i>)
POA	Plan of Actions
PWDs	Persons with Disabilities
RMP	Royal Malaysian Police
SMOKU	Information Management System for PWDs
SOCISO	Social Security Organisation
SOP	Standard Operating Procedure
TSH	Care Centres for PWDs (<i>Taman Sinar Harapan</i>)
UNESCAP	United Nations Economic and Social Commissions for Asia and the Pacific
WHO	World Health Organisation

-Thank You-

***Policy of Older Persons & Persons With Disabilities Unit
Policy and Strategy Planning Division
Ministry of Women, Family and Community Development
Putrajaya, Malaysia
Disember 2019***

Country Profiles on Autism



MYANMAR

Regional Workshop for Policy Recommendation on Autism



Ms. Khin San Yee

Director, Mandalay Regional Social Welfare office

Ministry of Social Welfare, Relief and Resettlement, Myanmar

Introduction (Background Information)

- **Ministry of Social Welfare, Relief and Resettlement, Myanmar**
- **There are Three Departments under the Ministry of Social Welfare, Relief and Resettlement, Myanmar**
 - (1) Department of Social Welfare
 - (2) Department of Rehabilitation (2018)
 - (3) Department of Disaster Management

Department of Social Welfare

There are (7) types of Services

- Early Childhood Care and Development (ECCD) and Child Protection Programme
- Social Protection Programme
- Youth Development Programme
- Women Development Programme
- Promoting Decent life and Care of the Aged
- **Care of the Persons with Disabilities**
- Grants in Aids to Voluntary organizations Programme
- Social Protection Programme

General Information for Data Collection

- According to 2014 Myanmar Census, there are (4.6%) with disabilities (Data collection by Ministry of Labour , Immigration and Population using Disabilities Analysis questions.
- Types of Disabilities
 - Physical Disability 1.8%
 - Visual Disability 2.5%
 - Hearing Disability 1.3%
 - Intellectual Disability 1.7%

General Information

- The First Myanmar National Disability Survey (2008-2009) 2.32 % are disabled and Prevalence Rates of Person with Disabilities are as follow –

Physical Disability	< 5 yrs	0.68
	6 - 15 yrs	1.3
Visual Disability	< 5 yrs	0.06
	6 - 15 yrs	0.16
Hearing Disability	< 5 yrs	0.07
	6 - 15 yrs	0.26
Intellectual Disability	< 5 yrs	0.07
	6-15yrs	0.3
Schooling		47.1 %
No Schooling		62.9 %

- Ratified the Convention on the Rights of Persons with Disabilities in 2011,
- Implementation Bali Declaration, Incheon Strategy (make the right the real)
- Enacted the Rights of the Persons with Disabilities Law in 2015 and by Law(2017)
- According to 2014 Myanmar Census, 5.8% are above 65 Years elderly Persons
- Law for Elderly Persons was drafted by Union Parliментary in 2016.
 - Rights for elderly
 - Social Pension for elderly
 - Care Service (Home Care, Family Care, Day Care)
 - Health Care and Social Care
 - Reasonable Accommodation and Environment
 - Social Participation
 - Identification Card
 - Set up Home for I/D Autism inclusion (Family net working)
 - Set up fund for Autism (Family net working)

Education

According to the Child Law (1993)

Art - 18.(a) A mentally or physically disabled child:-

- (i) has the right to acquire basic education (primary level) or vocational education at the special schools established by the Social Welfare | Department or by a voluntary social Welfare Department or by a voluntary social worker or by a non-government organization;
- (ii) has the right to obtain special care and assistance from the State.
 - (b) The Social Welfare Department shall lay down and carry out measures as may be necessary in order that mentally or physically disabled children may participate with dignity in the community stand on their own feet and promote self-reliance.

According to the child Right Law (2019)

Art-51- Every child with disabilities-

- (a) has the right to aquire Early child hood care and Development and life skill Education

(a) has the right to acquire education free fees in regularly School set up by Ministry of Education

According to the Right of Person with Disabilities Law

Art-20.(a) Every person with disability-

(a) has the right to education on an equal basis with the other without disability;

(b) has the right to pursue education at schools training , institutes colleges, universities operate by government, public, private and organizations and at private schools and vocational training schools.

Art-21 .National Committee in collaboration with the Ministry of Education, shall lay down the programmes for obtaining teaching materials communication devices, accommodation, and curriculums in order to facilitate the pursuit of basic to university level education by persons with disabilities.

Art-22. National Committee shall instruct the Ministry of Education to implement inclusive education system, to include the rights of persons with disabilities in the curriculums of education colleges and universities, and to learn the teaching methods for each type of with disabilities and different ways of communication.

Art-23. Except the consideration of subject requirement , anyone is not allowed to deny the admission of persons with disabilities on the account of disability.

Atr-24. Every child with disability-

(a) Shall have the right of educational opportunities including early childhood care and lifelong learning ;

(b) Shall have the access to certain free education level at schools run by ministry of Education under the state on an equal basis with others in the communities in which they live or as close as possible to their own communities.

Art-25 .The ministry shall carry out special education programmes, Informal education programmes,and vocational education programmes for the persons with disabilities who are not able to pursue the formal education.

Ministry of social welfare relief and resettlement under takes the protection and development measures for the PWDs , including CWDs by Myanmar National Strategy for Development of Persons with Disabilities.(2016-2025) base on Right of Person with Disabilities Law (2015) and by Law (2017)

Myanmar National Strategy for Development of Persons with Disabilities.(2016-2025) base on Right of Person with Disabilities Law (2015) and by Law (2017) will be carrying out in accordance with the following priority areas.

- (a) Policy Development**
- (b) Prevention**
- (c) Protection**
- (d) Habilitation and Rehabilitation**
- (e) Sector Development**
- (f) Building Capacity**
- (g) Cooperation and sharing information**

Education

Under the Department of Social Welfare-

- Special schools
- According to Early Childhood Care and Development Policy(ECCD) Policy
 - strong transition programme for children from home and preschool to inclusive kindergarten and primary school
 - building barrier free environments for children with disabilities in pre-primary and primary school

Rehabilitation for persons with disabilities

- Undertaking the medical , social and vocational rehabilitation.
- Department of Social Welfare is running (8) special schools
 - School for blind (2)
 - School for deaf (2)
 - training school for adult disabled (1)
 - School for children with disabled(2)+(1)=3
 - Caring Home for the children with disabilities(1)

Inclusive Education

Department of Social Welfare collaboration with Department of Basic Education as follow -

- skills-training for education teachers in dealing with disabilities
- develop curriculum on special education methods
- Awareness raising for right to education
- Conducting workshop for education opportunities and services

Health

- Setting Early childhood intervention service (0-5yrs age group)
- Rehabilitation project (2008-2013) (16) training for trainers programmes for (1665) medical staffs focusing on special care of cerebral palsy, stroke patients and persons with spinal cord injury.
- Caring physical disability, over 180,000 educational journals on awareness and treatment about physical disability were distributed to medical staffs in rural area.
- Rehabilitation conferences were conducted for six times and upgrading the National Rehabilitation Hospital.
- Implementing community based health care services (MOH)

Employment

- rights of the persons with disabilities law describes separate chapter for employment opportunity of persons with disabilities
- Promoting private sector for accessible work place
- conducting advanced vocational trainings and pre-job trainings
- Awareness raising for interesting and attention of private sector on job placement for persons with disabilities
- Conducting work shop for job opportunities with department of labor and private sector.

Social Protection

- Developing Myanmar National Social Protection Strategic Plan in 2014.
- Ensuring their needs , social inclusion, access to services for PWDs.
- Disability allowance will provide.
- Children with disabilities (0-18 yrs)will have the benefit.
- Families of Children with disabilities(until 18yrs)
- Workshops or centre will be established(adult, elderly, OPSHG, Day Care Centre, Home Care)
- Job placement(who complete vocational training)

Awareness raising

- The English-Myanmar dual version, easy read in Myanmar version, pocket booklets, pamphlets had also published in 2013 to understand the UNCRPD among public.
- awareness activities on UNCRPD(2011-2016) development plan of the Ministry of Social Welfare, Relief and Resettlement.
- Conducted Training Courses for Trainers programmes (UNCRPD)
- a module on understanding UNCRPD
- Awareness activities the rights of persons with disabilities and understanding disability
- refresher courses for the teachers from basic education, Ministry of Education totally 15,000 teachers since (2012)
- disability awareness programmes media

Accessibility

- Development of guidelines on renovating and designing public buildings and their environments (PWDs rights law)
- Since 2014, national level advocacy workshops on accessibility policies and guidelines were conducted.
- Developing the standards to promote barrier free environments for the public buildings by the Ministry of Construction.
- To reduce the communication difficulties of persons with hearing impairments, the DSW led and published Myanmar Standardized Sign Language Dictionary Volume I and II in 2007
- Project on Promoting Social Participation of the Deaf Community in order to develop sign language and sign language interpretation (JICA)
- Advance trainings for trainers of 18-month sign language supporter training were conducted 1st(2013-2014) , 2nd Batch 2015-216 , 3rd Batch 2017-2018
- Awareness raising activities on the use of sign language have been implemented in line with the action plan (2014-2015) by DSW.

Accessibility

- Sign language interpretation in regular television and news programs.
- Barrier free campaigns for persons with disabilities were conducted at highway stops, public markets and on highway buses in 2012 for four times
- In 2012, community-based rehabilitation programmes planned and implemented activities creating barrier free environments programmes in (128) target areas.
- Awareness raising of Rights to Persons with Disabilities Law.

Constraints and Challenges for Autism in Myanmar

- Although develop Right of Person with disabilities Law by Union Government
- There is many difficult for children with disabilities to attend the school except Yangon ,Mandalay and a few city.
(limited special schools, Limited Resources).
- Not for all inclusive for Autism . (Except Family net working Group).

Thank You

Country Profiles on Autism



PHILIPPINES



REPUBLIC OF THE PHILIPPINES
PHILIPPINE STATISTICS AUTHORITY

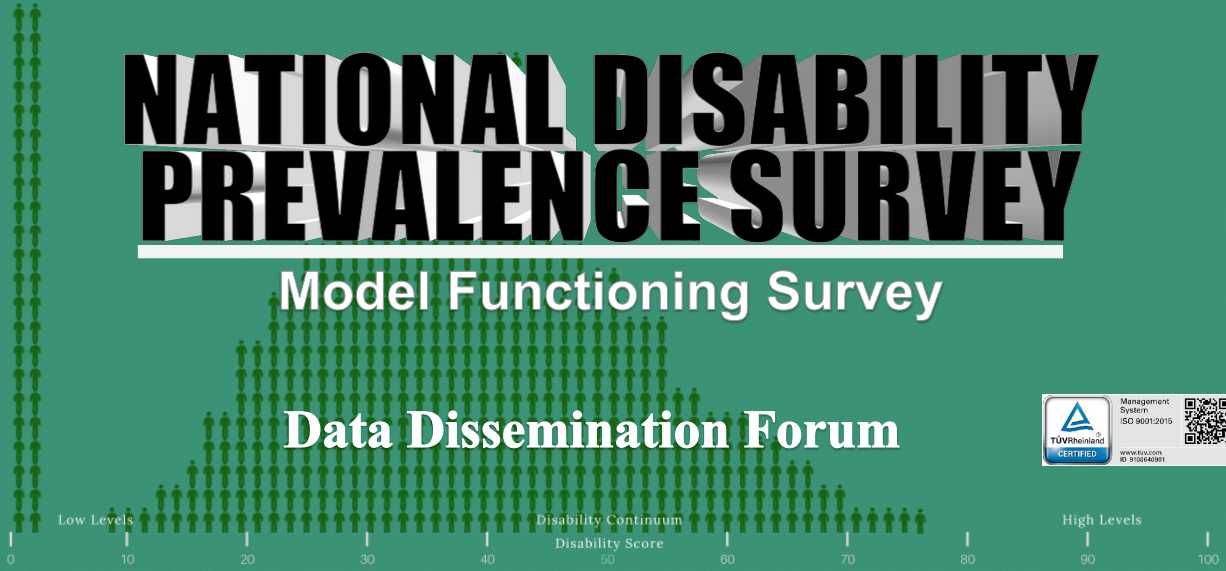


DEPARTMENT OF HEALTH

NATIONAL DISABILITY PREVALENCE SURVEY

Model Functioning Survey

Data Dissemination Forum



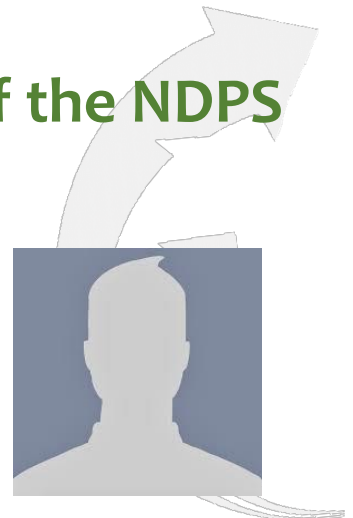
Background of the NDPS

NAME OF PRESENTER

Position

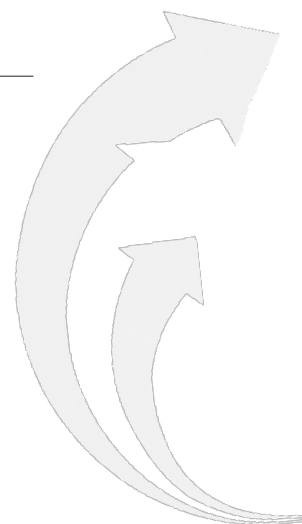
Office/Division

Philippine Statistics Authority



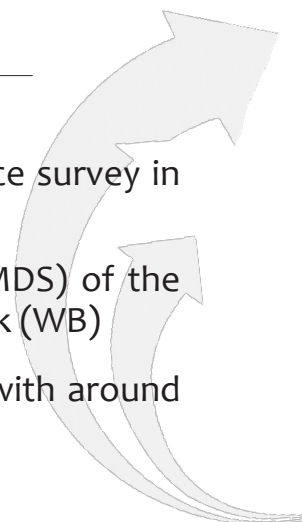
Outline of Presentation

- I. Overview of NDPS/MFS
 - Objectives of the Survey
- II. The MDS and the ICF as Basis of NDPS
 - What disability is and what it is not
 - Disability and Functioning
 - Performance and Capacity
 - Disability Continuum
 - Disability Rates
 - MDS Modules



Overview of the NDPS/MFS

- NDPS/MFS - first ever nationwide disability prevalence survey in the Philippines
- NDPS is anchored on the Model Disability Survey (MDS) of the World Health Organization (WHO) and the World Bank (WB)
- Conducted nationwide by the PSA in Nov-Dec 2016 with around 11,000 sample households
- Study collaborators:
 - ✓ Department of Health (DOH)
 - ✓ World Health Organization (WHO)
 - ✓ National Council on Disability Affairs (NCDA)
 - ✓ University of the Philippines – Manila





Overview of the NDPS/MFS

- NDPS is a general population survey that provides detailed and nuanced information on the interaction between health and the environment
- Collects comprehensive information on needs of persons with different disability levels as well as on barriers and inequalities they face



Objectives of the NDPS/MFS 2016

1. To estimate the prevalence of disability;
2. To determine the current disability distribution of the population;
3. To identify needs, barriers and inequalities faced by persons with different levels of disability;
4. To provide the information necessary for the development of policy priorities to improve the lives of the population with disability.



Uses of NDPS/MFS Data

A metric of disability is used to allow for the collection of comprehensive and relevant information that helps the country to:

- construct a complete picture of disability with particular relevance to disability policy,
- direct and reliable international comparisons of disability data, and;
- national and global monitoring of the implementation of the CRPD



Sampling Design

- **Sampling Frame:** Based on 2010 Census of Population and Housing (CPH) and refreshed using 2015 POPCEN
- **Sampling Design:** Adopted the 2013 Master Sample (MS) which is based on a 2-Stage Stratified Sampling Design
 - First Stage: 1250 primary sampling unit(PSU) selected via systematic sampling
 - Second Stage: Housing Units (HUs). Average of 12 or 16 Housing units per PSU based on proportionate allocation and using systematic random sampling
- **Sample Size:** Around 11,000 sample households



Sampling Design

Eligible Respondents (within the sample household)

- Any household member aged 15 years and over

Sampling for the Individual interview:

- Random selection of 1 (one) household member using using Kish Method



The NDPS Questionnaires

NDPS Form 1 – Household Questionnaire

- administered to the HH head or spouse, or to any responsible adult member of the household

Use to collect information on the following:

- Household membership
- Background characteristics of household members
- Household assets



Republic of the Philippines

Philippine Statistics Authority

The NDPS Questionnaires

NDPS Form 2 – Individual Questionnaire

- Administered to one (1) randomly selected household member (15 years old and older)
- Use to collect information on the following:
 - Socio-demographic characteristics
 - Work history and benefits
 - Environmental factors
 - Functioning
 - Health condition
 - Personal assistance, Assistive devices and Facilitators
 - Health care utilization
 - Well-being



Republic of the Philippines

Philippine Statistics Authority

Data Collection, Processing and Analysis

Duration of Interviews: Mean = 1 ½ hours

Data Collection: 21 Nov to 13 Dec 2016 (20 days)

Data Processing: Data encoding, data cleaning and evaluation was done from January to March 2017

Data Analysis:

Took longer than expected because of the developmental nature of the NDPS



Basis of the NDPS/MFS

- NDPS/MFS was adopted from the Model Disability Survey (MDS) of the World Health Organization (WHO) and World Bank (WB)
- MDS is grounded on the ICF (International Classification of Functioning, Disability and Health)



What Disability Is and What It is Not

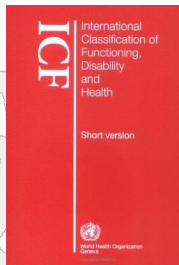
- ... is not something one might have or not
- ... is not an internal attribute of a person
- ... is not something that cause or contribute to the development of a disease or a condition

But, rather

- is a **LIVED EXPERIENCE**
- ... **is an OUTCOME of INTERACTION**



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Philippine Statistics Authority



The International Classification of Functioning, Disability and Health

HEALTH
(health conditions & impairments)



FUNCTIONING / DISABILITY

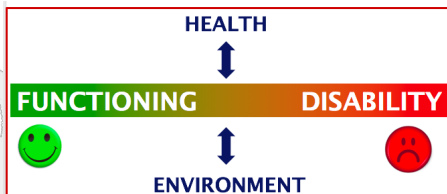


ENVIRONMENT

(physical, social, attitudinal and political)



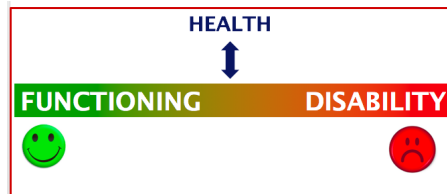
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PERFORMANCE

doing of an action or execution of a task given health conditions or health problems AND the actual context of the individual

“lived experience”



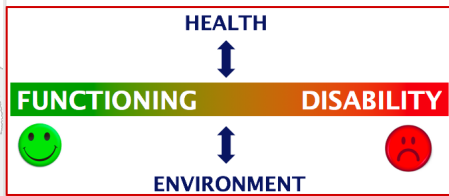
CAPACITY

inherent or intrinsic feature of a person to do an action or execute a task given health conditions or health problems

“under the skin”

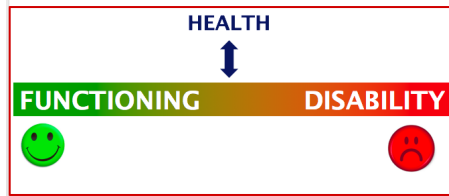


How to measure functioning or disability?



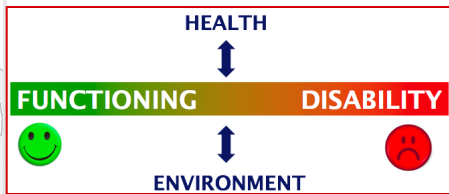
PERFORMANCE

doing of an action or execution of a task given health conditions or health problems **AND** the actual context of the individual



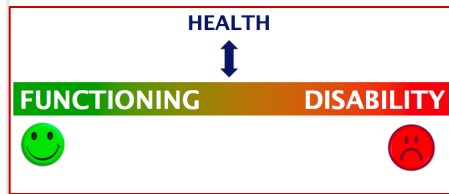
CAPACITY

inherent or intrinsic feature of a person to do an action or execute a task given health conditions or health problems



PERFORMANCE

doing of an action or execution of a task given health conditions or health problems **AND** the actual context of the individual



CAPACITY

inherent or intrinsic feature of a person to do an action or execute a task given health conditions or health problems





Why is it fundamental to have information about capacity and performance?

- To fully capture the positive or negative impact of the environment
- High levels of difficulties in capacity = high risk of experiencing disability if no accommodations are there: Who are these persons? What do they need?
- Guarantee the comparability with previous disability surveys, usually focusing on capacity



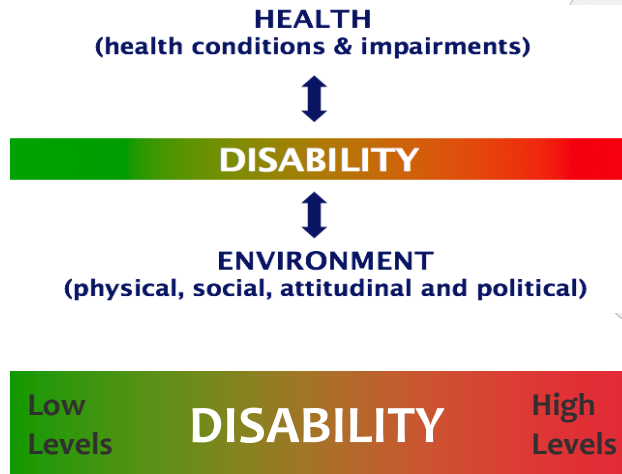
DISABILITY CONTINUUM



Disability understood as:

Outcome of the interaction

Continuum low to high levels



21

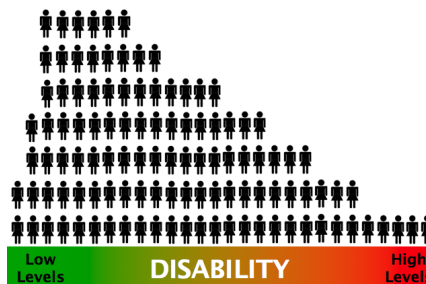


HEALTH
(health conditions & impairments)

DISABILITY

ENVIRONMENT
(physical, social, attitudinal and political)





Implications for data collection:

- **SAMPLE: GENERAL POPULATION**
- **NO FILTERS ARE APPLIED**
- **ONE** household member age 15 yrs. and over is **randomly** selected in each sample household





Cut-off used in the continuum

Target group	Cut-off criteria
No difficulties in capacity No problem in performance	Score < Mean – 1SD or Score = 0
Mild difficulties in capacity Mild problems in performance	Mean – 1SD < Score < Mean
Moderate difficulties in capacity Moderate problems in performance	Mean < Score < Mean + 1SD
Severe difficulties in capacity Severe problem	Score ≥ Mean + 1SD



DISABILITY RATES PERFORMANCE



How many people experience severe disability?



27



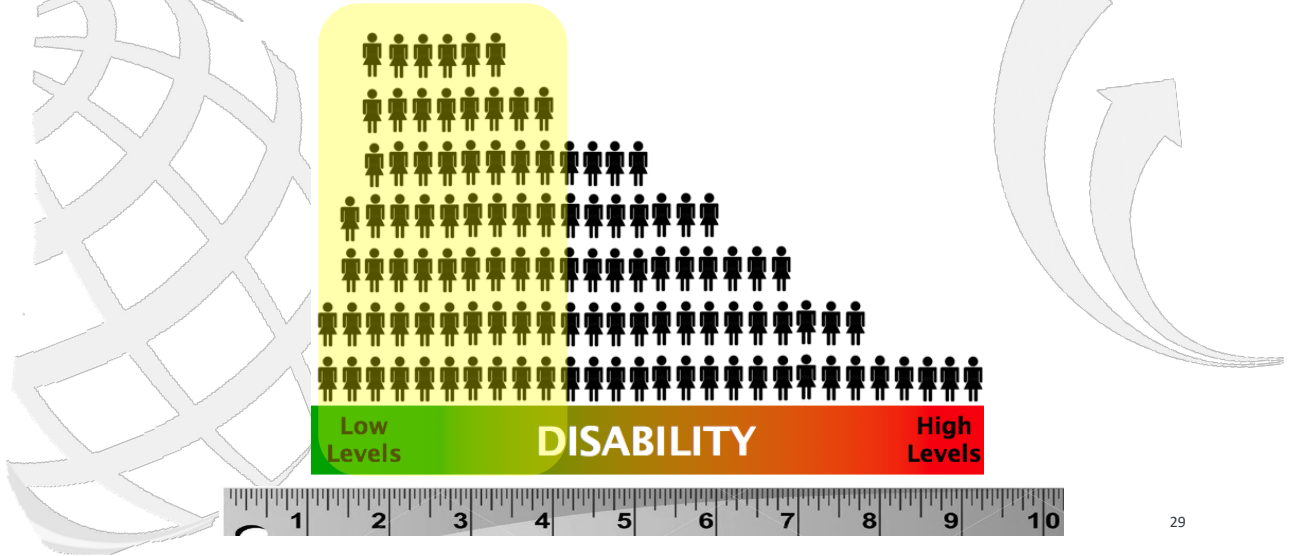
How many people experience moderate disability?



28



How many people experience **mild** disability?



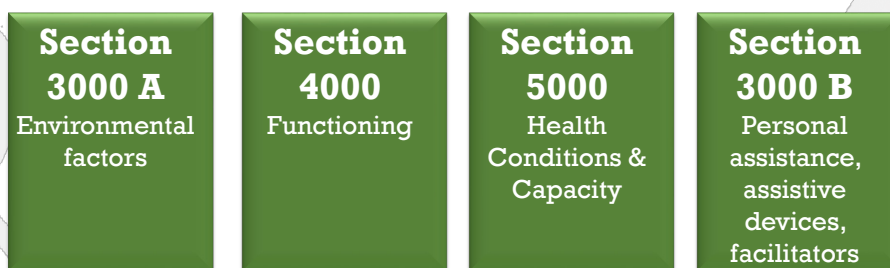
NDPS/MFS Questionnaire



NDPS/MFS Questionnaire (Modules)



Fundamental modules



HEALTH
(health conditions & impairments)



DISABILITY



ENVIRONMENT
(physical, social, attitudinal and political)



Section 3000 A
Environmental factors

Environmental information

- Hindering or facilitating aspects of the general environment
- Family and social support
- Attitudes of others
- Accessibility to information
- Regular use of medication



HEALTH
(health conditions & impairments)



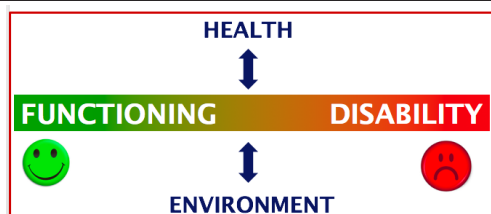
DISABILITY



ENVIRONMENT
(physical, social, attitudinal and political)

Section 3000 A
Environmental factors

Section 4000
Functioning



PERFORMANCE

doing of an action or execution of a task given health conditions or health problems AND the actual context of the individual



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Section 4000 Functioning

In this module I want to understand the kinds of **problems you experience in your life.**

By **problems** I mean **not getting things done in the way you want to or not getting them done at all.**

These problems may arise **because of your health or because of the environment in which you live.**

They may also arise because of the attitudes or behaviours of people around you.



**Section 4000
Functioning**

How much of a problem is getting out of your home for you?

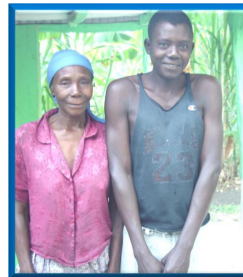
1 None	2	3	4	5 Extreme	8 Don't Know
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**Section 4000
Functioning**

How much of a problem is getting out of your home for you?

1 None	2	3	4	5 Extreme	8 Don't Know
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HIV

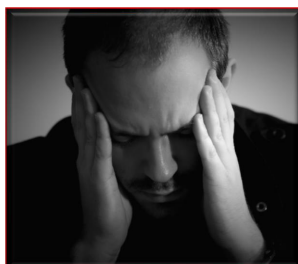
**Section 4000
Functioning**

How much of a problem is getting out of your home for you?

1 None	2	3	4	5 Extreme	8 Don't Know
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SCI

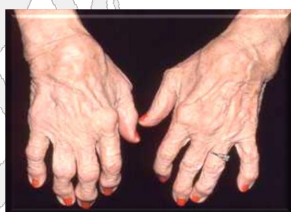


Migraine

**Section 4000
Functioning**

How much of a problem is being clean and dressed?

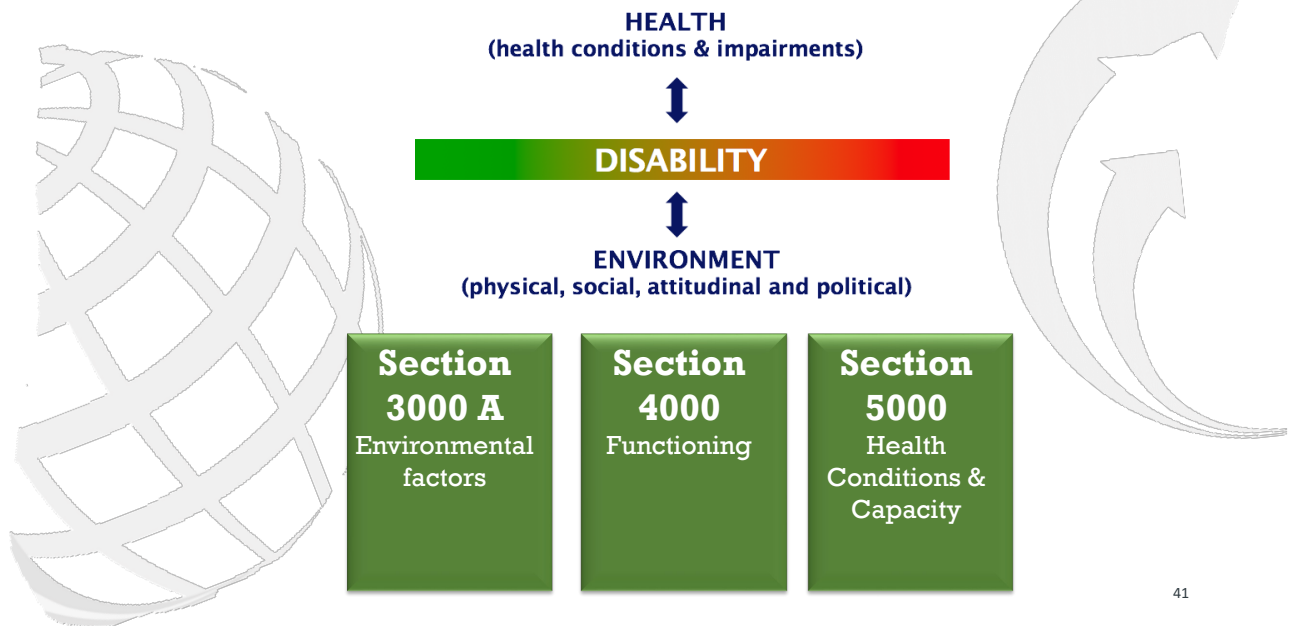
1 None	2	3	4	5 Extreme	8 Don't Know
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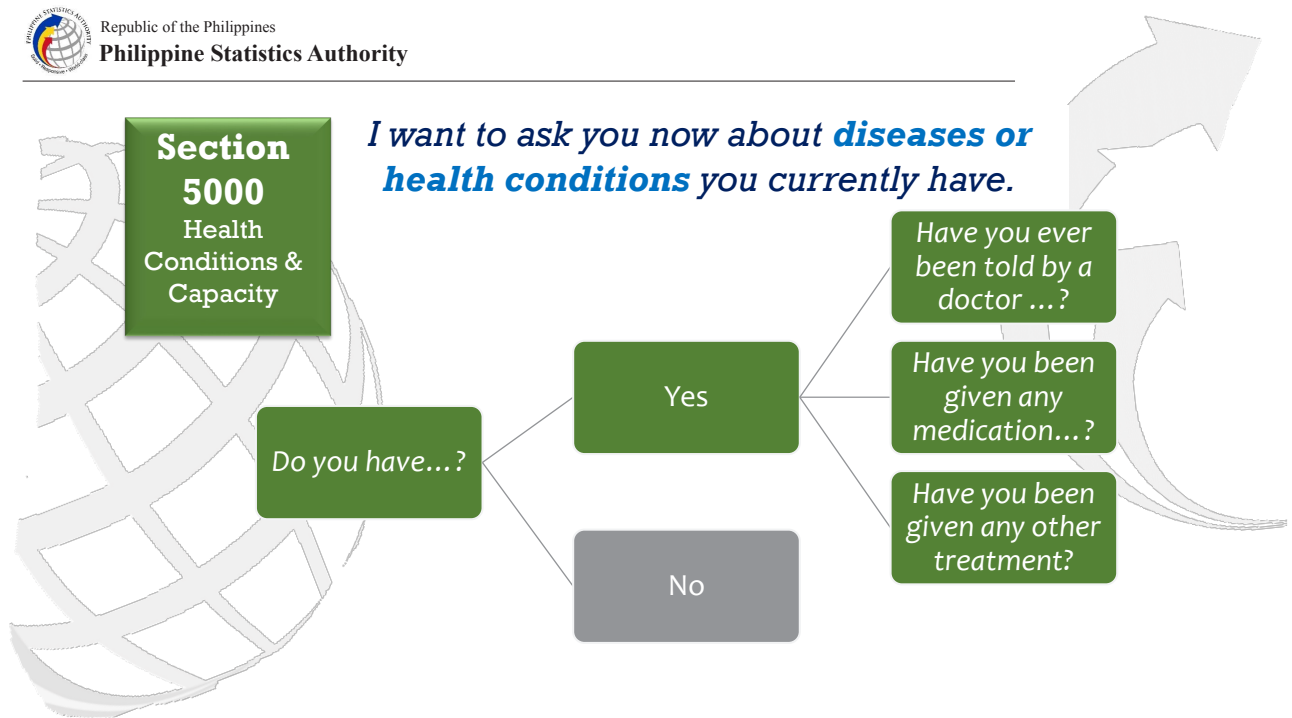
Arthritis



Depression

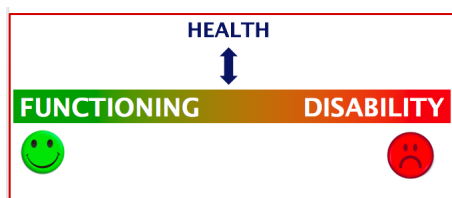


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- Vision loss
- Hearing loss
- Hypertension
- Diabetes
- Arthritis
- Heart disease
- Chronic Bronchitis or Emphysema
- Asthma, allergic respiratory disease
- Back pain or disc problems
- Migraine
- Stroke
- Depression or Anxiety
- Leprosy
- Amputation
- Polio
- Gastritis or Ulcer
- Tumour or cancer
- Trauma
- Dementia
- Kidney diseases
- Skin diseases e.g. Psoriasis
- Tuberculosis
- Mental (psychiatric) or behavioural disorders
- Sleep problems
- Tinnitus



CAPACITY

inherent or intrinsic feature of a person to do an action or execute a task given health conditions or health problems





Section
5000
Health
Conditions &
Capacity

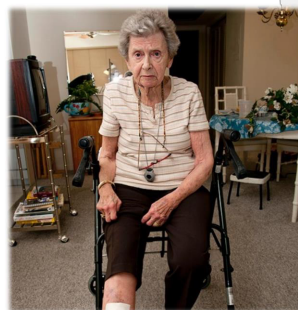
I have asked you many questions about kinds of problems you experience in your life. The next questions ask about difficulties you may have doing certain activities only **because of your HEALTH.**

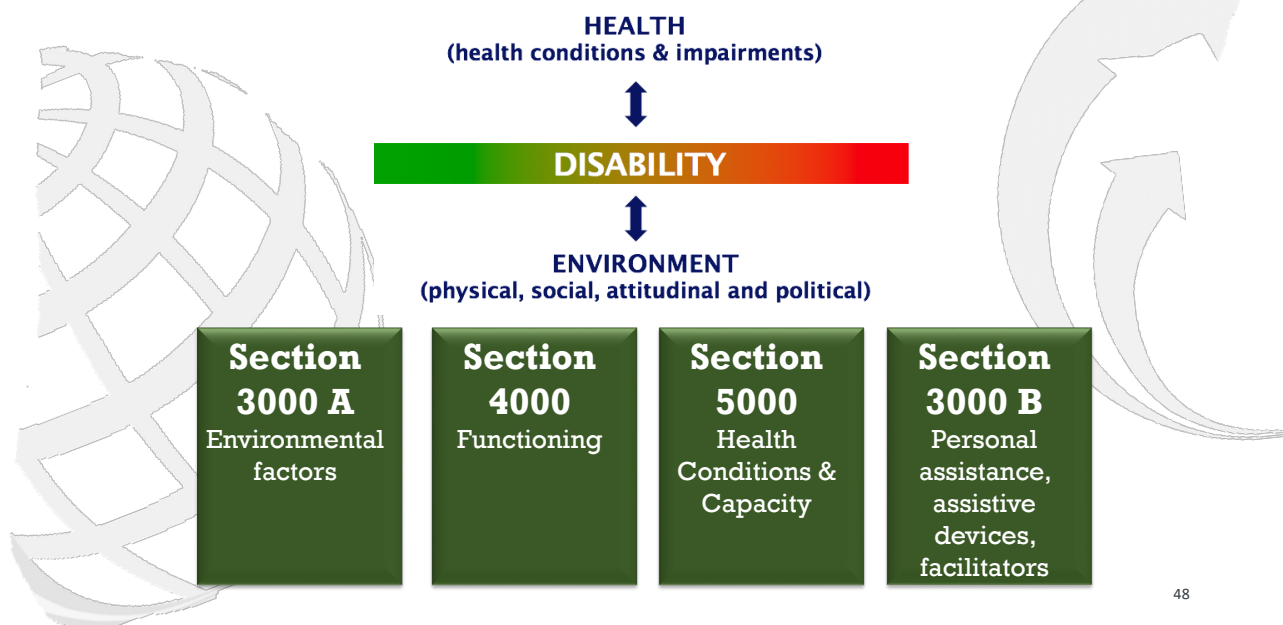
Now thinking **only** about your **health** I want you to answer these questions **WITHOUT** taking into **account** any help.



How much difficulty do you have moving around **because of your health?**

1 None	2	3	4	5 Extreme	8 Don't Know
-----------	---	--------------	---	--------------------------	-----------------





Section 3000 B
Personal assistance, assistive devices, facilitators

Environmental information

- Personal assistance
- Assistive devices for self-care, mobility, seeing, hearing, work and education
- Facilitators at home, school, work and community


















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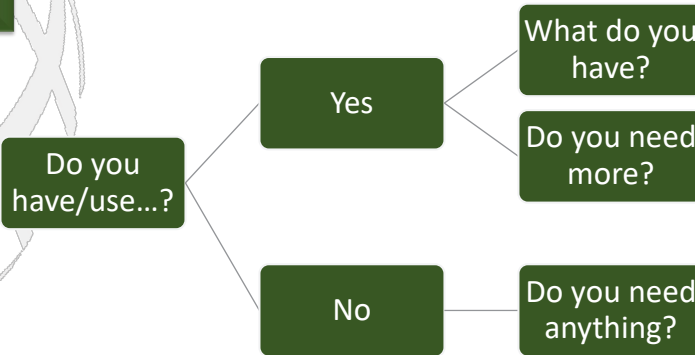


**Section
3000 B**

Personal assistance, assistive devices, facilitators

Environmental information

- Personal assistance
- Assistive devices for self-care, mobility, seeing, hearing, work and education
- Facilitators at home, school, work and community



50



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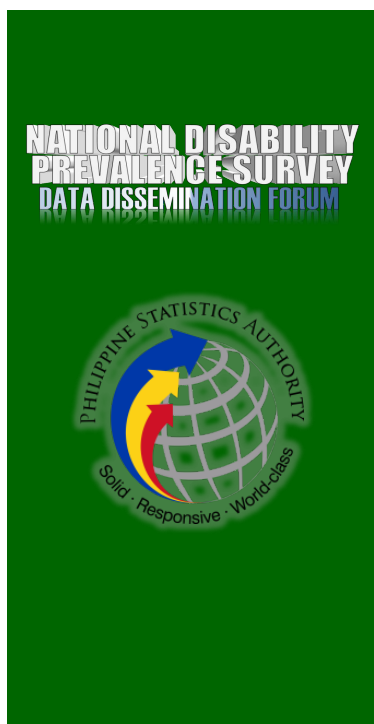


DEPARTMENT OF HEALTH

NATIONAL DISABILITY PREVALENCE SURVEY

Model Functioning Survey

Data Dissemination Forum



Presentation of the NDPS Results



NAME

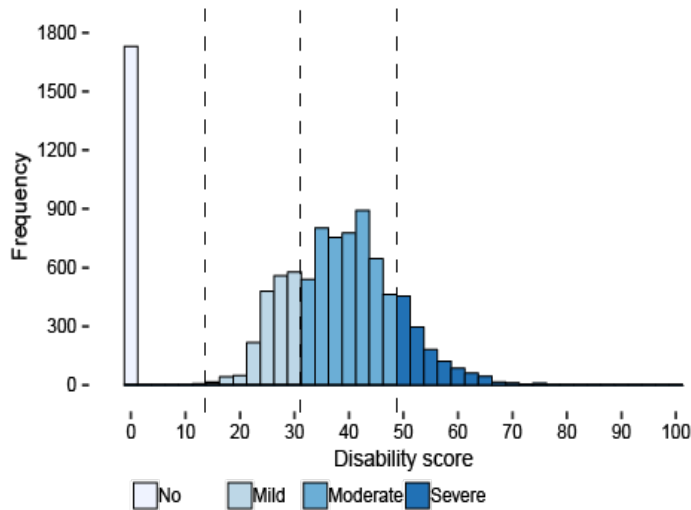
Position

Office/Division

Philippine Statistics Authority

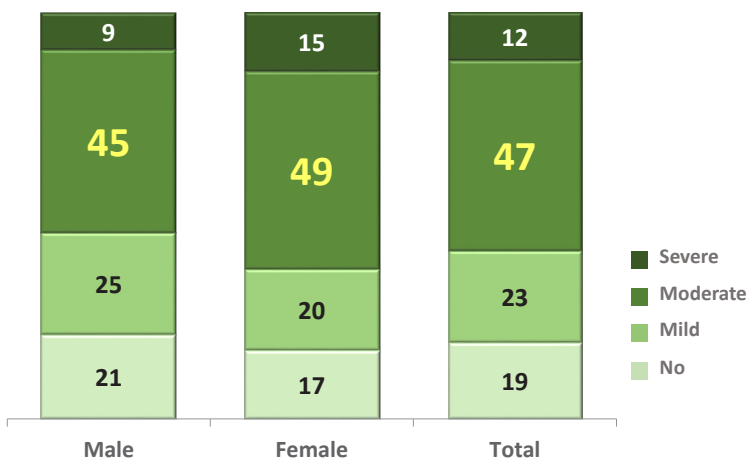
Disability Continuum

Distribution of individuals age 15 and older based on disability scores



Disability Level by sex

Distribution of disability among 15 and older



General severe disability prevalence in the country was **12%**

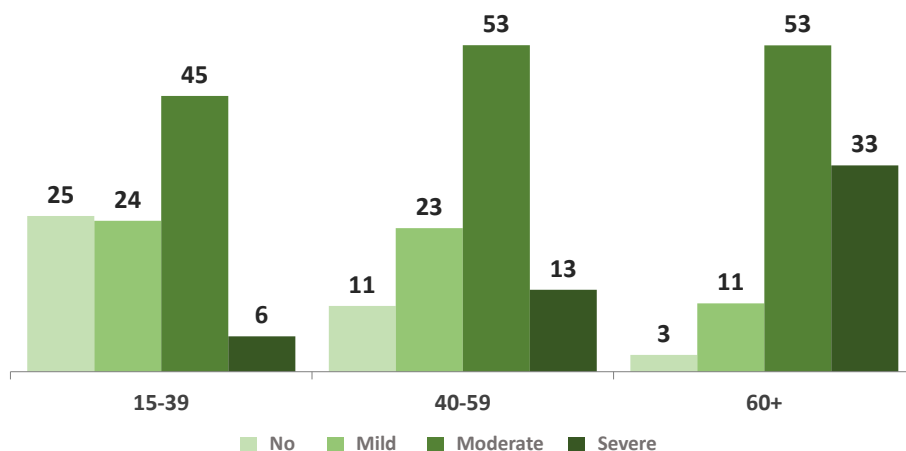
One in two persons experienced moderate level of disability at **47%**

Women are more likely to experience moderate to severe disability than men

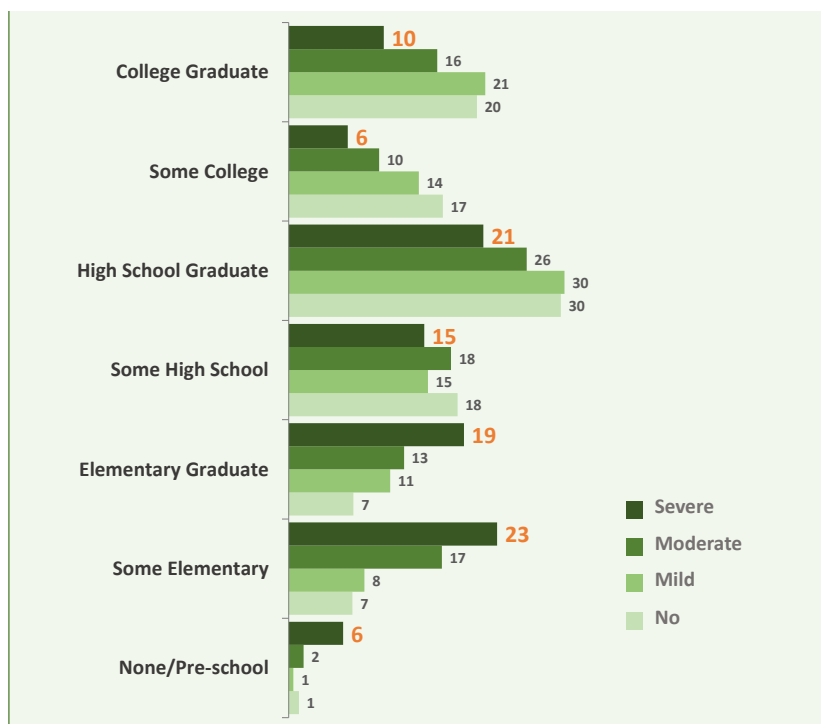


Disability Level by age

Percent distribution of individuals among 15 and older



Disability level tends to be higher for the older ages



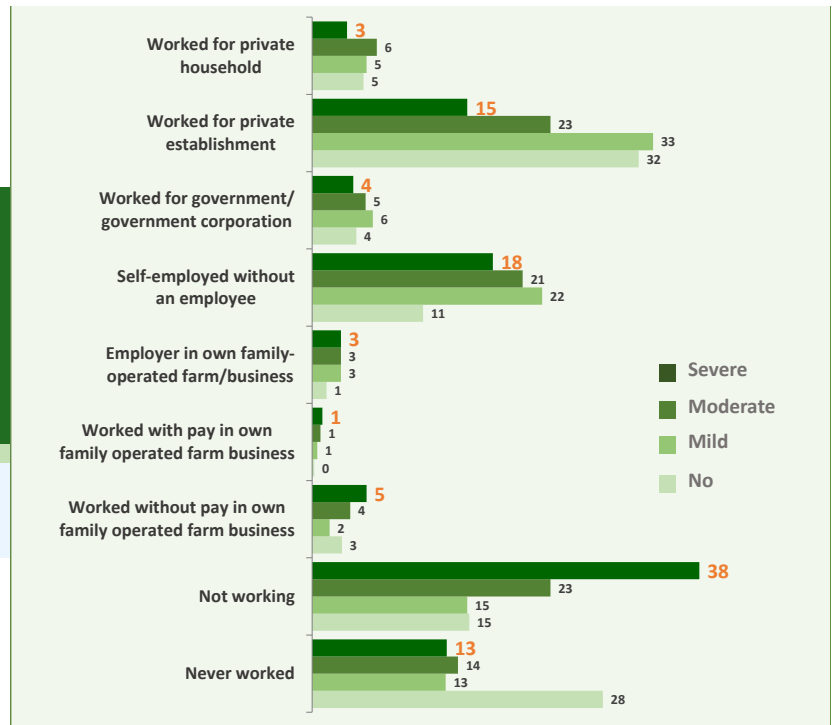
Disability Level by education

Percent distribution of individuals age 15 and older



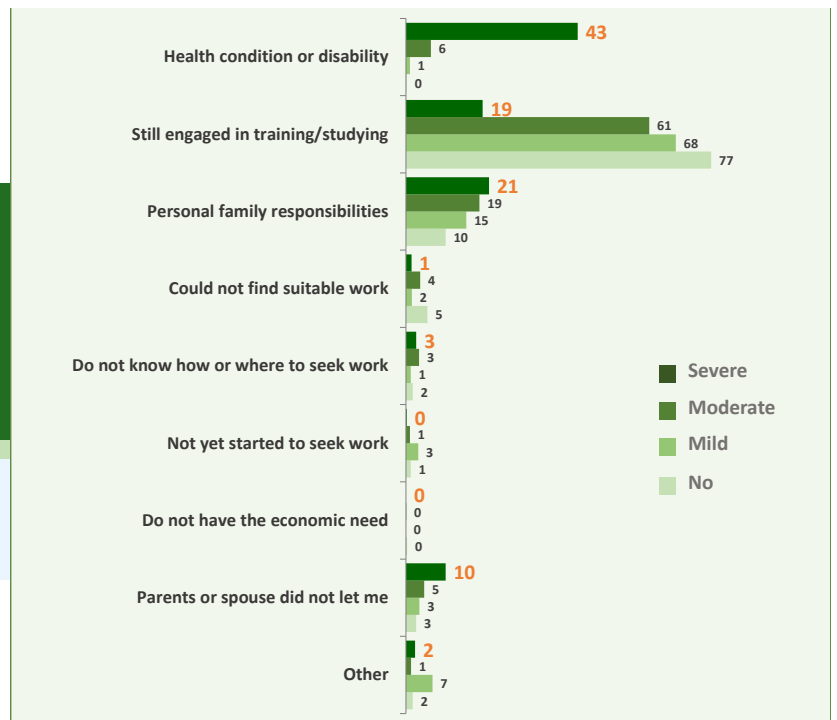
Disability Levels by work status and class of worker

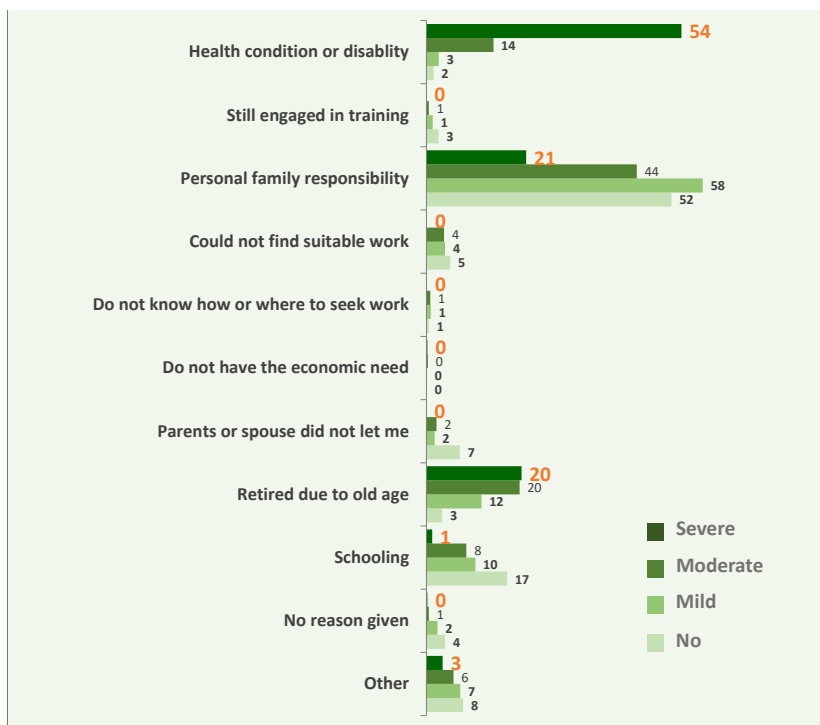
The biggest proportion of persons with severe disability are not currently working **38%**



Reason Why Never Worked

Percent of individuals age 15 and older who never worked





Reason Why Not Currently Working

Percent of individuals age 15 and older who are not current



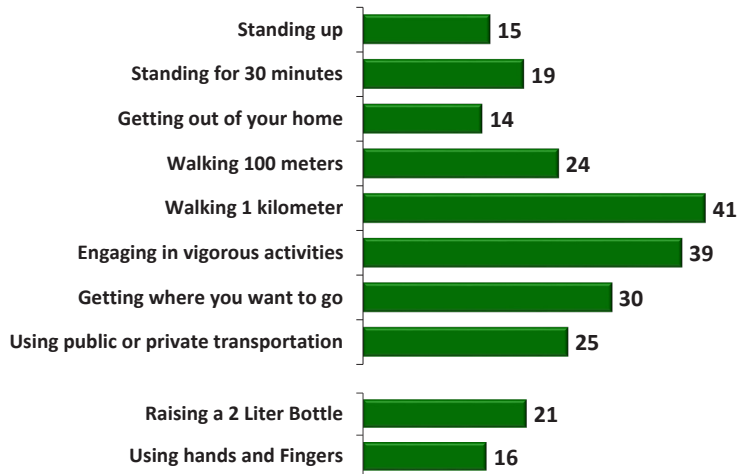
Most Affected Daily Life Areas

Among persons with severe disability

- | | |
|---------------------------|---|
| 1. Mobility | 10. Intergenerational relationships |
| 4. Seeing | 13. Cognition |
| 5. Hearing | 14. Household Tasks |
| 6. Pain | 15. Community and citizenship participation |
| 7. Sleep and energy drive | 16. Caring for others |
| 8. Breathing | 17. Work and Schooling |
| 9. Affect | |

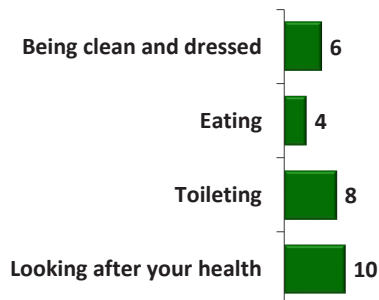
Mobility Domains rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability



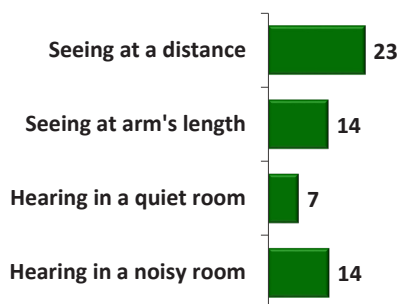
Self-care Aspect as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability



Hearing and Seeing Aspect rated as “Very Problematic” or “Extremely Problematic”

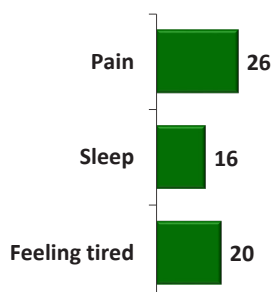
Percent of individuals age 15 and older with severe disability



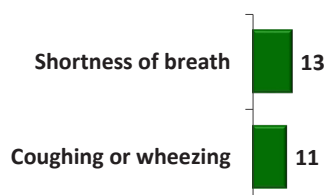
Pain and Affect or Emotional Functions and Interpersonal Relationships rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability

Pain, Energy and Drive



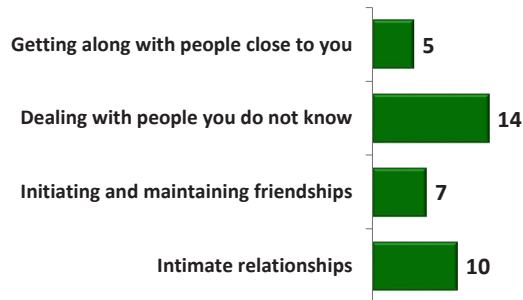
Breathing



Stress and Affect or Emotional Functions rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability

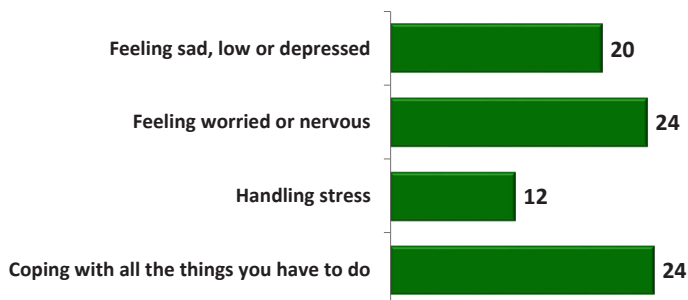
Stress and Affect or Emotional Functions



Interpersonal Relationships rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability

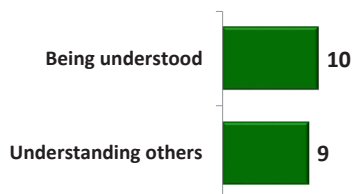
Interpersonal Relationships



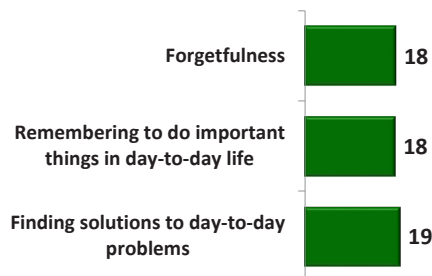
Hearing and Seeing Aspect rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability

Communication



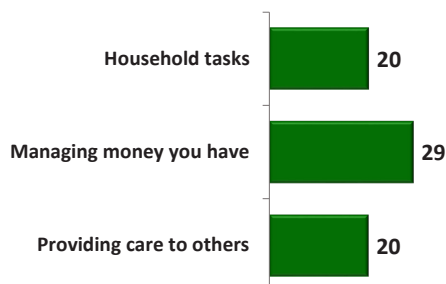
Cognition



Household Tasks, Managing Money and Providing Care and Participation Areas rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability

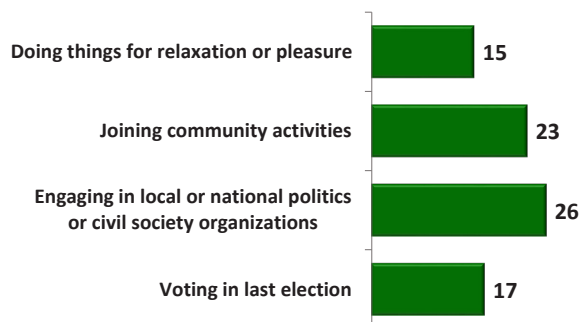
Household Tasks, Managing Money and Providing Care



Household Tasks, Managing Money and Providing Care and Participation Areas rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability

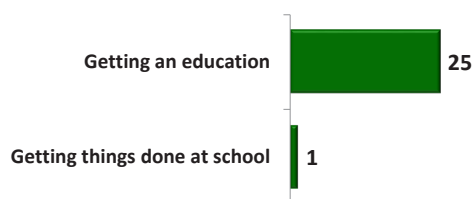
Participation Areas



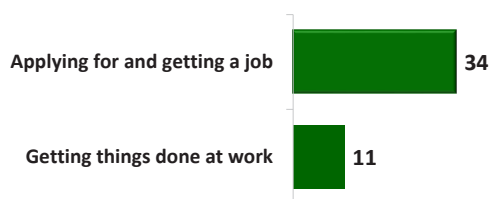
Education and Work Areas rated as “Very Problematic” or “Extremely Problematic”

Percent of individuals age 15 and older with severe disability

Education



Work



Most Affected Daily Life Areas rated as “Very Problematic” or “Extremely Problematic”

Percent distribution of individuals among 15 and older



Most Affected Daily Life Areas rated as “Extremely Problematic”

Percent distribution of individuals among 15 and older



Most Affected Daily Life Areas rated as “Very Problematic” or “Extremely Problematic”

Percent distribution of individuals among 15 and older

EDUCATION



25%

with extreme problem in getting an education



1%

with extreme problem in getting things done at school

WORK



34%

with extreme problem in applying for and getting a job



11%

with extreme problem in getting things done at work



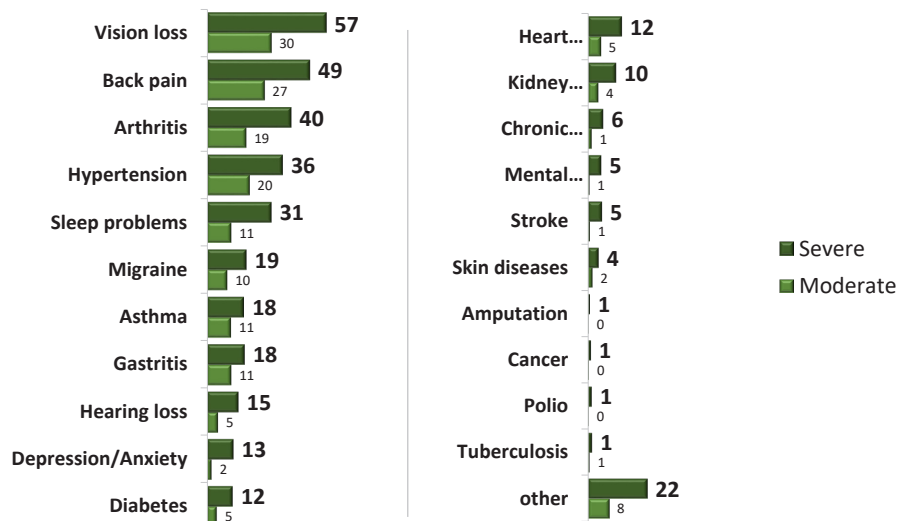
Health

1. Health Conditions and Impairments
2. Capacity



Health Conditions and Impairments

Percent of individuals age 15 and older



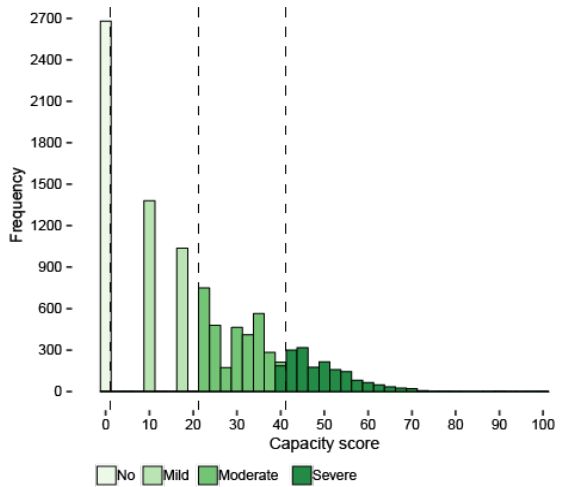
Capacity

Capacity Continuum

Frequency distribution of individuals age 15 and older

Capacity/Health State

- a synthesis of all intrinsic physical and mental capacities of a person, determined solely by his/her health conditions or impairments
- Capacity score is based on difficulties in 17 functioning domains

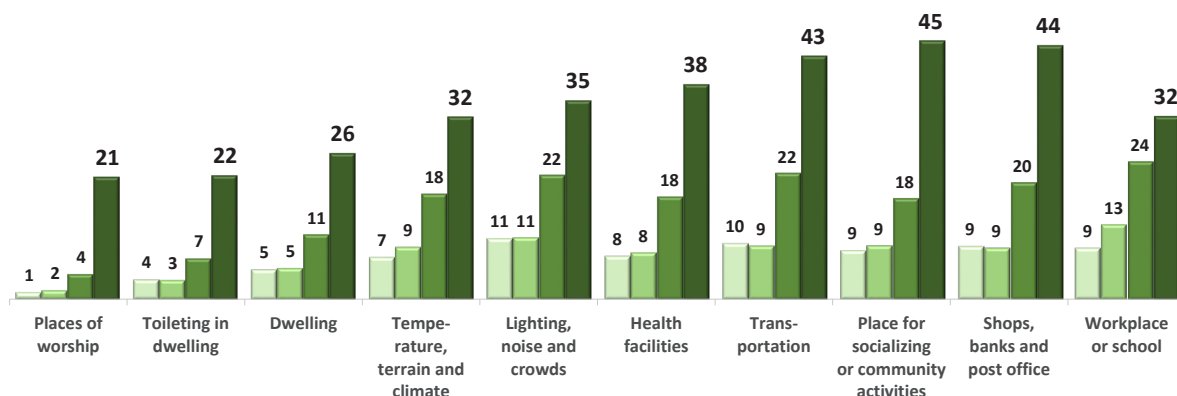


Environmental Factors



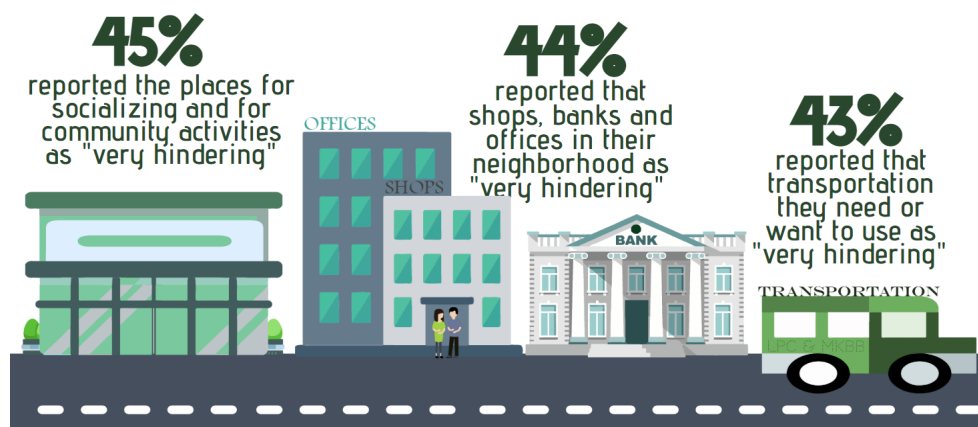
General Environment: hindering or Facilitating

Percent of individuals age 15 and older



General Environment: hindering or Facilitating

Percent of individuals age 15 and older with severe disability



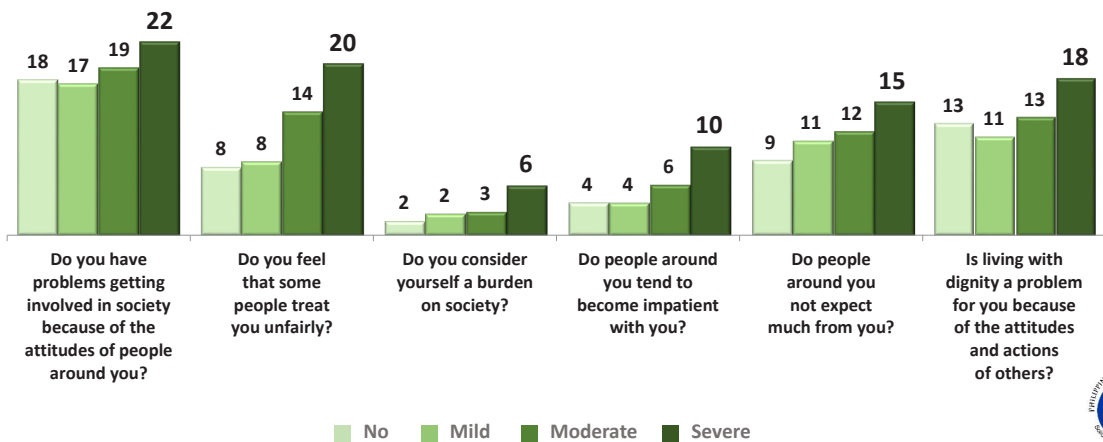
Personal Assistance

Percent of individuals age 15 and older with severe disability



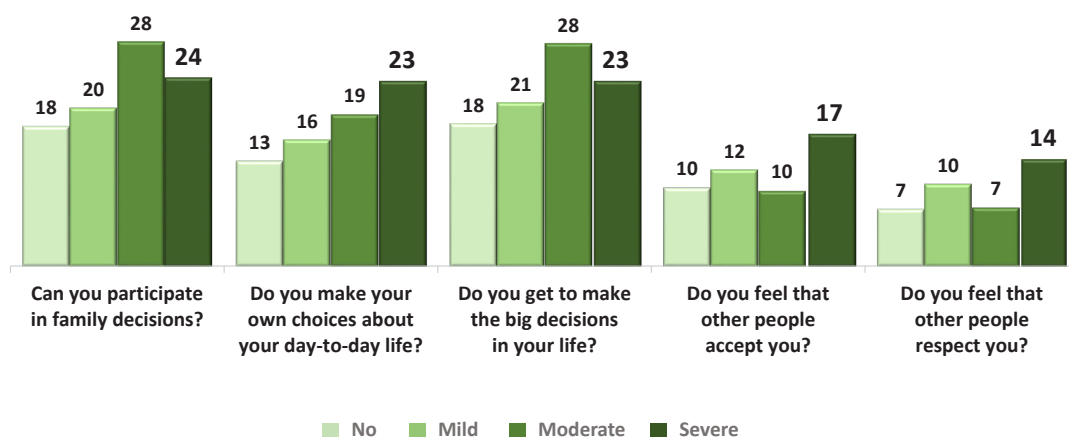
Attitudes of Others

Percent of individuals age 15 and older endorsing “mostly” or “completely” to the questions about attitudes of others



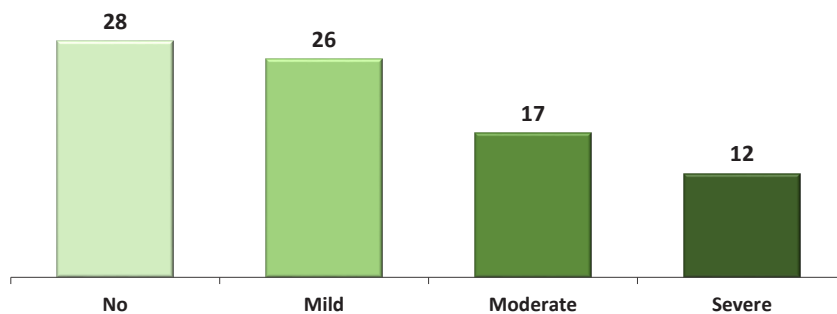
Attitudes of Others

Percent of individuals age 15 and older endorsing “no” or “not at all” to the questions about attitudes of others



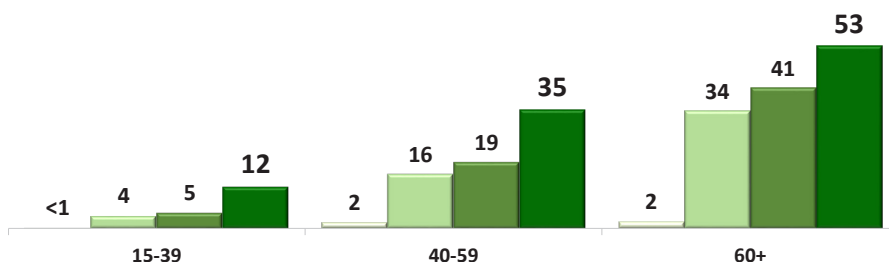
Access to Information

Percent of individuals age 15 and older with complete access to information they need or want



Regular Use of Medication by Age Group

Percent of individuals age 15 and older with regular medicine intake

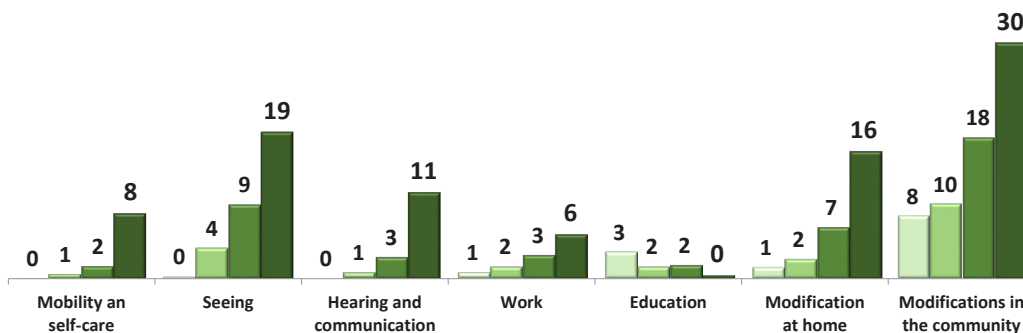


Note: Labels "<1" denotes greater than 0 but less than 1 percent



Unmet needs of Assistive Products and modifications

Percent of individuals age 15 and older who do not use products, reporting unmet needs of assistive products and modifications



Note: Labels "<1" denotes greater than 0 but less than 1 percent



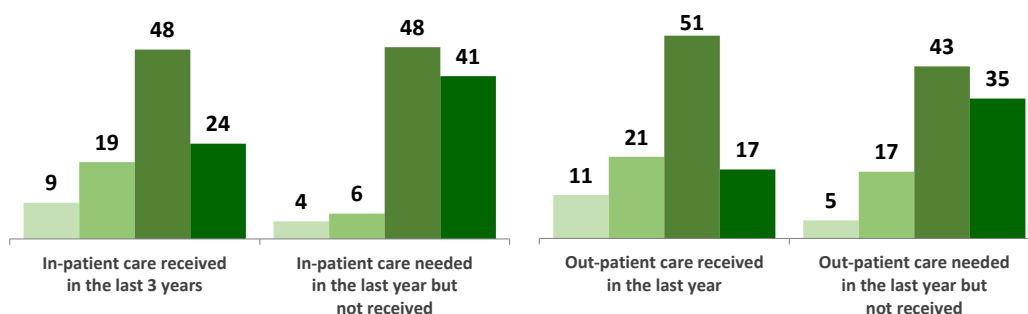
Unmet needs of Assistive Products and modifications

Percent of individuals age 15 and older who do not use products, reporting unmet needs of assistive products and modifications



Health Care Responsiveness

Percent of individuals age 15 and older who needed and did not get care



Summary Findings

1. The severe disability prevalence in 2016 in the Philippines was 12%
2. Almost every second person experiences moderate level of disability
3. Women are more likely to experience severe disability
4. Older persons are more likely to have severe disability



Summary Findings

5. Access to education and work poses problem for a large share of the general population, increasing for higher disability levels
6. Persons with higher level of disability face larger disadvantages due to barriers in their physical environment



Summary Findings

7. Attitude of others and access to information pose problems for all groups of the population, increasing for higher disability levels
8. Persons with severe disability have unmet needs regarding devices and modifications, additional personal assistance and outpatient care



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Autism Mapping Country Profile



SINGAPORE

I. INTRODUCTION TO SINGAPORE

A. Background

1. Singapore is a small, densely populated and diverse island city-state of 5.64 million people, comprising 4 million citizens and permanent residents, and 1.64 million foreign citizens living and working in the country, within a land area of around 724.2 square kilometres. From 2011 to 2018, the population density increased from 7,273 persons per square kilometre in to 7,804 persons per square kilometre.¹

B. Population profile

2. *Ethnicity, religion, age and gender:* Singapore's resident population is ethnically diverse, comprising approximately 74.3% Chinese, 13.4% Malay, 9.0% Indian, and 3.2% from other ethnicities. Singapore is also multi-religious, with a population that is approximately 33.2% Buddhist, 14.0% Muslim, 18.8% Christian, 10.0% Taoist, 5.0% Hindu, and the remainder from other faiths. Singapore's population is fast ageing, with the median age of the resident population at 40.8 years in 2018, compared to 38 years in 2011. In 2018, 20.5% were aged below 20 years, 65.8% aged 20 – 64 years and 13.7% were 65 years and above. In terms of gender, males made up 49.0% and females made up 51.0% of the resident population.²
3. *Labour force:* Singapore's resident labour force comprised 2.29 million people in 2018. The resident labour force participation rate was 67.7%, up from 65.4% in 2009. The annual seasonally adjusted resident unemployment rate for 2018 was 2.9% and is on a general declining trend from 4.5% in 2009³.
4. *Fertility and infant mortality:* Singapore's resident fertility rate was 1.14 births per female in 2018, compared to 1.2 in 2011. There were 39,115 resident live births, of which 51% were males, and 49% were females. Infant mortality rate remained the same at 2 per thousand resident live-births in 2018 compared to 2011. Maternal mortality rate has remained low. There were 7.5 per hundred thousand live-births and still-births in 2011, and none in 2017 (among the lowest in the world).
5. *Life expectancy:* Life expectancy at birth for the resident population continued to increase from 81.9 years in 2011 to 83.2 years in 2018. The proportion of Singapore's aged population (65 years and above) increased from 9.3% in 2011 to 13.7% in 2018.
6. *Disability prevalence:* An estimated 3%⁴ of the resident population has some form of disability.

C. Socio-Economic and Cultural Indicators

7. *Standard of Living:* The United Nations' Human Development Report 2018 ranked Singapore 9th out of 189 countries on the Human Development Index, up from 27th out of 169 countries in the

¹ Department of Statistics Singapore, as at end June 2018.

² Department of Statistics Singapore, as at end June 2018.

³ The annual average unemployment figures are the simple averages of the non-seasonally adjusted unemployment figures obtained at quarterly intervals.

⁴ Enabling Masterplan 2012 - 2016

2010 Report. This reflects an overall improvement in the standard of living in the areas of life expectancy, educational attainment and real income.

8. Singapore's socio-economic performance can be attributed to its continued political stability, quality judicial performance and the high integrity of its government. In 2018, the Political and Economic Risk Consultancy ranked Singapore highest in terms of integrity of government, with a corruption level of 1.90, the lowest in the region.
9. In 2018, the Gross Domestic Product (GDP) was S\$487 billion (USD\$279 billion) while GDP per capita was S\$86,383 (USD\$63,839). Singapore's economy continues to do well, with a real growth of 3.2% in 2018.⁵
10. Singapore provides affordable housing through public housing subsidy schemes, and heavily subsidised rental housing for those who cannot afford to own their flats. About 79.0%⁶ of Singapore's residents live in high-rise public housing built by the Government. The rest of the population lives mainly in private housing estates.
11. Singapore is also known as a city in a garden with an environment that is clean and green, and where residents enjoy a high standard of public health. The air quality in terms of the Pollutant Standards Index was in the 'Good' to 'Moderate' range for 99.5% and the 'Unhealthy' range for 0.5% of the days in year 2017.⁷
12. The incidences of food-, water- and vector- borne diseases are low, and practically all Singapore residents enjoy modern sanitation.
13. The literacy rate (number of literate persons for every 100 residents) for the resident population aged 15 years and older was 97.3% in 2018, up from 96.5% in 2013 and 93.8 % in 2004. The mean years of schooling for residents aged 25 years and older is 11.1 years in 2018, up from 10.6 years in 2014 and 8.9 years in 2004. Among residents aged 25 years and above, 55.8% have Post-Secondary, Polytechnic or University qualifications, up from 51.5% in 2014 and 33.9% in 2004.
14. Singapore has four official languages: Malay, Mandarin, Tamil and English. Malay is the national language while English is the language of administration. English is the common language learnt by all students in Singapore.

II. METHODOLOGY TO COLLECT DATA ON PERSONS WITH DISABILITIES

15. Data on persons with disabilities is presently collected by government agencies when such persons use services provided by these agencies, with protections in place under the Personal Data Protection Act (PDPA). Information is also collected through nation-wide surveys. The Ministry of Manpower conducts an annual Comprehensive Labour Force Survey, which includes information on workers with disabilities. The National Council of Social Service (NCSS) conducts surveys on persons with disabilities on their quality of life. Disability-related questions will also be included in the next Census of Population to be conducted in 2020 (Census 2020). The Government is also developing a system to better capture data concerning persons with disabilities in the wider public. This system aims to not only improve ease of access to schemes and services by persons with disabilities and their caregivers, but also improve information about the demographic, needs, and the outcome of interventions and services, of persons with disabilities in Singapore, so that

⁵ Department of Statistics Singapore, as at end June 2018.

⁶ Department of Statistics Singapore, 2018.

⁷ National Environment Agency

service providers and the Government can better provide holistic assistance to persons with disabilities. The system will pool together various sources of information, including from schools as well as the Census 2020.

III. LAW AND POLICY IN RELATION TO DISABILITIES, INCLUDING AUTISM SPECTRUM DISORDER

A. DEFINING AUTISM SPECTRUM DISORDER

(i) Diagnostic Approach⁸

16. The term “autism spectrum disorders” (ASD) reflects the broad spectrum of clinical characteristics that encompass complex developmental disorders that are behaviourally defined by the presence of persistent deficits in social communication and social interactions across multiple contexts and restrictive, repetitive patterns of behaviour, interests or activities. In Singapore, the use of the ICD-11 or DSM-5 is recommended for the diagnosis of ASD.

(ii) Detection⁹

17. Health professionals in Singapore are recommended to identify ASD early, in order to provide opportunity for early referral and intervention, so that the child with ASD may have improved functioning in later life. Early identification is recommended to be achieved by:

- developmental surveillance of all children so that deviations from normal may be detected early
- valuing and addressing parental and/or caregiver concerns about development
- early and ready access to developmental assessment services

18. 3. The Government issues a Health Booklet for every child born in Singapore, to track each child’s immunisation history and developmental screening progress. Under the Enabling Masterplan 2 2012-2016, it is recommended for the Health Booklet to be the major tool for developmental screening at primary care level. An extensive network of developmental surveillance is established nation-wide. Parents will remain the primary caregivers in developmental surveillance of their child, by using the parental checklists in the Health Booklet, which include all the red flags for ASD. They will be supported by primary health professionals in the community, consisting of family physicians, paediatricians and allied healthcare workers. In addition, the pre-school teachers will also be involved as children enter infant care and early childhood centres in the community.

19. In Singapore, the current recommended ages for developmental surveillance (often performed together with immunisation) are 4-6 weeks, 3-4 months, 6-10 months, 15-18 months, 2-3 years and 4-6 years. These "touch-points" in the developmental surveillance content of the Health

⁸ Autism Spectrum Disorders in Pre-School Children, Academy of Medicine Singapore - Ministry of Health Clinical Practice Guidelines 1/2010
https://www.moh.gov.sg/docs/librariesprovider4/guidelines/cpg_autism-spectrum-disorders-pre-school-children.pdf

⁹ Autism Spectrum Disorders in Pre-School Children, Academy of Medicine Singapore - Ministry of Health Clinical Practice Guidelines 1/2010
https://www.moh.gov.sg/docs/librariesprovider4/guidelines/cpg_autism-spectrum-disorders-pre-school-children.pdf

Booklet will continue to be reviewed. Children of any age with clinical and behavioural features suggestive of ASD are recommended for referral for comprehensive evaluation. ASD is a neuro-developmental condition, and diagnosis can be conducted throughout the lifespan, from childhood, adolescence to adulthood. ASD is a behaviour-based diagnosis.

20. With the revision and expansion of the definition of the spectrum concept, more individuals, especially those in the milder range, may be included. The label is useful in the context where such an individual could be accepted and understood in his/her journey of learning, acquisition of skills, and in the society and community. Although ASD is a lifespan diagnosis, a focus on the functioning of the individual in the community, work and social environment as they transit through different phases in life is more important.
21. Health professionals who detect any delays in a child's development during screening and medical check-ups would make referrals to the Child Development Programme (CDP) in appointed hospitals for diagnosis of developmental concerns. The diagnosis of autism is made with careful assessment by a team of qualified professionals that may include a developmental paediatrician, psychologist, speech-language therapist and an occupational therapist. Support would be provided in accessing short-term early intervention services within the hospital, as well as long-term early intervention programmes in the community. Advice would also be given to parents to assist them in making appropriate decisions regarding educational placement and transition needs to mainstream or special schools, such that the child's potential is maximised and his or her needs are met. Older children and adults can also be referred to the Child Guidance Clinic or Adult Neurodevelopment Service respectively at Institute of Mental Health (IMH) for an ASD diagnosis.

B. INTERNATIONAL COMMITMENTS

21. Singapore signed the Convention for the Rights of Persons with disabilities (CRPD) on 30 November 2012 and ratified it on 18 July 2013. The Convention entered into force on 18 August 2013. Singapore's initial report was submitted to the Committee on the Rights of Persons with Disabilities in June 2016. Singapore is also an active participant at the annual Conference of State Parties to the Convention on the Rights of Persons with disabilities held at the UN Headquarters, New York. This includes serving as the Vice-President of the 12th and 13th Conference from 2019-2020. The Government also set up an inter-ministerial Standing Committee on Disability in 2007 to exemplify the Whole-of-Government approach and coordination of disability-related policies and operational matters in the national implementation of the Convention.
22. Singapore is the first South-East Asian country, and 7th country worldwide to ratify the Marrakesh Treaty to Facilitate Access to Published Works for Persons who are Blind, Visually Impaired, or Otherwise Print Disabled on 30 March 2015¹⁰. The treaty entered into force on 30 September 2016. Amendments were also made to Singapore's Copyright Act to facilitate greater access to copyrighted works for people with reading disabilities¹¹.

¹⁰ http://wipo.int/treaties/en/ShowResults.jsp?lang=en&treaty_id=843

¹¹ <https://www.mlaw.gov.sg/content/minlaw/en/news/press-releases/amendments-to-the-copyright-act-2014.html>

23. Singapore also sits in the ASEAN Intergovernmental Commission on Human Rights (AICHR) Task Force on Mainstreaming the Rights of Persons with Disabilities in the ASEAN Community. The Task Force seeks to roll out an ASEAN 2025 Enabling Masterplan that sets out action lines to realise the rights of persons with disabilities in the region. Singapore continues to participate actively in regional meetings on disability matters. Government officials and representatives of the people sector have participated in various conferences and programmes on disability matters run by the United Nations Economic and Social Commission for Asia and the Pacific Concern for the Disabled (UNESCAP) and ASEAN.

C. NATIONAL APPROACH TO DISABILITY ISSUES: STRATEGY, LEGAL AND POLICY FRAMEWORK

(i) The Enabling Masterplans

24. Singapore strives to build an inclusive society where persons with disabilities are recognised, empowered and given every opportunity to be integral and contributing members of society. Singapore has charted plans to support persons with disabilities under the Enabling Masterplans (EMP). This is a collective effort amongst Government agencies, private sector and people sector, including persons with disabilities and non-government organisations that provide services to persons with disabilities. Each EMP is a five-year roadmap that guides Singapore towards becoming a more caring and inclusive society. Amongst others, the EMPs promote the social and economic inclusion of persons with disabilities in Singapore, with initiatives across areas such as early intervention, education, employment, transport, health, adult care, accessibility and technology. Three EMPs have been released thus far, beginning with the first Enabling Masterplan introduced in 2007. Singapore is currently implementing the Third Enabling Masterplan from 2017 to 2021.

25. Implementation of the EMPs is a collective effort amongst Government agencies, private sector and people sector, including persons with disability and social service agencies (SSAs) which provide services to persons with disability. The Government engages and works closely with relevant stakeholders to develop programmes and policies for persons with disabilities, as well as collect feedback. For example, the recommendations in the Enabling Masterplans (EMP) were drafted based on a ground-up approach, a series of consultations and focus group discussions. The progress of each EMP is shared with various representatives of the disability sector and persons with disabilities can provide their feedback. The results of the study provide useful information in the review of the next Enabling Masterplan.

(ii) Legal framework for protecting and safeguarding the rights of persons with disabilities

26. Singapore law provides protection and redress to persons with disabilities under its laws governing the relevant spheres. In Singapore, all persons, including persons with disabilities, are equal before the law. The rights of persons with disabilities are protected under the Constitution as well as in other legislation like the Women's Charter and the Penal Code. The Constitution of Singapore is the supreme law in Singapore and where any legislation or policy contravenes the provisions of the Constitution, all persons, including persons with disabilities, may apply to the High Court to seek a judicial review of that particular legislation on the grounds that it is inconsistent with the Constitution.

27. Singapore respects the inherent dignity, individual autonomy and independence of persons with disabilities. Under Singapore law, all persons are assumed to have legal capacity to make decisions

unless it is established that a person lacks capacity. Under the Mental Capacity Act, a person lacks capacity in relation to a matter if at the material time he is unable to make a decision for himself in relation to the particular matter because of an impairment of, or a disturbance in the functioning of, the mind or brain. The Act explicitly states that “a lack of capacity cannot be established merely by reference to a person’s age or appearance, or a condition of his, or an aspect of his behaviour, which might lead others to make unjustified assumptions about his capacity. This ensures a balance between the protection of persons with disabilities, and respect for their inherent dignity, individual autonomy and independence.

28. Singapore also has laws to protect its citizens, deter crime and protect employees’ rights, which also covers persons with disabilities. Policies and laws are also reviewed from time to time to ensure that they remain relevant and adequate in meeting changing needs. For example, the Children and Young Persons Act was amended in 2011 to provide for licensing of children homes to accord better protection to children in residential care. The regulation extends to homes for children with disabilities. Another example is the amendment of the Central Provident Fund Act in 2011 to implement the Special Needs Saving Scheme, which seeks to ensure that the financial needs of children with disabilities are taken care of through their deceased parents’ Central Provident Fund (CPF) monies.

IV. STAKEHOLDERS

A. GOVERNMENT BODIES

(i) Standing Committee on Disability

29. The Standing Committee on Disability (SCD) was set up to co-ordinate disability-related policy issues at the government-level. The SCD is chaired by the Permanent Secretary¹² of the Ministry of Social and Family Development (MSF) and comprises members from relevant government ministries and agencies, including the ministries for education, health, manpower, transport, national development and agencies such as the Workforce Singapore (WSG), the National Council of Social Services (NCSS) and SG Enable.
30. The SCD steers policy directions and develops strategies to address disability issues, coordinates inter-government and inter-agency efforts to address disability issues holistically, looks into resource planning for the disability sector, and tracks the implementation of the Enabling Masterplans. The inter-ministerial and inter-agency efforts also exemplify the Whole-of-Government approach in Singapore when considering disability matters.

(ii) Disability Office at the Ministry of Social and Family Development

31. The Disability Office serves as the secretariat to the SCD, and is the national focal point for policy issues concerning persons with disabilities. The Disability Office works closely with all government ministries, disability organisations and other stakeholders on issues relating to the interests of persons with disabilities. The Disability Office also conducts consultations for the purposes of developing and refining policy, with stakeholders such as persons with disabilities, their families, social service agencies (SSAs), employers, as well as professionals and practitioners in the field.

¹² The Permanent Secretary is a public officer appointed by the President to head a ministry. He takes charge of the implementation of policies and programmes of his ministry, under the general direction and control of the Minister responsible.

(iii) Special Educational Needs Division at the Ministry of Education

32. The Special Educational Needs Division provides system-level oversight of the educational needs of students with special educational needs (SEN) in mainstream and SPED schools. It oversees policies and measures to support students with SEN, and provides thought leadership, expertise and support to raise capabilities of SPED schools and mainstream schools to support students with SEN. This includes ensuring the quality, accessibility and affordability of special education, developing policies, and setting standards for quality assurance in SPED schools; developing and implementing policies and specialised educational programs and services for students with SEN in mainstream schools; and developing school staff capacity to provide support and deliver effective interventions.

(iv) National Council of Social Service

33. The National Council of Social Service (NCSS) is the umbrella body for over 450 social service agencies in Singapore, of which include disability agencies. Its mission is to provide leadership and direction in social services, enhance the capabilities of social service agencies, and provide strategic partnerships for an effective social service ecosystem. NCSS also plays a role in advocating for social service needs, raising public awareness on related issues, as well as conducting research on vulnerable populations to inform policy and the planning of services.

B. COMMUNITY PARTNERS

34. The Government works closely with community partners to deliver social services and ensure that no one is left behind. At the broader level, the Government enables and supports community efforts by bringing together community partners to forge a common picture of local service needs, and facilitate collaboration and partnerships. This is done through the Singapore Cares movement, or SG Cares, which aims to identify and share about needs on the ground, shape volunteering opportunities, and match givers to causes. Under the SG Cares movement, MSF and the Ministry of Culture, Community and Youth co-organise regular SG Cares Community Network sessions across all townships, bringing together Grassroots leaders and community partners.

35. In addition, MSF partners with the following organisations to deliver disability services:

(i) SG Enable

36. SG Enable is an agency dedicated to enabling persons with disabilities. The key functions of SG Enable are to provide information and referral services for child and adult disability services, administer grants and support to persons with disabilities and their caregivers, enhance employability and employment options for persons with disabilities and to rally stakeholder support in enabling persons with disabilities to integrate with the community at large.

(ii) Social Service Agencies

37. Social Service Agencies (SSAs) are non-profit organisations that provide welfare services and or/services that benefit the community at large. They are typically set up as societies or companies limited by guarantee or trusts and may receive government funding. SSAs serving the autism community in Singapore include the Autism Association (Singapore) (AAS), Autism Resource Centre (Singapore) (ARC), AWWA, , Rainbow Centre (Singapore) (RC) and St. Andrew's Mission Hospital. These organisations formed the [Autism Network Singapore \(ANS\)](#) to identify and address gaps in the autism services sector, increase public awareness of autism and mobilise relevant

stakeholders and partners to better support persons with autism. Membership in ANS is open to SSAs, government and related agencies.

V. STATISTIC DATA ON AUTISM

38. With better awareness and detection, Singapore is facing an increase in the number of persons diagnosed with ASD. Based on statistics from KK Women's and Children's Hospital as well as the National University Hospital, 1 in 150 children in Singapore is diagnosed with ASD compared to the World Health Organisation norm of 1 in 160 children.

VI. PROGRAMS AND SERVICES FOR PERSONS WITH AUTISM

A. EARLY-INTERVENTION

(i) General support for children with disabilities, including those with ASD

39. The Government funds early intervention programmes in the recognition that early intervention for children with disabilities improves long-term outcomes for them and their families, and reduces the risk of further delay and sub-normal developmental trajectories.

- Early Intervention (EI) programmes – Children under the age of seven with developmental needs can receive intervention through Government-funded EI programmes. Children with mild developmental needs are supported by the Development Support (DS) and Learning Support (LS) programmes, in a preschool setting. In 2018, 550 preschool centres offered DS-LS, up from 350 in 2016. For children with moderate to severe developmental needs, they are supported through the Early Intervention Programme for Infants and Children (EIPIC), provided at EI centres. There are currently 21 EIPIC centres operating in Singapore, run by 10 Social Service Agencies. In 2019, Singapore has enhanced support for children with developmental needs, building on the efforts of the Third Enabling Masterplan. Starting from July 2019, the Government is investing around S\$60 million a year to make fees for EI services much more affordable and to provide two new EI programmes, as follows:
 - EIPIC Under-2s – Children under two years old enrolled in EIPIC receive targeted intervention via the EIPIC Under-2s programme. The programme requires children to be accompanied by their parents/caregivers, who receive training to carry out intervention strategies in the child's daily routines at home. Such strategies embed learning opportunities throughout the children's daily lives, and lead to more sustainable outcomes. At the age of two, the children will transit to the EIPIC@Centre programme.
 - DS-Plus – Children who have made sufficient progress under EIPIC@Centre can transit to receiving intervention in a preschool setting under a new Development Support Plus (DS-Plus) programme, where they will receive continued intervention at their EI centre until they graduate to primary school. EI professionals from the EI centre will work with the child in his/her preschool up to twice a week, co-teaching the child alongside the preschool teacher. This helps the child to adapt to the mainstream preschool setting, so that he/she can be equipped with skills within a larger class setting.
- Pilot Private Intervention Providers (PIIP) – A subsidy scheme that complements EIPIC by offering more choices of early intervention programmes for children who have been referred for the EIPIC. Parents who choose to enrol their children in selected Private Intervention Centres will receive subsidies that will help defray enrolment costs.

40. In addition, there are inclusion programmes and services for children with special needs at the preschool level:

- Government-funded Integrated Child Care Programme (ICCP) in preschools - Inclusion programme for children with special needs in a mainstream childcare centre environment, intended to ease their adaptation in a mainstream school setting eventually.
- Inclusive Preschools - There are ongoing efforts in the sector to develop preschools that cater to children with moderate developmental needs alongside other children. This includes Canossaville Preschool as well as Kindle Garden, which is an inclusive preschool by AWWA that enables children with special needs (including those with autism) to attend preschool with other children. Kindle Garden aims to reduce barriers, embrace diversity, and create a rich environment for enriched learning and growth, mutual respect and understanding to benefit all children and society.

41. In 2019, MSF set up a cross-sectoral inclusive preschool Workgroup to study how we can better support children with moderate to severe developmental needs in preschools. The Workgroup is co-chaired by Senior Parliamentary Secretary (Social and Family Development, and Education) Muhammad Faishal Ibrahim and Associate Dean (Education Research) Dr Kenneth Poon from the National Institute of Education, and involves representatives from the people, private and public sector. Tapping on the experiences and outcomes of centres such as Kindle Garden and Canossaville Preschool that support children with moderate developmental needs, the Workgroup will aim to develop approaches that can be extended to more preschools and consider aspects such as infrastructure, programming and manpower capability.

B. EDUCATION

(ii) Support for Students with Special Educational Needs (SEN) in Singapore

42. The Government's approach to supporting children with Special Educational Needs (SEN) is to place them in the appropriate educational setting that can best serve their needs. Those with mild SEN with the cognitive abilities and adequate adaptive skills to learn in large-group settings attend mainstream schools. They make up the majority of students with SEN. Meanwhile, those who require more specialised and intensive support attend one of the 19 Government-funded special education (SPED) schools, run by Social Service Agencies (SSAs), formerly known as Voluntary Welfare Organisations. SPED students are provided with appropriate and meaningful opportunities for frequent interaction and integration with their peers in mainstream schools over the course of their education, with the aim of providing them skills to integrate well within society.

- Compulsory Education Framework - The Compulsory Education Act requires all Singapore Citizens between the age of 6 and 15 residing in Singapore to attend a national primary school regularly until he or she has passed the Primary School Leaving Examination (PSLE) or has reached the age of 16. From 2019, children with moderate-to-severe SEN, including those with ASD, have come under the Compulsory Education framework.
- Special Education (SPED) schools - These 19 government-funded SPED schools, run by SSAs, cater to students with moderate to severe disabilities. They have customised facilities supported by specially-trained teachers and allied professionals. Of these schools, six have specific programmes which cater to have specialised programmes for students with ASD, namely Pathlight School, Eden School, St. Andrew's Autism School, AWWA School, Rainbow

Centre – Margaret Drive School and Rainbow Centre – Yishun Park School. Most of the other SPED schools also enrol students with ASD.

- The Government (together with the community) funds SPED schools at significantly higher levels than mainstream schools, in recognition of the fact that these schools support children with higher needs. SPED schools offer curricula with holistic outcomes for Living, Learning and Working envisioned in six core learning domains: academic, social-emotional, daily living, vocational, the arts, physical education and sports. There are also several initiatives to help SPED students transit into the workforce, from quality vocational education programmes, to industry training and attachments. Some students have opportunities to attain nationally accredited vocational certification and apply for jobs in the open market, while others who may not benefit from vocational certification but are capable of work may undergo the School-to-Work Transition Programme, which offers customised training pathways-cum-work options.
- To promote inclusivity, satellite partnerships between SPED schools and mainstream schools have been established since 2008 to provide planned and purposeful interaction opportunities between students with moderate-to-severe SEN and their mainstream peers. These interactions help to raise general awareness of SEN and build empathy in students from mainstream schools, while also allowing children with SEN to adapt to social mixing at a gradual pace. To date, almost all SPED schools that are currently located next to or near to mainstream schools have established satellite partnerships.
- Building Capacity of Staff in Mainstream Schools
 - Teacher Capacity - Enhancing professional development (PD) in support for SEN is a priority for MOE and additional resources have been deployed to upskill all teachers. We are working towards equipping all teachers with basic competencies to support students with SEN in their classrooms. Since 2005, all pre-service teachers undergoing training at National Institute of Education, Singapore (NIE) are taught to support students with SEN, including those with ASD. Through modules such as 'Teaching and Managing Diverse Learners', 'Educational Psychology' and 'Pedagogical Practices', teachers gain a basic understanding of students with SEN and how to help them in their education journey. Teachers who wish to further deepen their expertise in supporting students with SEN can attend the Teachers trained in Special Needs (TSN) course conducted by NIE. This is a 130-hour certified course to be completed within 3 years. All schools have a group of TSNs, who are trained to provide pedagogical support for students with SEN.
 - Allied Educators (Learning and Behavioural Support) [AED(LBS)] - The AEDs(LBS) are specialised staff who provide learning and behavioral support to students with mild SEN in mainstream schools. Each primary school is given at least 2 AEDs(LBS) and secondary schools are given a baseline provision of 1 AED(LBS). AED(LBS) undergo pre- as well as in-service specialised training, to equip them with practical skills and knowledge to support students with SEN.
- Community Integration Support and Provision of Assistive Technological (AT) Devices in Mainstream Schools - Support is provided for students with Physical and Sensory Impairments who attend mainstream schools to help them develop appropriate skills to adapt and settle into the mainstream environment, access learning better and to meet their individual developmental milestones. These support services are provided by SSAs, and include learning and therapy support, assessment and recommendation of appropriate AT devices and access

arrangements, career guidance, counselling, training and enrichment for the student. In addition, service providers also provide teacher training and consultations, and parent support programmes to enable better community/caregiver support. AT Devices are also provided to eligible students. Students diagnosed with ASD and additional physical/sensory impairments in mainstream can access these services.

- Access to Mental Health Services - Since Aug 2007, Singapore's Ministry of Education (MOE) has collaborated with Institute of Mental Health (IMH) to introduce IMH's REACH (Response, Early intervention and Assessment in Community Mental Health) services to all mainstream schools in Singapore. This includes (a) a helpline for school personnel to consult psychiatrists and other mental health professionals and seek advice on strategies to help students with ASD, ADHD and other emotional and/or behavioural difficulties; and (b) referral services for students to mobile REACH teams comprising mental health professionals for assessment and intervention.
- Support for SEN in Institutes of Higher Learning (IHLs) - All IHLs provide specialised support to students with SEN. Every IHL has a SEN Support Office which provides a one-stop service in supporting students with SEN from pre-enrolment to graduation. The SEN Support Office and the relevant IHL academic department will engage the students to better understand their needs, and offer necessary support such as access arrangements for classes, assessments and examinations. The Offices also administer funding for students to purchase Assistive Technology devices and support services such as text enlargement software, wireless assistive hearing devices and note-taking services. IHLs also work with SSAs, for mentorship programmes, internship placements and job matching to better prepare students with SEN for the workforce.
- Special Student Care Centres (SSCCs) - SSCCs offer subsidised before- and after-school care services for children aged 7 to 18 with special needs who are attending either mainstream or SPED schools.

(iii) **Examples of Other Programmes run by SSAs for Students with ASD**

- Artist Development Programme (ADP) – This programme aims to uncover artistic talents in students with autism at Pathlight School and develop their potential. The programme is run by ARC. Under ADP, professional artists are engaged to work with talented students to nurture their talents. Students whose works are sold get a royalty payment from Pathlight School. This helps both students and their families to recognise the value of how their talent if properly honed and supported by good work habits, will give them a chance to have a dignified source of income.
- Autism Support Programme for Institute of Technical Education (ITE) Students run by ARC and Temasek Cares. The programme provides structured support for students with autism at ITE to develop better social, educational and mental well-being so that they are better able to access the curriculum and complete their ITE education. Caregivers receive guidance on ways to partner with the school to support the student as well.

C. EMPLOYMENT

43. Singapore is committed to enabling persons with disabilities to work on an equal basis with others, as employment empowers persons with disabilities and gives them full opportunity to become integral and contributing members of society. A range of policy measures and programmes are

offered to enhance the employability of job-seekers with disabilities and enable them to find gainful employment.

(i) General employment services and support for persons with disabilities

- In 2013, SG Enable was set up to enhance employability and employment of persons with disabilities. SG Enable works with other SSAs to provide vocational assessment of needs and readiness for open employment, job placement and job support services for Persons with disabilities. Support offered by SG Enable include:
 - SG Enable Institutes of Higher Learning (IHL) Internship Programme – Provides internship opportunities to assist students with disabilities in Institutes of Higher Learning (IHLs) to gain work exposure.
 - SG Enable RISE Mentorship Programme – a 12-week programme where students with disabilities from IHLs are matched with business leaders from corporates, multi-national corporations and other inclusive employers. Through the programme, participants are able to gain a better understanding of their skills and abilities, build professional networks and tap into their mentor’s wealth of knowledge and work experience.
 - SG Enable Job Shadowing Day – Provides Special Education (SPED) students aged 15 to 18 years old with the opportunity to be attached to employees from a variety of organisations for half a day. Through this exposure, SPED students gain valuable exposure to different job roles and types of workplaces, and thereby attain a stronger understanding of what employment and working life entail.
 - Job Placement Job Support (JPJS) - Provides vocational assessment, job matching in open employment and post-placement support for up to 12 months for persons with disabilities by appointed partners.
 - School-to-Work Transition Programme – Supports students from SPED schools who are assessed to be work-capable to transition from school to employment. This is a multi-agency collaboration between the Ministry of Education, the Ministry of Social and Family Development, and SG Enable, in partnership with special education schools. The programme offers customised training pathways and work options for students with diverse disability profiles who have the potential to work.
 - Workplace Disability Inclusive Index – An online self-assessment tool for employers to assess their readiness for inclusive hiring and identify areas of improvement to support their hiring and integrating of persons with disabilities.
- Workfare Income Supplement Scheme (WIS) – Encourages lower wage workers with disabilities to work and build up their CPF savings for their retirement, housing and healthcare needs, by supplementing their income and retirement savings through cash payments and CPF contributions.
- Workfare Training Support Scheme (WTS) – Complements WIS by encouraging Singaporean workers to attend training to improve their skills, and supports employers to send their workers for training. Employers can receive up to 95% course fee subsidy and absentee payroll funding.

- Special Employment Credit (SEC) – This scheme seeks to incentivise the employment of persons with disabilities. For each employee with disabilities who earns up to S\$4,000 a month, employers will receive credits of up to 16% of the employee’s monthly wages, subject to a cap of S\$240.
- SkillsFuture Study Awards (SFSA) – For persons with disabilities and Disability Employment Professionals (DEP). The SFSA for persons with disabilities recognises role models who have demonstrated resilience and perseverance in pursuing their learning to achieve their full potential in life, while the SFSA for DEP encourages experienced DEPs to strengthen their competencies, so that they can deliver quality service to persons with disabilities and employers.
- Open Door Programme (ODP) – Aims to enhance the employment and employability options for persons with disabilities and to support employers in hiring and integrating employees with disabilities into the workforce. Employers can tap on ODP grant to provide capability training or their employees with disabilities and job re-design including workplace modifications as well as the purchase of assistive technology devices that support persons with disabilities at work.

(ii) Specialised employment services and support for persons with autism by SSAs

- Employability and Employment Centre (E2C) – E2C is the first autism-focused centre that offers services to enable people with autism to perform successfully in the workplace and is operated by ARC. It also offers services for employers who are interested in hiring people with autism in their companies.
- Professor Brawn Café – The café is a social enterprise operated by the SSA, Autism Resource Centre (ARC). The cafe provides job and social integration opportunities to persons with disabilities and the disadvantaged in society. It currently has three outlets, one at Pathlight School, another in Raffles Institution and one at the Enabling Village. The outlets tap on ARC's job coaching expertise and network, to train and place adults with disabilities (including persons with autism).

44. In 2019, MSF also set up a cross-sectoral Workgroup to look at preparing adults with disabilities for the future economy, including by enhancing access to lifelong learning opportunities and developing pathways to jobs of tomorrow. The workgroup is co-chaired by Minister-of-State for Social and Family Development Sam Tan and Ms Denise Phua, President of the Autism Resource Centre.

D. HEALTH

44. In Singapore, healthcare and long-term care is financed by multiple different but overlapping schemes that provide holistic and robust support for healthcare costs. This ensures that all Singaporeans, including persons with autism, will not be denied access to appropriate healthcare due to inability to pay.
45. The Government provides heavy subsidies of up to 80% to Singaporeans for treatment across in all public healthcare institutions, e.g. acute and community hospitals, polyclinics. This also applies to residential and non-residential services in the long-term care space, which covers psychiatric

services that persons with autism may need. In private primary care, all Singaporeans may also benefit from the Community Health Assist Scheme (CHAS) subsidies.

46. For greater protection against large hospitalisation bills, MediShield Life was launched in 2015 to provide universal medical insurance to all Singaporeans for life, regardless of age and any pre-existing conditions or disabilities they might have. Singapore also has MediSave, a national healthcare saving scheme that allows Singaporeans set aside part of their income for their future healthcare needs.
47. To provide greater protection against long-term care costs, the Government will launch CareShield Life from mid-2020, a basic long-term care insurance scheme that is enhanced from the existing ElderShield, providing higher payouts for as long as a policyholder remains severely disabled. Coverage starts from age 30, and is universal for those born in 1980 or later, so Singaporeans can be covered regardless of any pre-existing conditions or disabilities. Coverage is optional for cohorts born in 1979 or earlier, and they can join CareShield Life if they are not severely disabled. There are also various disability-related schemes that Singaporeans can also benefit from, such as the Pioneer Generation Disability Assistance Scheme (PioneerDAS), Home Caregiving Grant (HCG) and ElderFund.
48. Like all Singaporeans, persons on the autistic spectrum can tap on their family members' MediSave, and may be eligible for MediSave top-ups from the Government through the various Government schemes for the needy. Premium subsidies are also available for national insurance schemes such as MediShield Life and CareShield Life to ensure that premiums are affordable and no one loses coverage due to the inability to afford their premiums.
49. The Government also provides a safety net through MediFund, to provide assistance to Singaporeans who need further assistance with their healthcare bills after subsidies, insurance and MediSave.

E. SOCIAL SERVICES (SUCH AS BENEFITS SYSTEM, INCENTIVES ETC.)

(i) General structure of social security and support for the needy

50. Singapore's social security framework emphasises self-reliance, where the primary responsibility to provide for one's retirement needs rests with the individual and his family. The Central Provident Fund (CPF) is a compulsory social security savings system that comprises individualised accounts funded by both employees and employers, with active Government support. CPF primarily provides three essential elements of social security: retirement, healthcare and home financing. Benefits and incentives are also provided to CPF members who top up the CPF accounts of their loved ones. For example, CPF members can enjoy tax relief of up to S\$7,000 (USD\$5,000) per calendar year if they make cash top-ups into the CPF accounts of their spouse or siblings with disabilities.
51. For individuals that are unable to provide for themselves despite their best efforts and who have no other sources of income support, the government administers targeted financial assistance:
 - ComCare Long-Term Assistance Scheme - Provides for the basic needs of persons who are permanently unable to work and have little or no financial support, including persons with disabilities, as well as their families. Individuals on this scheme receive free medical treatment in polyclinics and government/restructured hospitals. They also receive free or highly subsidised access to a wide range of social services such as home help and day activity centres

funded by the government. This is in addition to the supplementary assistance in cash and in-kind from community-based agencies.

- ComCare Short-to-Medium Term Assistance Scheme – Provides assistance to persons with disabilities who are work-capable but require support. The scheme assists those who are looking for work or are temporarily unable to work due to illness or have to care for children, elderly or other dependents, with little or no family support, savings or assets for daily needs. Assistance provided could include a monthly cash grant, rental, utilities, and/or transport vouchers, medical assistance and employment assistance such as job search and/or training. The amount and duration of the assistance vary, depending on the needs of the household.

52. Persons with disabilities and their families also receive additional subsidies through various services, including those set out in Sections VI (A – D) above. The Government continually reviews its schemes and subsidies to ensure that services remain accessible and affordable to the people who need them.

(ii) Care and residential support

53. The Government subsidises care and residential services, which are operated by SSAs. These services include:

- Sheltered Workshops - Provides skills training and supported employment for adults with disabilities, who are not ready for or unable to take up open employment.
- Day Activity Centres (DACs) - Provides day programme for persons with disabilities aged 16 and above to enhance their independence through equipping them with daily and community living skills. It provides care relief for caregivers to pursue economic activity or as a form of respite. There are currently 6 autism-focused DACs.
- Drop-In Disability Programme - Provides social and recreational programmes for a few hours each week to relatively higher-functioning persons with disabilities with minimal care needs and no serious behavioural issues.
- Home Personal Care – Provides assistance to persons with disabilities and their caregivers in carrying out Activities of Daily Living, medication, mind stimulating activities, simple maintenance exercise and other care tasks at the individual's home.
- Community Group Homes – Enables higher functioning adults with disabilities to live independently in designated HDB units retrofitted with disabled-friendly features
- Adult Disability Homes (ADH) – Provides long-term residential care to adults with disabilities with care needs but whose caregivers are incapable of caring for them. There is currently a autism-focused ADH that was specially designed and built to meet the needs of persons with ASD.
- Adult Disability Hostels – Provides alternative housing arrangement for adults with disabilities who do not require institutional care but are unable to live with their families. In addition to programmes and socio-recreational activities to encourage community integration, the hostels also provide basic training on independent living skills and residential-based training for work and life skills.

Children Disability Homes – Provides residential care to children with disabilities whose caregivers are incapable of caring for them.

- Respite care – Available for persons with mild-moderate disabilities at some SSAs to provide short-term caregiving support during the caregiver’s absence or for the caregiver to take a break from their daily duties.
- Examples of other programmes run by SSAs:
 - Eden for Life programme by Autism Association Singapore (AAS) – The programme provides support to families in stitching together a daily individualised programme for their adult child with autism after graduating from school.
 - Connected Communities by Rainbow Centre – The programme targets adults with moderate to severe special needs and aims to raise their Quality of Life through matching suitable community resources to meet the individuals’ holistic needs.

(iii) Caregiver support

- Foreign Domestic Worker Grant and Levy Concession – The Grant is a financial assistance scheme that provides a monthly grant payment to help families who need to hire a FDW to care for their loved ones with moderate to severe disabilities. The FDW Levy Concession enables families who employ Foreign Domestic Workers to look after their loved ones with disabilities to pay a lower monthly concessionary Foreign Domestic Worker levy, if they are eligible.
- Tax Reliefs for individuals supporting loved ones with disabilities
- Special Needs Savings Scheme (SNSS) - Set up to encourage parents of children with special needs to save for their long-term care. Parents can nominate their children to receive monthly disbursements from the parents’ CPF savings after their parents’ demise.
- Special Needs Trust Company (SNTC) - A government-funded trust management service set up for persons with special needs. SNTC works with parents to develop a care plan to ensure that the future needs (e.g. future accommodation, education, medical) of their beneficiaries are met when the caregiver is no longer around.
- Caregivers’ Pod – The caregivers’ space at Enabling Village was set up in 2018. The space serves as a venue for caregiver group activities, caregiver training, peer support, respite activities, engagement with SSAs and the community.
- Caregiver Training Grant – The Caregiver Training Grant is a \$200 annual subsidy that lets caregivers attend approved courses to better care for their loved ones.
- The Autism Resource Centre’s Autism Intervention, Training and Consultancy Service empowers and provides skills training to professionals and caregivers to better support individuals with autism.
- Family Empowerment Programme by Rainbow Centre – the programme aims to enhance caregivers' coping ability by equipping them with skills and strategies to manage their child's

behaviours, increase and strengthen their formal and informal support network, empower and increase their self-confidence in managing their child, and decrease their stress levels.

(iv) Transport Support

- Public Transport Concession – Persons with disabilities receive 25% off fares on buses and rails; and no additional fares beyond 7.2km travelled. Persons with disabilities can also opt to buy a \$60 monthly concession pass.
- VWO Transport Subsidy Scheme (VWOTS) – VWOTS provides transport subsidies for persons with disabilities attending services such as special education schools, daily activity centres and sheltered workshops.
- Taxi Subsidy Scheme (TSS) - For persons with disabilities who are medically certified as unable to take public transport and rely on taxis to commute to work, school and training.

F. RECREATION

- Enrichment Programme by Autism Resource Centre (ARC) - offers sports and non-sports enrichment activities for children and youths with autism to learn and socialise through fun and enjoyable experiences outside school hours. The activities also keep the children and youths with autism meaningfully engaged during school holidays.
- Social Leisure Club (SLC) by ARC - provides an avenue for youths and adults with autism to meet on a regular basis in a safe, autism-friendly environment. It aims to encourage life-long learning, promotes a healthy life-style and social interaction amongst members whilst engaging in leisure activities.
- Eden Activity Club (EAC) by Autism Association Singapore (AAS) - serves individuals with autism who have difficulty accessing other support services and who may be socially isolated as a result. The Club aims to increase the level of participation, community engagement and well-being of its members in an age-appropriate and meaningful social context. This is accomplished through making a weekly series of leisure and recreational activities available to its members.
- Young Adult Activities (YAA!) by Rainbow Centre – serves individuals with moderate to severe special needs who may have difficulties accessing other services. The programme aims to provide more opportunities to these individuals to participate and be meaningfully engaged in social recreational and interaction activities with the assistance of regular volunteers.

G. PUBLIC AWARENESS CAMPAIGNS AND OTHER NOTABLE DEVELOPMENTS

- World Autism Awareness Day organised by members of the Autism Network Singapore (ANS)
- A Very Special Walk, a fundraising event by the Autism Resource Centre to raise funds for projects that integrate people of all ages with autism into mainstream society.
- Purple Parade, a unifying national platform to promote awareness and celebrate abilities of persons with special needs. The core of The Purple Parade movement is to ensure that people with special needs are included in the main chapter of Singapore's growth and have equal access to education, employment, transport and social networks.

- Conversations @ The Purple Parade – With See the True Me’s involvement in The Purple Parade in 2019, a 5th component, Conversations, was added to the Parade which initially comprised of four key components: campaign, carnival, contingent, and concert. Helmed by National Council of Social Service, Conversations features persons with disabilities to share their personal stories to the public to promote inclusion and enable public interaction with persons with disabilities.
- Training on disability awareness for public members, such as public transport companies.
- The Asia Pacific Autism Conference 2019 (APAC19), which was held in Singapore in 2019, the first time this well-established Conference was held outside of Australia since its inception in 2009. The APAC is the largest autism learning event in Asia Pacific. APAC19 featured 30 international speakers and 300 presenters covering topics on the entire lifespan, from latest research updates and best practices from established programmes and models. The conference brought together about 1,700 members of the international autism community from nearly 30 countries. These include educators, allied professionals, parents and individuals on the autism spectrum, as well as 33 sponsored delegates from ASEAN NGOs who have pledged to bring the learning from the conference to their home countries. The conference also featured performances and showcases by people on the autism spectrum. APAC19 was hosted by Autism Resource Centre (Singapore) and supported by partner members of the Autism Network Singapore (ANS).
- Look Beyond My Disability, See the True Me – “See the True Me” is a public education campaign that encourages the public to see persons with disabilities for who they are instead of the disability they have. Organised by NCSS, and made possible by the Tote Board-Enabling Lives Initiative, the campaign aims to:
 - i. Celebrate the strengths and abilities of persons with disabilities;
 - ii. Educate the public on communication tips and support strategies for persons with disabilities; and
 - iii. Encourage the inclusion of persons with disabilities in society.

IX. CHALLENGES

54. In 2019, MSF formed three cross-sectoral workgroups involving representatives from the people, public and private sectors to address gaps and emerging issues. Aside from the earlier-mentioned workgroups on **Inclusive Pre-Schools** (see paragraph 41) and **Lifelong Learning and Employment** (see paragraph 44), there is a third workgroup on **Promoting Independent Living through Technology and Design** which is co-chaired by Minister-of-State for Social and Family Development Sam Tan and President of SPD, Ms Chia Yong Yong.
55. In addition, the Government has undertaken the following efforts in recent years to address various challenges identified in the disability sector, particularly with reference to persons with autism:
- To address differences in quality of early intervention services across private and public providers, the Advisory Panel on Standards and Professionalism for Early Intervention was set up in January 2014. The Panel advised MSF on professional standards, best practice guidelines and a framework to monitor child and family outcomes. It also provided a platform to share information, feedback and best practices. MSF had also appointed consultants from KK

Women's and Children's Hospital and National University Hospital to help EIPIC centres build capabilities and enhance early intervention standards. The Government will continue to build the capacity and capability of a pool of trained early intervention professionals to support this continuum.

- To develop more platforms for lifelong learning for individuals with autism, the government is developing more accessible training courses to help persons with disabilities acquire the relevant skills and work experience to secure jobs as well as advance in their careers. In 2017, SG Enable supported training courses which benefited 940 persons with disabilities. These courses were heavily subsidised by the Government. Trainees may also receive a training allowance to defray the cost of their training and to encourage them to take part in the training. The government is also working with SSAs, employers and persons with disabilities to come up with a comprehensive plan to help persons with disabilities benefit from the national SkillsFuture movement for lifelong learning. This currently includes the SkillsFuture Study Award for Persons with Disabilities to enhance their employability by developing and deepening their relevant competencies and skillsets.
- The government recognises the challenges that persons with disabilities face in securing and maintaining employment. In addition to programmes such as the School to Work Transition Programme and job support and job placement services as mentioned in sections VI (D), employer outreach has also been a staple feature in Singapore's efforts to enhance employment for persons with disabilities. The government, in collaboration with SG Enable, is continually taking steps to engage more employers.
- To close the gap in post-parental care of persons with autisms, the government is working towards stronger support for caregivers in their financial and care planning for their care recipient, together with agencies like SNTC and SG Enable as described in Section VI (E). Efforts are being made to ensure the continued well-being and smooth transition of persons with disabilities beyond the lifetime of their caregivers. Currently, the SNTC provides services and care planning for persons with disabilities in their care. In recent years, the government has reached out to caregivers to raise awareness of the importance of financial and care planning and to educate caregivers on the importance of ensuring that legal and financial matters are in order. Other efforts include the simplification of processes for deputyship and Lasting Power of Attorney for caregivers of persons with disabilities.

IX. CONCLUSIONS AND RECOMMENDATIONS

56. Singapore will continue to work on the implementation of key recommendations under the Third Enabling Masterplan in order to build a more inclusive society for persons with disabilities. This includes continuing efforts to work with the relevant stakeholders in the disability sector to identify gaps and needs of persons with disability (including individuals with autism), and addressing these gaps through policy and programme reviews.

Country Profiles on Autism



THAILAND

CHAPTER I

General Information on Persons with Disabilities in Thailand

1.1 Situation in Brief of Persons with Disabilities in Thailand

In Thailand there are many organizations both the public sector and the private sector including NGOs dealing with the issues of persons with disabilities. The data on persons with disabilities are restricted within those organizations. A single unit taking care of national level database on persons with disabilities as a whole is strongly recommended.

According to the Act of Empowerment of Persons with Disabilities 2007, persons with disabilities in Thailand refer to persons who encounter certain limitations in performing their daily activities or social participation due to their impairment in vision, mobility, communication, mind, emotion, conduct, intellect, learning, or any other impairment or disabilities, along with various difficulties, and specifically those who need some assistance to enable them to perform their daily activities or social participation as well as others in society.

As of October 31, 2018, Department of Empowerment of Persons with Disabilities (DEP) has issued 2,041,159 ID cards for persons with disabilities which is 3.08% of overall population. This included 12,297 persons with autism (0.60%).

DEP is a national focal point on disabilities issues and authorized to empower, co - operate and carry out tasks relating to disability both national and international levels. DEP promotes empowerment of persons with disabilities and corporates with other relevant stakeholders by generating provincial and general disability service centers as a local mechanism to support equal access to the rights of persons with disabilities.

Moreover, DEP has cooperated with national organizations of persons with disabilities concerned in autism field. DEP works with Association of Parents of Persons with Autism (Thailand) for promptly designing effective and efficient plans for providing assistance and rehabilitation for Persons with Autism. In term of education for persons with autism, DEP highlights the inclusive education and supports budget to access school and also promotes occupational and job employment for persons with autism.

With collaboration of all related agencies under the National Committee on Empowerment of Persons with Disabilities, Thailand ensures independent living for persons with disabilities in Thailand by providing services and welfares. These consist of disability allowance, legal assistance, personal assistants, sign language interpreters, accessibilities, reduced fee of public transportation, tax exemption, house modification, free medical services, free education and loans for employment from the Fund of Empowerment of Persons with Disabilities.

Thailand reaffirms the commitment towards the Convention on the Rights of Persons with Disabilities (CRPD), Article 24 in recognizing the right of persons with disabilities to education. By Persons with Disabilities Empowerment Act 2007 and its Amendment (Vol.2) 2013, Section 20, persons with disabilities have the rights to access an education in accordance with the National Act on Education or National Plan on Education.

1.2 National Survey on Persons with Disabilities

National Statistical Office of Thailand had conducted 3 disability surveys in 2002, 2007 and 2012. The 2017 survey was the 4th one collecting data in October - December 2017 from

109,000 households. The objective was to collect information about the persons with disabilities such as difficulties or health problems, impairments characteristics, health conditions, welfare and others including information about caregivers of persons with disabilities who had difficulties in self-care.

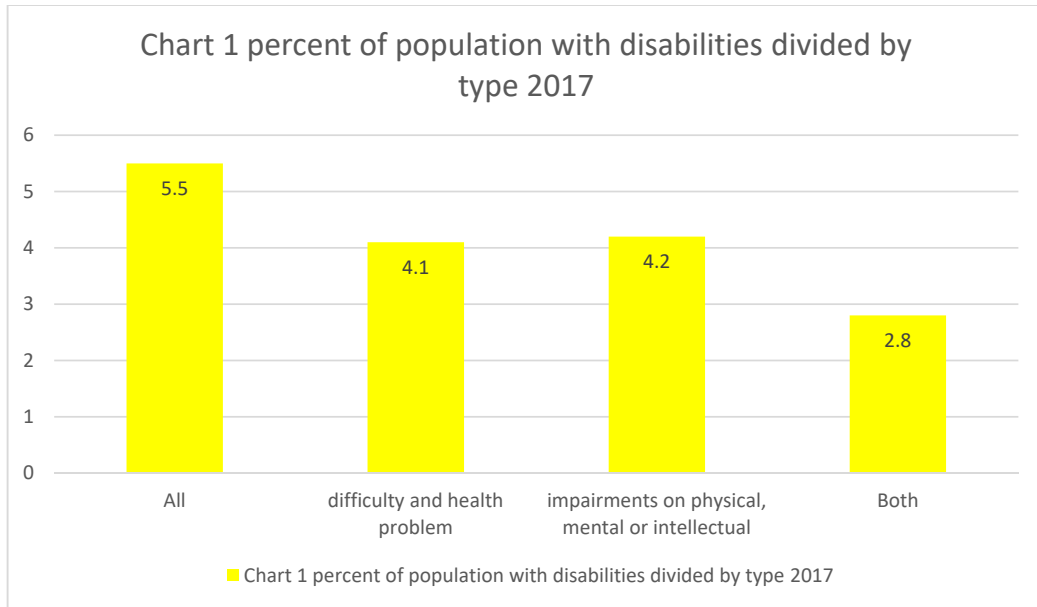
The Disability Survey 2017 was the data collection on the disabled population that had at least 1 of the following two characteristics: 1) difficulties or health problems causing restrictions on activities (including difficulties in self-care or personal activities) by asking information of people aged 2 years or above 2) impairments in physical, mental or intellectual disabilities. The survey inquired all age groups from birth onwards in order to know disability information of population from an early age towards prevention planning and treatment as soon as possible.

Based on the survey results in 2017, it was found that the population with disabilities was 3.7 million people or 5.5 percent of the total population. It increased from the 2012 survey which was only 2.2 percent. This increasing percentage was due to the increasing number of disabled people. There were also other factors. There was a change in the survey question set in 2017. It used a question set of the Washington and UNICEF groups in identifying disabilities by considering the hardship or health problems and the attitude of respondents. It also changed from the original belief that families should conceal the disability of household members. At present more information about disability was revealed. This was because each household wanted the government to help them access to the rights and the state welfares providing for persons with disabilities. Therefore, the survey results of the disabled population in 2017 should not be compared with the survey results in 2012.

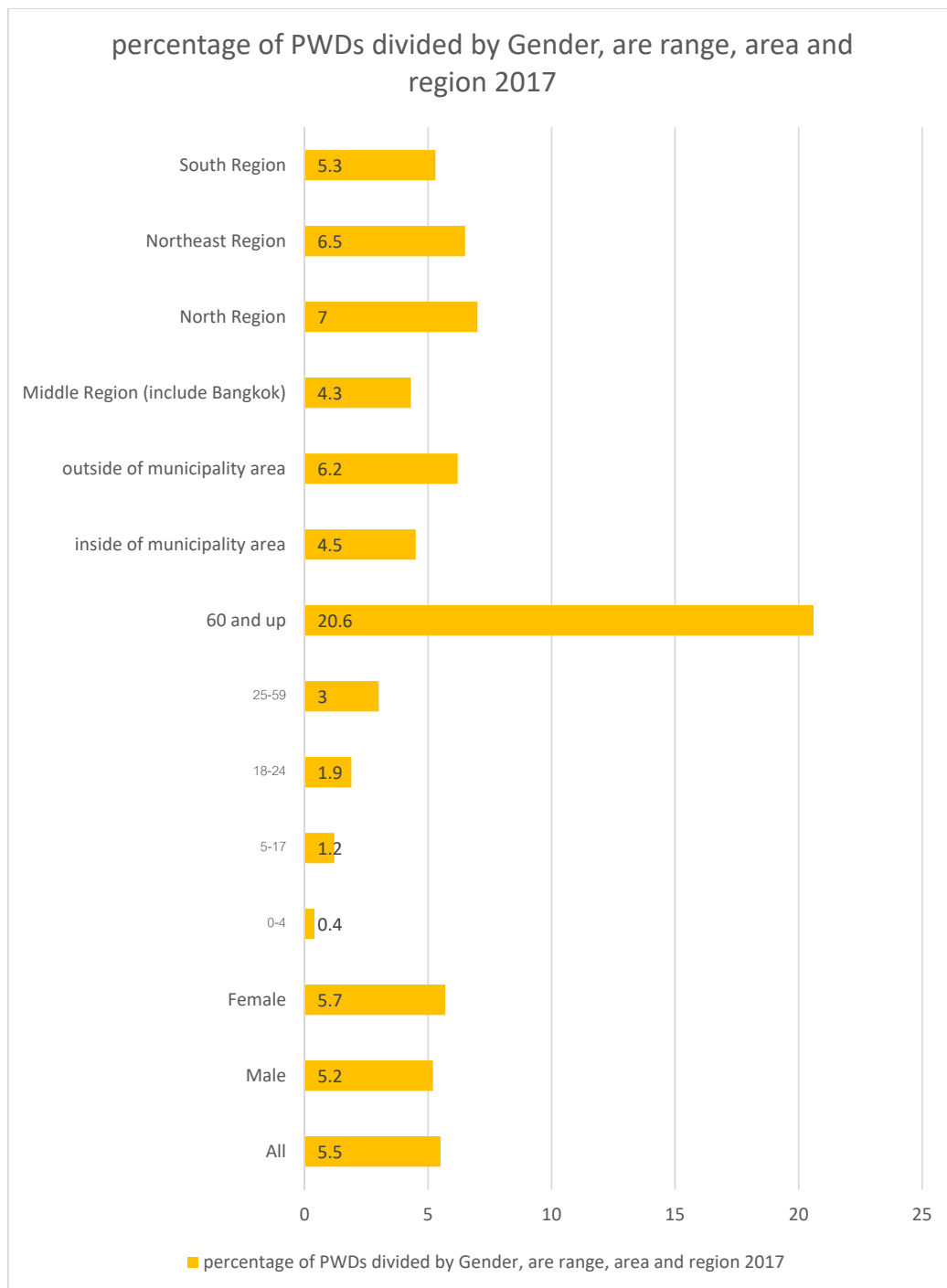
Major survey results in 2017 could be summarized as follows:

1) People with disabilities

From inquiring all age groups in 2017, there were 3.7 million people with disabilities, or 5.5%, who had at least one of the two characteristics of disabilities. Firstly people with difficulties or health problems which led to the limitation to participate in various activities were about 4.1 %. Secondly people with physical, mental or intellectual disabilities were about 4.2%. The population of persons with disabilities with both mentioned characteristics were about 2.8% or 1.9 million persons.



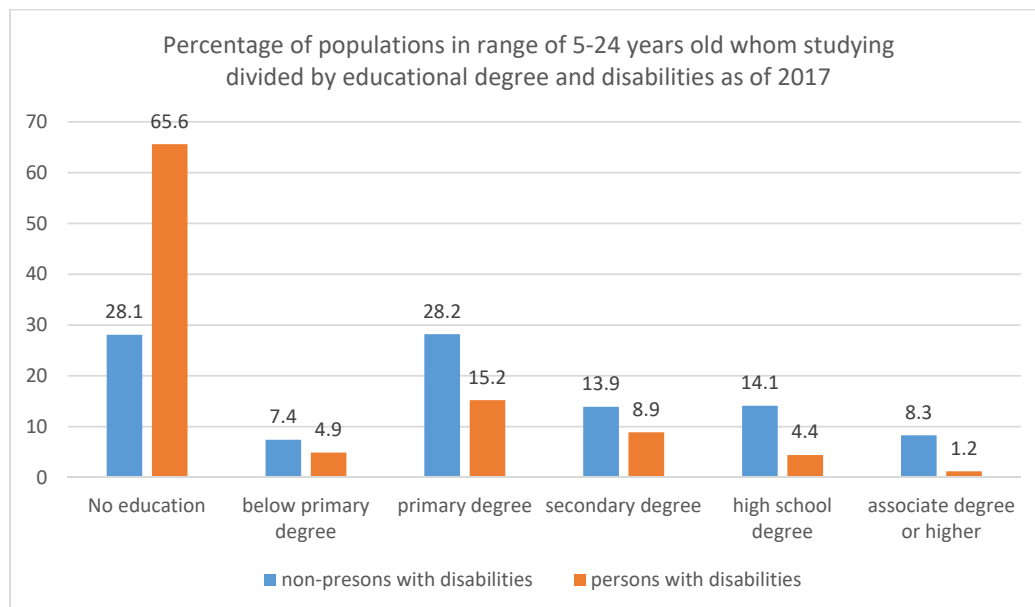
The percentage of people with disabilities in 2017 was different according to demographic characteristics. It was found that the percentage of women with disabilities was slightly higher than that of men. (5.7 and 5.2 %, respectively) The elderly (60 years and above) had a disable population of 20.6%, which was higher than other ages that was only 0.4 - 3.0%. This was because the elderly had difficulty or health problems according to the higher age so they were included into persons with disabilities. It was also found that the percentage of people with disabilities living outside the municipalities was higher than those in the municipalities (6.2% and 4.5% respectively). The percentage of people with disabilities in Northern and Northeastern regions (7.0 and 6.5%, respectively) was higher than those in other regions.



2) Education levels of those people with disabilities studying at the age 5 - 24 years

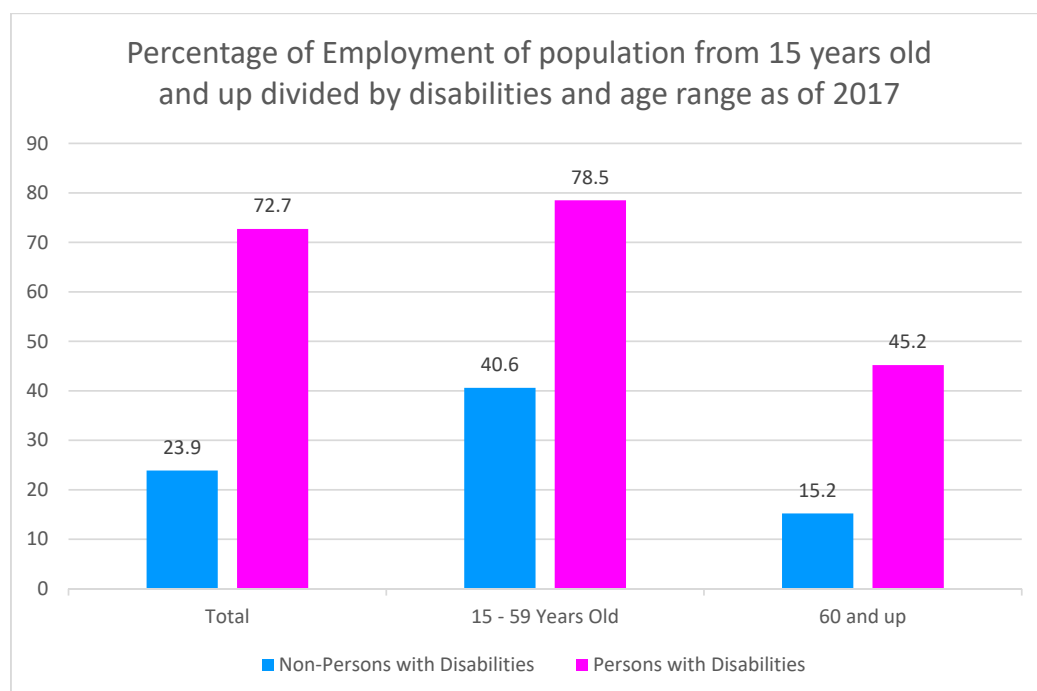
Education was one of the important factors that helped increase capacity of people with disabilities to be able to rely on themselves, have a better quality of life and live in society happily. The survey found that the population in school-age from 5 - 24 years were about 17.4 million people. There were only 0.3 million persons with disabilities (1.5%). Most of them were non-persons with disabilities or 17.1 million people. (98.5%).

The reasons why persons with disabilities currently were not studying in school or educational institute was mainly due to their illness or impairments for 51.2%. Out of this they could graduate for 24.9%. Meanwhile, non-persons with disabilities were not studying because they had already graduated for 78.9% and had to earn for self-living and/or family's living for 6.9%.



3) Employment of population from 15 years old and above

When considering workability of population from age of 15 and above during interview period from October 2016 – November 2017, there were about 56.1 million people. In this number, there were persons with disabilities for 3.6 million persons or 6.4% and non-persons with disabilities for 52.5 million persons or 93.6%.



4) Obtaining National Primary Medical Welfare

The Government had policies to provide medical services for all Thai citizen in 3 main types such as Health Insurance Card Holder, Social Security Scheme/Compensation Fund and Health Services for Government officials/ Government Pension Officials/State Enterprise Officers. These included persons with disabilities who needed both physical and mental treatment more than non-persons with disabilities.

The survey found that almost all population (97.1%) received benefits from primary medical treatment. Most of them received from the health insurance card up to 75.4%, followed by social security card /Compensation Fund (14.5%). The rest were Government officials/Government pension officials/State enterprise officer (7.2%).

Table 1 Percentage of Population who received primary medical treatment benefits

Divided by types of services and disabilities as of 2017

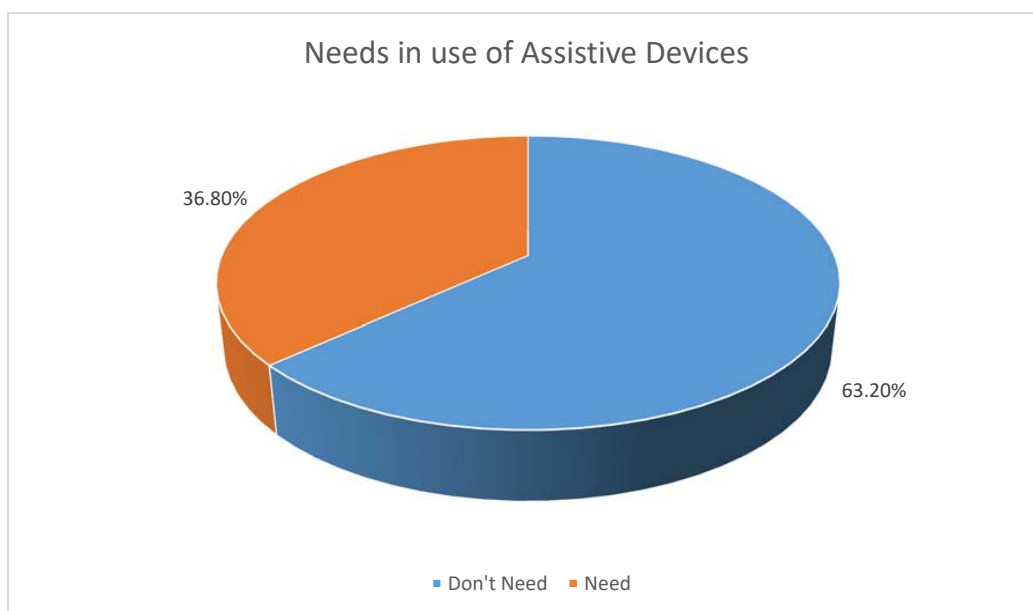
Obtaining National Primary Medical Welfare	Disabilities		
	Total	Disabilities	No Disabilities
Total	100.0	100.0	100.0
	(67,697,721)	(3,694,379)	(64,003,342)
Not Received any benefit	2.9	1.5	3.0
Received benefit	97.1	98.5	97.0
Universal Health Insurance Cards (Gold Card)	75.4	88.5	74.7
- General	73.3	58.0	74.2
- Persons with Disabilities (T. 74)	1.8	30.4	0.2
- Unknown	0.3	0.1	0.3
Social security card/Compensation fund	14.5	2.4	15.2

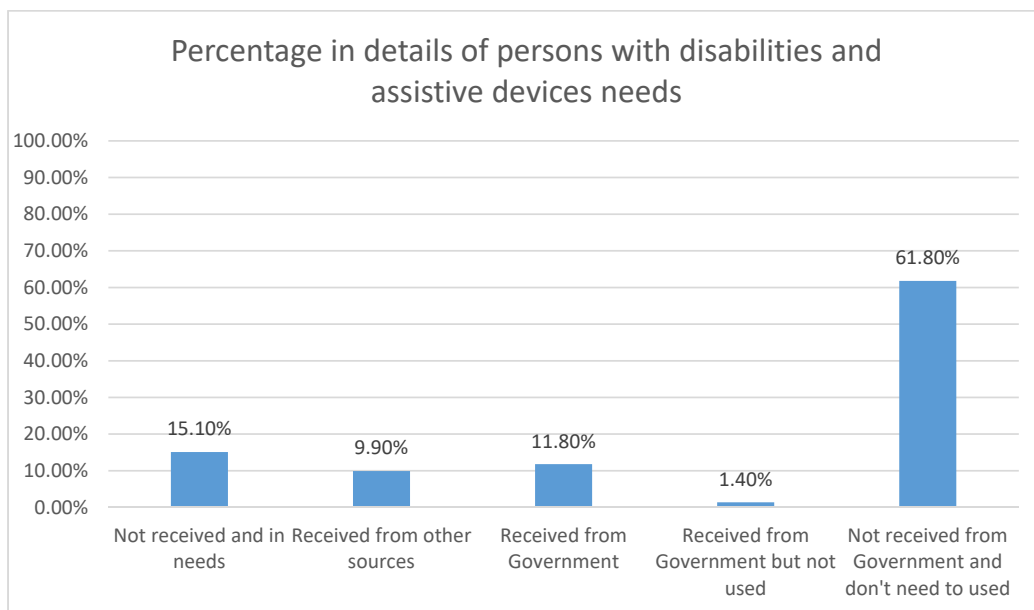
Obtaining National Primary Medical Welfare	Disabilities		
	Total	Disabilities	No Disabilities
- General	14.4	2.0	15.1
- Decrepitude	less than 0.1	0.4	less than 0.1
- Unknown	0.1	0.1	0.1
Benefit for Government Officials/Pension Officials/State Enterprise Officers	7.2	7.6	7.2

5) Assistive Devices for Persons with Disabilities

Usage of assistive devices means using artificial devices/organs or auxiliary equipment for persons with disabilities, which did not include self-made equipment, to help increase the ability to do activities, facilitate or alleviate any difficulties or problems.

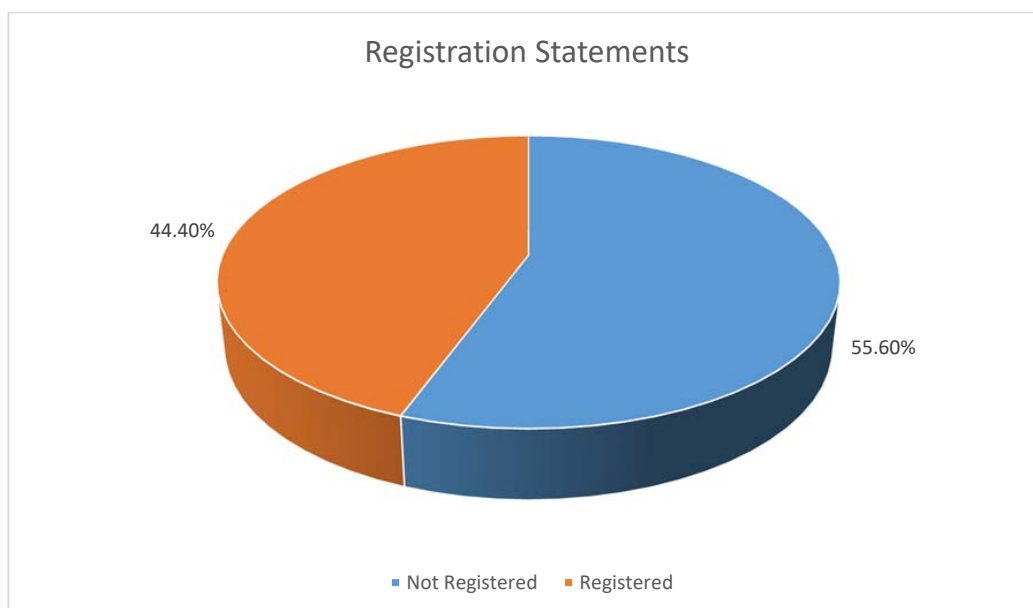
In 3.7 million persons with disabilities in Thailand, there was only one-third (36.8%) that needed to use assistive devices, artificial devices/organs or auxiliary equipment. In this group, they received assistive devices from Government Organizations for 11.8% and received from other sources for 9.9%. However, there was 15.1% of Thai persons with disabilities who didn't receive any assistive devices from any sources.

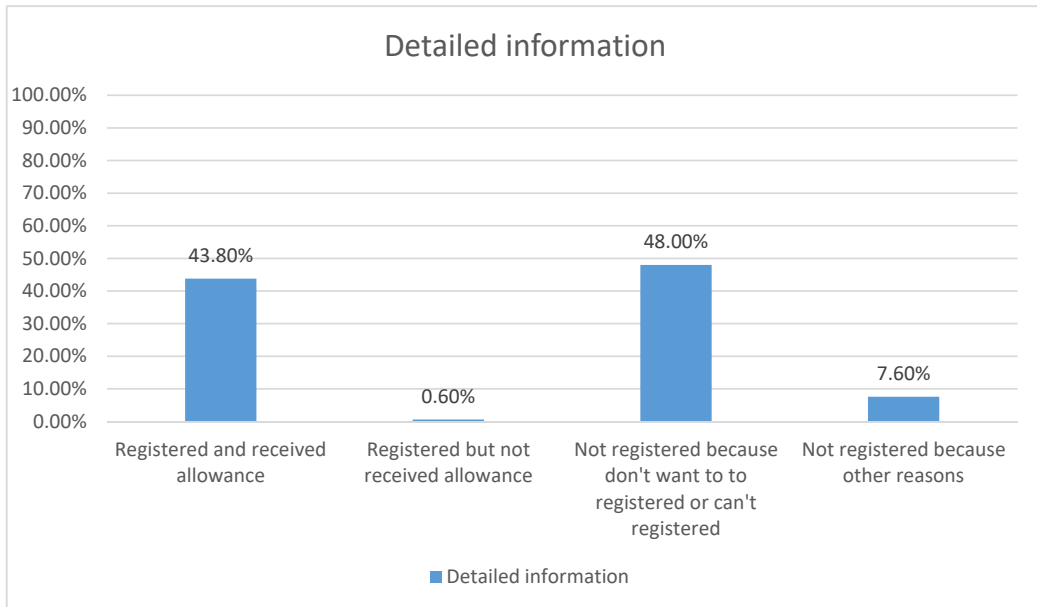




6) Registration of people with disabilities and receiving the allowance

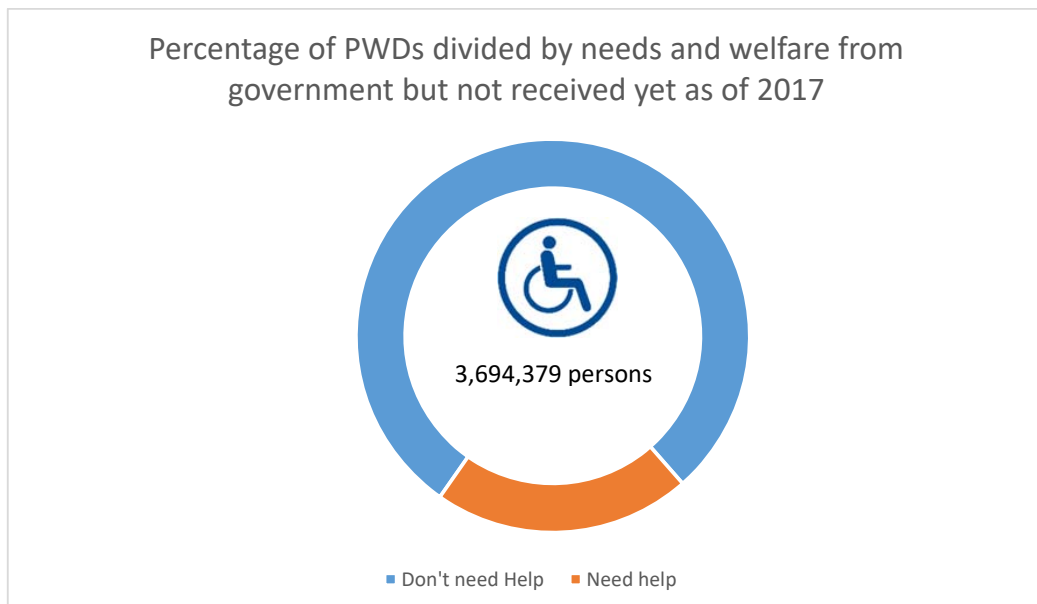
Registration of people with disabilities was a tool for people with disabilities to access and receive benefit from public facilities. The survey results showed that less than half of the persons with disabilities (44.4%) had registered with the government. In this number, persons with disabilities received the allowance were of 43.8%. While another 0.6% already registered but had not received the allowance yet. They might be still in the process of request or had not yet applied for the allowance.





7) Assistant Need or Government Welfare but not received yet of persons with disabilities

21.2% of persons with disabilities was entitled to receive assistance or welfare from the government but had not received it yet. The survey found that 5 most needs and helps were 1) supporting personal assistants 2) financial loan for vocational purpose 3) supporting service for private business 4) residential modification and 5) consultation services (31.5%, 23.7%, 19.4%, 17.1% and 15.2%, respectively).



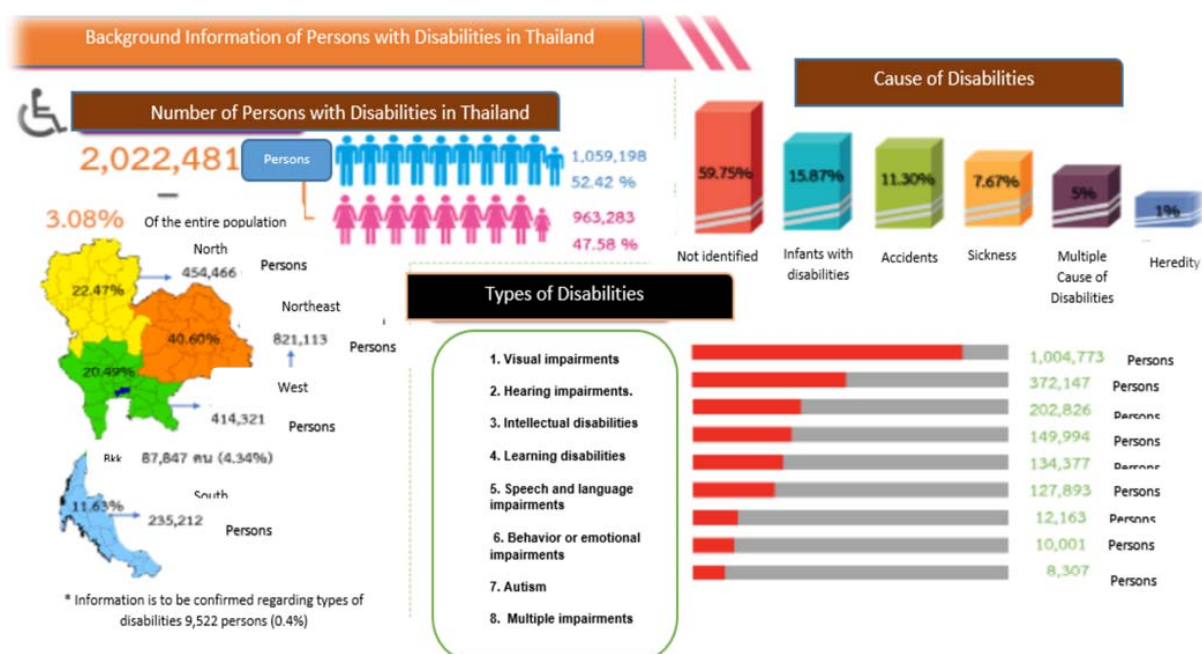
1.3 Types of Disabilities and Number of Persons with Disabilities

The Empowerment of Persons with Disabilities Act B.E. 2550 (2007) and amended (No. 2) B.E. 2556 (2013), Section 19 mention that persons with disabilities may apply to have an ID card of PWDs for the purpose of their access to their rights in order to get benefits of public facilities as well as other welfare and assistance from the State.

According to the registration of ID cards of PWDs requested by Thai persons with disabilities as of October 31, 2018, there were a total number of 2,041,159 persons with disabilities (3.08 % of the total population). They consisted of 1,068,145 Male ID cards (52.33 %) and 973,014 Female ID cards (47.67%). The main cause of disability was illness. They consisted of

- 1,015,955 persons with physical disabilities (49.77%)
- 375,680 persons with hearing disabilities (18.41%)
- 204,012 persons with visual disabilities (9.99%)
- 151,329 persons with psychosocial disabilities (7.41%)
- 134,996 persons with intellectual disabilities (6.61%)
- 12,297 persons with autism (0.60%)
- 10,133 persons with learning disabilities (0.50%) and
- 128,682 persons with multiple disabilities (6.30%)

Moreover, there were about 8,075 persons with disabilities (0.40%) whose information is to be confirmed.



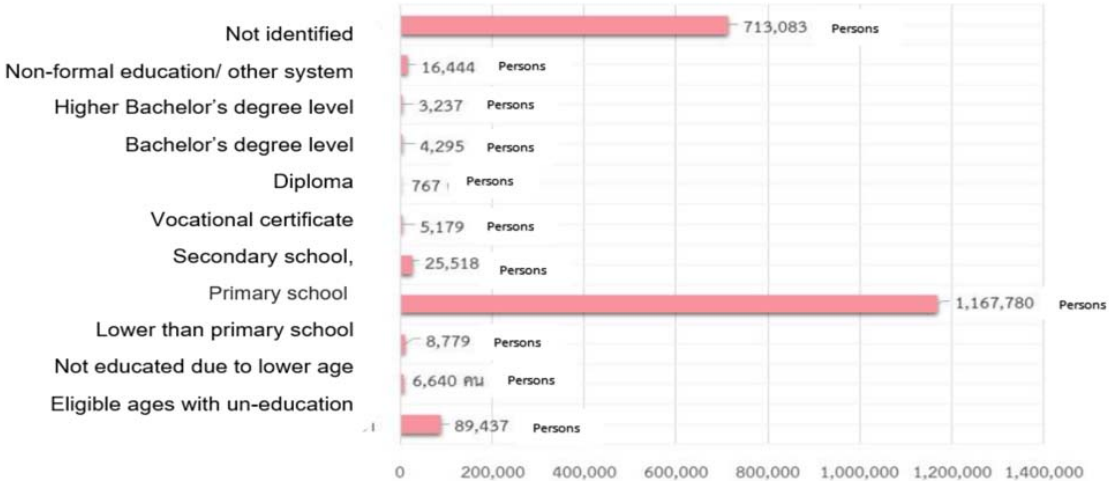
1.4 Persons with Disabilities in EDUCATION

As of October 31, 2018, there were 2,041,159 registered people with disabilities (3.08 % of the total population). It was found that 96,077 persons with disabilities did not have access

to education (4.71 % of the PWDs with ID card). It was 6,640 PWDs who were ineligible for education due to their ages (6.91% of uneducated persons with disabilities); 33,587 elderly persons aged 60 years old or over (83.49% of persons with disabilities who were not educated). However, they were unable to have access to education.

89,437 people of persons with disabilities had not been educated. Meanwhile, about 1,231,999 persons with disabilities were able to access formal education. Elementary education was the highest education level achieved for 1,167,780 people (94.79 %). This was followed by secondary school with 25,518 people (2.07 %). For the non-formal education and others, there were 16,444 students (1.33 %). Those lower than primary school were comprised of 8,779 students (0.71 %). With vocational certificate level (vocational certificates), it was 5,179 students (0.42 %). With a bachelor’s degree level, it was 4,295 students (0.35 %). Meanwhile, a total of 3,237 students (0.26 %) attained education higher than a bachelor’s degree. But persons with disabilities educated at the diploma level were only about 767 persons (0.06 %).

Education Levels of Persons with Disabilities in Thailand

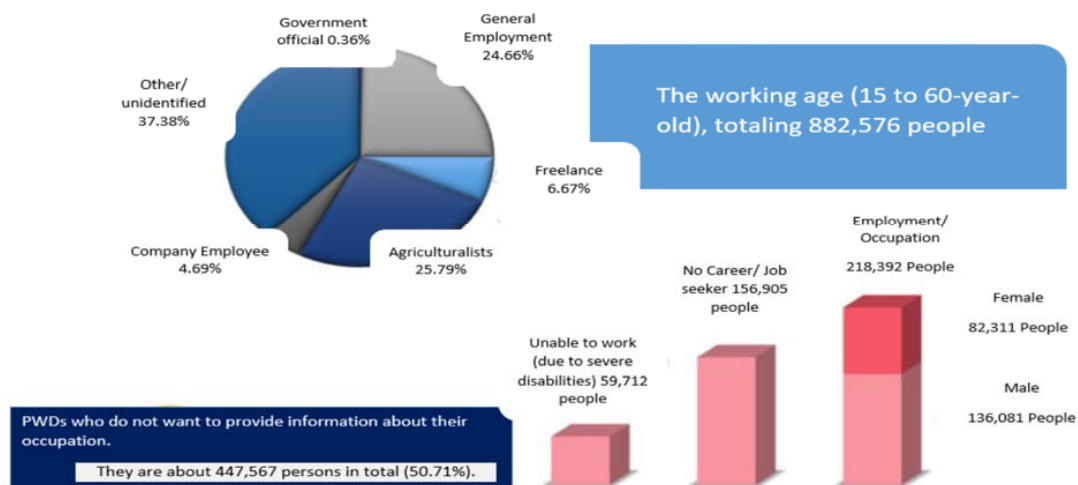


1.5 Persons with Disabilities in Employment

According to the information on the registration of the disabled people ID card as of October 31, 2018, there were about 2,041,159 people (3.08 % of the total population). This figure consisted of persons with disabilities who were in the working age (15 to 60 years old), representing 882,576 people. A total of 218,392 (24.74%) were persons with disabilities of working age who were employed.

However, about 156,905 people (17.78%) were unemployed and 59,712 people (6.77%) were not able to work (due to severe disabilities). Meanwhile, there were persons with disabilities who did not want to provide information about their occupation contributing 447,567 persons (50.71%). Other occupations of the PWDs (not specified) were 37.83%, 25.79% in agricultural work, 24.66% in freelancing, 6.67% in private business/self-employed, 4.69% in private sectors and a total of 0.36% in government sector.

Pie Chart: Number of Work and Employment Opportunities for PWDs



In the Persons with Disabilities Empowerment Act B.E. 2550 (2007) and (Vol.2) B.E. 2556 (2013), state that job promotion and employment protection for persons with disabilities enable them to have more job opportunities and enhance their skills to generate income, become self-reliant and reduce the burden of families and societies in taking care for them. They also encourage persons with disabilities to play an important role in stabilizing their family's financial status and the country's economy. Therefore, enterprises and government agencies are asked to boost the employment rate of people with disabilities by the following methods:

Section 33 states that employers, entrepreneurs, and government agencies shall employ persons with disabilities to work in the positions suitable for them in proper proportion to the total number of employees in the workplace.

Section 34 states that employers or entrepreneurs who do not employ persons with disabilities at the proper proportion as mentioned in Section 33 shall send money to the Fund pursuant to Section 24 (5).

For employment of PWDs in government agencies in line with the Empowerment of Persons with Disabilities Act B.E. 2550 (2007) and (Vol.2) B.E. 2556 (2013), Section 33 requires employers, owners of business sectors, and relevant government agencies to employ PWDs with proper proportion to the entire number of their workforce. The Cabinet approved the meeting on 27th October 2015 and allowed the Ministry of Social Development and Human Security to proceed and support relevant government agencies to comply with the law in many appropriate forms.

The Cabinet passed a resolution on 14th August 2018 as follows:

- The government agencies shall hasten the implementation of the employment of the PWDs by December 2018.
- The Ministry of Defence and related agencies shall monitor, supervise and coordinate the employment of police, soldiers and government officials who are disabled due to the duties in the southern border provinces.

- There will be an enforcement of employment law of the PWDs in the government agencies as a performance indicator of the authority in the ministry level. This will be conducted by the Ministry of Social Development and Human Security (MSDHS) in cooperation with the Office of the Public Sector Development Commission and the Office of the Civil Service Commission to consider the details of implementation.

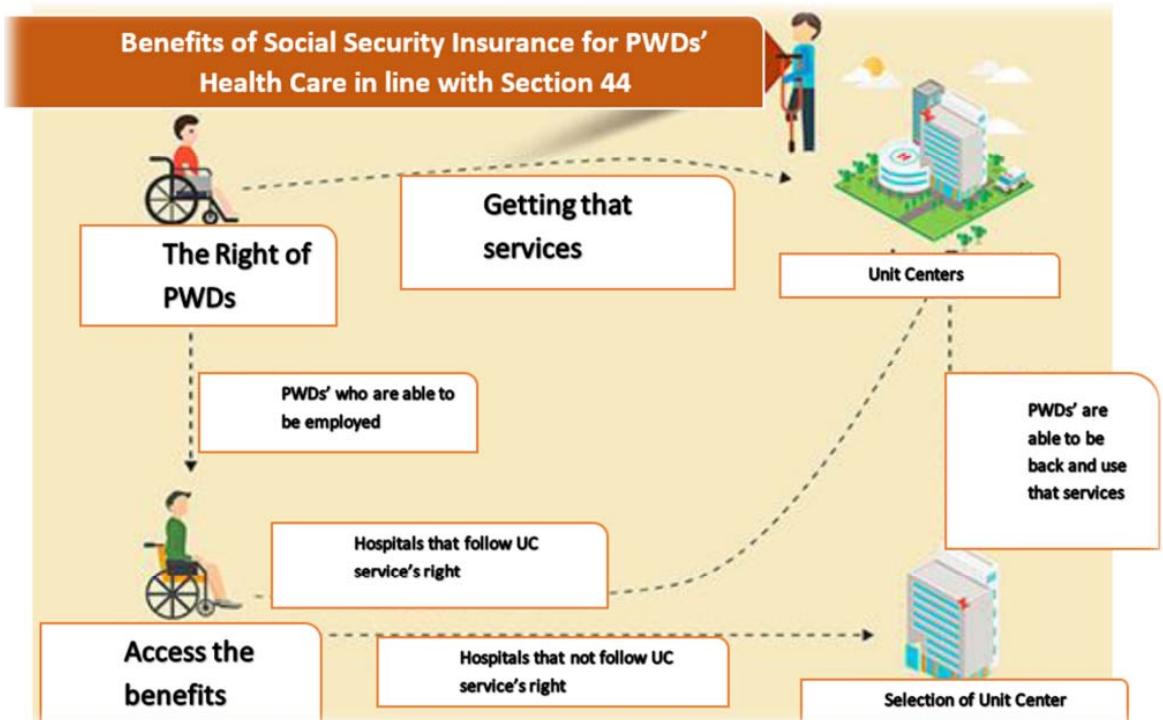
1.6 Persons with Disabilities in Health Services

National Health Security Act B.E. 2545 (A.D. 2002) indicates that everyone has the equal rights to receive standard healthcare services and the poor have the rights to get medical care free of charge from public healthcare units in Thailand. Public health services must be easily accessed and effective. They have to allow all Thai people including persons with disabilities to have the right to get standard health services.

Also, PWDs have the right to access health insurance as follows:

1) Basic benefits are such as basic medical services, including health promotion, disease prevention, healthcare services, childbirth, dental care, diagnosis and medical treatment. PWDs can receive these services from district primary care unit, public hospitals and universal coverage registered private hospitals.

2) Privileges for PWDs are the rights to access rehabilitation both on-site and mobile services, for example, physical therapy, cognitive and behavioral therapy, treatment activities, hearing rehabilitation, restoration of sight stimulation, assistive device stimulation and other forms of capacity building such as the use of white cane training for seeing rehabilitation. Persons with disabilities who are eligible for services in the universal coverage system must register their rights in the National Health Insurance for the database of the National Health Security Office.



1.7 Independent Living for Persons with Disabilities

The Thai government supports the independent living for persons with disabilities that allow them to live their daily lives independently and define their own way of life by becoming self-reliant or having some assistance from others or the society. The most significant thing is that PWDs shall have freedom of thought, self-confidence and creativity, which will enable them to decide and solve any problem occurring in their lives with their own potential. Alternatively, they could set up a self-help group to solve various issues. This will make them live in a society with value and the dignity of human rights.

Community-Based Rehabilitation (CBR)

CBR initiated by the World Health Organization (WHO) is an approach that enables persons with disabilities to live in their community. It is an important strategy in improving the quality of life of persons with disabilities and patients. It relies on the inclusion of their community to improve medical rehabilitation and other elements that will help to reduce poverty, create equal opportunities, and enhance social participation for persons with disabilities. Thailand has implemented this in accordance with the guidelines of the World Health Organization (WHO) since 1983 (B.E. 2526). The Ministry of Public Health (MPH) and the Ministry of Social Development and Human Security (MSDHS) are the main focal points for the development and the implementation of the rehabilitation and the service system of persons with disabilities.

The results of CBR services are that persons with disabilities and their families receive health promotion information like other people in the community. Health promotion programs and other relevant materials are designed or adapted to meet the needs of the PWDs and their families. Also, these PWDs and their families are expected to gain knowledge, skills, and support to help them stay in good health. Medical staff are more aware of both general and specialized needs of persons with disabilities and, in turn, respond to such needs by using relevant health promotion. Moreover, the community would provide a friendly environment for persons with disabilities to participate in community activities related to health promotion.

CBR was also implemented by both the government and non-governmental organizations. From 1979 to 1982, the World Health Organization (WHO) started conducting various trainings and the pilot projects of CBR in Asia and the Pacific region. Many countries (India, Indonesia, Myanmar, Philippines, and Sri Lanka) participated in the project.

As a result of the proclamation of the International Year of Disabled Persons of the United Nations in 1981 (B.E. 2524), many countries became aware of the rehabilitation of PWDs. For Thailand, the Ministry of Public Health (MPH) endorsed the policy of CBR in 1983 (B.E.2526) by adopting the “Training Disabled People in the Community” into practice for PWDs in the community.

The Ministry of Public Health tried out utilizing this CBR Guideline in Non-Sung District, Nakhon Ratchasima Province in 1986 (B.E.2529) and in Wat Bot District, Phitsanulok Province in 1987 (B.E. 2530). After the CBR Guideline try out and implementation in many areas, it could be concluded that the trend of implementing the CBR approach in Thailand was "The utilization of Community-Based Rehabilitation Concept" as a guideline for the rehabilitation and empowerment of persons with disabilities by relying on community support.

This main CBR implementing agency was the Sirindhorn National Medical Rehabilitation Institute (SNMRI), the focal point of Thailand.

In 1999 (B.E. 2542), Department of Public Welfare under the Ministry of the Interior signed a memorandum of collaboration or “Memorandum of Understanding (MOU)” with CBM (formerly “Christian Blind Mission”-- an international Christian development organization) on CBR implementing activities.

CBM has supported the Department of Public Welfare in piloting a CBR project for rehabilitating and improving the quality life of persons with disabilities in 4 regions both in budget allocation and knowledge sharing. In 2004 (B.E. 2547), the Department of Empowerment for Persons with Disabilities (DEP) under the Ministry of Social Development and Human Security (MSDHS) conducted the "Project on Capacity Building of Persons with Disabilities through Community-Based Rehabilitation Approach." The project organized participatory training for volunteers to support social development and human security to empower persons with disabilities.

The process of capacity building and development of the PWDs by the CBR approach is under the mission of the Ministry of Social Development and Human Security (MSDHS). The mission is operated under the CBR program for the PWDs to provide comprehensive services at the community level by means of "Volunteers on Social Development through CBR Approach in Empowering a Person with Disabilities in Community" (Volunteers on CBR).

1.8 Strengthening Capacity Building and Empowerment for Persons with Disabilities

There are 7 approaches in promoting the capacity building and empowerment for persons with disabilities under the National Plan on Life Quality Improvement for Persons with Disabilities item 5, 2017-2021 as follows:

1) Empower and develop capacity of persons with disabilities for all ages from birth or diagnosis-based disability as well as disability surveillance and prevention including those with special needs.

2) Empower and develop capacity of women and girls with disabilities in order to access equal opportunities on social development

3) Empower and develop capacity of leaders of persons with disabilities and the network to strengthen their quality of life sustainably and effectively.

4) Strengthen capacity of persons with disabilities, parents, personal assistant, family members and networking in promoting and improving the quality of life of persons with disabilities

5) Support the establishment of self-help groups with capacity building and good governance for Disabled People Organizations (DPOs) at all levels.

6) Empower DPOs at all levels to promote effectively the protection of the rights of persons with disabilities and full participation in every process of the public policy for persons with disability and related fields.

7) Support necessary resources, knowledge as well as effective management for Thai DPOs at all levels.

Empowering Persons with Disabilities Act B.E. 2550 (2007) and Revision 2 B.E. 2556 (2013), Section 23

It is the Fund for the Empowerment of Persons with Disabilities. It shall serve as the fund to be utilized for the protection and empowerment of persons with disabilities. It also includes the promotion and operation of welfare services for persons with disabilities, rehabilitation, education and job creation for persons with disabilities, as well as the promotion and support for organizations related to persons with disabilities.

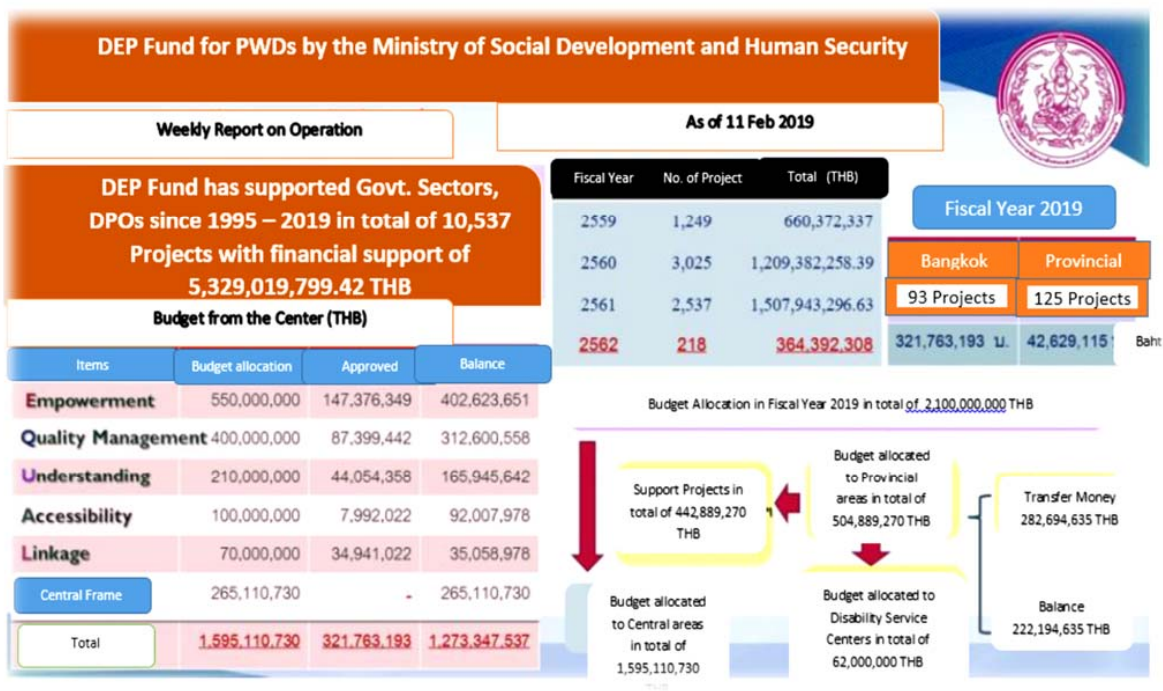
The fund shall be fairly and broadly allocated. The main mission is as follows:

1) Loan Service for Persons with Disabilities and Caregivers of Persons with Disabilities

The finances offered to support as loan to a job creation or expanding business for persons with disabilities will not exceed to 60,000 Thai baht per person. If someone wishes to borrow more, the committee will consider the possibility cases for not more than 120,000 baht per person. Meanwhile, a self-help group could be considered to allow to borrow funds not exceeding 1 million Thai baht with a condition to pay back within 5 years by instalment without interest.

2) Supporting Projects on Improving Quality of Life of Persons with Disabilities

In order to develop the potential of PWDs through the operation of DPOs and other related agencies, with the reference of annual reports during 1995 - 2019 (B.E. 2538 – 2562), the government provided supports to 10,537 development projects of DPOs & related government agencies with total amount of 5,329,109,799 Thai baht. Most of the activities were training projects on knowledge exchange about the rights of persons with disabilities, vocational training, promotion on job opportunities, providing facilities towards accessibility, supporting activities to persons with disabilities via disabled service centers, providing wages for personal assistants (PAs) and sign language interpreters.



1.9 Cooperation with Networks on Disability and Development

There are 5 approaches to promote networks on disability development sustainably on the quality of life of persons with disabilities as follows:

1) Networking and participatory approach for persons with disabilities among relevant government agencies, private sectors, civil society and relevant sectors by forming up a civil state mechanism and other forms. Also, the linkage of an active services for persons with disabilities is included.

2) Promotion and support of the integration of issues on disability development into a 20-year national policy, strategy, programs, integrated funding between relevant government agencies and other related private sectors in a participatory way.

3) Promotion on empowering the PWDs as a driving force on developing networks on disability across issues on the PWDs.

4) Encouraging social enterprise for persons with disabilities and integrated cooperation with relevant to networks of persons with disabilities and others towards self-reliance.

5) Integration and development of cooperation with the networks on disability development in sub-regional, regional and international level for improvement of the quality of life for PWDs.

International Organizations for Persons with Disabilities in Thailand

Some organizations have their missions and activities on disability development and cooperation with organizations in Thailand. They provide budget and technical support. Some self-help groups are not legal entities. It is only a gathering of those who have mutual problems. There is no clear management system. They have their own goals and short-term plans to promote, support and empower the DPOs and their networks in Thailand continuously. There are 3 main issues as follows:

- Efficiency of the organization management
- Terms of services
- Standardized quality of services

During 2009 -2018, there were 514 organizations gotten standardization-certified. Also, there were 425 organizations of PWDS, 65 organizations for PWDs and 25 organizations related to disability services.

1.10 Disability Organization is a national organization to improve the quality life of persons with disabilities by the Act B.E. 2500 and amended (version 2) B.E. 2556

They consist of 7 organizations as follows:

1) Disabilities Thailand: DTH

Address: Asia-Pacific Development Center on Disability (APCD) Bldg. No. 255, Ratchawithi Road, Thung Phaya Thai District, Ratchathewi District, Bangkok 10400, Thailand
Tel: 02 -3544260 Fax: 02-3544261 Contact: disabilityesth@gmail.com

2) Thailand Association of the Blind: TAB

Address: 85 / 1-3, Soi Bun Yu, Din Daeng Road, SamsenNai, Phayathai District, Bangkok 10400

Tel: 02-2476031 Fax: 02-2459846

3) National Association of the Deaf in Thailand (NADT)

Address: 144/9 Thitiporn Place, Phatthanakan Road, Suan Luang District, Bangkok 10260

Tel: 02-7171902 Fax: 02-7171904

4) Association of the Physically Handicapped of Thailand: APHT

Address: 73 / 7-8 SoiThepPrasarn, Tiwanon Road, TalatKhwanSubdistrict, Muang District, Nonthaburi 10110

Tel: 02-9510445-7 No. 102 Fax: 02-9510567

5) Association for Persons with Intellectual Disability (APID)

Address: 49/6 SoiRamintra 8 (WatTraiRattanaram), Bang Khen District, Bangkok 10220

Tel: 02-9719727 Fax: 02-5521606

6) Parent Association of Autistic Persons (Thai) Association of Parents for Autism (APTA)

Address: 140/47 Independence Road 39 Ban Chang Lo, Bangkok Noi District, Bangkok 10700

Tel: 02-4112899 Fax: 02-8661725

7) Association for Mental Disorders of Thailand-Association of the Mentally ill of Thailand

Address: Srithanya Hospital, Tiwanon Road, TaladKhwan, Nonthaburi Province

Tel: 02-5252630 Fax: 02-9689667

CHAPTER II

Country Profile on Autism of Thailand

2.1 Prevalence of Persons with Autism

Thailand have various sources of data on persons with disabilities including autism. According to the national survey on persons with disabilities of the National Statistical Office of Thailand in 2017, there were around 3.7 million people who were classified as persons with disabilities (5.5 % of the total population). However, data as of 31 October 2018 of the Department of Empowerment of Persons with Disabilities (DIP) indicated that there were a total number of 2,041,159 people who registered and applied for ID cards as persons with disabilities in order to get benefits of public facilities as well as other welfare and assistance from the government (3.08 % of the total population), out of this there were 12,297 persons with autism (0.60%).

2.2 Persons with Autism in Basic Education

According to data of Office of the Basic Education Commission (OBEC), in the education year 2018 there were 10,949 students with autism studying in the primary schools. OBEC has a mission to arrange and promote basic education for persons with disabilities, underprivileged group and talented people.

OBEC has organized education for 9 kinds of students with disabilities according to the announcement of the Ministry of Education regarding the type and criteria of educational persons with disabilities, 2009 as follows:

- 1) Persons with visual impairments
- 2) Persons with hearing impairments
- 3) Persons with intellectual disabilities
- 4) Persons with physical disabilities or mobility or health
- 5) Persons with learning disabilities
- 6) Persons with speech and language disability
- 7) Persons with Behavioural or emotion disability
- 8) Persons with autism and
- 9) Persons with multiple disabilities.

OBEC has arranged basic education for all types of children with disabilities to study according to their capacity and readiness of children with disabilities in the educational institutions that provide education for students with disabilities as follows:

1) Educational institutions under the Special Education Bureau, Office of the Basic Education Commission consists of

1.1) Special Education Center; under Regional and Provincial Educational Area, there are 77 centres. It is responsible for organizing and promoting education in Early Intervention (EI) and preparing for all types of persons with disabilities. It includes transferring these children with disabilities to child development centers, general inclusive education schools and disability-specific schools.

1.2) Disability-specific School, the total of 48 schools, it is divided by 4 types of disabilities namely 1) persons with visual impairments 2) persons with hearing impairments 3)

persons with intellectual disabilities 4) persons with physical or mobility or health disabilities. These schools organize an education according to the type of disabled children by organizing education for all levels, from pre-school to the secondary and/or high school level, both ordinary and vocational lines. There are specific courses for each type of disability, in accordance with the needs of each type of disability.

1.3) Welfare School (Suksa Songkhro School), the total of 51 schools, is responsible for providing basic education for 10 types of disadvantaged children for both boarding and non-boarding students.

2) General schools, under the Office of Primary and Secondary Educational Service Area, Office of the Basic Education Commission, will arrange education for children with disabilities as follows;

2.1) General inclusive schools, the total of 23,488 schools, shall organize education for students with all kinds of special needs and/or disabilities who are ready to attend school with other children, participate in learning activities and live without limitations and obstacles according to the potential of the learners with special needs. In school management these schools use SEAT framework and School-Based Management-SBM.

2.2) Parallel classrooms for persons with autism are usually arranged in general inclusive schools for persons with severe autism. These classrooms focus on the development of persons with autism until they are able to study together with general children in a normal classroom. Before that, the child must be stimulated and enhanced in skill development in all areas including academic, knowledge according to learning standards of the basic education curriculum by the Ministry of Education. This depends on the potential and readiness of each child.

The number of students with autism receiving educational services
Under the Office of the Basic Education Commission

No	Educational Institutes whom arranged curriculum for students with autism	Data updated as of	Amount (person)
1	77 Special Education Center	11 July 2018	3,287
2	9 Welfare School (Inclusive) for 135 persons And arranged parallel classroom in a school for 5 persons	10 June 2018	140
3	36 Disability-specific Inclusive School	10 June 2018	1,551
4	General School which arranged Inclusive Curriculum for students with autism, divided as below - students with autism in ordinary classroom for 4,648 persons; and - students with autism in parallel classroom for 1,320 persons	10 June 2018	5,968
Grand total			10,946

In addition, you can search data of students with disabilities from this link:

http://203.159.157.29/set_index/ and Office of Basic Education Commission had enclosed

pamphlet of all Educational Institutes under the Special Education Bureau for fulfil your information

2.3 Persons with Autism in Higher Education Commission

1) The number of students with autism

In the education year 2018 there were 276 persons with autism (male 229 and female 47) studying in universities, according to the data of **the Office of Higher Education Commission**.

Middle and East Region (for 182 persons, included male for 155 persons and Female for 27 persons)

No	University/ Higher Education Institute	Gender		Subtotal
		Male	Female	
1	Ramkhamhaeng University	12	2	14
2	Sukhothai Thammathirat Open University	22	6	28
3	Kasetsart University (Laboratory School Center for 66 persons and Bachelor Degree for 24 persons)	78	12	90
4	King Mongkut's University of Technology Thonburi	1		1
5	Suan Dusit University	14	4	18
6	Chandrakasem Rajabhat University	2		2
7	Dhonburi Rajabhat University	1		1
8	Bansomdejchaopraya Rajabhat University	2		2
9	Phranakhon Rajabhat University	4	2	6
10	Phetchaburi Rajabhat University	2		2
11	Rambhai Barni Rajabhat University	2		2
12	Kanchanaburi Rajabhat University	1		1
13	Suan Sunundha Rajabhat University	1		1
14	Rajamangala University of Technology Krungthep	2		2
15	Rajamangala University of Technology Thanyaburi	2		2
16	Rajamangala University of Technology Rattanakosin	1		1
17	Bangkok University	2		2
18	Rangsit University		1	1
19	North Bangkok University	1		1
20	Rattana Bundit University	1		1
21	University of the Thai Chamber of Commerce	1		1
22	Southeast Asia University	1		1
23	Thai-Nichi Institute of Technology	1		1
24	Sakaeo Community College (Associate Degree for 1 person)	1		1
	Grandtotal	155	27	182

Northern Region (for 39 persons, included male for 32 persons and Female for 7 persons)

No	University/ Higher Education Institute	Gender		Subtotal
		Male	Female	
1	Chiang Mai University (Demonstration School for 3 persons and Bachelor Degree for 5 persons)	6	2	8
2	University of Phayao		1	1
3	Chiang Rai Rajabhat University		1	1
4	Chiang Mai Rajabhat University (Special Classroom in Early Intervention Degree for 7 persons)	6	1	7
5	Kamphaeng Phet Rajabhat University	1		1
6	Pibulsongkram Rajabhat University (Kindergarten Class for 16 persons)	15	1	16
7	Lampang Rajabhat University	1		1
8	Rajamangala University of Technology Lanna	3	1	4
	Grandtotal	32	7	39

Southern Region (in total of 1 person)

No	Higher Education Institute	Gender		Subtotal
		Male	Female	
1	Rajamangala University of Technology Srivijaya	1		1
	Grandtotal	1		1

Northeastern Region

(In total of 54 persons, included male for 41 persons and female for 13 persons)

No	Higher Education Institute	Gender		Subtotal
		Male	Female	
1	Maharakham University	1		1
2	Khon Kaen University	6		6
3	Rajabhat Maha Sarakham University (Special Classroom in Early Intervention Degree for 23 persons)	15	8	23
4	Nakhon Ratchasima Rajabhat University (Kindergarten degree for 23 persons and Bachelor Degree for 1 person)	19	5	24
	Grandtotal	41	13	54

Divided by Age Range

1. Age between 2 – 18 Years old in total of 139 persons
2. Age between 18 – 30 Years old in total of 137 persons

2) Provision of educational services for people with autism

- (1) Creation of ISP (Individualized Services Plan: *ISP*)
- (2) Learning plan for students
- (3) Create peer-to-peer system (Buddy System)
- (4) Provide effective educational support services for students with Disability, Educational quality assurance, including organizing courses about the Learning process, Appropriate educational tests In accordance with special needs such as extra-time teaching class, Arrangement of separate examination rooms, Increasing the test time duration, etc.
- (5) Organize projects to develop capacities of students, such as social skills training, Independent living training and living with others
- (6) Coordinate with multidisciplinary professionals such as psychiatrists, psychologists, behaviour therapists, etc. to help develop social skills, adaptation, behaviour and emotions of students with autism.
- (7) Providing quality advice/consulting services to students, Instructors, and whom it may concern such as academics/learning issues, University life, etc.
- (8) Arrangements and/or borrowing media, equipment, facilities And any other educational assistance Which is conducive to teaching and learning
- (9) Student dormitory service
- (10) Coordinate and provide teachers/instructors-in-charge
- (11) Promote cooperation between organizations both internal and external the university in the form of the cooperation network

3) Departments/Agencies that supervise Students with autism

In all higher education institutions that have existing autistic students studying in their respective university/institute, there will have staff and instructors to supervise and provide educational services. These 41 higher education institutions have a Disability Support Service Center (DSS Center) in their institution as follows:

Northern Region (11 Centers)

Chiang Mai University, Chiang Mai Rajabhat University, Naresuan University, Chiang Rai Rajabhat University, University of Phayao, Lampang Rajabhat University, Rajamangala University of Technology Lanna, Kamphaeng Phet Rajabhat University, Mae Fah Luang University, Pibulsongkram Rajabhat University and Maejo University

Eastern Region (2 Centers)

Burapha University and Rambhai Barni Rajabhat University

Northeastern Region (10 Centers)

Khon Kaen University, Nakhon Ratchasima Rajabhat University, Mahasarakham University, Rajabhat Maha Sarakham University, Ubon Ratchathani Rajabhat University, Sakonkakhon Rajabhat University, Roi Et Rajabhat University, Buriram Rajabhat University, Sisaket Rajabhat University and Ubon Ratchathani University

Central Region (16 Centers)

Mahidol University, Bansomdejchaopraya Rajabhat University, Thammasat University, Suan Dusit University, Kasetsart University (Bangkhen Campus), Kasetsart University (Kamphaeng Saen Campus), Sukhothai Thammathirat Open University, Ramkhamhaeng University, Srinakharinwirot University, Chulalongkorn University, Rajamangala University of Technology Thanyaburi, Phetchaburi Rajabhat University, Rajamangala University of Technology Krungthep, Nakhon Pathom Rajabhat University, Rangsit University and Rattana Bundit University

Southern Region (2 Centers)

Suratthani Rajabhat University and Songkhla Rajabhat University

4) Encountered problems / obstacles and operational guidelines / corrections

Encountered Problems / obstacles	Operational guidelines / corrections
1. Some students with autism have an effect from medical therapy. This may cause students to have drowsiness. It affects the learning efficiency and activities in the classroom.	1. See a doctor regularly. If it is necessary to use medications in therapy, they must be under the advice and supervision of the doctor closely and may have to adjust the dosage and the drug to have the least impact on studying.
2. Some students have problems in expressing some inappropriate behaviour to the opposite sex including occasional body attack.	2. Organize meetings, work plans and solve problems together on a case-by-case basis between students, advisory instructors, academic instructors, parents, psychiatrists and personnel from DSS Center.
3. Most students with autism intend to study only the subjects they like. This may cause a lower level of study in dislike or subjects they uninterested.	3. Provide additional teaching services in the course that students lack interest by finding a supplementary instructor with techniques and psychology in teaching, such as special education students.
4. Some students have difficulty adjusting or adapting themselves. This sometimes may cause behavioural and emotional problems that affecting or disrupting the teaching of the instructor.	4. Parents need to provide buddy teachers to work closely with students with autism while DSS Center will coordinate multidisciplinary teams to help developing social skills, behaviour and emotional adaptation.

5) Service arrangements in the future

1) Organize social skills training programs and necessary working skills for status transition to the labour market for all graduates with autism who expected to graduate

2) Arrange development programs for students with autism individually. By coordinating agencies with expertise in a variety of logic to work together to develop, rehabilitate, recover students with autism, such as art therapy, music therapy, aquatic therapy, hippotherapy, social story, special education including the use of high-pressure oxygen (HBO: Hyperbaric Oxygen Therapy) etc.

6) Suggestions

Each assistance for individual with autism is not the same. However, the operation must be in the same direction. This may include creating knowledge and understanding for all parties involved, especially teachers and friends to be able to understand the needs of each.

2.4 Persons with Autism in Health Services

Department of Mental Health declared that in 2018 Thailand had 18,220 persons with autism. In this number, less than 100 persons had employment/income. DOMH also emphasized that if those with autism had been officially diagnosed and received therapy before age of 5, it would be better in promoting and strengthening them to be able to live independently.

Dr. Samai Sirithongthaworn, M.D., Deputy Director General of Mental Health, came to open a campaign on autism awareness according to World Autism Awareness Day on 1st April 2019 at Bangpu Nature Education Center commemorating 72nd anniversary of Her Majesty Queen Sirikit. It was organized by Yuwaprasart Waithayopatum Child and Adolescents Psychiatric Hospital under Department of Mental Health to raise social awareness on how to take care persons with autism. It had been emphasized on 'Accept, Understand and Walk together'. In this event there was a short film named 'open autism world' in the environmental friendly exhibition about persons with autism. Moreover, there were performances from persons with autism including tree planting in the mangrove areas at the Nature Center. In this event, there were 60 families with persons with autism, 40 persons with autism spectrum disorder participating in social skills and vocational skills training project, together with 300 staffs and general public.

Children with autism who had been diagnosed not later than the age of 5 would have a positive effect on encouraging them to live independently. From the implementation of the strategy for the development of service quality system, Department of Mental Health during the period 2017-2021 was able to increase an access to treatment services for children with autism aged 2-5 years from 8.51 per cent in 2016 to 35.12 per cent in 2017. Within the year 2021 it would increase the access to services by more than 50 percent. Therefore, in order for children with autism to receive good opportunities from society, parents should observe their children at 2 - 5 years old. The following characteristics were for example: "Do not make eye contact, No interaction, Don't point your finger, and Don't like to change." If thinking of autism, parents should bring the children to the screening test at a health promotion hospital or a community hospital nearby to be diagnosed correctly including obtained advice from the Mental Health Hotline 1323 with free of charge.

Dr Noppawan Srivanpanich, Director of Yuwaprasart Waithayopatum Hospital, said that "autism" was a disorder that had an effect of brain development in the area of social skill, language skill and behavioural skill. In Thailand, children with autism age not more than 5 years could be found in ratio of 1 to 161 people. It was estimated that around 18,220 persons with autism around the country. The degree of severity of each person was not equal. About 10 per cent of these number had been found geniuses in some aspects such as drawing or playing music. On the contrary way, 20 per cent had low to moderate level of IQs and had behaviour problems. They could study and participate in vocational training. The rest had to be taken care

continuously. The treatment had to combine among developmental promotions, arranging appropriate educational models, career promotion, employment and social coexistence.

Children with autism have prominent characteristics such as refusing to make eye contact, not looking at other people's faces, not interested in looking after hearing their names, not care about others, speaking more slowly than normal children. They might speak but not in proper language, say the same words over and over, not tell when wanting something, prefer to be in a private world, have inappropriate repetitive behavior, not like changes, like to stare at spinning objects at all time.

2.5 Persons with Autism in Employment

During 2018 – 2019 there were 1,039 persons with disabilities (Visual, Hearing, Mobility and Mental) attending 224 courses of occupation training in various fields organized by Department of Skill Development. Please see the list of courses in Annex.

CHAPTER III

Public Policies Regarding Persons with Disabilities

3.1 Public Policies of Persons with Disabilities

Thailand focuses on improving the quality of life for persons with disabilities by passing the Persons with Disabilities Empowerment Act B.E. 2550 (2007) and (Vol.2) B.E. 2556 (2013). It is disability-specific legislation that promotes the rights protection of persons with disabilities and renders them various types of services in order to avoid unjust discrimination because of their physical impairment/ health conditions. This Act also determines the mechanism towards the implementation in the national level, monitors how persons with disabilities could access their rights appropriately, and defines the role of the DPOs, Disability Service Centre, job creation for persons with disabilities and personal assistants.

In addition, there is the 5th National Plan on Empowerment of Persons with Disabilities B.E. 2560 – 2564 (2017-2021) imposing the vision “Make the Right Real for Persons with Disabilities towards Independent Living in Sustainable Inclusive Society”. The Department of Empowerment for Persons with Disabilities (DEP) under the Ministry of Social Development and Human Security (MSDHS) is the government focal point accordingly.

3.2 Public Policy Development in Line with Incheon Strategies “Make the Right Real”

There are some implementations to impel Incheon Strategy by drafting the National Action Plan for Operationalizing the Incheon Strategy Indicators between the Department of Empowerment of Persons with Disabilities (DEP) under the Ministry of Social Development and Human Security (MSDHS) and the Economic and Social Committee of Asia and the Pacific (ESCAP). The main points are as follows:

- The Department of Empowerment for Persons with Disabilities (DEP) is the national focal point on collecting basic information used for the Incheon Strategy operationalizing indicators reporting the progress related to disability development activities.

- There are 11 agencies responsible for collecting data related to persons with disabilities for 41 main indicators according to 10 goals of Incheon Strategy as follows:

- Department of Civil Aviation
- Department of Disaster Risk Reduction and Extenuation
- Department of Empowerment for Persons with Disabilities (DEP)
- Department of Women’s Affairs and Family Development
- Office of the Election Commission of Thailand
- Office of the Basic Education Commission (OBEC)
- Department of Medical Services
- Department of Skill Development
- National Statistical Office
- The Secretariat of the House of Representatives and the Senate

3.3 Social Welfare for Persons with Disabilities

According to Section 20 of the Empowerment of Persons with Disabilities Act, B.E. 2550 (2007), and amended the version No. 2, B.E. 2556 (2013), persons with disabilities have the right to access and utilize public facilities including welfare services and other support from the state as follows:

1) **Rehabilitation services using medical procedure:** This includes expenses on medical treatments, equipment, assistive devices, and media facilitating development to rehabilitate physiological, mental, emotional, social, behavioural, intellectual, and learning aspects, or to enhance their capabilities, as stipulated by the Minister of Public Health.

2) **Education in accordance with national education law or national education plan:** It covers education in special educational institutes, general educational institutes, alternative education or non-formal education. This will be supported by relevant agencies in charge of providing facilities, media, services and any other educational assistance for persons with disabilities, as appropriate. Education management for persons with disabilities in accordance with the Education Management for Persons with Disabilities Act B.E. 2551 (2008) indicates that persons with disabilities have the right to access education.

3) **Vocational Capacity Rehabilitation:** This includes standard services, labor protection, measures for employment opportunity, promotion of self-employment, media services, technological facilities and other assistances to support work and occupation of persons with disabilities. According to the Ministry of Labour's Announcement about criteria, procedures and conditions for the rehabilitation related to standard service jobs, labor protection, measures for employability and promotion of self-employment, media services, facilities, technology, and other assistances for the work and occupation of persons with disabilities on 13 March 2012 (B.E. 2555)

4) **Full and Efficient Acceptance and Participation in Social, Economic and Political Activities:** It is an equal basis with general people as well as in receiving various facilities and services according to the needs of persons with disabilities.

5) **Assistance to Access to Policies, Plans, Projects, Activities:** This includes development and public services, necessary products for living, legal assistance and provision of lawyers for legal cases shall be in accordance with the rules prescribed by the committee.

6) **Information, Communication, Telecommunication Services, Information and Communication Technology, and Facilities for Communication for All Types of Persons with Disabilities:** It includes public media from public or private sectors that receive financial support from the State according to the rules, procedures and conditions prescribed by the Minister of Information and Communication Technology in the Ministerial Regulations.

7) **Sign Language Interpreter Services for Persons who are Deaf**

According to the National Committee for the Empowerment for Persons with Disabilities related to sign language interpreters, 2009 (B.E. 2552), issued under Section 20 (7) of Empowerment for Persons with Disabilities Act, persons who are deaf have the right to access a sign language interpreter service in various cases such as having medical services, applying for their jobs, attending a seminar/meeting or delivering a lecture. The Department of Empowerment for Persons with Disabilities (DEP) through the Sub-Committee on Promotion and Development of Sign Language Interpreters has announced 492 officially registered sign

language interpreters. There are 726 persons with deaf/hard of hearing (HoH) using the sign language interpreter service across 77 provinces (according to the information on 20 March 2012).

To submit a request form to use a sign language interpreter service in Bangkok, persons who are deaf/hard of hearing can submit the completed form at the Department of Social Development and Welfare. For provincial areas, they can submit the request form at the Office of Social Development and Human Security in their province. Sign language interpreters will get their honorarium at a rate of not less than 300 Thai baht per hour, but not more than 500 Thai baht per hour. The honorarium can be up to 600 Thai baht per hour in case of providing services for meetings, seminars or trainings.

8) Rights for Persons with Disabilities to Bring Guide Dogs, Guiding Equipment or Assistive Devices: They have the right to bring with them in any vehicles or any public places for travel benefits. This includes the right to access public facilities with the exemption from additional payment for service charges, fees and additional rental fees for such guide dogs, tools, equipment or assistive devices. This also includes the right to waive tax for persons with disabilities and their caregivers.

9) Welfare for Persons with Disabilities: According to the Ministry of Interior Regulations on criteria for payment of disability allowance for persons with disabilities of the local administrative organizations, 2010 (B.E. 2553) and No. 2, 2016 (B.E. 2559), it allows the local administrative organizations to register eligible persons with disabilities to receive disability allowance. Only persons with disabilities registered according to the law on the Persons with Disabilities Empowerment Act can personally apply for a disability allowance at their domicile administrative organization. After approval, the persons with disabilities have the right to get disability allowance in the next month.

10) Modification of Housing Environment, Provision of Personal Assistants or Any Other Welfare Services: According to the criteria and procedures prescribed in the regulations of the National Committee for the Empowerment for Persons with Disabilities Regulation, it includes the modification of housing environment for persons with disabilities, provision of personal assistants, assistance to uncared persons with disabilities or the rights of caregivers of persons with disabilities.

3.4 Policies on Employment and Partnership with Private Sectors or Business Partners

The government has established a civil society working group to monitor and report the progress of civil society policies and implementing activities for the society. The working group consists of the Minister of Social Development and Human Security (MSDHS) as the leader of the government sector team, the Chairman of the Thai Chamber of Commerce Private as the leader of private sector team, and the manager of the Thai Health Promotion Foundation (Thai Health) as the leader of the civil society team.

Civil society operation focuses on the collaboration to solve social problems by selecting the familiar scope of work that can be extended for sustainability. Thai Health is responsible for coordinating work between the government agencies, private sectors and civil society sectors. These three sectors are in collaboration with Thai Health to compel health

promotion issues to develop a model in issue/area levels to extend results, such as employment of persons with disabilities. They are respond to social problems that affect Thai people's health. Ways to increase the choices of financial systems in the form of Social Investment Bonds (SIBs) are proposed by using funds raised from the private sectors to implement social projects. The government sectors will pay back the capital and the yield upon investment for investors, according to the conditions.

The operation of private sectors shall focus on sustainable development instead of social welfare support. This will help build long-term strengthening, especially the promotion of income generation and employment of persons with disabilities. This will change from sending money to the Fund (Section 34) to employment for the persons with disabilities (Section 33) and career promotion (Section 35). In this first phase (from December 2016 to February 2017) a group of companies in the working group already hired 7,576 persons with disabilities which was higher than the target of 7,155 and continued to expand its success with the network companies outside the state group by hiring 16,000 persons with disabilities in 2018 to be able to the announced intention.

The Ministry of Social Development and Human Security (MSDHS) defines an action plan to compel the civil society working group for society. There are some issues about promoting employment and income generation of persons with disabilities and compelling the employment of persons with disabilities to the target of 68,000 in line with Section 33 and 35 of the Persons with Disabilities Empowerment Act 2007 (B.E. 2550) in private, public and civil society sectors.

According to the data on the employment of persons with disabilities on 24 September 2018, there were 64,485 persons with disabilities who had to be employed. However, 36,971 persons with disabilities were employed under Section 33 (57.33 %). The levy was sent to the Fund for Promotion and Development of the Quality of Life of Persons with Disabilities instead of employing 14,537 persons with disabilities (22.54%) in accordance with Section 34. The levy contributed the total of 1,617 million Thai baht. There were 12,544 persons with disabilities/caregivers of persons with disabilities receiving the concession under Section 35 (19.45%). Those complied with Section 33, 34 and 35 contribute 64,052 people (99.32). There were 13,275 establishments which had to comply with the law. However, 11,655 establishments fully complied with the law (87.79%), 136 establishments partially complied with the law (1.02%) and 1,484 establishments did not comply with the law (11.18%).

In terms of the employment of persons with disabilities in public sectors, there were 12,500 persons with disabilities who had to be employed. According to the result, those comply with Section 33 represent 6,522 people (52.17%). 3,878 people (31.02%) complied with Section 35 and 10,400 people (83.19%) comply with both Section 33 and 35.

According to the Persons with Disabilities Empowerment Act 2007 (B.E. 2550) and amended (No. 2) 2013 (B.E. 2556), Section 34 stipulates that employers or business owners who do not wish to employ persons with disabilities in line with Section 33 shall send the levy to the Fund for Promotion and Development of the Quality of Life of Persons with Disabilities accordingly. Any employers or business owners who either employ persons with disabilities or send the levy to the Fund are entitled to tax deduction with the ratio of the employment of persons with disabilities expenses prescribed by laws.

CHAPTER IV

Facilities & Accessibility for Persons with Disabilities

4.1 Laws, Plans, Policies Related to Disability

Empowerment of Persons with Disabilities Act B.E. 2550 (2007) and amended (No. 2) B.E. 2556 (2013), Section 19 and Section 37 indicates that Minister of Social Development and Human Security, Minister of Transport and Minister of Interior shall issue ministerial regulations to prescribe aspects, specifications or the provision of equipment, facilities or services in the buildings, places, vehicles, transportation services and other public services to ascertain that they can be accessed and utilized by persons with disabilities.

Owners of buildings, establishments, vehicles, transportation services or other public service providers who provide equipment, facilities or services as prescribed in Paragraph 1 shall be eligible for a tax deduction or exemption at a certain percent of the amount incurred from such expenditure, as prescribed by law.

The Ministry of Social Development and Human Security: Notification of Ministerial Regulations determines the characteristics in the provision of equipment, facilities or services related to accessibility in buildings or public services for persons with disabilities and for them to be able to access and use those buildings and facilities in 2012.

Buildings and facilities belonging to government agencies, private organizations or other organizations shall provide equipment facilities for person with disabilities to access in any way. This includes seats for persons or parking lot, wheelchairs, surface ramps, toilet for persons with disabilities, elevator for persons with disabilities, notification of warning for persons with visual disabilities and persons with hearing impairment.

The Ministry of the Interior issued a Ministerial Regulation B.E. 2548 (2005) regarding the provision of facilities in the building states that buildings must provide facilities for persons with disabilities or disabilities and the elderly in areas that are open to the general public:

1) Hospitals, nursing homes, public health centers, health centers, government buildings, state enterprises, state organizations established under the law, educational institutions, libraries and state museums, and train stations, bus stations, and piers with area of more than 300 square meter opened to the public.

2) Office of the theatre, hotels, auditoriums, stadiums, shopping centers, shopping malls of various types in any area of the building that is open to the general public for more than 2,000 square meters. The buildings shall have the following details:

(1) Symbol of disability

(2) Sign showing the path to facilities for persons with disabilities or disabilities and seniors

(3) Symbols or letters showing the type of facilities

If the floor level in the building or floor level inside the building and outside the building or the floor level of the exterior corridor has different levels of over 20mm, the ramp or elevator between each floor must not be over 45 degrees.

The elevator for the persons with disabilities and the elderly must have a width of not less than 1,100 mm and not less than 1,400 mm. The door of the elevator must be at least 900

mm with different surface texture at the entrance. It must have lift control buttons, emergency notification buttons and a button to call the elevator.

Stairs for persons with disabilities and elderly must have a net width of not less than 1,500 mm and includes a resting balcony for every vertical distance of not more than 2,000 mm and also must have rails on both sides. There should be a sign showing the direction, position or floor number of the building that persons with visual impairment and elderly located on the way up and down the stairs connecting the floor of the building.

Ministry of Transport Ministerial Regulations indicate the determination of characteristics or providing equipment facilities or services in buildings, places, vehicles and transportation services for the disabled to be able to access and use in 2013 as follows;

Equipment or facilities in buildings, locations, vehicles, and transportation services must be stable, strong and safe to enable persons with disabilities to access and use in accordance with the needs of each type of disabilities.

Vehicles provide equipment facilities or services for persons with disabilities able to access and use such as:

1) A car used to transport passengers in transit type and not in accordance with the law on land transportation

2) Public cars and service cars under the law on cars

3) Trains under the law on rail and highway arrangement

4) Electric trains under the law on mass rapid transit of Thailand

5) Passenger boats in accordance with the law on navigation in Thai territorial waters

6) Transport aircraft under the law on air navigation Vehicles used to transport passengers to have facilities or services for persons with disabilities to be able to access and use any one of the benefits such as:

(1) Car doors for persons with disabilities

(2) Equipment for bringing persons with disabilities or wheelchair lift equipment

(3) Up and down the car ramp

(4) Parking space for wheelchairs or wheelchair storage equipment for persons with disabilities

(5) Signs showing equipment or facilities for persons with disabilities

(6) Guide to assisting persons with disabilities in each category for car care personnel

(7) Translation guide or sign language signs for car staff to communicate with persons with disabilities.

Survey results as of September 2011, government offices built in accordance with the cabinet resolution of 6 categories, including 830 hospitals, comprised of 75 city halls, 876 district offices, 50 district offices, 7,852 local administrative organizations, 31,884 educational institutions and 1,457 police stations, or a total of 43,024 places. It appeared that only 8,116 places had facilities for persons with disabilities.

4.2 The Concept of Environmental Arrangement Accessible for All

"Environment" may be tangible, such as buildings, locations, roads, but also includes information communication services and knowledge, as well as the concept of environmental management. The concept is based on 3 principles: Inclusive Design or Design for All or Universal Design (UD). The principles of the Convention on the Rights of Persons with Disabilities define that products and services can be used by a big group of people without needing to change for any use by specific person. The human rights emphasize the freedom of communication which includes persons with disabilities, elderly, and local tribes speaking different languages.

4.3 Proposal for Organizing the Public Environment for Everyone's Access

Committee on Disability Affairs for Children, Youth, Women, the Elderly, Persons with disabilities and the Underprivileged during the National Legislative Assembly in July 2016 indicated that there were 10 key issues as follow:

- 1) A driving strategy on Accessibility for All Act
- 2) Accessibility dimension to cover all aspects
- 3) Amendments to the laws related to accessibility
- 4) Provision on the accessibility law to be a main law
- 5) Drafting new laws
- 6) Comparison of the foreign law on accessibility,
- 7) Integration of laws regarding Accessibility
- 8) The guidelines to prepare AAA
- 9) Providing a law on accessibility standards for all
- 10) Pushing for filling accessibility in the national strategy for 20 years

CHAPTER V

Disability Inclusive Business (DIB)

Persons with disabilities should be empowered and gain job opportunities. Both employees and entrepreneurs can generate income for themselves and their families without any barrier in the society. Apart from relying on themselves, other sectors such as government sectors, state enterprises, private sectors and other people should be responsible to support persons with disabilities to be able to work with their full capacity and to promote them to participate in developing their society. There is a strategy on disability and development called “Incheon Strategy to Make the Right Real for Persons with Disabilities in Asia and the Pacific 2013 to 2022.” It includes empowering persons with disabilities and promoting job opportunities for them as part of its goal.

“Incheon Strategy: Make the Right Real” was approved by the high-ranking government officials meeting including the Thai government. This meeting was under the ASEAN and Pacific Decade of Persons with Disabilities, 2013-2022, conducted by Asia-Pacific Economic and Social Commission (ESCAP) in Incheon, Republic of Korea in 2012. The goals of the strategy are to promote the work of persons with disabilities, such as reducing poverty, and increasing job or employment opportunities.

This strategy requires persons with disabilities and their families to be able to rely on themselves, independently live without poverty and participate in the economic system of their society. The appropriate approaches consist of suitable job, education, training and so on which will help persons with disabilities to sustain their jobs. Persons with disabilities should be protected with the right to work in accordance with their capabilities. To achieve the goals, the government and related sectors should prepare appropriate environment for such. That is promoting the labor market for persons with disabilities such as increasing work and employment opportunities for working age persons with disabilities. They are in the working age group. They can work and want to work. This includes promoting the social participation in capacity-building training programs for their work and employment promotion programs supported by the government fund. These government’s support will help persons with disabilities and their families able to rely on themselves. They can participate in economic and social aspects and can contribute to the progress of their community and their country further.

According to the results of the implementation of the 4th National Plan on Empowerment of Persons with Disabilities (2012-2016) promoting persons with disabilities to work, we found that there were more than 32,500 persons with disabilities working in companies and 3,846 persons with disabilities working for the government. The government fund gave persons with disabilities and personal assistants with the loan without interest to support their independent occupations. The maximum rate of the loan was raised from 40,000 baht to 60,000 baht per person. This would be considered case by case. However, in some case, the maximum rate could be 120,000 baht per person to help persons with disabilities work accordingly.

Nowadays, Thailand has the 5th National Plan on Empowerment of Persons with Disabilities (2017-2021) in line with the Convention on the Rights of Person with Disabilities, Incheon Strategy: Make the Right Real and the Persons with Disabilities Empowerment Act (2007) and the Amended No. 2 (2013). The Plan defines that “Persons with disabilities have their own right to access and independently live in their society sustainably” under the Equal

Strategy (EQUAL). It is to promote their participation and cooperation of all sectors, including the public, private and civil society sectors in order to enable persons with disabilities to maintain their human dignity and promote equal access to facilities in accordance with their rights.

The Equal Strategies are related to promote the Disability-Inclusive Business (DIB) as follows: 1) Empower persons with disabilities and their disabled organizations to reach their potentials and strength (Empowerment); 2) Develop quality of life and eliminate discrimination to enable their rights to access (Quality Management); 3) Enhance understanding and positive attitude to persons with disabilities and their disabilities (Understanding); 4) Create a public environment and services where everyone can access and use (Accessibility); and 5) Promote the integration of networks and create participation to improve the quality of life for persons with disabilities in a sustainable way (Linkage). These strategies will protect the rights of persons with disabilities to access facilities.

5.1 Businesses Run by Persons with Disabilities

There is some information based on data from Department of Empowerment of Persons with Disabilities showing that there were some persons with disabilities who were able to run their own businesses and got loans from the Empowerment of Persons with Disabilities Fund in 2016 (as of 30 Sep 2016). In Bangkok, there were 546 persons with disabilities getting the loan in 24,478,000 baht. In provincial parts there were 15,884 persons getting 573,691,089 baht. They had various occupations: agriculture, 7,902 persons getting 285 million baht; commerce, 5,701 persons getting 207 million baht; mechanic and service, 2,227 persons getting 81 million baht; lottery agent, 580 persons getting 22 million baht; and computer technique, 19 persons with disabilities. The total loan for 16,430 persons with disabilities was 598 million baht.

The survey on Disability-Inclusive Business conducted by Workability Thailand (WTH) cooperating with Workability Asia, the Ministry of Labor, the Department of Employment and the Department of Empowerment found that there were the businesses both run by persons with disabilities themselves and by their personal assistants or families. The example of the companies run by persons with disabilities is Siam Nissin Company Limited.

5.2 Employment of Persons with Disabilities in Private Sectors

According to the Empowerment for Persons with Disabilities Act, 2007, Section 33, 34 and 35. Persons with disabilities have their rights to access to the job promotion of government or other stakeholders through the act. Private and public stakeholders shall employ a person with disability per 100 employees.

- Section 33 is to promote and develop the life quality of persons with disabilities, the employers, business owners and public agencies who have more than 100 staff shall employ a person with disability per one hundred employees in a suitable workplace.

- Section 34 is to give any employers a choice in case they don't want to employ or recruit persons with disabilities in their companies in accordance with Section 33, they shall make contribution to the fund pursuant to Section 24.

- Section 35 is to help any public agencies which don't want to choose Sections 33 and 34, they shall provide goods and services for persons with disabilities in workplaces.

Regarding the employment of persons with disabilities in 2018, there were 63,778 persons with disabilities employed in companies; 10,256 persons with disabilities employed by public agencies. 176,620 persons with disabilities and their personal assistants received professional loans without interest in the amount of 5,507,744,605 baht.

5.3 Branding and Development for the Products of Persons with Disabilities

The Ministry of Social Development and Human Security (MSDHS) has public policies to help workers who are in a shortage of valuable work. "Valuable work" means work that can meet the needs of human life. Human life needs include opportunity and income, rights, voice, recognition, family stability personal development, fairness and gender equality. For this reason, the ministry and the related agencies both public and private sectors have trained and developed the capacities of persons with disabilities through, for example, the Cube Project and Buy Social Thailand Project.

The Cube Project of the Ministry of Labour and parties recognizes the importance of developing potentials and life quality of workers with disabilities together with promoting High Value Job. The Ministry has provided a job guidance and training to persons with disabilities. One interesting program for the development of products of persons with disabilities is "Product Development & Design for Entrepreneurs with Disabilities." The objective is to improve the quality of the products of persons with disabilities to be accepted in the labor market in the way of promoting design innovation and work processes which will give job opportunities to persons with disabilities in local communities.

5.4 Training and Policies on Disability-Inclusive Business

Government agencies, private sectors and social sectors have regularly organized training programs for persons with disabilities and they have a variety of work skills to train persons with disabilities. Persons with disabilities will receive training through the appropriate ways, including Thailand Job Coach Project, a network of job guidance and training for Thai persons with disabilities; Buy Social Thailand Project, supporting marketing for social enterprise networks and the Cube, the Incubation Center on Business Innovation and Inclusive Employment for persons with disabilities. They prepared a career guidance program for persons with disabilities and their families to have knowledge and understanding on occupations, labor market information, training resources and funding sources. Persons with disabilities and families will be able to apply knowledge in consideration into planning, making a decision by themselves to choose a career which suits their personality, skills and attitude. Then persons with disabilities or their families are able to work and make their own income. The activity of the project is to invite speakers, who are knowledgeable and successful in their careers, to give inspiration on occupation, career information and how to make preparations before entering a career. Moreover, the project organizes occupational promotion activities appropriate with the type of disabilities.

5.5 Tax Incentives Related to Persons with Disabilities

Tax benefits for employers

1) Job payment for persons with disabilities: Employer or owner of the establishment, which accepts persons with disabilities to work, is entitled to exemption from income tax in the amount of one hundred percent of the expenditure in the employment of persons with disabilities under Section 3 of the Royal Decree (No. 499) 2010. This means that

the employer or the owner of the establishment can bring the wages of persons with disabilities to deduct 2 times as additional expenses. In this case, the actual wage paid is 120,000 baht, and can be considered as expenditure up to 240,000 baht, even if paying the wages of persons with disabilities is only 120,000 baht.

2) Expenses for providing equipment, facilities or service to employees with disabilities: Employers and entrepreneurs have the right to income tax exemption at the amount of one hundred percent of the expenditure in providing equipment. Facilities or such services to employees with disabilities.

3) Exempt from income tax: There are more than 60 percent of all employees with disabilities. Article 38 of the Empowerment of Persons with Disabilities Act, 2007 specifies that "Employers or owners of enterprises that hire people with disabilities to do more than 60 percent of the employees in that establishment with a period of employment exceeding 180 days in any tax year have the right to be exempt from income tax in that tax year as required by law."

4) Other benefits: Under Section 39, Paragraph 2 of the Empowerment for Persons with Disabilities Act, 2007, it stipulates that "in the case that the state or government agency will consider giving concessions, investment promotion, award of honor, insignia award or any other benefits to any employer or establishment. The information published under Paragraph 1 shall also be used for consideration.

5.6 Cooperation with the business sectors in the target community

The survey of Workability Thailand found that most persons with disabilities continue to engage in general employment and agricultural sector in more numbers than as private employees or government service/state enterprise. Therefore, cooperating with the business sectors in the community to work together to develop a disability-inclusive society is very important. This means the promotion of support for all persons with disabilities. These support may be in the form of promotion of training for persons with disabilities to develop the skills necessary for their careers or in the form of promotion of employment persons with disabilities. Businesses that perform this function may be a private business sector or social enterprise. It is a group that takes care of persons with disabilities or group run by persons with disabilities themselves. One good example of employment in the community is the employment of Thai Bankers' Association, Thai Red Cross and Social Innovation Foundation. They have a contract of employment of persons with disabilities in the Office of the Red Cross and 240 Red Cross branches in 76 provinces nationwide with a total of 668 positions in the regular staff positions.

5.7 Public Policies on Disability-Inclusive Business by Persons with Disabilities

Fund for the Empowerment of Persons with Disabilities is aimed to support the development of the quality of life of persons with disabilities to be strong, sustainable, thorough and fair. It was established under the Persons with Disabilities Empowerment Act, in developing the quality life of persons with disabilities in 2007, Section 23. A fund is established and called "Fund for the Empowerment of Persons with Disabilities." It is for spending on protection and development of their capacity along with their education and occupation including promoting and supporting the operations of organizations related to persons with disabilities by allocating it fairly and thoroughly, providing services to the persons with disabilities.

5.8 Partnership with Business Sectors and Network System Management

In response to the government's policy of developing disability-inclusive communities in the country, the Empowerment of Persons with Disabilities Act, 2007 regulates employment for the persons with disabilities in the ratio of 1:100 in various agencies, both public, private and social sectors. This includes entrepreneurs with disabilities and entrepreneurs who are able to hire the persons with disabilities as employees. They must be carried out together to achieve success alongside public policy.

One of the most important work/employment goals is to raise awareness among all sectors in the society. Let each sector share and be generous with persons with disabilities and develop their cooperation in being a civil state between government and private sectors. The cooperation between business and society for persons with disabilities will offer an opportunity to develop a disability inclusive society and ensure to “Leave No One Behind.” When persons with disabilities and their self-help group are strong, they will be able to strengthen the community and each other.

CHAPTER VI

International Collaboration (Partnership with ASEAN Countries)

6.1 Participation in International Conferences

The Ministry of Social Development and Human Security (MSDHS) through the Department of Empowerment of Persons with Disabilities acts as representative, government focal point of Thailand in collaboration with other government agencies, the private sectors and the Disabled Persons Organization (DPOs) of Thailand. They work together to implement the public policy on disability development in accordance with the ASEAN Member States' commitment through the Convention on the Rights of Persons with Disabilities (CRPD) at the community level, national level, and regional level. It consists of the implementation of the Sustainable Development Agenda in 2030, which has a public policy about “No One Left Behind” through the Incheon Strategy to "Make the Right Real" for Persons with Disabilities in the Asia and Pacific countries. Its purpose is to promote the participation of persons with disabilities in every aspect by reducing various barriers, along with the ASEAN Landscape signed into the Bali Declaration on Strengthening the Role and Participation of Persons with Disabilities in the ASEAN Community. It was announced that the ASEAN Disability Development Decade of 2011 – 2020 (10 Years) will promote equal rights and opportunities for persons with disabilities in ASEAN region and the endorsement of the “ASEAN Master Plan in 2025” and to integrate the rights of persons with disabilities.

6.2 Sharing Experiences with International Organizations

The Ministry of Social Development and Human Security through the Department for Empowerment of Persons with Disabilities along with other government agencies, private sectors, and DPOs attended meetings in ASEAN to learn and share experiences on education, public health, labor, environment, and social services such as:

- 1) ASEAN workshop on “Networking of ASEAN Entrepreneur Specialist.”
- 2) Meeting on Regional Masterplan of Action to Promote the Rights of Persons with Disabilities in the ASEAN Community 2025
- 3) Meeting of ASEAN Economic Community (AEC) between government and civil society, social welfare and development

6.3 Partnership with Parties in Participatory Development in the Community

Ministry of Social Development and Human Security (MSDHS) through the Department of Empowerment for Persons with Disabilities in collaboration with government agencies, the private sectors and the DPOs of Thailand attended to exchange knowledge, and experiences of learning sessions in workshop at various levels.

1) Partnership on Community-Based Inclusive Development (CBID)

- Attending the 1st Asia-Pacific Community-Based Rehabilitation (CBR) in Bangkok, Thailand in 2009; the 2nd Asia-Pacific CBR in Manila, Philippines in 2011; and the 3rd Asia-Pacific CBR in Tokyo, Japan in 2015
- Attending the 1st CBR World Congress in Akra, India in 2012; and 2nd CBR World Congress in Kuala Lumpur, Malaysia in 2016

- The preparatory meeting for the 4th Asia-Pacific Community-Based Inclusive Development (CBID) Congress “Sustainable Social Development and Economic Growth through Community-based Inclusive Development (CBID)” held on 2nd-3rd July 2019 at Shangri-la Hotel Ulaanbaatar, Mongolia

2) Collaborations with APCD

- Support collaboration and networking, international workshop and information management
- Promote Disability-Inclusive Business (DIB) and trainings of 60+ Plus Projects
- Support Skills Development Training for Persons with Disabilities: Employability in Food Business with Thai Yamazaki Co., Ltd.
 - Support the training of 60+ Plus Chocolatier and Chocolate by Mark Rin
 - Support the sales of 60+ Plus Bakery and Chocolatier in other places e.g. The United Nations (Thailand) and Ministry of Foreign Affairs
 - Support job trainings for persons with disabilities for Thai Yamazaki, Café Amazon, Grand Hyatt Hotel and Dunkin’ Donut
 - Support the Project on Hotel Service & Employment Training for Thai Persons with Disabilities to work in the hotel business, which received support from the fund to promote and improve the quality of life of persons with disabilities.

CHAPTER VII

Planning for the Future

7.1 Trends on Disability and Development in the Future

Thailand has focused on trends on disability and development in the quality of life of Persons with Disabilities through the Empowerment of Persons with Disabilities Act B.E. 2550 (2007) and amended (No. 2) B.E. 2556 (2013). This Act has some important principles to determine some legislations related to benefits of persons with disabilities and the protection of their rights to prevent undeserved discrimination because of their physical condition/health. This resulted in the establishment of the Office of National Promotion and Development of the Quality of Life of the Persons with Disabilities (later renamed as “the Department of Empowerment for Persons with Disabilities (DEP)” as the government focal point of disability and development in Thailand in accordance with the Ministerial Regulation to operate under the Ministry of Social Development and Human Security, 2016).

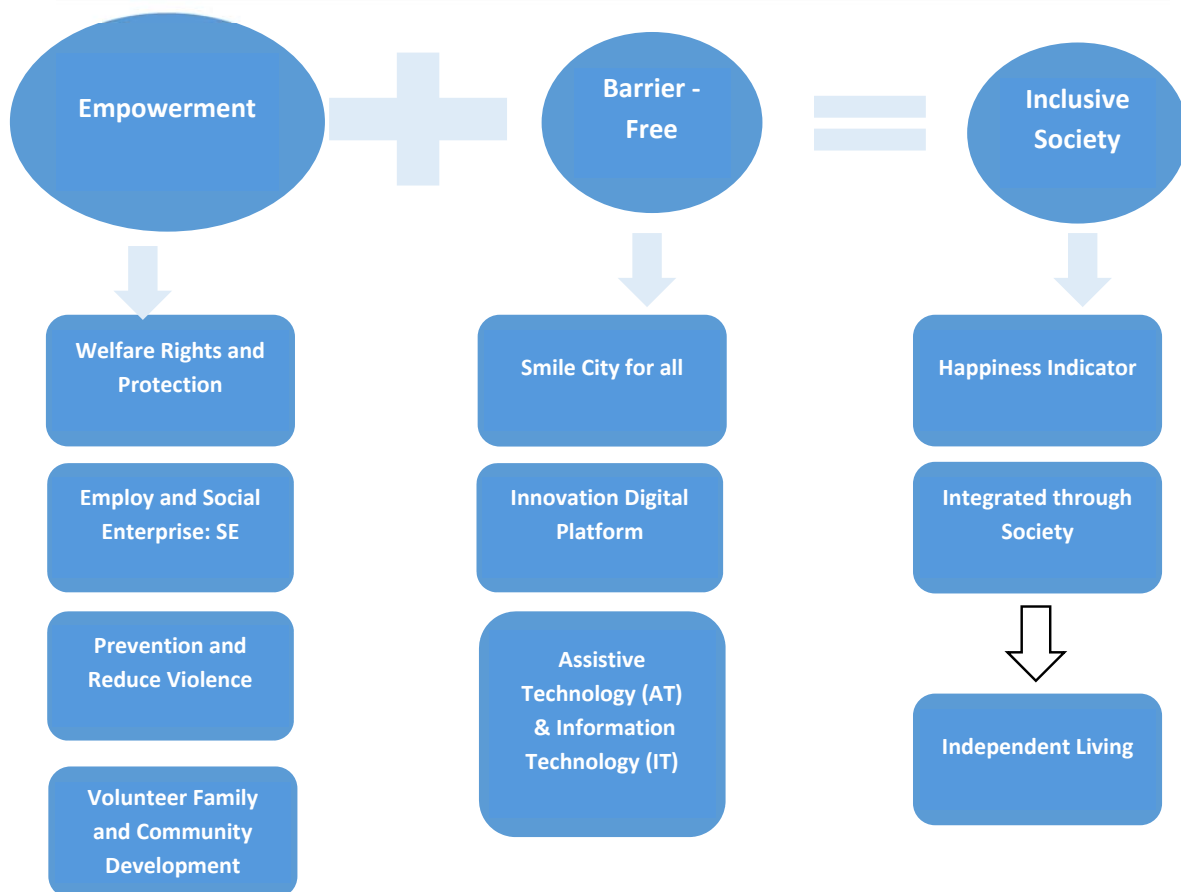
In addition, this Act serves as a mechanism to drive implementations in the national level such as the National Committee for the Department of Empowerment for Persons with Disabilities which has the Prime Minister acting as the chairman. The Department works as a policy maker, and impels action plans to improve the quality of life of persons with disabilities in Thailand and relevant responsibilities about data collection and analysis on the quality of life situation of persons with disabilities. There is also an action plan on the development of the quality of life of persons with disabilities, the 5th edited version 2007 – 2021 (B.E. 2553 – 2564), related to legislations, the National Disability Public Policy Framework, and international obligations, e.g. the Sustainable Development Goals (SDG) 2015 – 2030, the Convention on the Rights of Persons with Disabilities (CRPD), Incheon Strategy: Make the Right Real under the Asian and Pacific Decade Persons with Disabilities 2013-2022, the Sendai Operation Framework for Disaster Risk Reduction 2015-2030, ASEAN Enabling Master Plan 2025: Mainstreaming the Rights of Persons with Disabilities.

The Department of Empowerment for Persons with Disabilities has an action plan from 2017 to 2021 under the vision "Every person with disabilities has their potential towards Independent Living and happy inclusive society". For fiscal year 2019, the implementation plan is in line with the strategic plan of the Ministry of Social Development and Human Security (MSDHS) from 2017 to 2021 (B.E. 2560 – 2564), with an amended version on March 2018. The Ministry's vision is to become the leader of the society in Thailand and ASEAN countries towards a quality society.

7.2 Administration Concept

To drive the development of the quality of life of persons with disabilities comprises of 2 concepts which are capacity building and barrier-free society to empower persons with disabilities to live in the society happily and equally as others in line with the 5th National Plan on Empowerment of Persons with Disabilities. These concepts lead to 9 projects run by DEP under the vision “Empowerment and Barrier-Free on the Rights and Welfare for Persons with Disabilities through Sustainability” as can be seen in the following diagram:

EQUAL: Strategy on Equality



CHAPTER VIII: Conclusion

Since the introduction of Persons with Disabilities Empowerment Act B.E. 2550 (2007) and amended (No. 2) B.E. 2556 (2013), the empowerment of persons with disabilities in Thailand has had continuous developments according to their rights. This Act stipulates some policies and provides mechanisms to protect the rights of persons with disabilities. Moreover, persons with disabilities are able to enjoy all the benefits from their rights, social welfare, public accessible facilities, and other assistance from the state.

8.1 Social Barriers of Persons with Disabilities and Challenges

There are some social barriers of persons with disabilities:

- 1) Persons with disabilities may lack self-esteem and think that they do not have the ability to do activities or participate in any matters of society
- 2) Families may feel shameful of having family members with disabilities, so they do not support their family members with disabilities to attend any social participation
- 3) Community members may have negative attitudes or irrational thoughts towards persons with disabilities, e.g. they are cursed or possessed by evil
- 4) Physical disabilities might deter persons with disabilities to travel or enter some premises such as community sports fields or cinemas that are not accessible for them
- 5) Gender inequality might lead to limitations in joining some social activities of women with disabilities. They are abused and discriminated. Women and children with disabilities might lack the opportunity to participate in social activities or decision-making processes.

8.2 Direction of the Development on Quality of Life of Persons with Disabilities

Situation of persons with disabilities are analysed according to opportunity, threat, strength and weakness as follows:

Opportunity: There are some external factors seen as opportunity to the development on quality of life of persons with disabilities. This results from the global movement on the development on quality of life of persons with disabilities, namely, the Convention on the Rights of Persons with Disabilities (CRPD), the Incheon Strategy: Make the Right Real, under the Asian and Pacific Decade Persons with Disabilities, the Sustainable Development Goals (SDG), the Sendai Operation Framework for Disaster Risk Reduction, as well as other international obligations related to the quality of life development of persons with disabilities.

All of these impel Thailand to amend and enforce legislations and policies in line with the mainstream.

In addition, the Sustainable Development Goals (SDG) is an impactful external factor in the implementation on the quality of life development of persons with disabilities in Thailand. SDGs 2016-2030, which should be achieved in the next 15 years, consists of 17 goals and 169 targets. They serve as a guideline to develop the country imposing the vision of “No one is left behind” including persons with disabilities.

Threat: Currently, Thailand has encountered a number of transitions in many aspects. Political changes result in the draft of the new constitution and country-wide reformations. By this, persons with disabilities are more and more encouraged to participate in relevant public policy making. In addition, the National Development Framework stipulates the 20-year

National Strategic Plan giving directions for the sustainable development of Thailand. Meanwhile, there is the 12th National Economic and Social Development Plan 2017-2021 (B.E. 2560-2564) promulgated under the 10 aspects of the National Strategic Plan in line with the development of the quality of life of persons with disabilities in every strategy.

Strength: Thailand has laws and policies regarding the development of the quality of life of persons with disabilities covering various dimensions such as Empowerment of Persons with Disabilities Act B.E. 2550 (2007) and amended (No. 2) B.E. 2556 (2013) and Education of Persons with Disabilities ACT B.E. 2551 (2008). There are also National Strategic Plan and other strategic plans in the provincial level to give directions in the quality of life development of persons with disabilities.

Weakness: There are some internal factors considered as weakness. The majority of persons with disabilities are poor which make for a lack of opportunity for regular capacity building and rehabilitation since disabilities are firstly diagnosed. They also miss the opportunity to receive proper education and encounter unemployment. Moreover, the environment and public services such as accommodations, premises, tourist attractions, transportation system and technology are not all accessible for persons with disabilities which prevent them from information access and social participation.

Considering the systematic aspect of the quality of life development of persons with disabilities, it should be integrated with other relevant agencies for the effectiveness of services. This is to make persons with disabilities capable of accessing the benefits from their rights, social welfare, other public services and assistance from the government. This includes improving the linkage of database of persons with disabilities among relevant organizations to be more effective as to be applied for further policy making and service provision in accordance with the needs of persons with disabilities. Additionally, the enforcement of laws and the promotion of good understanding about the benefits of persons with disabilities under relevant act or legislation are essential in the development on quality of life of persons with disabilities in Thailand for further efficient implementations.

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3. Department of Mental Health, Data on Persons with Disabilities, 2019
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5. National Statistical Office of Thailand, Executive Summary of the National Survey on Disabilities, 2017
6. Office of the Basic Education Commission, Data on Persons with Disabilities, 2019
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Country Profiles on Autism



VIETNAM

Viet Nam Autism Country Profile

I	<p>Introduction (<i>including country background, etc.</i>)</p> <p>There are about 11.3 million elderly people, 6.2 million people with disabilities (PWD), 1.5 million children with special situations, 1.4 million beneficiaries for the revolution merits, approximately 1.4 poor households at 5.7%, 1.059 million near-poor households at 4.3%, over 2.8 million monthly social beneficiaries, about 250,000 HIV detected people, over 224,000 drug addicts in Viet Nam. Moreover, there are many women and children suffering from mistreatments, family violence, trafficking, sexual abuse or earning for living by wandering on the street and over 2 million people needing casual supports as well due to natural disasters, fire and crop failures.</p> <p>Now there are an estimated 6.2 million PWD at 7.06% of the population aged 2 years and older, of which females accounted for 58%, children for 28.3% ; nearly 29% are people with severe and specially severe disabilities. By the end of 2018, there are an estimated 1.5 million PWD granted certificates of disabilities. In addition, there are about 200,000 people with autism in Vietnam.</p>
II	<p>Methodology (<i>how to collect data</i>)</p> <ul style="list-style-type: none"> -Delivering questionnaires to organs, units and localities -Consultations and intensive interviews
III	<p>Law and Policy (<i>concerning people with disabilities including autism</i>)</p> <ul style="list-style-type: none"> - Law of PWDs No. 51/2010/QH12 dated 17/6/2010 by National Assembly - Decree No. 28/2012/NĐ-CP dated 10/4/2012 by the Government with its detailed regulations and guidelines for implementing some articles of Law of PWDs. - Decree No. 103/2017/NĐ-CP dated 12/9/2017 with its regulations on establishment, activities organising, dissolution and management of social assistance facilities. - Decree No. 136/2913. NĐ-CP with its regulations on social assistance policies for social protection beneficiaries. - Decree No. 56/2017/NĐ-CP dated 9/5/2017 with its regulations detailed on some articles of Law of Children. - Decision No. 1215/QĐ-TTg dated 22/7/2011 by Prime Minister to approve Project of the social assistance and rehalibitation for people with mental illness, people with mental disorders relying on the community in the stage 2011-2020. - Decision No. 1019/QĐ-TTg dated 5/8/2012 by Prime Minister to approve Project of social assistance for PWDs in the stage 2012-2020 - Decision No. 1364/QĐ-LĐT BXH dated 02/10/2012 by the Minister of MOLISA to approve the planning of the network of social assistace facilities in care and rehalibitaton for people with mental illness and people with mental disorders relied on the community in the stage 2012-2020. - Decision No. 647/2013/QĐ-TTg dated 26/04/2013 by Prime Minister to approve Project of taking care of helpless orphans, abandoned children, HIV infected children, child victims of chemical toxics, children with serve disabilities and children suffered from natural disaters in the stage 2013-2020 - Decision No. 1717/QĐ-TTg dated 06/10/2015 by Prime Minister for the establishment of National Committee for Vietnamese people with disabilities.

	<ul style="list-style-type: none"> - Decision No. 1100/QĐ-TTg dated 21/6/2016 by Prime Minister approving the Action Plan for UN Convention on Rights of PWD. - Circular No. 01/2019/TT-BLĐT BXH dated 2/1/2019 by the Minister of MOLISA with regulations on disability levels determination implemented by the Council of disability levels determination. - Circular No. 01/2015/TT-BLĐT BXH dated 6/1/2015 with the guideline of case management for PWDs. - Joint Circular No. 42/2013/TTLT-BGDĐT-BLĐT BXH-BTC dated 31/12/2013 by Minister of Education and Training, MOLISA and Finance Minister with the regulation for educational policies for PWDs.
	<p>A. Defining Autism (<i>including a diagnosis system used in the country</i>) Autism Spectrum disorder (ASD) or autism is a lifelong developmental disability manifested since early childhood. Autism is characterized by pervasive difficulties including reciprocal social communication and restricted, repetitive interests and behaviors. (*) (*) <i>source: a365.vn</i></p>
	<p>B. International Commitments <i>(including international organization participation and regional instruments such as UN, Incheon strategy etc.)</i></p> <ul style="list-style-type: none"> - Incheon Strategy to “Make the Right Real” for Persons with Disabilities in Asia and the Pacific - Convention on the Rights of Persons with Disabilities (CRPD) - UN Convention on the Rights of the child (UNCRC)
	<p>National Legal and Policy Framework <i>(including the governmental structure of organizations concerning people of disabilities, especially persons of autism)</i></p> <ul style="list-style-type: none"> o Governmental structure of organizations - The National Committee of Vietnamese Persons with Disabilities. - The National Coordinating Council on Disabilities - The Vietnam Federation on Disability. - Local organizations of people with disabilities
IV	<p>Stakeholders (<i>providing detailed information of the followings</i>) Các bên liên quan (<i>cung cấp thông tin chi tiết sau đây</i>)</p>
	<p>A. Government Bodies <i>(responsible for data collection and providing support services/ Interventions throughout the country)</i></p> <ul style="list-style-type: none"> - MOLISA - MOH - MOET - MOPI
	<p>B. Non-Government Organizations (<i>of and for persons with autism</i>)</p> <ul style="list-style-type: none"> - Vietnam Autism Network <ul style="list-style-type: none"> + Established: 30/8/2013 + Recognized by the Ministry of Labour - Invalids and Social Affairs of Vietnam (MoLISA), Vietnam Federation on Disabilities (VFD), ASEAN-Pacific Development Center on Disabilities (APCD). + Member: 13 members

	<p>+ Website: http://vietnamautism.com/ + Facebook page: https://www.facebook.com/mangluoitukyvietnam/ + Contact: vietnamautismnetwork@gmail.com Ms. Pham Thi Kim Tam (tamjal@yahoo.com) – Tel: +84 919992065 Ms. Hoang Nhat Linh (linhhoang24@gmail.com) – Tel: +84 975955545</p>
V	<p>Statistic data on Autism <i>(including the situation and prevalence of autism with the identified source of data)</i></p> <ul style="list-style-type: none"> - There are an estimated 200,000 people with autism, most of them are children. - Diagnostic rate of children with autism tends to increase compared with other usual diseases and types of disability of children - Support services for children with autism in the localities are lacking and poor in quality such as: services of early detection, early intervention, consultation, psychological therapy, rehabilitation, special education for children with autism <p>A. Social Welfare</p> <p>B. Health</p> <p>C. Education</p> <p>D. Human Resources</p> <p>E. Other resources</p>
VI	<p>Programs and Services for persons with autism <i>(provided by governmental and non – governmental organizations)</i></p> <p>1. Main support activities</p> <ul style="list-style-type: none"> - Early detection and intervention, orthopaedic surgery and provision of assistance tools for PWDs. - Educational approaching support; - Vocational supports and job making; - Construction using and accessing supports ; - Traffic and transport means accessing supports; - Communications and IT using and accessing supports; - Legal supports; - PWDs support in activities of culture, sports and tourism. <p>2. Care and assistance models for children with autism.</p> <p>On 26th April, 2013, the Prime Minister issued the Decision No. 647/2013/QĐ-TTg to approve the Project of taking care of helpless orphans, abandoned children, HIV/AIDS infected children, child victims of chemical toxics, children with severe disabilities and the children affected by natural disasters and accidents relied on the community (2013-2020). The content of the project include building models of caring and assistance facilities for children with autism, Down disease and mental retardation and some other special groups.</p> <ul style="list-style-type: none"> - Functions of models: Caring, rehabilitation and education for children with autism, down disease, mental retardation and some other special groups; helping children to build and develop knowledge and physical and psychological skills. - Responsibilities of models: <ul style="list-style-type: none"> o Health care, psychological support and rehabilitation

	<ul style="list-style-type: none"> ○ Educating psychological and physical skills, especially focusing on motion and language skills, simple personal and social skills ○ Preparation of the school skills ○ Organising entertainment, amusing and communication integration activities
	A. Early-Intervention
	B. Health
	C. Education
	D. Employment
	E. Social Services (<i>such as benefits system, incentives etc.</i>)
VII	<p>Challenges (<i>including risks or obstacles and how they will be mitigated</i>)</p> <ul style="list-style-type: none"> - Large number of people with disabilities, including mobility impairment, intellectual impairment and other groups. - Disabled people are unable to fully access health, orthopedic, rehabilitation, occupation therapy services... - Limited accessibility to construction, sports activities, transportation, information and communication technology.
VIII	<p>National Strategy (<i>concerning people of disabilities including autism</i>)</p> <ul style="list-style-type: none"> - Decision No. 1019/QĐ-TTg dated 5/8/2012 by Prime Minister to approve Project of social assistance for PWDs in the stage 2012-2020
IX	Conclusions and Recommendations
X	<p>Directory Support</p> <ul style="list-style-type: none"> - Enhance roles and effectiveness of National Committee on Disabled people in promoting activities for taking care of disabled people and elderly people. - Strengthen measures for an efficiency implementation of Law on Disabled People. - Increase the social assistance funding from 1.5 to 3% GDP. - Enhance the capacity of taking care for disabled people. - Raise awareness on social assistance, social care for disabled people and promote the roles of them in the community.
Annex	
References	<ol style="list-style-type: none"> 1. Law of PWDs No. 51/2010/QH12 dated 17/6/2010 by the National Assembly 2. Decree No. 28/2012/NĐ-CP dated 10/4/2012 by the Government with its detailed regulations and guidelines for implementing some articles of Law of PWDs. 3. Decree No. 103/2017/NĐ-CP dated 12/9/2017 with its regulations on establishment, activities organising, dissolution and management of social assistance facilities. 4. Decree No. 136/2913. NĐ-CP with its regulations on social assistance policies for social protection beneficiaries. 5. Decree No. 56/2017/NĐ-CP dated 9/5/2017 with its regulations detailed on some articles of Law of Children. 6. Decision No. 1215/QĐ-TTg dated 22/7/2011 by Prime Minister to approve Project of the social assistance and rehabilitation for people with mental illness, people with mental disorders relying on the community in the stage 2011-2020.

	<p>7. Decision No. 1019/QĐ-TTg dated 5/8/2012 by Prime Minister to approve Project of social assistance for PWDs in the stage 2012-2020</p> <p>8. Decision No. 1717/QĐ-TTg dated 06/10/2015 by Prime Minister for the establishment of National Committee for Vietnamese people with disabilities.</p> <p>9. Decision No. 1100/QĐ-TTg dated 21/6/2016 by Prime Minister approving the Action Plan for UN Convention on Rights of PWD.</p> <p>10. Circular No. 01/2019/TT-BLĐTBXH dated 2/1/2019 by the Minister of MOLISA with regulations on disability levels determination implemented by the Council of disability levels determination.</p> <p>11. Circular No. 01/2015/TT-BLĐTBXH dated 6/1/2015 with the guideline of case management for PWDs.</p>
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Remark:

1. The template has been agreed upon the “Workshop on the Development of Methodology for Mapping of Country Profile on Autism” under the ASEAN Secretariat’s Project “The Autism Mapping Project in the ASEAN Region” during 23- 25 July 2018 at APCD Training Center, Bangkok.
2. The autism country profile is expected to be filled out by the concerned government organizations and submitted to APCD within February 2019 in order to publish the “Autism at a Glance in ASEAN.”

Accessible for Persons with disAbilities

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