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The Current Situation and Tasks of Hospital Schools for Students with Health Impairment in South Korea

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ABSTRACT

As some of 「Special Education Promotion Law」 was amended in 2005, the term, 'health impairment', has been added to the types of disabilities requiring special education and education services have been provided for the children with health impairment, namely with chronic diseases or weakness. As hospital schools have been expanded in the whole country, more students with health impairment could be officially provided with education services. Now it is the time to secure the higher-quality of education for students with health impairment by establishing the support system that is ready to be applied for the management of hospital school.

This study aims to understand health impairment and to analyze and examine the current situation and tasks of hospital schools. This study employed literature review as a study method centering on the analyses of precedent studies and statistics.

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In South Korea, the number of students with health impairment has increased from 1,024 in 2006 to 2,174 in 2010. There are total 30 special schools nationwide; 20 schools run by offices of education and 10 schools run based on the agreement between office of education and hospital or run by only hospital in 2010. 30 hospital schools are giving education services to 1,005 students per month by 50 teachers and staffs.

The management of hospital schools has presented several problems; the lack of teachers and assistive personnel considering the number of students with health impairment, the insufficient facilities and the regional bias of hospital schools; 10 schools among total 30 schools nationwide are being operated in Seoul. To solve these problems, special education teachers, assistant teachers and volunteers have to be supplied sufficiently and the facilities for education have to be expanded.

<Key-words>

health impairment, hospital school, special education

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I . Introduction

The children and adolescents who have chronic diseases including pediatric cancers, kidney diseases and cardiac diseases have difficulties caused by long-term treatment, chemotherapy and pharmacotherapy; the limitation of physical change and body functions in daily life comparing with the same age group, psychological and emotional difficulties and the difficulties in school life and performance. As 1~4% of Survival rate of patients of pediatric cancer in 1930's has risen to about over 70% owing to the development of medical science for the last 70 years (Park Mi-Ju 2007), the focus of the education for students with health impairment has been moved from psychological approach to death from the way of living their life together with chronic diseases.

As students with health impairment are absent from school frequently and/or for a long time because of their diseases and its treatment process, they may not only struggle with school life by being kept back in the same class and feeling difficulty in studying, but also have psychological and emotional problems in the relationship between friends and teachers. To solve these problems and secure the right of learning for students with health impairment, special educational support is required.

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About 8,000 students drop out of and/or are temporarily absent from school because of diseases (MEST 2003) and 97% of those with health impairment have trouble with the re-adaptation to school life due to the long term learning deficit and the blank of school life, even though they are recovered and return to school(Park Eun-Hye et al. 2005).

To solve the psychological and emotional problems of students with health impairment, foreign countries such as the U.S.A, Japan, Germany and Swiss have already considered the students with health problems as the person subject of special education. In Japan, the Enforcement Rules of Act on Elementary Education in 1947 mentioned that sick and weak children require special protective care and in the Act on School Education, the Article 75, clearly states that children with health impairment become the persons subject of special support class in elementary, middle and high schools. In South Korea, by partially amending the 「Special Education Promotion Law」, children who have chronic diseases or weakness were included to the persons subject of the special education with the name of 'health impairment' and began to be given educational services and also the 「Enforcement Decree of the Act on the Special Education for Disabled Persons, Etc.」, which was enacted in 2007, prescribes that children with health impairment have to be given special educational support by selecting them as the persons subject of special education.

The methods to provide educational supports for students with health impairment include hospital school, the support for students to return to school, itinerant education, supports within school, and educational supports by using mass media such as cyber home learning system or video lesson (Park Eun-Hye et al. 2005).

Hospital schools enable in-patient students to be provided with tailored education services that help them keep up with the education courses of general schools. In Japan, U.K., Italy and Canada as well as the U.S.A., these kinds of hospital schools are generally run in the pediatric ward. In Japan, a hospital school is installed in a hospital as a branch school of close general school of the hospital and provides education based on the local school curriculum for students with chronic disease who need long-term treatments and daily living management (Thkhashi YoKo 2006).

In South Korea, Seoul National University Hospital began to run a hospital school in 1999 and Severance Hospital also started to set up a small scale of children's hospital school in 2000, even when students with health impairment had not been included to the persons subject to special education in 2005. Hospital schools that belong to office of education and run by dispatched special education teachers have been installed in Gyeongsang National University Hospital and Pusan National

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University Hospital in 2004. Four hospital schools in 2005 and 10 in 2006 have been established; total 30 hospital schools are providing education for 1,005 students per month on average in 2010.

As hospital schools have been expanded in the whole country, more students with health impairment could be officially provided with education services. Now it is the time to secure the higher-quality of education for students with health impairment by establishing the substantial support system that is ready to be applied for the management of hospital school. Therefore, this study aims to understand health impairment and to analyze and examine the current situation and tasks of hospital schools. This study employed literature review as a study method centering on the analyses of precedent studies and statistics.

II . Theoretical Background

1) The Definition of Health Impairment

As the sense of value and systems of eras has changed, the concept of disability has also changed. Recently “International Classification of Functioning, Disability and Health (ICF)” by WHO has affected the concept of disability to change from physical disabilities to functional disability in social policy context (WHO 2001; Hwang Soo-Kyeong 2004) and the persons subject to special education tend to be expanded.

Along with the international tendency, in 2005, as the Special Education Promotion Law was partially amended, students with ‘health impairment’, which the fields of medicine, nursing, health studies and pedagogy have concerned about, became the persons subject to special education.

In South Korea, children with health impairment who need medical and life care for over 6 months because of chronic chest disease, cardiac disorder and kidney disease are classified into the persons subject to special education. Ahn Byung-Jub et al. (1994) analyzed the current situation of children with health impairment and emphasized that the education of hospital schools has to be connected to that of the schools that students are originally affiliated with in order to help them readapt to school life.

Korea Institute for Special Education defines students with health impairment as the students who need special supports for studying and daily living, for they require continuous medical treatments e.g., long-term hospitalization or outpatient care due to the chronic disease or weakness and for the first time, added students with health impairment to the persons subject to special education (Chung Dong-Young et al.

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2001).

As persons with chronic diseases or children with chronic disease and weakness have been included to persons with 'health impairment' by the amendment of the Special Education Promotion Law in 2005, the concept of children with health impairment has been established and the tailored education support and services to meet their need have been able to be provided.

Moreover, 'Act on Special Education for Disabled Persons, Etc' defines a person with health impairment as the person who needs continuous education services for school life and school performance as well as continuous medical support such as long-term hospitalization or out-patient care for over three months because of chronic diseases including mental and physical disorder, kidney disorder and liver disorder.

Japan employs the term, frailty linked to disease and physical frailty, as the similar term of health impairment. Japan Ministry of Education, Culture, Sports, Science and Technology defines frailty linked to disease as the condition that needs continuous medical and life regulation due to chronic disease and physical frailty as the condition that needs continuous life regulation due to the state easily to be sick (Ministry of Education, Culture, Sports, Science and Technology: Japan, 2006).

Social Security Act in the U.S.A. prescribes children with health impairment as the ones who need special health-related care, for they have developmental disorder, mental retardation and learning disorder or have chronic disease e.g., asthma or diabetes or have emotional and behavioral disorders e.g., ADHD.

Individuals with Disabilities Education Act (IDEA) of the U.S.A. defines other health impairment as the insufficient state of physical power and arousal due to chronic disease or serious health-related conditions including asthma, ADHD, diabetes, epilepsy, cardiac disease, tuberculosis, rheumatism, nephritis, hemophilia, lead toxicity, leukemia, etc. (OECD 2004).

2) Characteristics of Students with Health Impairment

Most of students with health impairment present the difficulties in cognitive and socio-emotional adaptation due to the diseases themselves, long-term absence, long-term hospitalization and changes of the function of family members (Brown & Madan-Swain 1993). Therefore, it requires that the characteristics of diseases of student with health impairment are needed to be understood and the cognitive, social, emotional and physical characteristics of students with health impairment may be presented differently due to the treatment processes of their diseases and other various experiences.

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① Pediatric Cancer

Pediatric cancers include malignant tumors such as leukemia and brain tumor and among them, leukemia is the one that occurs most frequently. Leukemia develops the cognitive, social-emotional and behavioral problems for short- or long-term period due to the treatment process (Brown & Madan-Swain 1993). In addition, physical change including the weight change, hair loss, oral ulcer and others in the process of treatment, which make patients hurt pride and lowered social adaptability. Especially it is reported that children with leukemia show the difficulty in quantitative description, fine motor skill, vision and movement (Park Eun-Hye et al., 2004) and their abilities of attention, concentration, ordering, memory and understanding seem to go down (MEST 2006).

② Childhood Asthma

Childhood asthma is the bronchial asthma and bronchitis to give rise to respiratory distress and makes patients absent from school frequently and difficult to learn new information, for they feel bad and hard to concentrate on, even though they attend class (Bender 1999). Asthma itself is not the cause to lower learning ability, but the medication for asthma bring about depression, fear and short-term memory impairment and in result, decreases the ability of understanding (Park Eun-Hye et al., 2004).

③ Children Diabetes

Diabetes is the chronic disease occurred by the decrease of synthesis and secretion of insulin in the pancreas. Diabetes doesn't have perfect cure and may cause complications such as retinosis, nephrosis and nerve lesions.

Diabetes requires strict self-management; blood-sugar test and insulin injection several times a day to keep proper blood-sugar, regular meals based on the balanced nutrition level and daily and steady exercise. Therefore, there is possibility that diabetes makes patients' life shrunken greatly. Childhood diabetes occurs in the physically and mentally immature period; patients feel burden mentally, for they have to manage the disease for the rest of their life and struggle with depression and stress due to the side effects and complications, if they fail to manage it.

Moreover, they feel difficult in peer relationship and school life comprehensively; they don't have enough place or time to exercise, to do blood-sugar test and to get injection and cannot have direct support of parents in the school; when they are excluded from school events, for example, school excursion, they feel isolated.

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④ Cardiac Disorder

Cardiac Disorder is the term to include the dysfunctions of heart caused by myocardial infarction, valvular disease of heart and angina pectoris. Most of children cardiac disorders occur innately; in result, normal physical development is disturbed and frequent respiratory diseases cause vulnerable health condition; and the difficulties in commuting to school, passive relationship with friends and performing school activities are raised (MEST 2006).

⑤ Kidney Disorder

This is the disorder that is caused by the dysfunctions of kidney that controls the proper quantity of water and electrolytes by getting rid of waste matters in body; it makes patients difficult in daily living activities and includes chronic renal failure that requires permanent hemodialysis or renal transplantation. Childhood kidney disorder causes poor growth by bring about poor appetite, lack of calories and chronic anemia and the physical immaturity gives children mental burden greatly (Jo Byeong-Su, 1998).

Most of students with health impairment experience more severe fear and depression than other students of the same age without disorders, even though the degrees and kinds of difficulties are different from the kind of diseases. Students with health impairment have psychological, social and cognitive difficulties such as physical changes caused by disease, passive relationship with people, maladjustment to school or society rather than difficulties from diseases themselves. Moreover, the medication for treatment causes psychological, social and emotional problems such as depression raised by steroid for a short-term and emotional fluctuation of fear or sadness.

3) Definition and Roles of Hospital School

Hospital schools have been established to meet the needs of students with health impairment. The hospital school is the school that is installed within hospital for students who cannot attend school due to the long-term hospitalization and outpatient treatment (Kim Eun-Joo 2006). Hospital schools provide the opportunity to continue to get education for students with health impairment that are given long-term treatment and carry out various programs to help them return to school after treatment. Therefore, they help students continue school life by establishing educational environment and getting dispatched teachers to teach them while they get treatment from hospital. In addition, as well as education, they aim to improve

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the treatment effects based on the psychological and emotional stability of students with health impairment by helping them maintain the relationship with students of the same age.

Likewise, hospital schools provide the opportunity to be promoted to next grade and various educational benefits free of charge by securing the educational opportunity for students with health impairment, minimizing the burden from learning deficit, helping them maintain the relationship with students of the same age and securing attendance days. Moreover, teachers can teach students with health impairment without stopping and simultaneously have medical supports for the emergent situation while they are teaching (Choi Yong-Jae 2009).

In South Korea, based on the Act that prescribes the provision of education to the persons subject to special education by dispatching teachers to the facilities or hospitals, hospital schools have been established in the type of special classes and special education teachers have been dispatched (MEST 2006). Most of hospital schools are run as the type of branch class by one special teacher who is dispatched from general school. Even though hospital school are composed of only one class, they are called as not hospital class, but hospital school, for several classes and several grades study together and the positions of students and their parents are considered (Kim Eun-Joo 2006).

4) The Necessity of Educational Support for Students with Health Impairment

Students with health impairment experiences various difficulties caused by chronic diseases as well as the physical pains (Kim Eun-Joo 2008). Especially as students with health impairment are absent from school frequently and/or for a long time because of their diseases and its treatment process, they struggle with school life feeling social and emotional difficulties in the relationship with friends or teachers and difficulties in academic retardation or academic performance.

Students with health impairment feel difficult in being kept in the same class, as they cannot enter advanced school or be promoted to higher grade together with friends of the same age due to the long-term or frequent absence (Kim Eun-Joo 2008).

The attendance of students with health impairment is affected by some factors: the attitude for the diseases, the response to the learning deficit, significant adults surrounding children, e.g., teachers and parents, doctor's attitude, educational level of parents, the children's ability for physical activities, the children's health condition and available resources of school to meet the needs related to health and learning

(Kim Eun-Joo 2008).

Even though there are somewhat differences according to the symptoms of diseases, the common symptom in therapeutic process of chronic diseases is fatigue, which makes students difficult to study; students with health impairment have difficulties in secondary outcomes of medication as well as the disease, itself (Sexson & Madan-Swain 1993).

Not only declines of Physical conditions and cognitive ability, changes of emotional state, limited physical movement and increase of absence, but also the short knowledge of the disease, the misunderstanding and the attitude changes of friends and teachers are the main problems to disturb the class activities of students with health impairment. Side effects of therapeutic process of chronic diseases bring about negative responses from friends or teachers: frequent absence, difficulty in learning caused by side effects from chemotherapy or radiation therapy, loss or increase of weight, hair loss, etc. Those problems make students with health impairment lost confidence, decrease participation of school life, induce them to be excluded from school activities and give rise to psychological and social anxiety in the relationship with friends or teachers.

Therefore, solutions to overcome difficulties including being kept in the same class and feeling difficult in studying and adapting themselves to school life have to be found.

III. Education for Students with Health Impairment

1) Current Situation of Students with Health Impairment

Students with health impairment take outpatient care attending general school or choose hospitalization for a long-term treatment attending hospital school or attend special school for a long-term treatment (Choi Yong-Jae 2009).

As persons with Health impairment were included to the persons subject to special education in 2005, the official statistics on health impairment has been managed since 2006 and the number of students with health impairment for the last five years is shown in Table 1.

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<Table 1> Number of Students with Health Impairment

Year	Special Schools	General Schools		Total
		Special Classes	General Classes	
2006	46	619	359	1,024(1.6)
2007	40	509	593	1,142(1.7)
2008	17	490	1,130	1,637(2.3)
2009	16	538	1,391	1,945(2.6)
2010	24	496	1,654*	2,174(2.7)

Source: 「2010 Workshop on the Management of Nationwide Hospital Schools」 Ministry of Education, science and Technology

**Special Education Support Center: two (2) persons are included*

() : proportion of children with health impairment to total number of person subject for special education

As noticed in the Table 1, since 2006 when the research on students with health impairment has been carried out, the number of students with health impairment has increased every year. In 2010, the students with health impairment were 24 in special schools, 496 in special classes and 1,654 in general classes and total of students with health impairment is 2,174, which is the 2.7% of 79,711 of the persons subject to special education. The number of students with health impairment has increased in general classes rather than in special schools.

2) Current Situation of Hospital Schools

In South Korea, based on the Act that prescribes the provision of education to the persons subject to special education by dispatching teachers to the facilities or hospitals, hospital schools have been established in the type of special classes and special education teachers have been dispatched.

In South Korea, Seoul National University Hospital had opened a hospital school in July, 1999 as it was authorized as an official school, and then, Severance Hospital and Gyeongsang National University Hospital opened in 2004, In 2004 the Korean Association for Children with Leukemia & Cancer opened a shelter that performs the functions of hospital school by connecting with Pusan National University Hospital. In March, 2005, two university hospitals in Busan Metropolitan City founded hospital schools for pediatric cancer patients as the part of the policy of alternative

education in Korea.

<Table 2> Current Situation of Hospital Schools

Number of Schools	Number of Students by month	Number of Teachers and Staff	Name of Hospitals	
			Hospital Schools run by Offices of Education (20)	Hospital Schools run based on the Agreement between Offices of Education and Hospital or run by Hospital alone (10)
30	1,005	50	Gyeongsang National University Hospital, Pusan National University Hospital, Inje University Pusan Paik Hospital, Dong-a Medical Center, Bugok National Hospital, National Cancer Center, Daegu Yeungnam University Medical Center, Daedong Hospital, Gachon University Gil Hospital, Inha University Hospital, Ulsan University Hospital, Chungnam National University Hospital, Chonnam National University Hwasun Hospital, Dankook University Hospital, GangNeung Asan Hospital, Kangwon National University Hospital, Chungbuk National University	Seoul National University Hospital, Severance Hospital, Hanyang University Medical Center, Asan Medical Center, Samsung Medical Center, Seoul National Hospital, Seoul Metropolitan Children's Hospital, Korea Institute of Radiological and Medical Science, Seoul St. Mary's Hospital, Kyung Hee University Medical Center

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			Hospital, Chonbuk National University Hospital, Kyungpook National University Hospital, Pusan National University Yangsan Hospital	
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Source: 「2010 Annual Report on Special Education」, Ministry of Education, Science and Technology

As shown on Table 2, in South Korea, total 30 hospital schools have offered education to 1,005 students per month on average; 10 hospital schools run based on the agreement with office of education to provide administrative and financial support for hospitals; 20 hospital schools operated as the classes belong to office of education or general schools.

For the first semester (March to July) in 2010, 50 teachers in nationwide 30 hospital schools are teaching 1,005 students a month on average and among them, 930 students had health impairment.

As for the average period that students with health impairment attended, less than one month were most frequent and then, 6 months to 1 year and one month to three months were ranked next in descending order (MEST, 2010).

<Table 3> Number of Students and Teachers and Staff by Hospital School

Region	Name of Hospital	Monthly Average Number of Students to Use Hospital School	Number of Students with Health Impairment	Number of Special Education Teachers(In Case of Seoul, Qualification and Number of Teachers or Staff)	Number of Assistants
Seoul	Kyung Hee University Medical Center	7	1	Social Worker 4	30
	Seoul National Hospital	86	61	Therapeutic Teacher 3	50

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Region	Name of Hospital	Monthly Average Number of Students to Use Hospital School	Number of Students with Health Impairment	Number of Special Education Teachers(In Case of Seoul, Qualification and Number of Teachers or Staff)	Number of Assistants
	Samsung Medical Center	63	66	Level 2, Teacher's License for Middle School, 1	-
	Seoul National University Hospital	80	267	Lifelong Educator 1	111
	Seoul St. Mary's Hospital	87	57	Medical Social Worker 1	-
	Seoul Metropolitan Children's Hospital	6	0	Special Education Teacher for Elementary Students 1	- -
	Seoul Asan Medical Center	29	61	Medical Social Worker 1	
	Severance Hospital	115	68	Level 1, Teacher's License for Elementary School 1 Level 2, Teacher's License for Middle School 1	-
	Korea Institute of Radiological and Medical Science	20	22	Teacher's License for Elementary, Middle and High School 11	8
	Hanyang University Medical Center	52	28	Staff of Hospital 1	-
Busan	Pusan National University	15	16	1	1

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Region	Name of Hospital	Monthly Average Number of Students to Use Hospital School	Number of Students with Health Impairment	Number of Special Education Teachers(In Case of Seoul, Qualification and Number of Teachers or Staff)	Number of Assistants
	Hospital				
	Dong-a Medical Center	17	2	1	-
	Inje University Pusan Paik Hospital	28	39	1	1
Daegu	Daedong Hospital	15	5	1	-
	Daegu Yeungnam University Medical Center	12	34	1	-
	Kyungpook National University Hospital	28	24	1	-
Incheon	Inha University Hospital	35	2	1	-
	Gachon University Gil Hospital	15	1	1	-
Daejeon	Chungnam National University Hospital	8	17	1	1
Ulsan	Ulsan University Hospital (Dasom Hospital School)	51	42	2	3
Gyeonggi	National Cancer	15	12	2	-

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Region	Name of Hospital	Monthly Average Number of Students to Use Hospital School	Number of Students with Health Impairment	Number of Special Education Teachers(In Case of Seoul, Qualification and Number of Teachers or Staff)	Number of Assistants
	Center				
Gangwon	Kangwon National University Hospital	65	6	1	1
	GangNeung Asan Hospital	88	12	1	1
Chungbuk	Chungbuk National University Hospital	7	8	1	-
Chungnam	Dankook University Hospital	5	5	1	1
Jeonbuk	Chonbuk National University Hospital	12	10	1	1
Jeonnam	Chonnam National University Hwasun Hospital	16	36	2	1
Gyeongnam	Gyeongsang National University Hospital	4	4	1	-
	Bugok National Hospital	8	8	1	1

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Region	Name of Hospital	Monthly Average Number of Students to Use Hospital School	Number of Students with Health Impairment	Number of Special Education Teachers(In Case of Seoul, Qualification and Number of Teachers or Staff)	Number of Assistants
	Pusan National University Yangsan Hospital	16	16	2	-
Total	30	1,005	930	50	211

Source: 「2010 Annual Report on Special Education」, Ministry of Education, Science and Technology

3) Current Situation of Education Support System and Curriculum of Hospital Schools

Various education delivering systems need to be built for the educational support for students with health impairment in order to secure the equal opportunity based on their physical state (Park Eun-Hye et al., 2005).

Educational support for student with health impairment needs to be given to secure the opportunity for education and the basic right to learning and to help them adapted to school life by providing individualized learning support and balanced psychological and emotional supports. In addition, various services have to be given to improve the treatment effect by planting the hope and courage for life (MEST 2006).

In South Korea, the educational supports for students with health impairment have been carried out through the cyber home learning system, itinerant education and U-learning support and psychological and emotional supports for them have been carried out through communication media such as telephone and e-mail and education programs to improve the perception for health impairment (See Figure 1).

Hospital schools have run the curriculum aiming to increase the synergy effects of treatment through the psychological and emotional stability by minimizing the difficulties of students who have learning deficit and absence with the result of long term treatment based on the continuity of studying and peer relationship.

Hospital schools have focused to the establishment of tailored educational

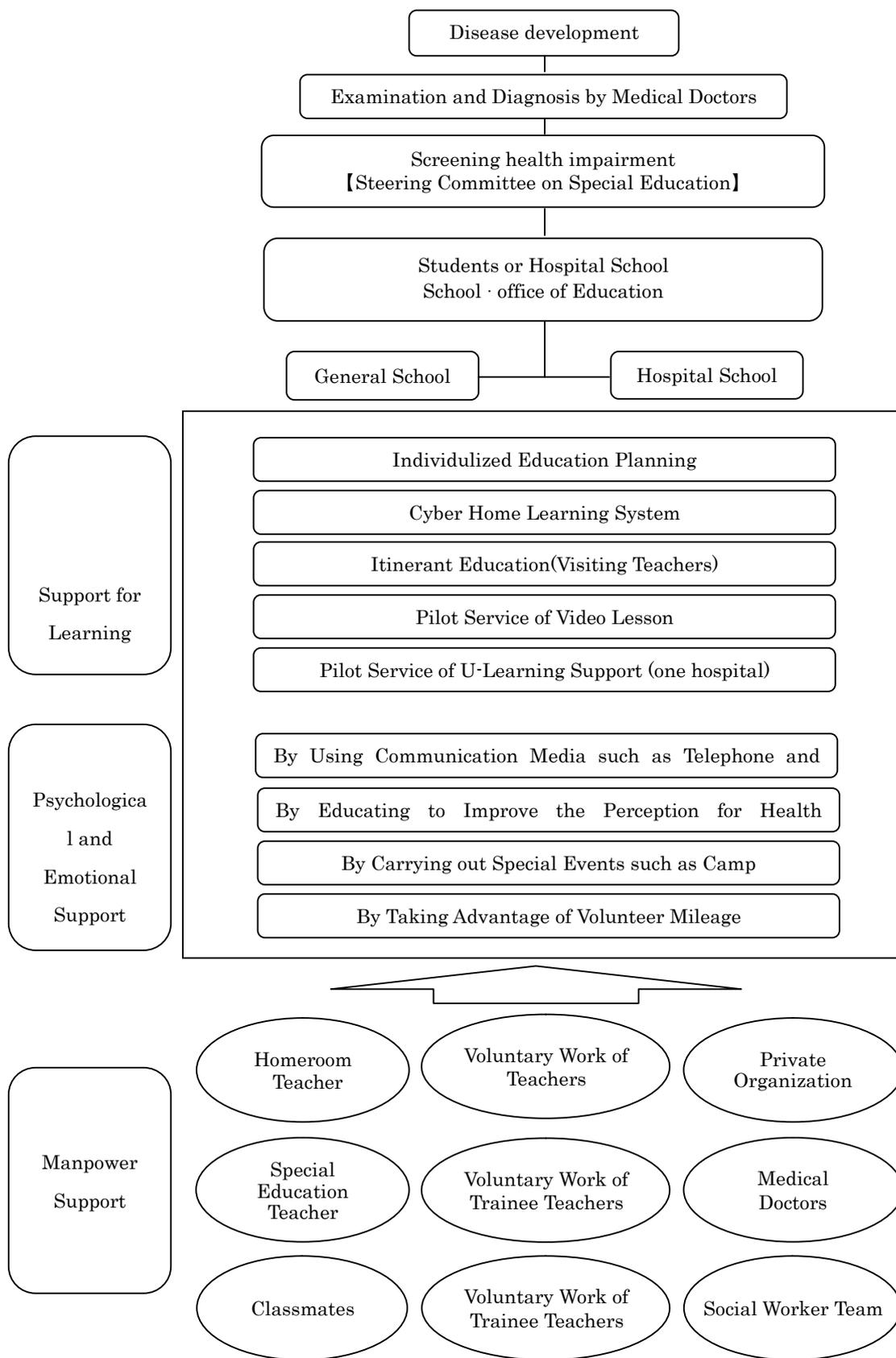
planning, the management of attendance based on efficient education management, active visitations of friends and teachers, the provision of counseling for out-patient students and the offering of supports for educational, psychological and emotional adaptation (Hospital School of Korea 2011).

The education curriculum of hospital schools are largely divided into learning activity, special activities and diverse events. Learning activities are comprised of education activity and discretionary activity; education activity for main subjects, which are Korean, Mathematics, social studies and sciences for elementary school students and Korean, Mathematics and English for middle and high school students, is provided to meet the needs of each student through various methods by considering the characteristics of hospital school and the health condition and learning ability of students; discretionary activity includes various programs for psychological stability, emotional cultivation and increase of sociality.

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<Figure 1> Model of Educational Support for Students with Health Impairment

Source: Hospital School of Korea (2011)

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Special activities consist of various programs including folding paper into various figures, art, watching movies, storytelling, art therapy, music therapy and play therapy that are carried out by professionals and volunteers. These activities help students with health impairment adapted psychologically and emotionally and lessen depression and mental stress caused by diseases.

As for events, various events including Children's Day, experiential learning, drawing contest, book report contest have been performed.

The classes of hospital school are scheduled as one (1) or over one hour a day for elementary school students and two (2) or over two hours a day for middle and high school students. Students with health impairment are registered to the schools that they are originally affiliated with and the classes are carried out by hospital schools. Attendance of hospital school is considered as official attendance based on the verification of the principal.

If possible, students with health impairment are recommended to take the academic achievement test at school that they are affiliated with, but if impossible due to the health related problems, they may take the test at hospital based on the discussion between teachers of hospital school and school that students are affiliated with. In addition, if the test cannot be taken, the principal of school may decide the result of the test based on the 'rules of academic achievement management' of the school.

IV. Discussion

As the sense of value and systems of eras has changed, the concept of disability has also changed. As the Special Education Promotion Law was partially amended in 2005, the term, 'health impairment', has been added to the scopes of disabilities, which includes children with chronic diseases or weakness to the persons subject to special education.

As students with health impairment are absent from school frequently and/or for a long time because of their diseases and its treatment process, they struggle with school life by being kept back in the same class and feeling difficulty in studying and the relationship with peers. To solve those problems, hospital schools have been established.

In South Korea, total 30 hospital schools have offered education to 1,005 students per month on average; 10 hospital schools run based on the agreement with office of education to provide administrative and financial support for hospitals; 20 hospital

schools run by office of education or general schools as the classes.

Hospital schools aim to increase the synergic effects of treatment through the psychological and emotional stability by minimizing the difficulties of students who have learning deficit and absence with the result of long term treatment based on the continuity of studying and peer relationship. Therefore, hospital schools play roles to establish tailored educational planning, to manage attendance based on efficient education management system, to make peers and teachers visit patient actively, to provide counseling for out-patient students and to offer supports for educational, psychological and emotional adaptation.

In hospital schools, students are provided education to meet the needs of individual students through various methods centering on key subjects, considering the health condition and learning ability of students.

In South Korea where legally recognized health impairment, established hospital schools and built support system and operational policies, the education students with health impairment by hospital schools have tasks to be improved:

First, the number of hospital schools is absolutely insufficient, as there are only 30 hospital schools for 2,174 students with health impairment in 2010. Hospital schools need to be expanded enough to meet educational needs of student with health impairment.

Second, the distribution of 30 hospital schools shows regional imbalance, which make students with health impairment take advantage of hospital schools; while 13 schools in Seoul and Gyeonggi areas and 7 in Busan and Gyeongnam are situated, 3 schools in Daejeon and Chungcheong areas, 3 in Daegu, 2 in Gangwon area and 2 in Jeolla area are established and Gyeongbuk area except Daegu and Jeju area doesn't have any schools. To solve the regional imbalance of hospital school distribution, enough number of hospital schools needs to be established based on the research on the regional demand.

Third, as most of the hospital schools are run by one special teacher who is dispatched, it is practically difficult to deal with all students whose grades and learning ability are different at the same time. The placement of special education teachers needs to be carried out based on the actual demands.

Fourth, because hospital schools except several ones in Seoul don't have any assistant for education and special education teachers have to take responsibility for all students alone, the efficiency of class management has fallen. The methods to expand manpower support, for example, to make parents of students with health impairment participate in class as teaching assistants, have to be found.

Finally the inclusive education programs to understand students with health

impairment and to help their psychological and emotional treatment need to be developed by connecting the school that they are affiliated with and inducing the student of the same age to work as volunteers.

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