

*Educational systems for inclusive education in Norway, Romania, Scotland and Sweden.*

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## **Background to the paper**

The aim of this paper is to explore how the Scottish, Romanian, Swedish and Norwegian education system have addressed the inclusion of people with learning disabilities. The focus of the paper evolved during a three-year collaboration of an Erasmus Intensive Programme (IP) (2011-2013) *Inclusion of persons with disabilities in employment, education and health services*. It brought together learning disability nurses (England and Scotland), special education teachers (Romania and Sweden) and social educators (Norway) to work and learn together about inclusion and the implications for their future professional practice. The IP was developed and delivered by academics from the University of Hertfordshire (England); Edinburgh Napier University (Scotland); University of Oradea (Romania); Stockholm University (Sweden) and Oslo and Akershus University College, (Norway).

The major focus of the program was on international and multidisciplinary group working to expand the participant's knowledge of working collaboratively. In the current system, nurses

train to focus on health and teachers on learning. Bringing together undergraduate students from different countries and professions to work interprofessionally, made the students think “outside the box” as the students started to learn from each other and debate shared concerns and interests. For example, the nursing students had to apply their professional knowledge and expertise to unfamiliar settings as the school environment and the student teachers had to consider how their knowledge could be useful in addressing health needs and concerns in the classroom environment. Creating such learning opportunities is important and this is increasingly apparent in the international research evidence of the significant number of children and young people living into adulthood with complex health conditions (Vohra et al. 2014). Ensuring that health needs are recognised and met to safeguard that learning can happen is necessary (Emerson & Brigham 2016). It is also important that nurses have an understanding regarding the education of children and young people in the school setting, including those in need of special education, to provide the necessary support to services users and families (Singer 2013).

The current paper presents an overview of how educational systems in the four countries “builds” education for all children and the application of learning during the Intensive Programme. The intention of the Intensive Programme was to present students and professionals unfamiliar with the teacher-focused approach to supporting and enabling inclusion, with a “snapshot” of the education systems in the four countries. A wider outcome was the opportunity to compare and contrast systems in different European countries and reflect on the possible application to future practice. The last section of the paper discusses similarities and differences in the education systems in the four countries.

## **From segregation to inclusion**

Education is vital to all individuals and is about providing the opportunity and supports necessary to help people to develop and realise their full potential and independence (Convention on the right of the Child 1989). Schooling has over the last hundred years, become a main source of education in European countries. Moreover, school is an important social experience for children from which they develop as individuals through socialisation and by making friends.

Historically, countries such as Norway, Romania, Scotland and Sweden have delivered education based on medical definitions of disability in segregated settings (Ebersold, Schmitt, and Priestley 2010). Nirje (1969) argued that accessing 'normal' education is vital for the normalisation of life experiences for people with disabilities, thereby including them in the same opportunities as the rest of the population. The Social Role Valorisation-tradition, developed by Wolfensberger, which has been influential in shaping and developing the care and support of people with learning disabilities, holds the same argument; segregation of people with disabilities further promotes their marginalisation and stigma (Wolfenberger 1972).

The movement towards inclusive education has been lead and influenced by several United Nations (UN) conventions and declarations. The *UN Convention on the Rights of the Child* is important for guiding work in educational policy and practice, resulting in welfare states agreeing on ensuring an inclusive education system at all levels, and for all pupils, equally (Convention on the Rights of the Child 1989 Article 28).

Another important document, *The Salamanca Declaration* concluded that:

‘Schools should accommodate all children regardless of their physical, intellectual, social, emotional, linguistic or other conditions.’(The Salamanca Statement and Framework for Action on Special Needs Education 1994, 1, p. 6).

It is still an important conceptual framework for policies (Meijer 2010). One statement frequently cited as a guiding principle in policy level debates, is

*Regular schools with an inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system.* (Meijer 2010, p. 1).

The current paper explores if the education system presents barriers to inclusive education thereby applying a system perspective on inclusion. We focus on **legal** inclusion, **administrative** or organisational inclusion and **physical** inclusion.

### **A system perspective on inclusion across the countries**

Comparisons across countries are complicated because they easily overlook the specific context a nation constitutes legally, economically, politically and culturally. Romania, for example, has transformed its educational system after the fall of communism in 1989 (Ives, Runceanu, & Cheney 2007). The Romanian Constitution, introduced in 1991, set down a universal right to education. Policy documents from the UN, such as the Salamanca-declaration of 1994, and policy documents from the European Union (EU), such as the *EU Charter* (2000), have played an influential role in forming the educational system in all the four countries. All of the

contributing countries have therefore developed and adapted their educational frameworks to meet the requirements of these ratified policies, each implementing them differently (European Agency for Development in Special Needs Education 2011)

**Legal** inclusion refers to formal legal rights, which grants all citizens the right to education.

Since people in special educational needs historically have faced barriers in accessing this formal right, it is important to know that in addition to the *universal legal right to education*, there is provision legally to an *individual learning plan* for people in need of additional education support. If such provision exists, it is necessary to understand the *criteria for eligibility* applied to access such additional educational support. Additionally, it is important to know if there is a *common curriculum* and if access to education is *free* for all. **Administrative** or organisational inclusion refers to the systems that delivers education; is there *one system* delivering and monitoring education for all citizens or are there *several, separate* educational systems aimed at serving different groups? **Physical** inclusion refers to whether education takes place in *the same physical area*, in the same building, in the same classroom or *separated physically* for different groups.

## Legal inclusion

Table 1 Legal inclusion in education in Norway, Romania, Scotland and Sweden

<b>LEGAL</b>	<b>Norway</b>	<b>Romania</b>	<b>Scotland</b>	<b>Sweden</b>
<b>Universal right to education</b>	One law: Education Act of 1998: Universal right to education in the neighborhood classroom	Several laws: The Education Law of 1995 stating a universal right to education. Laws after 1995 stating a right for pupils with special learning needs to special education or to inclusive education	Several laws: Standards in Scotland's Schools etc. Act 2000 stating a universal right to education.	One law: The Swedish Education Act (2010): A universal right to education. Sweden have two parallel school systems for pupils from the age of six to eighteen; mainstream schools and Särskolen. Särskolan is for pupils in need of special education
<b>Legal right to individual learning plan (ILP)</b>	The right to a ILP when the pupils special learning needs are documented	The Individual Services Plan for Special Needs Children	Coordinated Support Plan and an Individualised Education Plan	Pupils at risk are entitled to an Individual Learning Plan. In Särskolan throughout all years
<b>Eligibility criteria for additional learning support</b>	Could be permanently or temporarily. Any additional support need identified: intellectual, physical, social or emotional	Medical, psychological, educational or social diagnosis	Any additional support need identified: intellectual, physical, social or emotional	Medical diagnosis for Särskolan. For additional learning support in the mainstream school, any additional support need identified
<b>Common curriculum</b>	Same curriculum but adapted to the pupils learning needs	Same curriculum for pupils in mainstream, but adapted to special needs. Different curriculum in, special education, in inclusive education	Same 'curriculum for excellence' as other pupils, but adapted for their individual needs	Same curriculum but adapted to the pupils learning needs
<b>Reference:</b>	The Education Act 1998; White paper, ST. Meld.18, 2010-2011	The Education Law 1995, Several laws and Ministerial orders, see Borca 2010; National Education Law nr 1/2011; Bazgan and Bazgan 2015	Standards in Scotland's Schools etc. Act 2000; Scottish Government 2012; The Education (Additional Support for Learning) Scotland Act 2004 and Act 2009; Scottish Executive 2004	The Swedish Education Act (2010); skolverket.se

As demonstrated in Table 1, the four countries grants a right to education, specifically adapted to educational needs, for all. In the four countries, education is state funded and free for all.

Schooling is mandatory for all people aged six to sixteen years old (in Scotland from five to sixteen years). From sixteen to eighteen years, schooling is optional. Norway is the only country linking the legal right to education, irrespective of disability, to a right to education in the regular, local school.

Adapted education covers whether the individual learner is offered learning opportunities, which will develop their abilities and skills. Mere formal rights to education that does not take into consideration that pupils have different needs for additional support, is inadequate when seeking to provide access to adapted education.

All countries set down a legal right to an Individual Learning Plan, for pupils in need of special support as a tool for securing adapted education (Table 1). All countries have also set down legislation regarding the content of the school curriculum (Table 1). In Romania, the curriculum for the mainstream schools and the special schools differ. The other countries have legislation that prescribe one curriculum entitling all pupils to the same hours of teaching, while recognising that it can be adapted to meet individual learning needs.

The Individual Learning Plan is an important tool adopted in all countries. The Coordinated Support Plan in Scotland seems to be important in securing multi-agency across professions and services (Table 1). Having an individual plan does not guarantee adapted education, it must be evaluated and reformulated and this seems to be a challenge in all the four countries. The idea that the community school should cater for a variety of educational needs, requires trained professionals, and systems for assessing, developing and monitoring diverse learning needs.

Scotland, Sweden and Norway share these challenges. It is documented in Norway that one third of the hours in special education is conducted by non-educated assistants and that teaching hours are lost because no replacement is provided (Nordahl and Hausstätter 2009). Romania has altered the education system, since the revolution in 1989, and set down legal rights in compliance with EU legislation thus acquiring tools for more inclusive education. However, funding a fragmented educational system and lack of educated staff still present severe challenges (Vrasmas & Vrasmas 2007; Bazgan and Bazgan 2015).

All of the four countries have criteria defining who may be eligible to receive adapted education (Table 1). All countries distinguish between mild, severe and complex additional support needs. In Romania, the educational system evolves around medical and psychological definitions of deviation and grades of deviation. All deviations are covered by laws, which specifies the appropriate school for the particular deviation. The other countries have also developed eligibility criteria, based on medical definitions of disability. In Sweden access to Särskolan (Table 1), requires a medical diagnosis of an intellectual disability (IQ 70 or below). In Scotland, Sweden and Norway medical diagnosis are one among several definitions of additional support needs, which make a pupil eligible to adapted education.

The *Education Act* in Norway and Sweden and The *Special Education Act* in Scotland sets out a system responsible for assessing, organising and monitoring education for all pupils. In Romania, various acts specify a number of different bodies that are responsible for determining the level of disability and education options available. All countries systems for special education involve a variety of professions that highlights the importance of multi-agency working across professions and services and of the range of needs that children and their family

have. The role of parental choice and their influence in forming the education for pupils with special education needs is apparent.

### Administrative inclusion

Table 2 Administrative inclusion in Norway, Romania, Scotland and Sweden

Administrative	Norway	Romania	Scotland	Sweden
<b>One system for delivering and monitoring education for all</b>	The state regulates and fund. The municipalities is responsible for education for all		The state regulates and fund. The municipalities is responsible for education for all	The state regulates and fund. The municipalities is responsible for education for all
<b>Several; one for mainstream education another for special education</b>	The state is responsible for a few special schools for the deaf	The state regulates and fund. The county organise and monitor, the municipality deliver: But one system for mainstream education another for various special education		The state is responsible for the Special School for the deaf and hard of hearing
<b>Reference</b>	The Education Act 1998; White paper, ST. Meld.18, 2010-2011	Vrasmas & Vrasmas 2007; Borca 2010; UNESCO 2010/2011	Standards in Scotland's Schools etc. Act 2000; Scottish Government 2012	The Swedish Education Act (2010); skolinspektionen.se

In Norway, Scotland and Sweden the municipality is responsible for delivering and monitoring education for all (Table 2). The state regulates and funds education. The education acts in these countries set out the bodies that need to be a part of the system of assessing, delivering and monitoring special education. In the latter countries, the responsible body is local and close to the pupil as opposed to Romania where responsibility varies according to type of school (Table 2). The Romanian system could present a barrier as it becomes difficult for the pupil, family and teachers to influence the additional support needed.

### Physical inclusion

Table 3 Physical inclusion in Norway, Romania, Scotland and Sweden

Physical inclusion	Norway	Romania	Scotland	Sweden
Same physical area	The neighborhood school	Mainstream-schools/Inclusive education	Mainstream-schools	Mainstream-schools
Same building, separate classroom	x	x	x	x
Same classroom	6-8 years old	x	x	x
Another physical area	Very few	Special schools. In the process of being transformed into Inclusive Education Centers	Some Special schools	Specialskolan for the deaf Särskolan for people with learning disabilities
Reference	The Education Act 1998; White paper, ST. Meld.18, 2010-2011	Vrasmas & Vrasmas 2007; Ives, Runceanu, & Cheney 2007; Eurydice 2016	The Additional Support for Learning Act (Scotland) 2004; Standards in Scotland's Schools etc. Act 2000; Scottish Government 2012	The Swedish Education Act (2010); skolinspektionen.se

Norway is the country most insistent on physical inclusion; education is education for all in the classroom in the local community school (Table 3). Children in the same area attend the neighborhood school. The other countries policies do not link inclusive education so closely to education in the community school but stresses the argument that education should meet the special learning needs of the pupil to optimise their abilities. If the needs are better met outside the mainstream school, then special schools are more inclusive because they cater for the educational needs of such pupils. Hence, Scotland, Sweden and Romania have several special schools while Norway officially only have the special schools for the deaf (Table 3).

### Similarities and differences in the education systems

The intention of the over view of the education system in the four countries, was to provide students and professionals unfamiliar with the teacher training approach to inclusion an understanding of how legal, administrative and physical aspects of the education systems

contribute to delivering education that is adapted to meet the needs of the individual learner. It is possible, for example, for nurses and special teachers to attempt to meet the needs of the same child with a learning disability without ever having to coordinate their services and communicate with each other. Yet a child with a learning disability will benefit from having professionals who recognise that meeting a child's learning needs involves meeting not only the education needs but the child's health needs too.

Acknowledging that addressing and meeting health needs is important for learning to happen for this child, is an important starting point in securing inclusive education for the child and for the professionals to understand each other's role and to work collaboratively in the provision of services. However it implies as the students in the Intensive Programme noted, that professionals have to think "outside the box".

The over view demonstrates that the education systems in the four countries legally and administratively have introduced tools for adapted learning.

Merely having the right to access formal education, while failing to take into account different education needs, has historically presented barriers for those in need of additional support. All the four countries have set down a legal right to an individual learning plan, an important tool in securing that education is adapted to a learner's specific needs. Developing an individual learning plan requires assessing and monitoring of the child's needs and renewal of the plan as the child grow older. Scotland has through The Coordinated Support Plan, set down requirements of multi-agency across professions and services. This seems to be important in securing that education is adapted to the various needs of a child with a learning disability and includes contributions from a variety of professionals. All Norwegian, Swedish and Scottish pupils have a

right to the same curriculum, adapted to the learner's needs, and the same amount of teaching hours. This is important as it secures children in need of additional support equal opportunities to develop skills and optimise abilities.

Several administrative bodies responsible for education for different groups have presented obstacles to addressing equal educational opportunities. Norway, Sweden and Scotland have existing local authorities as the responsible body for education for all, with just one main organisation responsible for providing education for all. Romania still has a variety of administrative bodies involved in granting education for different groups, defined by diagnostic criteria, thus sometimes minimising opportunities for different pupils. Having one local body responsible for education could make it easier for both service providers and parents to influence on the education offered to a pupil.

Dismantling one barrier could lead to the creation of unintended new barriers; the system currently used in the four countries involves major bureaucracy engaged in assessing the needs of a child and developing, monitoring and evaluating school placements. Multidisciplinary work therefore presents an important opportunity to try to decrease the amount of bureaucracy through coordinated assessments, support plans and evaluations.

I could be argue that Norway has developed and implemented inclusive education by its insistence on physical inclusion in the regular, neighborhood school. The Salamanca declaration advocates regular schools with an inclusive orientation as the most effective means to build inclusive societies (Meijer 2010). Nirje (1969) and Wolfensberger (1972) holds the same argument; segregation promotes marginalisation and stigma.

Physical inclusion is a necessary although not sufficient condition for social inclusion. The critical point must be if the individual learner is truly included socially in the school, in the class and among their peers. Attending school is one of the most important social arenas outside the family for children and it is a place for making friends and experiencing varieties in behavior and manners. Historically segregation of disabled made them invisible in society and thus more vulnerable for stereotypic notions and stigmatisation. Inclusion in the community school presents people with disability as a part of the pupil population and makes it possible for a variety of pupils to know about each other.

Norway is the country most insistent on physical inclusion in the classroom as a means to attaining social inclusion. Clearly, attending a special school in Norway, leads to exclusion, as almost all Norwegian children attend the neighborhood school. The Norwegian community classroom in the younger years could have pupils with a wide variety of education needs. Some will spend all their time with their class and some may spend a few hours, depending on their individual education needs. Being a part of the community classroom, can improve individual performance simply because pupils can learn from their peers. Besides, it gives experiences about the variety in human performances and manners and may foster tolerance and respect. However, it could also be an experience of exclusion. Being in a regular class may lead to individuals feeling as one off and of being the one that never performs as well as the other (Wendelborg and Tøssebro 2010).

Other countries may perceive adapted education as more important and therefore consider physical inclusion as important, but not the only guiding factor, necessary for defining inclusive education. In contrast to Norway, in Scotland, Sweden and Romania, a mix of special schools and community schools presents a wider variety of educational settings and offers a choice.

Inclusion in education is about getting adapted education to develop capabilities, knowledge and skills. A pupil with dyslexia will have educational needs different from a pupil with a learning disability. Inclusion in the same classroom, providing for diverse learning needs, requires teachers and schools able to educate and meet different learning needs. All countries are having to face up to these challenges.

## **Conclusion**

The overview presented in this article was developed and applied during an LLP Erasmus Intensive Program for learning disability students from England and Scotland, special teacher students from Romania and Sweden and social educator students from Norway. The multidisciplinary group work undertaken as an integral part of the Intensive Programme raised new questions for the students. Thinking outside “the box” into which they were being socialised, made them uncomfortable at times, as assumptions were challenged. Meeting professionals with a different profession and who had a different approach added more uneasiness. As the group work progressed, they challenged and re-considered their professional knowledge and assumptions considering the contributions of professions other than their own. Nursing students commented that focusing on the education of children with learning disabilities made them realise the importance of their health role and how health needs are met and integrated within the education curriculum. They also had to accept the limits of their professional expertise, recognise their knowledge gaps and appreciate the knowledge other disciplines brought to adapting learning and support to meet the needs of individuals.

With the growing evidence base of the increasing number of children with intellectual and developmental disabilities living into adulthood, many with complex care and education needs,

bringing together students from different European countries and from different disciplines is useful (Cameron et al. 2014; McClanahan & Weismuller 2015). Developing the understanding of the needs of children and their families and of how different professions can and must work collaboratively now and in the future, is essential (Garvis et al. 2016). The over view of the education systems developed and applied during the Intensive Program is one example of attempting to prepare students from different countries and professions to work together to address the needs of children and their families.

EU and UN policies recognise education as a crucial tool for securing inclusion and for combating marginalisation. The over view of the educational systems demonstrates the start of dismantling barriers to inclusion. The right to an individual learning plan, the right to a curriculum, adapted to the learner's needs, and the same amount of teaching hours are all important tools for adapting learning to the individual learner. The Coordinated Support Plan in Scotland explicitly sets down requirements of multi-agency working across services and is vital for securing collaborative working. This is an area that the other countries can learn from. All four countries have the tools to ensure that education is adapted to the individual learner's need.

Despite the positive developments that have taken place in recent decades, there are a range of challenges that will need to be overcome in the future, as the number of children living into adulthood with complex learning disabilities continues to increase. Collaborative working between different professions in addressing and meeting a child's needs is essential to ensure inclusive education in the future.

- Unmet health needs make learning more difficult
- A learning disabled pupil could benefit from learning disability nurses and teachers working collaboratively in order to facilitate learning and meet health needs
- Nurses could benefit from knowledge about the wider debates on inclusion within education systems
- Nurses could benefit from knowledge about how inclusion in education is implemented in day today education practice and how their role can contribute

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