An analysis of administrators of special education and rehabilitation centers and the relationship between school and environment: A case study for Istanbul

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Abstract

Within the context of global education studies, the improvement of the special education process and its sustainability are becoming increasingly important. In this sense, studies on a national basis represent examples of different globalized educational processes. In this study, data was produced using qualitative research methods and content analysis. Observation, voice recordings and interviews were used as the data gathering technique. According to the observation results, the themes were created and were analyzed. The sampling area of the work was selected from the special education institutions in the Esenyurt and Küçükçekmece regions of Istanbul. A total of 12 school directors (eight female and four male) were interviewed in Turkey, who are managers in special education institutions in Istanbul. Interviews were held on the problems experienced in special education and rehabilitation centers. The suggestions for the sources of the problems of the managers were evaluated and solutions were provided to the family-institution-staff relations in order to increase the quality of education. By focusing on what the expectations of education and family relations are in terms of education; alternatives have been identified for the bureaucratic process to work faster. Regulation of special education process and health services and processes for fast service procurement are discussed.

Keywords: Special education, health services.

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1. Introduction

The number of people who require special care is not known and the education and rehabilitation services that are provided are very limited. This outcome shows the importance of requirements of providing appropriate education and rehabilitation services for the people with special requirements by the non-governmental private and legal entities (Akcamet, 1998). Although the government has recently regulated the establishment requirements, service, control, fee, tax, personnel qualifications and training, educational support etc. issues for the special education and treatment centers whose number is increasing day by day, it is observed that there are many problems and challenges with regard to operations.

In this study, the opinions of the administrators are considered in order to determine the problems in special education and rehabilitation centers serving for people who need special care and to provide solutions for such problems. What are the opinions of administrators about the Special Education and Rehabilitation centers and about the solutions for these problems in these centers? This question is the main question of this study.

1.1. Aim of this study

The education services and quality development in such services are underestimated due to the observed problems in special education and rehabilitation centers whose number has been increasing during the recent years.

The aim of this study is to determine the problems encountered by administrators of special education and rehabilitation centers with regard to center and environment relationships on the administrative basis and to put forward suggestions for solutions of such problems. It is aimed to improve the qualifications of these institutions by using the results of this study and to contribute to this field.

Sub-goals:

1- What are the opinions of the administrators of special education and rehabilitation centers for the problems that emerge in their centers with regard to school and environment relationship and what are their opinions for the solution of such problems?

2- What are the opinions of the administrators of special education and rehabilitation centers with regard to problems encountered in their relationship with the Ministry and what are their opinions for the solution of such problems?

1.2. The importance of this study

Anyone who needs special education has a right to receive appropriate education for his/her individual equality in line with the purpose of quality and special education from qualified personnel. The goal of improving the special education services can be achieved through solving the problems of special education and rehabilitation centers which are an integral part of the educational system in the light of focus on education, as it should be. The study has characteristics of a study that reflects suggestions for the latest problems and solutions after the amendments in regulations, legislations, memorandums and codes in this field.

1.3. Limitations of the study

The scope of this study is limited with the opinions of the administrators about the problems and their suggested solutions for special education and rehabilitation centers.

1- The physical extent of this study is limited with 12 rehabilitation centers in Esenyurt and Buyukcekmece in Istanbul.
2. Theoretical and Conceptual Framework

The special education is an education that is provided to children who differ from majority and require special education; enables the gifted ones to reach their optimum, preventing their inability to become an obstacle for them, equip the disabled person to reach a self-sufficient position in order to ease their adoption to society and to make them independent and productive individuals.

Another point that the special education differs from general education, is the arrangement of educational content. The content of the general education is arranged through a centralized program by considering the average child’s level; however the content of the program in special education is determined by considering the requirements of the child.

The special education centers are the institutions that aim to remove or to minimize the effect of problems such as speaking and language development difficulties, voice disorders, mental, physical, emotional, social, sensual and behavioral disorders on individuals who need special education; and to maximize their abilities, to develop their main self-care skills and to improve their independent living skills and to adopt them into society. It is also a special education institution that provides supportive education to the disabled people who are determined as they need supportive education as a result of educational assessment and diagnosis that are performed by special education assessment boards.

There are articles in our constitution about “Special Education and Disabled People”. According to the 42\textsuperscript{nd} article of the Constitution of T.R.: “Nobody can be deprived from his/her educational rights… Government takes measures in order to make the persons socially beneficial who need special education due to their situation.” The 50\textsuperscript{th} article states “Nobody can be forced to work in jobs that are not suitable for their age, gender and power. The people who lack mental and physical capacity shall be protected regardless of their working conditions.” The 61\textsuperscript{st} article states that “Government takes measures to protect disabled people and to achieve their adoption to social life”. According to these statements, same like the healthy individuals also the individuals who have some special needs have a right to receive education and there is equal opportunity in the education system.

In the beginning of the 21\textsuperscript{st} century every person, disabled or not, has right to study and improve herself. The equality in opportunity and availability of educational services is the main characteristic of democratic societies. According to the special education regulations, special education is defined as an education that is established on the educational and social needs of people who are disabled and provided by specially trained personnel through an improved education program and methods on the basis of competencies of individuals who require special education and performed in an environment suitable for their improvement characteristics (Cavkaytar, 2008).

The educational system provides the education that people need for solutions of their problems that they meet during their development period. In this educational system the special education services can be described as wide-ranging, costly and a difficult field in itself. The special education is a purposeful intervention that is performed towards disabled people.

From past to present; there are two models that determine our view to disability. The first one is “individualistic model” or “medical model” and the second one is “social model”. These models have been effective until today on policies that are developed towards special education services and on determining the societal point of view towards individuals who need special education (Isman, 2009).

The first one “medical model” in other words “individual model” was discovered in 1800’s for the first time as a result of improvements in medical and rehabilitation fields. The discovery of “medical model” has both positive and negative effects on societies. The positive effects can be presented as it provided many opportunities for families with regard to diagnosis, treatment and care services of the disabled person. The negative effects are under estimation of the social dimension of disability. Disabled persons are considered as they are “ill” persons and they stay in a “passive” situation instead of “active” situation. This approach is based on “the problems of the disabled person shall be solved by herself rather than the society” idea. Shortly, a disabled persons’ lack of independence and power...

to solve her problems and control them. The antithesis of individualistic approach is “social model”. “Social model” considers the disability concept as a societal phenomenon instead of an individual phenomenon.

This model was developed in 1983 by the academicians who are also physically disabled. According to the social model, disability is defined as a “social result of having a disorder or a disability”. The objective of the social model is to enable disabled individuals to continue an independent, productive and active life. This new model is liberating, not repressive. According to this model disability is not the fact that makes a person disabled; it is the reaction of the society towards the disabled person. Shortly, in this model the disability is not related with the individual, it is related with the perspective of the society towards the disabled person. It doesn’t suggest to remove the personality and to leave the disabled person by herself. Regardless of the type and degree of disability this model requires respecting the personality of individuals (Isman, 2009).

Disabled people have many different stories based on the traditional characteristics of the society that they live; in general they are considered as individuals who are second class, helpless and need care, cannot live their life independently, need guidance and safekeeping. In the medieval age the disabled people were placed in institutions and isolated from the society; they were cared mercifully on religious basis and treated as second class humans while they didn’t have any social rights (Messhur, 2013.)

It was very hard to find examples of solutions producing policies for problems of disabled people until the 1940s. Disability has been remarked as an economic and social problem. The developed countries decided to put the disability case on their agenda. In the first years the efforts of United Nations towards the disabled people aimed to increase the life quality of disabled people (Drew et al., 2011). The attempts performed in 1970’s and former periods had a guiding role to create awareness on the life quality of disabled people. On 9th December 1975 the Declaration on the Rights of the Disabled Person was accepted by the General Assembly of the United Nations in order to protect the rights of disabled people. The declaration that consists of 13 articles has historical international characteristics and it defines the rights of disabled people that enable them to take their actual place in society and live in society as a productive individual and also it describes the responsibilities of the society against disabled people. In the 1980’s the full participation and equality vision dominated the United Nations. In 1993, the practice of standards with regard to equal opportunity for disabled people that is accepted by the General Assembly of the United Nations was considered as an advisory matter. Then in the general assembly meeting of the World Blind Union, it was decided that the standard rules should be accepted as an international agreement. Efforts have been started within the United Nations required for preparation of an international agreement that regulates disabled persons’ rights against discrimination. This agreement was submitted to member countries for signature on 30th March 2007 and it was signed by 81 countries including Turkey. Same like United Nations there are also arrangements in the “European Convention on Human Rights”, “European Social Charter” and “European Urban Charter” of the Council of Europe with regard to disabled people. As the social model has become widespread around the world it has a significant effect on the approach of international institutions mainly in the United Nations towards disabled people (World Blind Union).

According to the 25th article of Universal Declaration of Human Rights that is declared by the United Nations, the health, educational and social security of disabled people are guaranteed. In addition to the Declaration of Human Rights the United Nations declared the “Declaration on the Rights of Disabled People”. In this declaration which consists of thirteen articles it is regulated that to enable disabled people to take their actual place in society and to live in society as a productive individual and also it describes the responsibilities of the society against disabled people (Hendrics, 2007). The year of 1981 is accepted as the “International Year of Disabled People” with the theme of “full participation and equality” as a result of efforts of the United Nations. Ten yearly disabled people program was described for the period between 1983 and 1992 and this decade was accepted as International
Decade of Disabled People. In this period each country prepared an “action plan” for disabled people. In this guide the United Nations arranges programs towards disabled people, tackles their problems and suggests solutions. On 20th December 1993, the General Assembly of United Nations established the “Standard Rules” with regard to equal opportunity for disabled people in order to improve personal development of disabled people. These rules are arranged under four sections as equal participation, target areas, implementation measures and monitoring mechanism (Akyüz, 2000). The Standard Rules has 22 articles and submitted in an advisory manner and the efforts are on progress to resolve these rules into an agreement in order to give them legal status. This document considers the fundamental rights of disabled people in detail and broadly. Another document that is accepted by the United Nations on 20th December 1989 is the Child Rights Convention. At the 23rd article of this convention the rights of disabled children and the responsibilities of the governments are arranged in detail. The General Assembly of United Nations considered the disabled people as members of society.

European Union has also comprehended that disabled people have a right to improve themselves and took a decision in line with the decision of the United Nations in order to enable these people benefit from such rights at optimum level. “The European Social Fund” that is allocated for social policies developed by the European Union is a financial instrument that is benefited to promote the equal opportunity for disabled persons in Europe. In summary, disability makes its’ presence felt in society as a social issue of the world. The legal, administrative and educational regulations has been tried to be arranged in order to enable disabled people benefit from equal education and living opportunities like normally developing individuals (Drew et al., 2011).

The educational services that are provided to people with special needs in member countries of the EU may vary between countries. Each country provides the educational services for people with special needs in a way that they are uniquely adopted. For instance, the integration applications that have become popular day by day in recent years vary between countries. While in the countries such as Italy, France, Portugal, Spain and England most of the children with special needs benefit from integration opportunities and the integration rules has obligatory status in law; countries like Germany, Netherlands and Finland provide educational services for children with special needs can only benefit from such services at the special schools. In most of the member countries, the educational services for children with special needs are provided both in special schools and regular schools (Oberhuemer et al., 2010).

Single system approach: This country aims to adopt nearly all of the students with special needs into the general education. As an example of this approach, Spain, Sweden, Italy, Norway and Portugal can be given.

Hybrid system approach: The general education system performs a mix of general and special education. Denmark, France, Finland and Ireland are the examples of this approach.

Dual system approach: In this country there are two separate educational systems which are general education and special education. In the countries that adopt this approach the students with special needs are educated in a separate environment. Even in some countries that adopt this approach the legal arrangements for general and special education are completely separated. As an example of dual system countries Belgium and Switzerland can be given. In some countries such as Germany and Netherlands there are significant attempts to switch from dual system to hybrid system.

The special education services are provided at the early childhood period or pre-school period in nearly all EU member countries. The individuals are continuously assessed with regard to special education requirements just after they are born in order to achieve early diagnosis and to forward such people to special education in countries such as England, Denmark and Austria.

For example in Austria, in order to determine the children in the risk group any child who is supposed to be registered in the school is assessed and monitored by the teachers of that school months before the registry age. In most of the EU member countries, the teachers who provide educational services to the students with special needs have a primary school education degree and
certified upon participating courses or additional lessons for special education. However, in some countries the process of training special education teachers may vary. For example, in Austria, individuals who have a primary school teaching grade can be special education teachers upon receiving two years graduate study in Greece. In Finland there are seven different fields for special education while teachers are trained in England only for special education of visually and hearing impaired people (Graham & Jahnukainen, 2011; Hanushek, Kain & Rivkin, 2002).

Although the regulations for disabled people have been placed systematically in legal legislation after the 1980’s it is hard to accomplish many regulations. The first systematical education for gifted students was presented in the Enderun Schools of the Ottoman Empire (Kargin, 2003). In the first decade of the Turkish Republic, the Geneva Declaration of the Rights of Children was signed.

Another development for the disabled people is the transfer of the responsibility of special education services to the Ministry of National Education from Ministry of Health and Social Assistance that had performed this duty from 1924 until 1950.

In the 1990’s the developments in special education and integration services continued increasingly. In 1992 the General Directorate of Special Education and Guidance and Counseling Services was established.

3. Method

This section covers data collection standards, participants, data and the methodology of this research study.

3.1. Data collection tool

The sample of this study includes administrators of 12 rehabilitation centers in Esenyurt and Buyukcekmece county of Istanbul province.

More detailed questions under the two main questions with the title of “school & environment” and “ministry” were prepared in order to reveal the problems that the administrators of special education and rehabilitation centers face. (APP. 2)

The data was received through the interview forms and voice recorder devices and included in content analysis as such data was scripted in a written manner by using qualitative research methods. The presented results of content analysis are transformed in quantitative form through coding.

3.2 Participants

The participants are 8 male and 4 female administrators of 12 Special Education and Rehabilitation Centers in Esenyurt and Kucukcekmece county of Istanbul province. They are all managers of institutions.

3.3. Bias and validity

The value of research is assessed by considering its contribution to the scientific field and solutions that it brings to the problems of peoples’ lives. However, besides serving these two purposes a scientific research must also have a clear research process and its results must be explicit, consistent and approved by other researchers. Lincoln and Guba (1985) suggest long term interaction, depthness focused data collection, variability, specialist examination and participant approval in order to achieve reliability. The researcher takes great care on these phases in order to achieve reliability. The researcher uses reflective listening method in order to encourage the conversation and to be objective. The questions of the interview are prepared as open ended questions. Hence the administrators have a chance to narrate their experiences comfortably without being under the influence of anything (Hacifazlioglu, 2010).
3.4. Analysis and interpretation of the data

The analysis phase is based on five models that are suggested by Marshall and Rossman (1999): a) arrangement of the data b) defining the themes and categories c) testing the hypothesis by using data d) searching for alternative explanations with regard to data and e) writing the report. Later on, by referencing Seidman (2004) the references are selected and the intra textual and inter textual relations have been tried to be established.

3.5. Phase of theme composition

As referencing to researcher Miles and Huberman (1994) the concepts that are gained at the content analysis are classified under a specific theme. As a result of examination of concepts the relationship between sub-themes are revealed and such relations are explained with a superior theme. The data is transferred to tables that are prepared before, and for each participant the related theme and experience is reflected across in that table. The researcher receives feedback from the academicians and administrators during the interview and analysis period.

3.6. Presentation of the data

In the presentation of data, it is focused on difficulties that administrators of special education and rehabilitation centers face with regard to family-environment and ministry scope and how they tackle such problems. The collected data is arranged in a long time and subjected to first analysis and the results received from data analysis are presented to the participants in form of a report. The participants read the report and assess whether the analysis represents their actual situation and working life; and they presented their opinions both in a written manner of verbally in a “confirmation meeting”. In the verbal “confirmation meetings” as stated it is observed that new data arises and it is included in assessment (Hacifazlioglu, 2010).

4. Findings and Comments

4.1. Findings and comments for the first sub-problem

The first sub-problem of this study is “problems observed in the school and environment relations”. Under this sub-problem there are problems and solutions of administrators with regard to “Institution & Family Relations and Relations with Other Institutions”.

4.1.1 Problems and solutions for school and environment relations

Institution & Family Relations

In the first years the families had high expectations. They have thought that we have a magic stick in our hand and we were able to change everything quickly as we touch their child. We have been trying to understand such expectations by the help of our psychologists and specialist friends by the time. (D1)

Institution & Family Relations – Family Education

We perform family education through seminars. From time to time we are trying to perform; it is not possible to do it every day. We are trying to give information of child development with the topic of the day. Our colleagues who give seminars performing this education through catechize method with parents. (D1)

Administrators create a chance to know the family and at the time that they need

It is the hardest thing to have a disabled individual and to be parents. Some of the society members get disturbed to see these disabled people but that’s our job and we are an exception and as some people – I don’t want to give names of any people or institution - cannot tolerate these children only

for a couple of hours while their families are together with these disabled people for 24 hours in a day. Therefore those families get depressed and parents have problems on accepting the situation. In other words they question that is it possible for my child to have such a problem? One percent of disabled children have not registered their child to school due to the fact that they cannot accept the situation. The ones who accept the situation get a little depressed as the time goes by due to the physical and economic problems. As the children grow up they find themselves in a hard situation when they think about what will be of their child after they pass away. This hardness can be reflected in every moment of their daily life. In a sense the problem doesn't stay as a family problem, they have high expectations when they arrive to our institution. (E1)

Family Education

Every family has dreams for their baby and the possibility of a disabled baby has never been considered.

All the preparations are for a normal baby. The expectation of all the members of the family are same with the mother's and father's expectations. Many families have very little knowledge about disability before the birth. The possibility of having a disabled child is one of the worst fears of families during the pre-birth period. Therefore, families express their expectations with these words “it doesn’t matter boy or girl, it is important to have a healthy child”. Birth of a baby affects the family structurally, developmentally and functionally. Happiness of birth protects the family from the negative effects of such changes. In case of the birth of a disabled child this happiness may be replaced with a deep sadness. With the birth of a disabled child the family may dive in very mixed emotional feelings.

Solution suggestions for families

We offered to give a salary to these children at every age. Regardless of their parents economic situation even if they are very rich it should be offered. This must be a salary that is delivered to the child. I think that it is possible to find a caretaker with this money in the future. This disabled salary must be offered and the education must be encouraged. We provide supportive education but this is not enough. A school education must be offered. Also a day care center must be provided for them. Imagine a child that her family doesn’t want her to stay at home or cannot keep her at home, both is possible. There must be places that they can leave their child in day care centers and also there must be places for night care. These three steps remove the worry of the parent that arises from the question of “what will our child do after we pass away”. (E1)

Institution and family relations – Family education

We delivered this job to the Ministry of National Education as the association. You only give individual and group allowance. If you give once a month session for family education and counseling we can only give one session counseling in a month for each family. Because we need to finance this also, this cannot be an unpaid service. We deliver this service unpaid to the people who cannot afford but we give from ourselves; if all the families demand such a service then we would not meet their demand. We can only satisfy one fifth or one sixth of the families. It would be more efficient and the behavior of the family will change towards the child if it is obliged with regulation enabling once in a month sessions for each family by providing the required financial fund officially. (E2)

Institution and Family Relations

Firstly the families must accept this situation. For example some parents cannot accept. They question that whether their child is an idiot or not. We are trying to force them to accept this situation that it can happen to anyone. Accepting the situation is very important in this problem. As the parents accept the situation the problems begin to be solved. Later on our psychologist guides the family with regard to their behavioral approach to their child. How to deal with puberty, how to deal with childhood; we continuously give information to parents. For instance, our lesson duration is 45 minutes and for 15 minutes of a lesson we evaluate the development of the child. Our special education teacher
Institution and Family Relations – Family education

There is an education program at least once in every two weeks. At least two subjects are lectured to the families in a month. We inform the families with regard to education. We call them and listen to their complaints with regard to the institution. We develop solutions in light of these complaints.

Time is needed for positive and stable relations between the institution and family

As the family arrives firstly in our institution they mostly have accepted the situation and as they attend and know the institution our relations get warmer. (C2)

4.2.1. Problems and suggestions with regard to ministry

The problems that arise due to the personnel circulation Directorate of National Education in the county offices and inexperienced fresh personnel are explained by an administrator as follows;

Each replacement of officers in Directorate of National Education means new problems for us because as the paper work are a problem for us, it is also a problem for county national education offices and provincial national education offices. Each new officer brings new problems because they don’t know the work procedures. They prepare at least 3 or 5 documents which are wrong. We experience this situation very often. The documents are returned from the Directorate of National Education Office of Esenyurt County due to wrong preparation. There are some additional problems in big cities. Most of the documents that are approved by county offices must also be approved by the provincial office. It means more paper work that takes one month to deliver a single document to the provincial office. In that month the assignment of the teacher must be completed. Hence we usually face problems. (E2)

My solution is conducting governmental works on the place. If the authority of the provincial directorate is distributed to the county offices we complete procedures in one hour rather than one month and also the officers must be permanent officers here. They should not be oriented so often. Because it is hard to learn that job and the audits are formal procedures after learning the job. Is there a plant ledger? Is the flag cabinet on its place? Does the writing on it comply with the regulation? Do classrooms have writing plates? etc. formal audits and also an audit are performed whether the child comes to the center or not, however I have never experienced any audit that controls the content of the education. It can be handled but until then they make a lot of mistakes (E2)

Problems of RAM (Counseling and Research Center)

Counseling research centers have some little differences with the nature of this job. They don’t accept a case in the same way. One case may be accepted in a RAM however another one does not accept it. They need to be standardized; a regulation that is issued by the ministry can be interpreted in the benefit of the child by RAM A and the same regulation can be interpreted as against the child in another RAM B. Counselors must perform research in a way that focuses more on the child. (D1)

Problems encountered in the health certificating period

I am speaking especially about Istanbul; there are government hospitals in each county. These hospitals are authorized to give disability health certificate. So the problem of hospital report can be eliminated. (E2)

Solutions for the problems encountered in the health certificating period

There are serious problems of health certificating in hospitals. It is impossible to take a disabled certificate of a child earlier than 4 months. They give appointment time on very late dates. There is no stable system for that. (A3) It is required to establish special departments for that. All the hospitals are not authorized to give health certificate for special education. Therefore the authorized hospitals are very busy. They would increment the number of committees in hospitals or they would establish a special
Suggestions for solutions of the problems encountered in the health certificating

They should also control the hospitals. If the government obliges me to give health certification in 20 days and if the hospital gives appointment date for after 6 months, the chief physician must be discharged from this position. Because this is not a child game, these children are ill and the education that they receive would determine their life quality in the future. We undertake the responsibility of education of these children under the authority of government. The government should audit other institutions. We are also audited but government should control other institutions. So we can do our job more easily and these children benefit from this efficiency. (B2)

Problems of RAM (Counseling and Research Center)

In my opinion the counseling put too much emphasis on this research. In the past the hospitals were performing these services and the assigned doctors were psychologists, psychiatrists, neurologists, pediatrician etc. and they confirm that if a child needs special education. We were doing it in this way. I don’t suggest removing counseling research but at least it should be revised. (D1)

5. Results and Suggestions

5.1. Results

In this study the relationship of the special education and rehabilitation centers with school, environment and the ministry is examined by considering the opinion of administrators. The results of the study are as follows:

Institution – family relations get better by time through mutual understandings, and additional fund needed in order to give the required education to families. There is a requirement for additional personnel for this family education program.

Families are very unwilling to participate in education and to pursue their child’s development.

Circulation of the experienced personnel in the Directorate of National Education causes the late and wrong performance of works, and the new coming personnel need a long time to learn the work and to adapt. Due to many bureaucratic procedures the process delays and fails.

The personnel who work in RAM are not sufficient both in qualification and quantitatively. Some of the health certificates that are received during the diagnosis period show that these people are not appropriate for special education and upon reclaiming they can take the new health certificate after a very long time. Therefore the duration to start education is extended.

The health certification appointments that are taken from the hospitals are given for a very long date and therefore the education is delayed and this situation makes institutions and students to suffer.

5.2. Suggestions

Institution – family relations get better by time and families are educated in order to keep their expectation at normal levels however a suggestion for an additional fund is presented in order to give this education to all families. The problems such as the families become desperate, fall in great expectations after the education and they cannot accept their child’s situation shall be removed through family education.

As the bureaucratic process is shortened in the Directorate of National Education and distributing some of the authorities of the Province Directorate of National Education are delivered to the County Directorate of National Education may solve the time losing procedural problems as easing the works.

In order to shorten the appointment date waiting period in the hospital for the health certificates

the committees can be extended to other hospitals. Educational diagnosis and assessment should be conditioned on a rule in order to complete the process in a determined period (like in other countries regulations should be limited to a max. 30 days).

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