THE STUDY OF SCHOOL-IN-HOSPITAL IN PEDIATRIC WARDS
FOR CHILDREN WITH MEDICAL NEEDS IN MALAYSIA

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Abstract
The concept of providing special education services to the children with medical needs is relatively a new project in Malaysia. The study found that during children’s recovering process in any medical centre, their education should not be overlooked as the hospitalized children and young people still need learning activities to maintain a sense of normality in the hospital environment. This study aims to investigate measure of preventing hospitalized children from lagging behind in their studies while undergoing long treatment in hospitals. This issue must be addressed while the children are under treatments, as it influences the children’s academic future. Nevertheless, this study focuses on examining spatial requirements of existing schools in hospitals, in Malaysia. The study finds that the educational place for the children should be provided based on their age ranges which are preschool, primary school, and secondary school, to meet the children’s needs of continuous education. Overall, this paper intends to highlight the needs of educational place and spatial requirements for future improvement to the existing school in hospital for the education of children with medical needs in Malaysia.

Keywords: Special education, Children, Spatial Requirement, Hospital and School

1. Introduction

The concept of providing special education services to the children with medical needs is relatively new in Malaysia. The hospital school projects commence in Malaysia since 2011. There are 3 existing school hospitals, which are Hospital Serdang, Hopital Ampang and Hospital Kuala Lumpur. It aims to facilitate continuous education for hospitalized children, especially those who are being warded for long periods and returning patients (Indramalar, 2011; American Academy of Pediatrics, 2000). Besides, Lucy (2008) states that in order for hospitalized children and young people to maintain a sense of normality in the hospital environment, they need to be provide with learning activities while undergoing their recovering process. Her view is in accordance to suggestion made by the Department of Education and Skills (2003), which is to avoid students from left behind in their studies while under going long treatment at the hospitals. In short, the school project not only helps the student to help children to regain motivation, but also provide an alternative ways to keep up with their academic matters.

Hospitalization often causes hassle and trauma to children (Ismail and Mohd, 2006). The needs to stay in hospital to receive treatment make the children unable to attend school in regular basis. As discussed by the American Academy of Pediatrics (2000), in the “Pediatric” journal, volume 106, there are several reasons for the children to not continue their studies in the wards, for example recovering from surgery, trauma, extended recovery, and chronic diseases. According to Wendy and Anna (1998), the children who stay long in the hospital view the environment in hospital as an unfamiliar setting from their home or school. Similarly, Ismail and Mohd (2006), states that hospitalized children view hospital settings as a threat. Thus, they often act differently and experiencing symptoms such as recluse, bored, and excessive fear towards strange environment. As a result, they often neglect and refuse to study while receiving treatment.
Thus, this is important for Malaysian government to provide educational services for hospitalized children. The needs and spatial requirement in providing educational place may be varied in every country, depending on the requirement by local authority, but for the hospitalized children (Lucy, 2008; Wendy & Anna, 1998; American Academy of Pediatrics, 2000) educational goals should be addressed before they were discharge from the hospital. Overall, this paper intends to highlight the needs of educational place and spatial requirements for future improvement to the existing school in hospital for the education of children with medical needs in Malaysian hospital.

2. Literature Review

According to the standard in the Building Bulletin 77, Department for Education and Skills (DfeS) (2005), described that there are various definitions of the children with special needs. The sick children can be categorized based on several types of sickness such as children with disability, medical needs, special education needs, and mental health needs. Medical needs can be described as facing and having medical conditions (DfeS, 2005; Indramalar, 2011) during recovering process. Isabelle (2011) cited that the hospitalized children are usually or constantly left behind in the study. Therefore, there are constantly not interested toward schooling after being discharge. Thus, discharge plan is important to help children in terms of providing a proper access to education in their academic in future.

The special guidelines for educational services should be provided for Malaysian hospital. Research done by Devon Country Council (n.d), illustrated that the children who are unable to attend school because of medical needs should not be removed from the school register. This view is supported by the Department for Education and Skills (2005); Department of Education (1992); Department for Children, Schools and Families (2005); Michele,Janette&Andrew(2006) as the hospitalized children, who are temporarily unable to attend school on a full time basis, have rights to have education even during a long period of illness. Thus, providing special guideline will ensure that the children receive appropriate learning services during recovering process.

The age category for admission on the Pediatric Ward is from newborn infant to 16 years of age. Thus, the children who are within the age for schooling are entitled to have education equally as the normal children even though they are staying in the hospital. According to the American Academy of Pediatrics (2000); Indramalar (2011), the children may be admitted into pediatric ward for only few days. But there are also children who remain on their units for longer period based on their condition and treatment needed. The hospitalized children fall into three categories depending on the length of stay in the hospital. There are long term children, recurring children, and short stay children. Department for Education and Skills (DfeS) (2001) stated “others may attend the hospital school regularly for a few days a week, returning home or school for the rest of week.” In brief, the teachers shall provide continuity of education in as normal learning environment as possible so that the children who depending on length to stay in the hospital receive the educational equally with others.

According to National Education System at school level under the Malaysia Education Institution, the education in Malaysia consists of four stages; Pre-School, primary level school, secondary level school, and higher Level educational institutions such as college and universities. Therefore, based on the admission into the pediatric wards, the children who are newborn until the age of 16 years old, are entitled to have access of education in hospital school.
Table 1: The levels of education in Malaysia

<table>
<thead>
<tr>
<th>Stage(level)</th>
<th>Age( years old)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-School</td>
<td>5-6 years old</td>
</tr>
<tr>
<td>Primary Level</td>
<td>7-11 years old</td>
</tr>
<tr>
<td>Secondary Level</td>
<td>12-17 years old</td>
</tr>
<tr>
<td>(Lower secondary, Upper secondary and Post secondary)</td>
<td></td>
</tr>
<tr>
<td>Higher Level</td>
<td>18 and above</td>
</tr>
</tbody>
</table>

Source: Adapted from Ministry of Education Malaysia, MoE (2011)

The current hospital school in the abroad has set up their own policy in providing services for admission into the school hospital. For instance, the several hospital schools in UK’s such as Royal Borough of Kensington & Chelsea Hospital, Latimer Education Centre, Chelsea & Westminster Hospital, The Royal Brompton Hospital, Collingham garden child & family psychiatry unit and Cheyne Celebral Palsy Centre, provides balance and broad curriculum for special needs children, age range between 2 to 19 years old (Department of Children and Family Services, 2009). Department of Children and Family Services (2009), states that ensuring the children with medical needs to have proper education in hospital environment is key priority in their Education Development Plan. Based on their policy, if the students are unable to attend school for three weeks or more, then they will provide the children with medical needs in a variety of ways for the children with medical needs.

There are several ways to make sure the hospitalized children received proper education, such as admission to the school hospital (Lucy, 2008; Indramalar, 2011), attendance at the educational centre and lastly individual tuition at another education setting such as local libraries. Occasionally, when the children is unwell (example: If children have an acute illness and are physically unable post operation), individual tuition may be offered at home. The school hospital in U.K. can be adapted for Malaysian hospitals because both of the country is under same Olympic country. In additional, there is quite similar level of education which is pre-school level, primary level and secondary level between Malaysia and U.K.

Asiah (2001) mentioned that according to Children’s Act 1989, Local authorities have a duty to identify children in needs; provide services for disable children; provide information about services, etc. Moreover, under the Disability Discrimination Act 1995, stated that every local authority and school must not discriminate against disabled pupils; curriculum must be planned strategically according to the needs and lastly, this acts mention about to promote equality of opportunity for disabled people especially access to education (Department of Children and Family Services, 2009). In addition, each of the children especially with medical needs required different methods on their learning and education (Guild, 1994). Besides, every child from stages of pre-school, secondary school and primary school have different needs based on their development. According to The Education Act 1988, there are spatial requirements in providing the education places for the children with medical needs.
Based on the Department of Education (2001), general requirement for main teaching accommodation must be different for every stage or level of education. Moreover, the accommodation should be planned for flexibility, therapeutic as long as it complimentary with academic function. Lucy (2008) states that the school in hospital should be designed as a “special school” because the student in particular age differ in the ways they learn. Her ideas is accordance to the general requirement for special school where the school needs to provide special accommodations, in term of class base, practical area, variety of spaces and types of activities offered in the schools.

Department of Education (2001) claimed that, in order to give the children a sense of stability and belonging, each class group should have its own class base. Furthermore, some practical area such as for science, art, and design technology can be provided depending on the age of the children. This idea of providing practical areas is supported by research done by the Gera and Kathy (2007); Guild (1994); Liza and Rachel (2010) where they claimed that the children learnt best through play and experience things. Moreover, variety of sizes of teaching spaces, including small group rooms for discussion (Wendy and Anna, 1998) to meet individual learning needs also should be provided. Variety of spaces can support variety of the task and teaching activities to meet children needs.

According to the Asiah (2001), she found that research done by the Curtis and Carter (2003), outlined that facilities and furniture in the education places need to be take account suitable with the chronological ages. Besides, the children can feel comfortable with the environment.

Thus, this is important for Malaysian government to provide such services for hospitalized children as they are able to continue the education as well as keep up their studies even though having sickness and being hospitalized for some duration of time.

3. Methodology

To achieve the overall aim of this research, literature reviews on background of hospital, paediatric wards, therapeutic space and the existing layout of the school in hospital also has been reviewed. This study use qualitative method of table research to investigate measure of preventing hospitalized children from continuously left behind on their study. The observation and interviews approach are to be used to measure the behavioural responses of the children towards the hospital school environments. Interviews will be conducted with the related sample such as doctors, teachers, parents and children in order to get the actual situations and needs of hospitalized children in hospital environment.
4. Result and Analysis

This study will contribute in highlighting the importance of providing spaces for the education of children under treatment in Malaysian hospital. The combination from overseas cases, the government of Malaysia and Ministry of Education should find the best methods and design guidance for education in the hospital school as a successful project in future. There should be a special provision of spaces for children with medical needs to have continuous education while they stay in hospitals. It is hoped that this research help to identify the spatial requirements for future improvement to the existing school in hospital for the education of children with medical needs in Malaysia.

5. Conclusion

An alternative education setting is not intended to replace the regular school system instruction, but it is the responsibility of the government in providing meaningful program adjustment for children who suffer illness. In addition, it is necessary to provide educational place in hospital wards so that the hospitalized children will be ready to continue the study after they are discharged.

References


