Children with disabilities in the Japanese school system: a path toward social integration?

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Abstract: Japanese children with disabilities have traditionally been educated in special schools, specifically dedicated to one type of disability, and often isolated from the rest of society. However, in 2006, in the course of the general reform of education, special education was reformed to promote the principle of “inclusive education” – that is, education in mainstream schools along with non-disabled peers – and, in a broader sense, education meeting the needs of all children, regardless of their particularities in terms of abilities, command of the Japanese language, ethnic/social/family background, etc. This paper aims at assessing the results of this reform after almost ten years of implementation. To what extent has the 2006 reform contributed to improving the integration of disabled or less-abled children into Japanese society? Based on quantitative and qualitative data, the argument shows that it has achieved mixed results in practice, with large variations depending on the type of disability considered. The observed evolution can be interpreted as an extended individualization of pedagogy in mainstream schools, still enrooted in the framework of strong control processes. Even though new structures are created in order to meet everyone’s needs, the implemented approach remains based on a willingness to externalize difficulties, rather than the promised radical transformation of schools toward the recognition of a general diversity.

Keywords: education, disability, minority, integration, school

1 Introduction

Describing the Japanese educational system as highly normative sounds almost cliché. During the last decades, it has undergone several reforms aimed at fa-}{*Corresponding author: Anne-Lise Mithout, Department of Japanese Studies, Université de Strasbourg, E-mail: mithout@unistra.fr
Voring pedagogical individualization (Cave 2001, 2003, 2007) and has seen the emergence of a growing number of issues related to schools (e.g., violence, bullying, suicide, dropouts) (Yoneyama 2012: Ch. 7–8; Zeng and LeTendre 2013), as well as (sometimes over-mediatized) social problems for which schools are expected to provide solutions (e.g., inequalities, delinquency, compensated dating) (LeTendre 1995; Fujita 2003; Gordon et al. 2010). However, Japanese school education remains based on extremely codified socialization processes, explicitly compiled in “classroom social skills” textbooks, and intended to foster children’s ability to fit into Japanese society. These processes rely on the assumption that children comply with the ideal of “the Japanese student” whose main features are: (i) a good command of the Japanese language, (ii) a stable family environment (including a mother able and available to cooperate with the school), (iii) good health condition, (iv) sustained attention capacity, (v) full control over one’s body and gestures, (vi) “average” physical ability, and (vii) “normal” social skills. Since the Meiji era, this compliance has been guaranteed by the “externalization” of children who did not match this type to other educational institutions (Yamaguchi and Kaneko 2004). Yet, today, this way of functioning is harshly questioned, both in theory and in practice (Gordon et al. 2010; Galan and Lévi Alvarès 2012).

The case of disabled children exemplifies the many contradictions occurring in the Japanese school system, especially regarding its ability to cater for members of “minorities.” Since the late nineteenth century, they have been progressively enrolled into special schools, managed by the Ministry of Education, Culture, Sports, Science and Technology (MEXT), but isolated from the mainstream school system. Since the 1980s, disabled people’s associations have expressed their favoritism of mainstream schooling, resulting in a gradual opening of mainstream schools to disabled students (Yamaguchi and Kaneko 2004). A complete reform of the special education system, anchored in the philosophy of “integration” (or “inclusion”), was implemented in 2006, so as to favor enrollment of disabled students into the mainstream system. To what extent has this reform contributed to a better integration of children with disabilities into Japanese society?

This paper argues that the evolution of Japanese schools combines an increased consideration for the needs of disabled children with a willingness to control “troublemakers,” mixing social and medical issues. After shedding light on the political context of this reform, this paper will analyze its results based

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1 At first, special schools targeted only blind and deaf children. Their scope was extended gradually to other types of disabilities. Finally, and as late as 1979, education became compulsory for children with mental disabilities.
on MEXT data and my own ethnographic fieldwork conducted in 2013 and 2014.²

2 A reform between activism and neoliberal policies

The special education reform of 2006 appears as a curious combination of three political factors: the international movement for school inclusion, the reform of the Japanese welfare system for disabled people, and the general reform of Japanese education. Examining how these factors intertwine reveals the ambiguities that have characterized the reform from its very beginning.

The international movement for school inclusion developed after the Warnock Report (Warnock 1978) was published in the United Kingdom in 1978. A breakthrough in the history of educational policies for disabled children, this report stated that disabled children are not radically different from other children; on the contrary, every child may, at some point during their school years, have “specific educational needs” and, in most cases, these needs can be met within the framework of mainstream schools.

Those ideas were internationally promoted from the 1980s onward (Vislie 2003), especially by UNESCO. Their Salamanca Statement from 1994 championed the principle of an “education for all” that would foster everybody’s participation, regardless of their specificities. The outcome of this statement has been slow to appear but, during the 2000s, most OECD countries implemented reforms following its orientations. Moreover, Japan signed in 2007, and ratified in 2014, the UN Convention on the Rights of Persons with Disabilities; as a result, legislation started to change so as to reflect international concerns regarding disabled individuals’ legal protection.

At the same time, Japan’s social welfare system for people with disabilities underwent major changes. Following Ozawa (2008), the history of disabled people’s social welfare in Japan can be divided into three periods. Between 1947 and 1980, policies focused on guaranteeing the respect of basic human rights through a number of laws aimed at enforcing the right of every individual to lead a decent life. In practice, welfare laws created a system in which every disabled person could find a host institution – aside from the rest of society.

² This research was made possible thanks to a fellowship granted by the Japanese Society for the Promotion of Science.
The 1980s and 1990s were marked by a political willingness to support disabled people’s autonomy and social participation, under the influence of ideas like “normalization” and “full equality,” especially as promoted by international organizations. In particular, the Basic Law for Persons with Disabilities (Shōgaisha kihon-hō) from 1993 emphasized support for disabled people’s economic activity and financial autonomy. Policies gradually shifted from a focus on institutions and experts surrounding disabled people to a system centered on the disabled persons themselves – even though, in practice, life in special institutions remained a very common situation (Stevens 2013).

In the 2000s, a set of reforms called Reforms of the Substructures of Social Welfare (Shakai fukushi kiso kōzō kaikaku) were implemented, in spite of harsh criticism (Oshima 2007), especially among disability rights activists. The framework of social welfare has since been transformed following neoliberal ideas. Disabled persons are placed at the core of a support system that is designed to favor their participation in social life. Their autonomy is thus asserted in a specific way, as they are defined as users of freely chosen services. The Law on Support to Disabled People’s Autonomy (Shōgaisha jiritsu shien-hō) from 2005 introduced the “user-payer principle” and triggered bursts of outcry among activist associations who denounced the shift from an entitlement-based system to a system roughly similar to insurance (Nakamura 2009).

The 2000s were also marked by the general reform of the Japanese school system, especially the revision of the Basic Act on Education (Kyōiku kihon-hō) from 2006. After several decades of reforms promoting the consideration of children’s individualities in the form of “less stressful education” (yutori kyōiku) and a stronger contribution from the educational system in meeting the challenges of the Japanese economy, the first Abe cabinet launched a radical reform aimed at backing the state out of the management of education, handing down most of it to local authorities. In parallel, education to civism and “public spirit” were emphasized, as already identified by Hata (1993), in a double process of developing freedom of management and a strengthening of moral control.

The revision of the Basic Act on Education saw the appearance of the statement “The state or local authorities should provide disabled children with adapted educational support so that they can receive a full education corresponding to their situation” (Article 4, paragraph 2) – a statement that sets the framework of the new system, based on the notion of “support” (shien). This reform is thus oriented toward educating autonomous individuals and offering families a free choice of school. Indeed, even though the final decision regarding enrollment is taken by local educational committees, parents’ opinions weigh much more than in the past. Therefore, it shares the goals of neoliberal reform or, at least, its vocabulary. Ochiai (2009) revealed that the orientation
given to disabled children’s education from the Warnock Report onward is anchored in, and contributes to, the logic of Thatcherism. This comes as no surprise given that the philosophical background of neoliberalism is the promotion of individual freedom and the creation of a society enabling individual fulfillment in a vision of social change that is, on the conceptual level (although often not on the political one), very similar to the vision promoted by disability rights activism. It can be assumed that this match between the ambitions of the special education reform and its ideological context has been one of the key factors leading to its implementation.

Finally, special education in Japan is extremely costly, especially because of the high student–teacher ratio (with no more than six students per teacher, and often even less). In a context of cost-cutting, financial arguments also turn in favor of a reform promoting mainstream schooling.

The special education reform embodies the meeting of three factors: (i) the ambition to build a society fostering disabled people’s integration, (ii) the emergence of a welfare system based on individual support services freely chosen by a disabled person seen as “autonomous consumer,” and (iii) the general reform of education under neoliberal influence. This combination of activists’ goals and neoliberal policies taints the reform with a peculiar color. In practice, to what extent does this reform favor a better social integration for disabled people?

In fact, the reform does not introduce disruptive practices. It does not create radically new structures, but rather aims at developing the existing support structures favoring mainstream schooling. As before, children with disabilities can be enrolled into three types of structures: (i) special schools, (ii) special classes within mainstream schools, or (iii) attending regular classes at mainstream schools. However, enrollment in mainstream schools is promoted not only through the opening of special classes in a growing number of schools, but also the appointment of special support education coordinators in every school and the enhanced training of regular teachers to meet the special educational needs in their classrooms. The decision about the type of structure suiting a child’s needs is still made by the local educational committee, but it takes into account families’ wishes and is based on a detailed evaluation of the child’s needs and abilities, so that enrollment into special schools becomes less systematic. In practice, not only mainstream schools change in order to open

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3 Although there are no official statistics published on the subject, experts from the National Research Institute on Special Support Education agree that the cost (for both the state and local authorities) of schooling a child in a special school is about ten times higher than in a mainstream school.
their doors to disabled children, special schools also evolve. In official terms, they are no longer schools dedicated to one category of disability (e.g., visual or hearing impairment, mental disability, etc.); they are now called “special support schools” (tokubetsu shien gakkō) and can cater to children with all types of disabilities living in their surroundings. Moreover, in addition to their traditional mission of educating children who cannot attend mainstream schools, they now also play a new role as local centers of expertise, working in close collaboration with mainstream schools in order to provide support, advice, and training to regular teachers who have disabled children in their classrooms.

The main evolution is indeed conceptual, with Japan shifting from “special education” (tokushu kyōiku) (a term that conveys a very negative image of disabled children and their education) to “special support education” (tokubetsu shien kyōiku), which is anchored in the philosophy of inclusion. The goal of special support education is to

offer an education corresponding to the level of preschool, primary school, junior high school, or high school, while providing the children with skills and knowledge necessary to their autonomy, enabling them to overcome the difficulties regarding learning or daily life, according to their disability. (Article 72 of the new law on school education; Gakkō kyōiku-hō)

This law sends the message that the purpose of disabled children’s education is no different from regular education; there are only additional goals that are specific to disability (Kanazawa 2013), especially concerning education to autonomy.

3 Special support education in practice: what inclusion for whom?

Ten years after its implementation, the outcomes of the reform have to be assessed both from quantitative and qualitative points of view. The argument is based on two datasets: the quantitative statistical data by MEXT and the qualitative data from my own ethnographical fieldwork conducted in 2013 and 2014. The fieldwork consisted of observing classes in twenty schools (five mainstream and fifteen special schools) in Hiroshima, Tokyo, and Kyoto, with stays between one day and one week each, and conducting interviews with forty teachers (special teachers and regular teachers with disabled children in their classes). The research was originally designed to assess the evolution of special schools
in times of inclusion, but it appeared necessary to broaden the scope of the study so as to analyze the observed phenomena within their general context.

3.1 The reform in numbers: the disability boom

MEXT’s statistics reveal the following evolution for primary and junior high school levels (see Figure 1).4 Strikingly enough, the number of children receiving special support appears to have almost doubled since 2005 from 199,227 up to 327,201, while the total number of children in education decreased from 10,823,873 to 10,317,282,5 which means that the percentage of children diagnosed with a disability among the student population increased from 1.84% to 3.17%. However, from a medical point of view this does not mean that the prevalence of disabilities among students has suddenly skyrocketed. Neither does it mean that the reform has enabled children unable to attend any school because of their disability to gain access to education. Education has been compulsory for all disabled children since 1979 and, even though the reform may have been beneficial to children with multi-disabilities (as will be explained below), those cases remain statistically rare and cannot be the only explanation for this dramatic increase.

The main reason for this is that the reform has coincided with a period of increased recognition of “developmental disorders” (hattatsu shōgai), including attention deficit, hyperactivity, and learning disorders. Since the 1990s, these disorders have received growing attention, both in the medical field as well as through the activism of parent groups, a movement that was primarily oriented toward an increased recognition and tolerance of diversity and individualities within Japanese society (Teruyama 2009). These groups gained complete political recognition in 2004, through the Law to Support People with Developmental Disabilities (Hattatsu shōgaisha shien-hō). Today, the MEXT estimates that around 6.5% of school-age children have a “possibility of developmental disorders” (MEXT 2012a). Therefore, it is the extension of the scope of the official definition of disability that has led to the somehow artificial increase in the number of disabled children enrolled in education.

There are two possible interpretations for this phenomenon. In a sense, it is undeniable that the Japanese state thus enables children with real difficulties

4 Those statistics only account for children enrolled into a support structure. There are no data regarding children who would be recognized as “disabled” though attend a mainstream school without receiving special support.


to receive support adapted to their needs. On the other hand, entering this support system implies a "labelling" process that can be experienced as a stigma, as children in need have to become "disabled children" in the eyes of institutions, schools, peers, and families and themselves, before entering a support system aimed at their re-integration into society. However, this paradox is not specific to Japan; it has been discussed worldwide in the field of disability studies (Stiker 2003; Morel 2014).

The question arises as to what extent this massive "production" of disabled children by the Japanese school system is a way of externalizing the various difficulties of the mainstream school system. Kimura (2006, 2015) interprets the emergence of "developmental disorders" as a symptom of the medicalization of society, that is, the development of medical processes in response to "mal-adjusted behaviors" that could have social causes. This trend is particularly visible in the increasing efforts paid to early diagnosis of disability, occurring especially during mandatory medical exams for 18-month-old and 3-and-a-half-year-old children (Sasamori 2010) and in preschools (Sakuma et al. 2011).

Therefore, in light of this phenomenon, the statistics of integration must be analyzed carefully. They show, in the first place, strong development in mainstream schooling, with enrollment in regular classes up by 50% and enrollment in special classes up by 150% between 2005 and 2012. In contrast, enrollment in special schools has become the least frequent solution as of 2012. However, the headcounts of special schools have not decreased; on the contra-
Table 1: Evolution of headcounts in the three schooling structures for children with disabilities – according to type of disability (2005–2012).

<table>
<thead>
<tr>
<th></th>
<th>Special schools</th>
<th>Special classes</th>
<th>Individual integration</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental disability</td>
<td>2005 0.321 %</td>
<td>2012 0.566 %</td>
<td>0.552 %</td>
<td>X 0.873 %</td>
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<td></td>
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<tr>
<td>Emotional disorders</td>
<td>2005 X 0.267 %</td>
<td>2012 X 0.653 %</td>
<td>0.063 %</td>
<td>0.330 %</td>
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<td></td>
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<td></td>
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<tr>
<td>Language disorders</td>
<td>2005 X 0.011 %</td>
<td>2012 X 0.015 %</td>
<td>0.276 %</td>
<td>0.288 %</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Autism</td>
<td>2012 X 0.109 %</td>
<td>2012 X 0.086 %</td>
<td>0.109 %</td>
<td>0.086 %</td>
</tr>
<tr>
<td>Attention deficit</td>
<td>2012 X 0.083 %</td>
<td>2012 X 0.083 %</td>
<td></td>
<td>0.083 %</td>
</tr>
<tr>
<td>Physical disability</td>
<td>2005 0.113 %</td>
<td>2012 0.212 %</td>
<td>0.035 %</td>
<td>0.000005 %</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.147 %</td>
</tr>
<tr>
<td>Visual impairment</td>
<td>2005 0.011 %</td>
<td>2012 0.028 %</td>
<td>0.003 %</td>
<td>0.0002 %</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.015 %</td>
</tr>
<tr>
<td>Hearing impairment</td>
<td>2005 0.031 %</td>
<td>2012 0.049 %</td>
<td>0.011 %</td>
<td>0.002 %</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.033 %</td>
</tr>
<tr>
<td>Incapacitating illness</td>
<td>2005 0.026 %</td>
<td>2012 0.121 %</td>
<td>0.016 %</td>
<td>0.00001 %</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.042 %</td>
</tr>
</tbody>
</table>

Source: Percentages computed based on MEXT (2005b, 2012c) data.
Note: The “X” sign means that children with that type of disability cannot be enrolled in the corresponding schooling structure.

ry, they have increased slightly, showing that special schools are not disappearing. Table 1 shows the percentage of children in education (primary and junior high school levels) having a disability and their repartition into the different schooling structures according to their type of disability in 2005 and 2012. It appears that the different categories of disabilities follow very different trends.

There has been an increase in the prevalence of all types of disabilities in the total population, with the highest growth rates appearing in cases of mental disability and emotional disorders. The MEXT defines emotional disorders as a state in which the process of apparition of emotions is distorted and can be violent, where an ongoing impossibility to control one’s will results in a hindrance in school and social life. (MEXT 2002: Pt. 4, para. 7)
This definition illustrates the ambiguity of the criteria used to categorized “disabled children” in a school context. Indeed, it remains unclear whether this “state” is due to biological, psychological, or social causes, and so forth, leading to a variety of interpretations of individual situations by teachers, doctors, and families. To the extent that the main “symptom” of emotional disorders is the apparition of violent behaviors, it is however clear that the diagnosis of children as “emotionally disturbed” is part of a broader plan to prevent violence in schools, among other problems of more or less social nature that special support education has been designed to solve.

Moreover, even though enrollment in regular classes has thrived in all categories, its development remains extremely slow in some cases (e.g., visual impairment, physical disability, incapacitating illness). The general increase in mainstream schooling (i.e., through individual integration) appears mainly related to autism (previously included in the category of “mental disability” and thus not catered for in mainstream schools) and the above-mentioned new categories of “learning disorders” and “attention deficit.” Therefore, two trends can be distinguished: (i) a growing enrollment of children with autism into mainstream schools and (ii) the development, inside mainstream schools, of a support system for children with difficulties who were already attending regular education. The statistics give a less clear view of the evolution of special classes and special schools, but it is noticeable that the increase in these categories is linked to mental disability – an increase that can also be explained by the growing number of children labelled as such.

According to statistics, the integration policy reveals mixed results. Integration seems to have progressed, but this progress appears relatively slow, except in the case of mental disability. In this category, only “autism” clearly reveals a development in mainstream schooling (assuming that autism has a clear medical definition and is not part of the medicalization process as much as other “developmental disorders”). In fact, paradoxically, a situation that, at first glance, looks like the development of school integration (i.e., an increasing number of children individually integrated into regular classes) turns out to be caused by the massive entrance into a support system based on new medical labels of children whose needs could not be met by mainstream schools alone – a process that somehow looks like sidelining.

### 3.2 The reform in practice: between integration and isolation

Alongside numbers, it is necessary to investigate the practices of special support education, so as to examine whether facts do or do not confirm this assess-
ment. The answer appears variable, according to the types of disabilities observed. Presenting a condensed account of my own fieldwork of in-class observations, the following sections focus on the three cases of (i) developmental disorders, (ii) visual impairment, and (iii) multi-disabilities.

3.2.1 Developmental disorders or the medicalization of society

The only schooling possibility for “children with developmental disorders” as such is individual integration into regular classes. Enrollment into special classes or a special school can only be conducted under the label “mental disability.” The specificity of this disability is thus that it exists as a category only in the framework of mainstream school. Children attend regular classes and receive individual support with a special teacher for a few hours per week, as an alternative to some classes or at the end of their school day.

For a foreign observer, the presence of a “child with developmental disorder” in a regular Japanese classroom is strikingly visible – to the extent that they usually stand out as children with strong (yet ordinary in nature) disciplinary issues – in the middle of an otherwise quiet class. These children do not respect the rules of classroom savoir-vivre as codified in manuals of “classroom social skills” (kurasurūmu sōsharu sukiru), whereas other children generally comply more or less with this model (in spite of an increase in disciplinary problems). Moreover, they do not listen to the teacher, do not write down the lesson, play with various objects, swing on their chair, do not participate in the lesson when asked, talk when not asked, unexpectedly stand up, and so forth. For teachers, their presence in classrooms is thus related to disciplinary issues, in addition to issues of pedagogical adaptation.

Practices in response to these issues vary from one teacher to another and from one class to another. The teacher may choose to place the “disabled” child next to her desk and conduct her regular lesson regardless of the disabled child’s doings, regularly confiscating the objects the child plays with, and without engaging in interaction (verbal or other) with the child (i.e., the teacher adopts an attitude focused on discipline management). In other cases, the teacher tries to decipher the message the child is sending through her “disturbing” behavior and brings back discipline after negotiating with the child, for instance by saying “I know you want the class to be over, we still have a little

more work to do but, if you cooperate, we will be able to finish faster” (i.e., attitude centered on the child as an individual). Tsuruta (2007) has analyzed the difference between these two attitudes as the expression of the teacher’s “assumption of individual reality” concerning the child; that is, the teachers’ attitudes vary depending on whether they acknowledge that the child has skills (in expression, communication, etc.) and is a member of the learning community inside the classroom, regardless of the “disability” label. In practice, the issue of class management does not involve only the teacher and the disabled child; situations can vary according to the reactions of the rest of the class to the child’s behavior (laughter, group dynamics leading to “collective deviance,” passivity, disapprobation, etc.). Therefore, the teacher must manage a fragile balance between acknowledging everyone’s difficulties and managing the collective situation.

The case of children with developmental disorders thus epitomizes the ambiguity of the “disability” label. Indeed, in the above-mentioned situations, the “disabled child” does not appear as a child with difficulties radically different from other children. Even though she does have difficulties (to stay focused, to adapt her behavior to the classroom context, to understand the content of lessons or answer to questions, etc.), it is not clearly visible to an outsider’s eye whether the so-called “disability” is of a medical nature or lies in the continuity of disciplinary issues. This implies that, in a framework designed to foster the social integration of disabled children, the diagnosis of “disability” can also be used as a means of dealing with all sorts of problematic behaviors.

However, it is worth noting that, for teachers, the presence of a child with attention deficit or hyperactivity has been identified as a major stress factor (Takada et al. 2011). While this statement seems to echo the argument that resulted in disabled children’s exclusion from mainstream schools, today’s goal is, inversely, to enable those children to be included under favorable conditions. Therefore, policies promote teacher’s training and the development of a support structure in order to provide them with solutions to difficult situations. However, for the time being, teachers (who are facing many other problems, including in their classrooms, regarding school organizations, paperwork, relations with families, etc.) have often been shown to face a higher level of professional exhaustion than company workers. In fact, the prevalence of psychic troubles among them has tripled over the last ten years (MEXT 2012b).

Including a disabled child in a mainstream school is not only a classroom issue. Relationships with other children, especially during non-pedagogical activities, play a central role in the success of inclusive education. This is particularly true in Japan where, for the last few years, increased attention has been paid to the problem of bullying (ijime). In 1998, as Tada (1998) has shown, 58%
of children with developmental disorders had already experienced *ijime*, a rate reaching 76% in the case of children with autism. Moreover, *ijime* is also the first reason why children with developmental disorders drop out of school. Therefore, at the time of the reform, the MEXT emphasized the link between the development of special support education and the fight against *ijime* and school dropout:

> Because it happens that children with attention deficit, learning difficulties or high-level autism become targets of *ijime* or have maladjusted behaviors, and because this may be a sign of a risk dropping out of school, we hope that the development of special support education in the whole school will also result in preventing *ijime* and school dropout. (MEXT 2005a: Ch. 2)

Consequently, one of the special support education coordinators’ missions in schools has been to raise awareness among other teachers about the detection of potential *ijime* situations, in order to solve them. However, the results of this policy are not yet clearly known.

The situation of children with developmental disorders is thus anchored in Japanese schools’ current problems. The development of special support education does pursue goals that do not pertain only to disability. Designed to help solve various problems at schools (including *ijime*, school violence, disciplinary problems in the classroom, and school dropout), the system is based on a medical labelling that diagnoses behaviors of unclear nature as symptoms of “disability,” following the emergence of new categories of disability. These new categories account for most of the increase in the number of disabled children in education (and included in mainstream schools), in a process resulting as much from the medicalization of social issues as from the improvement of schooling conditions for disabled students.

### 3.2.2 Visual impairment or the permanence of isolation

The case of children with visual impairment appears radically different. Indeed, most of these children are enrolled in special schools. For children attending special classes, this structure exists only in primary schools and junior high schools (this is not specific to visual impairment: there are no special classes in high schools). Following junior high school, students have to choose between either regular high schools or special schools. Choosing a regular high school is uncommon, as proven by high school levels in special schools having twice as many students as junior high schools’ levels, which is a sign of a massive entrance of new students at this level. However, graduates from special
school suffer from a very low enrollment rate in higher education, meaning that enrollment in a special school has a strong impact on student’s future social and professional careers.

Special schools for the blind (mōgakkō), now referred to under the general name “special support schools” (tokubetsu shien gakkō), are currently facing a new phenomenon. There is generally only one school for the blind in each prefecture (except in Tokyo and Hokkaido), often located far from students’ homes. Yet, since the reform, all special schools are open to students with all kinds of difficulties. In practice, priority can now be given to schooling children in a school specialized in another type of disability but located closer to the student’s home (especially for children having other difficulties in addition to visual impairment) rather than enrollment in a special school for the blind. Because of teachers’ frequent job rotations, all special schools are supposed to have staff with skills and experience in visual disability. However, this contributes to reducing the headcounts of schools for the blind. Today, these schools hardly see classes with more than three students, and it is quite frequent to observe classes with only one student. As correspondence with mainstream school levels is carefully respected, class mergers are only selectively authorized (e.g., for music or sports classes). Since the student–teacher ratio was already high due to the legislation (i.e., no more than six students per teacher, three students per teacher in the case of multi-disabilities), today, schools for the blind have almost as many teachers as students.

Therefore, teaching conditions are completely different from mainstream schools, and classes are highly individualized, verging on private lessons. In that sense, the goal to provide special support adapted to every child’s need is fully reached. However, one can wonder about the effects of such an organization on the development of a child’s autonomy, which is the purpose of special education. The system, as it exists, tends to overprotect children, to the point that it is often called onshitsu sodachi (‘greenhouse education’); indeed, children thus are educated in an overindulgent world that does not prepare them for joining the far less benevolent “outside world.” Moreover, the child’s socialization is limited, as lessons aimed at developing communication skills, for example, seem to peculiarly lack an essential element, namely the presence of an audience and its reaction to the speech. Finally, special school students

7 Even if the teacher does not intend to do so, this private lesson configuration results in close proximity between teacher and students. In a class with only one student, teachers have no other person than the one child to dedicate their energy to, and it is in practice impossible to maintain the same distance as in a regular class.
have only few occasions to carry out activities outside the school, in spite of teachers’ efforts to prepare their entrance into adult society.

In special schools, children with no mental disability follow the regular curriculum. They use the official textbooks, transcribed into Braille or featuring enlarged characters. High school graduates are thus supposed to have an academic level equivalent to their peers from mainstream schools, enabling them to pass entrance exams to universities. However, in practice, they represent two different cases. The school for the blind annexed to Tsukuba University (a national school), for instance, appears as an elite school that educates students from all over the country. Students enter its junior high school and high school levels after selective examination and receive a very demanding education that prepares them for entrance exams to prestigious universities (especially in the field of sciences). As for prefectural schools for the blind, in contrast, one-third of their students on average have associated mental disability or learning difficulties. Education here is oriented, for the most autonomous children, toward entrance to local universities or traditional professional training for the blind (e.g., massage, acupuncture, moxa cautery); other students mostly get to work in special work centers or live in special institutions.

Therefore, in the case of visual impairment, inclusion seems limited (be it school inclusion or social inclusion). Students with visual disabilities receive extremely individualized support, but their social participation does not show significant progress, as the current system keeps them in a marginal position. Moreover, there seems to be a gap between the very few who can enter a path leading to social integration and the strengthened isolation of those who take the “special path.”

3.2.3 Multi-disabilities, from hospitals to schools

By opening special schools to all types of disabilities, the reform has had a very positive impact on the education of children with multi-disabilities. Now they can be catered for in special schools that have staff with the appropriate experience and skills, rather than in education units inside hospitals (still in use for the most severely handicapped children). Today, all special schools have students with multi-disabilities, in a proportion that can reach 30% or 40% in schools for the blind and schools for children with physical disabilities (meaning that those former category-based school names do not apply to the current reality of schools, now all known under the general name “special support schools,” as explained above).
Inside special schools, there is an official separation between children with a “single” disability (tan’itsu) and children with “multi”-disabilities (chōfuku) and they are hence enrolled into different classes. For example, if there are two third-graders, one with a single disability, the other with multi-disabilities, two separate classes are created in which each of them is the only student. The reason explaining this separation is practical and pedagogical: “Those children are in different situations, they have different needs, be it in terms of academic content or teaching methods; the best way to meet those needs is thus to place them in different structures.”8 The difficulty of the Japanese school system to develop diversity within a class is evident, even inside special schools.

In the case of children with the most severe disabilities, attending education units inside medical facilities (usually located in remote neighborhoods hosting various types of medical institutions and care centers), the grade system is abolished (i.e., only three levels exist: primary, junior high, and high school), so that children can take part in collective activities, according to their abilities. The education they receive in those institutions has nothing in common with “schooling” in the usual sense. Instead, it is oriented toward physical reeducation (i.e., through work aimed at maximizing the use of their functional muscles), activities favoring communication (i.e., children who do not have oral communication abilities), and giving them pleasure (i.e., through music, plastic arts, etc.). However, it is carried out by teachers with MEXT’s licenses and MEXT teachers’ statuses, who have received specialized training.

Those units conduct highly individualized teaching, because every child there is in a unique situation. Educative work requires an acute understanding of every child’s difficulties and capacities as well as sustained pedagogical creativity. Nevertheless, all of this is carried out in a context of isolation. Children living there go back to their families only when the latter ask for it; and they have no contact with the outside world, except when the outside world comes to them. On turning 18, they are simply moved to the adults’ dormitory, located in the same building. However, it would be a mistake to believe that such a situation is unique to Japan.

The case of multi-disabilities highlights the fact that, in the Japanese special education system, increased pedagogical individualization remains corollary to increased separation.

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8 This is, roughly summarized, the answer of all special teachers asked on the subject during the interviews conducted for this research.
3.3 Separate paths based on early selection

The three cases above reveal the main features of disabled people’s inclusion in education in Japan. There exist separate paths based on an early selection of those who will join (or not) mainstream society. Moreover, whereas special support education has been developed with the idea of supporting individualization in schools, facts show that most of the individual work is carried out outside of the regular classroom.

However, this situation is not perceived in the same manner by all disability-related activist groups. Noticeably, even though most associations champion school inclusion as a triggering factor for a more active participation to society, the deaf community appears much less supportive of inclusive education. Indeed, the development of special support education tends to unravel the community links that used to be created by children in schools for the deaf and contributed to the transmission and the dynamism of deaf culture, which is claiming recognition as a minority culture in Japan, especially through the D-Pro movement, which defines itself in the following terms:

We believe that the deaf are a linguistic minority using Japanese Sign Language, a language that is different from Japanese. We seek to realize a society that respects deaf culture and JSL and treats them with an equal status as Japanese language and culture, a society in which deaf people can live as deaf in a deaf-like manner.

This echoes the diversity of situations encompassed by the word “disability” and the difficulty of implementing a policy adapted to all individuals bearing this label.

4 Conclusion

The development of special support education appears as a way to solve, through the same means, different problems of the Japanese school system. Therefore, the assessment to be drawn in the case of children with disabilities is mixed. Some achievements are visible, such as a better schooling for children with multi-disabilities and a better inclusion in mainstream schools for children with autism. Other aspects, however, show no real evolution, as evidenced by the massive enrollment into special schools by children with physical or senso-

9 For a detailed account of deaf activism in Japan, see Nakamura (2006).
rrial impairments, and with meager prospects of future participation in mainstream society. This evolution can be interpreted as an individualization of pedagogy that remains rooted in social control processes inside schools. Said differently, even though structures are created in order to meet everyone’s needs, the approach remains based on a willingness to externalize difficulties rather than the promised radical transformation of schools toward the recognition of general diversity. The emergence of new categories of disabilities, sometimes based on ambiguous definitions, and the consequent broad labelling of children as “disabled,” contributes to mixing the issue of disability with that of the medicalization of society. Since the Japanese government is putting more and more effort into the early diagnosis of disabilities, especially developmental disorders, this trend seems likely to continue in future years. As for children with other types of disabilities coming very slowly out of special schools, it can be foreseen that the path toward their full integration into mainstream schools and into Japanese society at large will still be very long. However, as Japan ratified the UN Convention on the Rights of Persons with Disabilities in 2014, legislations concerning disabled people are being progressively transformed and, with more and more attention being paid to both the actual situations of persons with disabilities and to the voices of disabled people’s associations, changes might be triggered by this combination of international pressure and domestic forces.

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