



Comparative Analysis of Executive Laws Related to the Rehabilitation Support of Exceptional Children in Iran and the International Organization UNICEF

Abdolrahim Tajeddin¹, Mansoureh Shahriari Ahmadi^{2*}, Gholamali Afrooz³, Hassan Pasha Sharifi³

¹ Ph.D. Student, Department of Psychology, Central Tehran Branch, Islamic Azad University, Tehran, Iran

² Assistant Professor, Department of Psychology, Central Tehran Branch, Islamic Azad University, Tehran, Iran

³ Professor, Department of Psychology, Faculty of Psychology and Educational Sciences, University of Tehran, Tehran, Iran

⁴ Associate Professor, Department of Psychology, Central Tehran Branch, Islamic Azad University, Tehran, Iran

* Corresponding author email address: mansure_shahriari@yahoo.com

Article Info

ABSTRACT

Article type:

Original Research

How to cite this article:

Tajeddin, A., Shahriari Ahmadi, M., Afrooz, G., & Sharifi, H. P. (2024). Comparative Analysis of Executive Laws Related to the Rehabilitation Support of Exceptional Children in Iran and the International Organization UNICEF. *Health Nexus*, 2(3), 108-114. <https://doi.org/10.61838/kman.hn.2.3.13>



© 2024 the authors. Published by KMAN Publication Inc. (KMANPUB), Ontario, Canada. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

Respect for the rights of individuals with disabilities, particularly exceptional children, is a sign of the cultural richness and advancement of a society. This study aims to compare the executive laws related to the rehabilitation support of exceptional children in Iran with those of the international organization UNICEF. The research method is comparative-qualitative. The statistical population includes all documents and reports related to rehabilitation support in Iran from 2011 to 2020 and UNICEF reports from developing countries regarding the indicators of rehabilitation support for exceptional children and adolescents. The research sample consists of annual documents and reports available in the Welfare Organization from 2011 to 2020, selected through accessible and purposeful sampling. Internationally, UNICEF's annual reports on the rehabilitation support of exceptional children and adolescents from 2011 to 2020 were examined. Some quantitative data were analyzed using descriptive methods, and content analysis was performed for the comparison of documents. According to the findings, the number of exceptional children and adolescents covered by welfare services has been increasing in recent years. Additionally, the phi correlation coefficient between the views of families of exceptional children and adolescents and welfare officials regarding the quantity and quality of rehabilitation services was not significant, indicating no correlation or agreement. The results of this study showed that according to UNICEF, 5 to 15 percent of exceptional children and adolescents in developing countries have access to rehabilitation aids, while in Iran, 26 to 50 percent of these children and adolescents have access to such aids. Therefore, it can be concluded that rehabilitation aid services in Iran are in a better state compared to UNICEF reports from developing countries.

Keywords: Exceptional children and adolescents, Disability rights support, Rehabilitation support

1. Introduction

All children and adolescents have the right to have their basic needs met, which include the necessities for survival and security, as well as rights that enable them to reach their full physical and mental potential and function as members of society. According to World Health Organization statistics, more than 1 billion people worldwide (15 percent) live with some form of disability today, with 2 to 4 percent experiencing severe functional difficulties. The World Health Organization has called on governments to increase efforts to provide essential services and invest in specialized programs for people with disabilities (1-6).

The primary goal of government planning is the physical, psychological, and social support of people through the provision of relevant facilities. Case and Waterman (2003) define psychosocial support as the way in which one commits to existential challenges. From UNICEF's perspective, psychosocial support refers to any local or external assistance aimed at protecting or enhancing psychosocial well-being and/or preventing or treating mental disorders (1, 7).

In this regard, a strong, efficient, and comprehensive social security system is needed in every country, as economic development and the realization of social justice depend on a comprehensive and desirable social welfare and security system. On February 20, 1994, the law allowing the accession of the Islamic Republic of Iran to the United Nations Convention on the Rights of the Child (1989) was approved by the Islamic Consultative Assembly and subsequently ratified by the Guardian Council on March 1, 1994 (1).

The Convention on the Rights of Persons with Disabilities is an international human rights treaty of the United Nations aimed at protecting the rights and dignity of persons with disabilities. This convention serves as a key instrument in the global disability rights movement, transitioning from viewing persons with disabilities as subjects of medical treatment and social support to recognizing them as full and equal members of society with human rights. This convention was the first human rights treaty of the United Nations in the 21st century. The text was adopted by the United Nations General Assembly on December 13, 2006, and was signed on March 30, 2007.

After ratification, it entered into force on May 3, 2008. As of July 2020, it has 163 signatories and 182 parties, including 181 countries and the European Union (which ratified it on December 23, 2010). The convention is monitored by the Committee on the Rights of Persons with Disabilities (8).

On September 27, 2008, in accordance with Article 123 of the Constitution of the Islamic Republic of Iran, the law approving the Convention on the Rights of Persons with Disabilities, which had been submitted to the Islamic Consultative Assembly as a bill, was ratified in a public session on December 3, 2008, and confirmed by the Guardian Council. Finally, on April 11, 2018, the Comprehensive Law on the Protection of Disabled Children was ratified by the Islamic Consultative Assembly (8).

According to Article 2 of the Structure of the Comprehensive Social Welfare and Security System Law (2004), the social security system includes three domains: the insurance domain, the support and rehabilitation domain, and the relief domain. The executive responsibilities of each domain are assigned to the relevant agencies and institutions. Exceptional children and adolescents, due to their young age and disabilities, require special legal support. It must be acknowledged that both international and domestic legislators have endeavored to recognize the rights of children with special needs by enacting appropriate laws and considering various enforcement guarantees. However, regarding international laws, it is argued that they lack strong and effective enforcement guarantees. This factor prevents the recognition of the rights of these children in some countries as it should be (1, 3). Therefore, it would be better if international legislative bodies, while clarifying the legitimate rights of this group, also provide enforcement guarantees so that countries do not incur higher costs in case of non-compliance with legal obligations. Regarding domestic laws, the legislator has attempted to implement the defined rights for disabled children by enacting the Comprehensive Law on the Protection of Persons with Disabilities, acceding to the International Convention on the Rights of Persons with Disabilities, and joining the Convention on the Rights of the Child. However, it is observed that the legislator has not been able to protect some of the rights of disabled children under legal support. Therefore, it is expected that the domestic legislator pays more attention and makes more efforts in enacting

comprehensive and effective laws concerning the rights of children and adolescents with special needs (Baraabadi, 2018). Among the issues that deserve examination and attention are the services of rehabilitation centers. It is questionable to what extent the laws in these areas have been enacted and implemented.

According to the Rehabilitation Centers Establishment Regulations (2005), rehabilitation is defined as the process of restoring and maximizing an individual's abilities to a state of maximum independence. According to the definitions in the Rehabilitation Centers Establishment Regulations, comprehensive rehabilitation centers are medical centers where comprehensive rehabilitation services (including medical, vocational, and social services) are provided to persons with disabilities by a rehabilitation team. Typically, severely mentally disabled children are cared for in rehabilitation centers on a full-time basis (1, 8). Additionally, some disabled children receive livelihood support. According to the regulations and their definitions, rehabilitation services include a wide range of services for disabled individuals, which not only help to improve the quality of life of these individuals but also integrate them into society and, consequently, grant them rights. This study aims to compare and examine the executive laws related to the rehabilitation support of exceptional children and adolescents in Iran and UNICEF.

2. Methods and Materials

2.1. Study Design and Participants

The present study is fundamental in its theoretical purpose and historical-descriptive in nature and method, as the data have been collected based on legal documents and records available in relevant organizations in Iran and around the world (Delavar, 2016). Statistically and analytically, the study employs a comparative-qualitative approach, as the data from two populations were compared using content analysis in several similar domains (Madanidar Arani, 2016).

The statistical population of this study in Iran includes all documents and reports related to rehabilitation support from 2011 to 2020 in the Islamic Consultative Assembly, Judiciary, Ministry of Education, Ministry of Cooperatives, Labor and Social Welfare, Welfare Organization, Imam

Khomeini Relief Committee, and non-governmental organizations. Internationally, it includes UNICEF reports from developing countries on psychosocial support indicators in the rehabilitation dimension for disabled children.

The sample of this study includes annual reports available in the Welfare Organization from 2011 to 2020, selected through accessible and purposeful sampling. Internationally, UNICEF's annual reports on psychosocial support laws (in the rehabilitation dimension) for exceptional children from 2011 to 2020 were reviewed.

In this study, considering the documentary nature of the research, documents related to international and Iranian rehabilitation support were collected. Based on the requirements of the comparative method and content analysis, a checklist of rehabilitation aid services was initially prepared as a tool, based on the researcher's managerial experience in this field.

Quantitatively, a checklist of the implementation of international laws and resolutions in Iran was specified as yes or no by welfare officials and families with disabled and exceptional children over the years 2011 to 2020 (the 2020 annual report has not yet been published). It was determined whether exceptional children and adolescents covered by welfare received rehabilitation aid services during the years 2011 to 2020.

Part of the data collection method was documentary and library-based, and another part of the data was collected using a researcher-made checklist. The checklist was completed by officials working in centers for exceptional children and adolescents. These documented reports of law implementation were compared in both quantitative and qualitative dimensions with international standards.

3. Findings and Results

According to the National Welfare Organization Statistical Yearbook (2019), the severity of disability refers to the "extent and scope of impairment" in an individual's functioning and social participation, determined by the combined impact of the extent and scope of impairment in "physiological function and anatomical structure of the body" and "limitations in capacity and ability to perform daily living activities or social participation." The severity levels include mild, moderate, severe, and very severe.

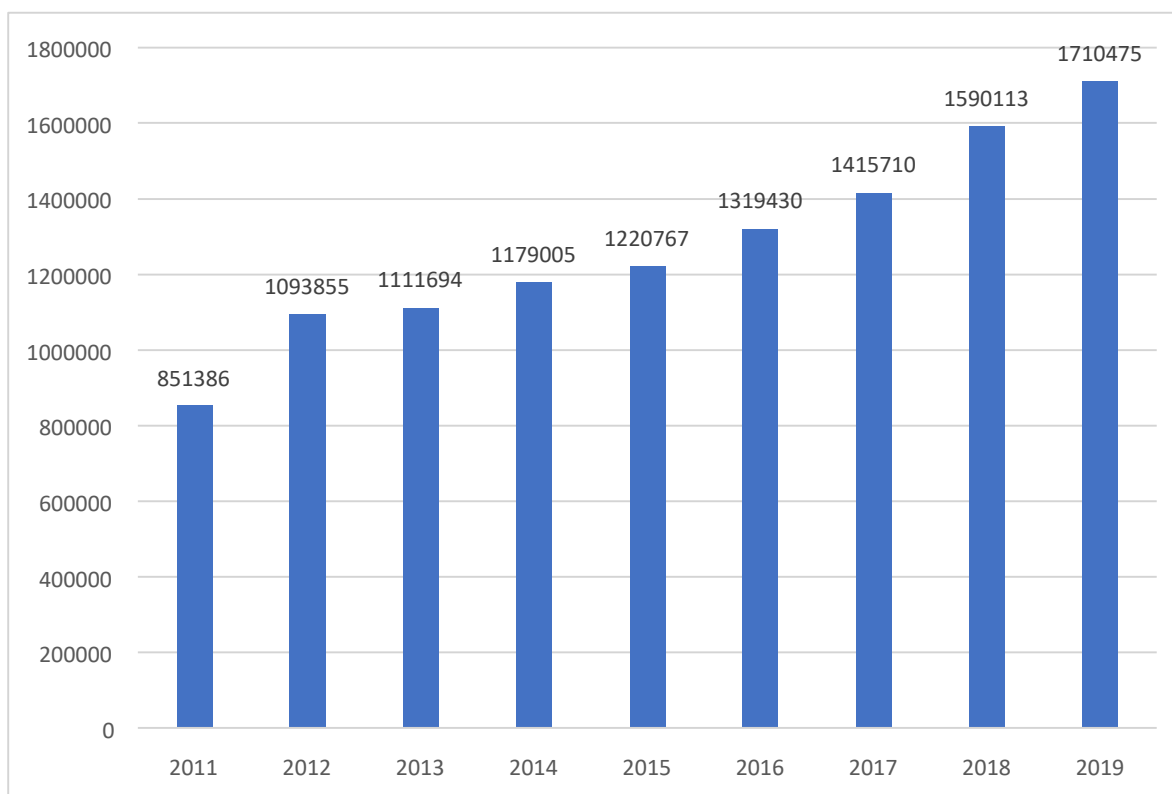
Table 1

Number of Disabled Individuals Covered by Welfare Organization from 2011 to 2019 by Disability Severity Nationwide

Year	Total Number	Mild Frequency	Mild Percentage	Moderate Frequency	Moderate Percentage	Severe Frequency	Severe Percentage	Very Severe Frequency	Very Severe Percentage	Unspecified Frequency	Unspecified Percentage
2011	Information not available	-	-	-	-	-	-	-	-	-	-
2012	1,093,855	-	-	-	-	-	-	-	-	-	-
2013	1,111,694	83,169	12.03%	314,503	26.28%	375,801	33.82%	230,167	20.37%	83,254	7.48%
2014	1,179,005	116,929	12.14%	333,522	26.38%	406,808	34.53%	223,634	19.85%	82,844	7.07%
2015	1,220,767	146,241	12.95%	331,228	27.16%	434,342	35.50%	220,867	18.09%	82,789	6.28%
2016	1,319,430	178,347	13.69%	360,997	27.39%	474,891	35.99%	225,897	17.14%	82,898	21.71%
2017	1,415,710	206,337	14.91%	399,747	28.21%	517,306	36.53%	214,784	15.37%	82,898	8.63%
2018	1,590,113	262,869	16.58%	462,116	29.09%	578,478	36.38%	216,229	13.93%	82,898	4.01%
2019	1,710,475	308,495	18.08%	501,404	29.41%	620,261	36.36%	208,201	12.82%	62,090	3.60%

Figure 1

Number of Disabled Individuals Covered by the National Welfare Organization from 2011 to 2019



According to the National Welfare Organization Statistical Yearbook (2019), the severity of disability refers to the "extent and scope of impairment" in an individual's functioning and social participation, determined by the combined impact of the extent and scope of impairment in "physiological function and anatomical structure of the body" and "limitations in capacity and ability to perform

daily living activities or social participation." The severity levels include mild, moderate, severe, and very severe.

In the reviewed yearbooks, the number of disabled individuals by age was not provided. Therefore, based on the existing files and documents in the organization, the number of exceptional children and adolescents was estimated as follows: in 2021, 200,000 disabled individuals under the age

of 7 and approximately 500,000 disabled individuals aged 7 to 20 were under the coverage of the Welfare Organization.

In the checklist completed by families with exceptional children and adolescents under the coverage of the Welfare Organization, the following results were obtained: 40 exceptional girls and 60 exceptional boys participated in this study and responded to the researcher-made questionnaire (completed by the families). The mean age of the exceptional children and adolescents in the study was 16.60 years with a standard deviation of 3.21. Among these, 44 percent had physical-motor disabilities, 10 percent had multiple disabilities, 16 percent had intellectual disabilities, 13 percent had visual disabilities, 8 percent had psychological disabilities, and 9 percent had hearing disabilities.

The educational level of those who responded to the questionnaires was as follows: 25 percent were illiterate, 61 percent had below high school education, and 14 percent had a high school diploma. Among the exceptional children and adolescents in this study, 28 percent were only children, 40 percent had one sibling, 25 percent had two siblings, 4 percent had three siblings, and 3 percent had four siblings. Fifty-two percent of these exceptional children and adolescents were the first child in their family, 31 percent were the second child, 15 percent were the third child, and 2 percent were the fourth child.

In this study, 101 welfare officials with access to the files participated, including 84 women and 17 men. The mean work experience of these officials was 19.49 years with a standard deviation of 7.42 years.

Table 2

Report on the Percentage of Rehabilitation Aid Services Received or Not Received by Families of Disabled Individuals and Welfare Officials from 2011 to 2020

Year	Official (Yes)	Official (No)	Phi Coefficient	Significance Level
2011	21.8%	78.2%	0.051	0.610
2012	22.8%	77.2%	0.021	0.831
2013	22.8%	77.2%	0.021	0.831
2014	22.8%	77.2%	0.086	0.390
2015	24.8%	75.2%	0.047	0.640
2016	25.7%	74.3%	0.038	0.700
2017	26.7%	73.3%	0.010	0.919
2018	26.7%	73.3%	0.030	0.761
2019	26.7%	73.3%	0.030	0.761
2020	26.7%	73.3%	0.030	0.761

As shown in Table 2, in 2020, 90 percent of families reported not receiving services from rehabilitation centers, while 73.3 percent of welfare officials stated that the disabled individuals did not benefit from rehabilitation aid services. The phi coefficient was used to examine the correlation between the views of families and welfare officials, which was found to be very small, around 0.030, in 2020.

Another important point is that the views of families and officials remained almost constant from 2011 to 2020, with only slight changes in the status of receiving rehabilitation aid services. According to officials, the percentage of not receiving rehabilitation aid services decreased from 78 percent in 2011 to 73 percent in 2020, showing only a 5 percent improvement.

4. Discussion and Conclusion

The results of this study showed that providing rehabilitation aid services to exceptional children and adolescents in Iran is in a better state compared to UNICEF statistics. According to the checklist data obtained from families with exceptional children and adolescents and welfare officials, the results showed that in 2020, according to families, 10 percent and according to officials, 26 percent of disabled individuals used rehabilitation aid services.

To explain the difference in views between welfare officials and families of disabled children, it can be said that when completing the questions and forms, officials filled out the forms based on the documents, which provided a more objective and accurate perspective compared to the families

who completed the forms subjectively. Moreover, due to unmet needs and existing shortcomings, families often reflect their dissatisfaction in their responses. Nevertheless, the officials' responses, based on records and documentation, are more reliable.

Additionally, according to UNICEF, 5 to 15 percent of disabled and exceptional children in developing countries have access to rehabilitation aids, while in Iran, according to officials, 50 percent of these children have access to rehabilitation aids (1). Although the figures presented by officials and based on the documents and records of disabled individuals in the Welfare Organization differ significantly (50 percent vs. 26 percent), relying on the statistics provided by welfare officials, which are based on existing evidence and documents (26 percent) (8), it can be concluded that Iran holds a better position in providing rehabilitation aid services to disabled individuals compared to developing countries.

Based on the results of this study, Iran holds a better position than UNICEF statistics in developing countries. One reason for this is that despite economic challenges in the country, a significant portion of the costs for the needy is covered by philanthropy, charity, donations, alms, and vows, known as public participation with supportive institutions in the country. In 2019, the total public participation with the Welfare Organization amounted to 10,512,071,593,518 Rials, of which 2,759,614,968,724 Rials were in cash, 6,256,881,021,088 Rials in non-cash, and 1,495,575,603,706 Rials in services (National Welfare Organization Statistical Yearbook, 2019). A substantial part of this aid is allocated to exceptional children and adolescents, including the provision of rehabilitation aids.

Some limitations for not providing rehabilitation aid services for the disabled include high costs, insufficient government funds, cultural challenges, lack of adequate training, inadequate adaptation of places and passages for the presence and participation of the disabled, lack of sufficient enforcement laws, poverty, and family livelihood problems (1, 8). Some limitations and challenges in this study included: the absence of age-segregated statistics in the Welfare Organization yearbooks, limiting access to the number of exceptional children and adolescents under the welfare support, although approximate statistics were obtained based on reports and opinions of officials. The lack

of coordination among supportive institutions in providing services, with services being provided in a fragmented manner and institutions not having complete and accurate information about the services of other institutions, making data collection by the researcher difficult. The absence of precise executive policies in providing rehabilitation aid services to disabled and exceptional children and the dominance of executive preferences over a planned program, resulting in varied opinions among officials. The establishment of different service provision systems in supportive institutions for the disabled, leading to a lack of precise information for the audience and causing confusion for the researcher. Given the researcher's 30-year experience and expertise related to exceptional and disabled children, and considering the conducted research, which was very precise due to effective communication with officials and supportive institutions, especially the Welfare Organization, the following recommendations are provided:

Prevent the dispersion of credits allocated to exceptional and disabled children and their families. The Budget and Planning Organization should allocate specific credits for specific programs, such as rehabilitation aids, to the Welfare Organization as the main authority for this group. International experiences have shown that establishing a Ministry of Family can unify scattered organizations, goals, programs, credits, human resources, etc., under a single command and prevent the leakage and wastage of credits, facilities, human resources, etc. Obviously, monitoring in this mechanism would be more effective, and services would be provided to individuals and families with greater quantity and quality. The establishment of a Research and Study Office in the Welfare Organization is essential for accurately evaluating services and activities. Such an office would monitor activities and continually improve the quality of services. Additionally, this office could provide more accurate and focused information to researchers and students. It is also recommended that other social welfare indicators be scientifically investigated, and by comparing them with global standards, the country's position is determined, and a better service delivery model is designed for supportive institutions.

Authors' Contributions

A.T., M.S.A., G.A., and H.P.S. collaboratively designed and conducted the comparative analysis of executive laws related to the rehabilitation support of exceptional children in Iran and those by UNICEF. A.T. and M.S.A. were primarily responsible for collecting and analyzing the documents and reports from Iran, while G.A. and H.P.S. focused on gathering and interpreting the relevant international data, particularly from UNICEF. M.S.A. and G.A. carried out the content analysis, comparing the different legal frameworks and support systems. A.T. synthesized the findings and contributed to drafting the manuscript, while H.P.S. provided critical revisions and ensured the manuscript's alignment with international standards. All authors reviewed and approved the final manuscript, contributing their expertise to ensure the accuracy and depth of the comparative analysis presented in the study.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

Acknowledgments

We would like to express our gratitude to all individuals helped us to do the project.

Declaration of Interest

The authors report no conflict of interest.

Funding

According to the authors, this article has no financial support.

Ethical Considerations

Not applicable.

References

1. Iravani M, Riahi L, Abdi K, Tabibi SJ. A Comparative Study of the Rehabilitation Services Systems for People With Disabilities. *USWR*. 2021;21(4):544-63. [DOI]
2. Abdolmohammadi K, Malek A, Ghadiri F, Ebrahimzadeh K. Comparing the Dimensions of Executive Functions in Monolingual and Bilingual Children. *Practice in Clinical Psychology*. 2022;10(3):185-92. [DOI]
3. Boroon M, Mokhtari S, Nojomi M, Hadi F, Soraya S, Shalbfan M. Knowledge, Attitude, and Practice Regarding Child Maltreatment Amongst Iranian Medical Students Through Internship Course: An 18-Month Longitudinal Study. *BMC Primary Care*. 2023;24(1). [PMCID: 36717772] [DOI]
4. Foley-Nicpon M, Teriba A. Policy Considerations for Twice-Exceptional Students. *Gifted Child Today*. 2022;45(4):212-9. [DOI]
5. Hartono BT. Child Safeguarding Policy in Lembaga Penyelenggara Kesejahteraan Sosial (Lpks). *Devote Jurnal Pengabdian Masyarakat Global*. 2024;3(1):21-34. [DOI]
6. Uchitel J, Alden ER, Bhutta ZA, Goldhagen J, Narayan AP, Raman S, et al. The Rights of Children for Optimal Development and Nurturing Care. *Pediatrics*. 2019;144(6). [PMID: 31771960] [DOI]
7. Bahmaei J, Ravangard R, Bahrami MA, Asadollahi A, Bastani P. Policy Requirements in Promoting Older People Health Care in Iran: A Qualitative Study. *Journal of Education and Health Promotion*. 2023;12(1):159. [PMID: 37404909] [PMCID: PMC10317271] [DOI]
8. Farahbod M, Asl IM, Tabibi SJ, Kamali M. Comparing the Rehabilitation Structures in the Health Systems of Iran, Germany, Japan, Canada, Turkey, and South Africa. *Journal of Rehabilitation*. 2023;24(1):96-113. [DOI]