
Special Education for Tahan-Tahanan

Service to the Nation through Education

Michael, a university student majoring in Special Education (SPED), kept a watchful eye over Bella as she worked dutifully on the educational module he brought for her. He observed the 10-year-old's quick reading pace and the fluency she showed as she responded to the questions that measured her comprehension. He saw her eyes light up with joy when she realized that he prepared a module that kept her at pace with her grade level work. She had been vocal about missing school and articulated her fears of not being able to cope with the academic demands of school when she finished her treatment.

Like Bella, several of the children in Tahan-Tahanan, a hospital-based halfway house in Quezon City, Philippines had missed out on academic work while undergoing treatment. The six-cycle course of chemotherapy adhered to by medical staff in the Philippines lasted approximately 36 weeks. This time duration was marked by side effects such as fatigue, loss of memory, appetite changes, bruising or bleeding, diarrhea or constipation, susceptibility to infection, nausea and vomiting, and mouth sores. Pediatric patients typically rested and recuperated in between treatments. As such, most volunteers had focused their time on counseling the pediatric patients and their families. Literacy-based activities were not prioritized because none of these activities had been designed to address the needs of a child going through chemotherapy.

Michael, who had volunteered his field experience hours to serve in Tahan-Tahanan, learned that just a year ago, Bella was a top achiever in her class. But she was now sick, her schooling derailed by cancer treatment. As a SPED major, Michael's role was to deliver education that responded to the learner's needs. His knowledge of diagnostic-prescriptive teaching and skill in psycho-educational assessments pointed him toward creating a curriculum that reflected the hospital-based context in grade level competencies. Due to time constraints he urged his fellow SPED majors to join him in creating a series of modules for Tahan-Tahanan volunteers to use. Using Bella's case as inspiration, he and his classmates discussed a design for literacy-based modules.

Dreams Put on Hold

Like most of her friends, Bella comes from a low-income family. Her father ekes out a minimum wage living as a factory-worker. Her mother cleans other people's homes, does their wash by hand, and takes on whatever other odd jobs that she chances upon, always for less-than-minimum wage rates. This is the only way she is able to augment the meager budget for their household of nine: Bella, her parents, her three siblings ages 3, 6, and 9, their maternal grandparents, and 19-year old aunt. From a very tender age, Bella almost instinctively understood her obligations as a dutiful daughter, the big sister, a loving granddaughter, and niece.

It was clear that her family banked on her academic success as the key to a better life for herself and the whole household. Having this responsibility sitting squarely upon her shoulders, she made a pact with her friends — they would be the first ones in their respective families to earn university degrees. With their longstanding agreement to help one another get into a university, Bella and her circle of closest friends invariably vied for the top honors in their Grade 5 class.

During summer break, Bella was plagued with frequent nosebleeds, headaches, and infections. At first, the adults around her attributed these to the April heat and kept her indoors. When the symptoms persisted, medical staff at the town health center advised her parents to take Bella to a government hospital in Metro Manila for further testing. The diagnosis: acute lymphoblastic leukemia, a cancer that accounts for three out of four cases of childhood leukemia.¹

Leukemia is the tenth leading cause of child mortality in the Philippines.² Patients can expect to go through routine diagnostic procedures such as blood and urine tests, X-ray examinations, magnetic resonance imaging (MRI), ultrasound and computed tomography (CT) scans, electrographs, angiograms and endoscopies, and therapeutic treatment. The treatment plan for children entails medication and non-surgical procedures. These can be grouped into four broad classes: physical examination (propaedeutic procedures); tests, x-rays and scans (diagnostic procedures); treatments to repair the effects of injury, disease or malfunctions, including medicines, physical, and radiation therapies (therapeutic procedures); and allied health treatments to improve, maintain, or restore physical function (rehabilitative procedures).

To access treatment, Bella had to stay in Metro Manila, where she had neither friends nor family with whom she could stay. Fortunately, her health service worker sought help from Maggie Garcia-Abilgos, the house manager of Tahan-Tahanan.

A Haven Away from Home

The need for a halfway home for children like Bella stems from the fact that most Philippine government hospitals were located in the National Capital Region (NCR).ⁱ The Philippine Heart Center, the National Kidney Institute, the Philippine Children's Hospital, and East Avenue Medical Center, to name a few, were all located in Quezon City, a northern area of the NCR. Those who needed medical services from these hospitals and lived outside of the city often sought temporary shelter with relatives who lived within the metro area.

Dr. Ma. Victoria M. Abesamis, a pediatric oncologist and the hospital's chief of professional medical services, observed that mortality due to infection was high in her pediatric cancer patients living in this situation, thus, the idea of Tahan-Tahanan was born.³ Abesamis had served as Tahan-Tahanan's medical director since its inception in 2011. The halfway house was limited to 50 beds, prioritizing patients with non-communicable diseases, ages 0 to 20, from indigent families with homes outside the NCR. The facility had the capacity to house a maximum of 25 pediatric and their mothers. For most indigent families in the Philippines the provision of basic needs (i.e., food, shelter, and clothing) is a daily struggle. The implications of Bella requiring chemotherapy outside her home placed a strain on her family's already tight budget. Tahan-Tahanan defrayed the cost of board and lodging through a partnership with the Philippines Charity Sweepstakes Office.

"Tahan" is a Filipino root word meaning "to comfort" and describes an action that pacifies or coaxes an infant or small child to stop crying. "Tahanan" means "home," a place where we find comfort. True to these words, Tahan-Tahanan was created to provide comfort to patients undergoing medical treatment. The homestay covered board, lodging, food, medicine, and medical, therapeutic, and health services.

"We aim to provide and coordinate services that tie up all aspects of the healing process,"⁴ Abesamis said.

Continuation of Schooling

As a member state of the United Nations, the Philippines subscribed to the move toward Education for All (EFA) by 2015. Central to these efforts to improve the delivery of education to all who needed basic education in the country were the Kindergarten Act of 2012⁵ and Enhanced Basic Education Act of 2013⁶ and their implementing rules and regulations (IRR).

The Department of Education followed the UNESCO definition of inclusive education as a key strategy for achieving EFA.⁷ Section 5⁸ and Section 8⁹ of the IRR provided for the allotment of funds, and when deemed necessary, the creation of programs for the gifted and talented, learners with disabilities, Muslim learners through Madrasah education, indigenous peoples, and learners under difficult circumstances. The clientele of Tahan-Tahanan could easily fall under the second and fifth groups, and be assigned to either a SPED teacher or a mobile teacher from the Department of Education's Alternative Learning System.¹⁰

In an effort to provide special education to the children housed in Tahan-Tahanan, practicum students were given the option to serve in this setting. The first three batches had members who were working full time and were available on different days, which made collaboration with one another

ⁱ The Philippines is an archipelago composed of 7,107 islands. It has three main island groups, Luzon, Visayas, and Mindanao. The national capital region is located in Luzon.

challenging. In the first semester of the academic year 2014-2015, a group of eight practicum students found that they shared a common schedule — Monday to Friday, 3 p.m. to 7 p.m.¹¹

The common schedule allowed the batch members to collaborate with one another. They were the first group of volunteers from academia that focused on creating a classroom-like atmosphere and routine for the students.¹² Aside from converting the common area into a school, they facilitated the learning of literacy and numerical skills by dividing the children into three groups they named preschoolers, school-age, and teenagers. The group also organized field trips to Repertory Philippines' Pinocchio for the school-age children and teenagers, and to Aylon Zoo for the preschoolers. Their team established partnerships with organizations and looked for donors to augment field trip costs.¹³

Based on observations of faculty advisers,¹⁴ volunteers capable of designing school-related material and training people to implement educational programs were not always available. The student-teachers, like Michael, were present during the regular University terms — January to April and August to November. On the weekdays that the student-teachers were not present, the children of Tahan-Tahanan did not have a school program to follow.

Past student-teachers¹⁵ stated that Tahan-Tahanan had a good collection of books and educational materials donated for the use of the children. Not all volunteers were capable of designing lessons around these resources, thus, there had been a need to create modules that extended beyond pretend play and moved into building literacy and numerical skills at various age groups. The envisioned educational modules specifically would cater to the learning needs of a typical Tahan-Tahanan client — a balance of rest, counseling, recreation, and academic work revolving around their hospital-based context.

Conclusion

As Michael observed Bella, he thought about the dreams she put on hold for the predicted six-cycle cancer treatment. He promised to look into long-term options for her. For the time being, he committed to designing an educational plan for the next eight weeks of his service with an eye to stabilizing her literacy and numerical skills to grade level.

As Bella's case is one of many, he looked into the feasibility of creating educational modules that could guide future volunteers. He sought to describe the clientele in Tahan-Tahanan to his team, even introducing them to the Tahan-Tahanan staff. Discussions thereafter revolved around the needs of children undergoing cancer treatment, as prompted by the following questions: What type of programs are necessary to address all of Bella's needs for holistic development? How can Tahan-Tahanan ensure the continuity of programs deemed helpful to their clients? If you were Michael, what plan of action would you design and employ to assist Bella in attaining her dreams? (See **Appendix A** for additional insight).

Appendix A

Play Area



Source: Photo courtesy the author of the case.

In the play area, wooden toys that resembled a doctor's station, a CT scan machine, and an X-ray machine were used. These displays simulated procedures that patients went through. Having the opportunity to simulate these medical procedures eased some of the children's fear.

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Endnotes

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