Special Education and Severe Disabilities in Costa Rica: Developing Inclusion in a Developing Country

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Special education has been part of the Costa Rican public education system for more than 60 years. Approximately 10% of the 75,000 students who receive special services have a severe disability; however, there is a chronic shortage of personnel trained to educate students with significant educational needs. In the last 5 years, Costa Rica has promulgated four educational service models that extend special education expertise: consulting teachers, educational assistance teams, itinerant teams, and resource centers. These models more equitably distribute the technical skills and knowledge of special education professionals throughout the country. In addition, the Department of Special Education has developed a pragmatic educational classification system that describes the level of modifications required by students with disabilities, rather than one that is driven by their diagnostic label. Few publications have been written about special education in Costa Rica. This is the first historical overview of the development of inclusion in this country.

DESCRIPTORS: inclusion, international special education, severe disabilities, Costa Rica

Economically, Costa Rica is considered a developing country; it has an average per capita income of \$3,866 per person and an external debt of more than 3.9 billion dollars (United Nations, 2001; The World Bank, 2000). However, this small Central American country has long valued education and, in 1869, was one of the first nations in the world to make public education free. obligatory, and state supported (Biesanz, Biesanz, & Biesanz, 1999; Dengo Obregón, 2000). Despite its struggles, the Costa Rican government has long made education an economic priority and for the last 30 years between 19% and 31% of the national budget has gone to education (Dengo Obregón, 2000; United Nations Educational and Scientific Organization (UNESCO). 1999). All children attend elementary school until sixth grade and the countrywide literacy rate is estimated to be more than 95% (United Nations, 2000; UNESCO,

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1999). Oscar Arias, Nobel Peace Prize winner and former President, reflected this Costa Rican veneration for education in his recent statement that, "The only manner in which we will have a more presperous Latin America will be to have an educated Latin America" (La Nación, 2001, p. 6). Special education has been part of the Costa Rican public education system for more than 60 years and has grown from serving a class of 8 students in 1940 to a system that educated a population of 70,743 students in the year 2000 (Monge Chavarría, 2001).

What is notable about special education in Costa Rica is not only that it takes place in an economically adverse setting, but that this country has developed educational service models that serve to distribute the expertise of special educators. These models suggest how disability services might be delivered in other locations where the number of trained personnel is limited. In addition, Costa Rica has developed progressive and inclusive laws that affect the education and adult lives of individuals with disabilities. Finally, the country uses a cross-categorical approach to qualifying students for services that emphasizes the educational needs of students, rather than their disability. The purpose of this article is to give a historical overview of the development of inclusive practice in Costa Rica.

History of Services for Individuals with Disabilities

Little has been written about the treatment of individuals with disabilities in Costa Rica before the 20th century. As of 1940, the only service available was institutionalization in the Manuel Antonic Chapuí Psychiatric Hospital in San José, which treated a small number of individuals with mental retardation. Later,

¹In referring to the historical development of services with disabilities or to current Costa Rican categorization of individuals with disabilities, terms and language are translated so that they closely reflect the original intent of a word or a phrase, rather than being translated literally. In some cases, disability-related terminology reflects current Costa Rican usage rather than current usage in the United States (e.g., "mental retardation" rather than "cognitive impairments"). All Spanish-English translations have been made by the author.

the Institute for Reeducation, a private school for adolescents with mental retardation, was created. With these two exceptions, no other residential program existed for individuals with disabilities before 1985 (Meléndez Rodriguez, 2002); as a result, Costa Rica never developed the custom of institutionalizing large numbers of individuals with severe disabilities. In part because of the unavailability of residential services, individuals with disabilities overwhelmingly remained at home with their families, regardless of the severity of their disability, which is still the custom today. However, until the introduction of the socialized medical system in 1942, the longevity of Costa Ricans was limited. For example, men born in 1923 had a life expectancy of only about 40 years (Biesanz, Biesanz, & Biesanz, 2000), and it is probable that individuals with disabilities with medical complications had significantly shorter life spans.

Public school education for students with disabilities was also nonexistent until the middle of the 20th century, although it is likely that many students with unidentified mild disabilities attended general education classes. In 1939, Fernando Centeno Güell, an educator, began offering private school services to students with disabilities. Shortly after opening the school, Centeno Güell advocated its establishment as a public special education school under the administration of the national Ministry of Public Education. Centeno Güell's efforts were successful because of the assistance of parents, who formed what was probably the first advocacy group in Costa Rica. Referring to Costa Rica's progressive social reform period of the 1940s, Dengo Obregón (2000) remarked, "perhaps the most significant [educational accomplishment], after the establishment of the University [of Costa Rica], was the establishment of the Special Education School..." (p. 154). The Ministry of Public Education subsequently opened the Special Education School, which was later named for Centeno Güell, in a suburb of the capital city of San José. The Centeno Güell School originally provided educational services for students with mental retardation, but 4 years later expanded its programs to provide services for students with auditory, visual, or language disabilities. Dengo Obregón (2000) comments, "...until that point children who exhibited mental retardation, deafness, or blindness, had no institution that provided these necessary educational resources" (p. 154). The Centeno Güell School, however, continued to be the only public school for students with disabilities until 1950, when a second school was opened. Educational services for students with severe disabilities during the remainder of the decade continued to be provided in special education schools (Marín Arias, 2000).

A polio epidemic in Costa Rica in the early part of the 1950s created a countrywide alarm and a resultant drive to create rehabilitation and physical therapy services for individuals with physical disabilities. Dr. Humberto Araya Rojas, a pediatrician, organized a group of orthopedic specialists and opened the Casa Verde, offering what were probably the first physical rehabilitation services in the country (Marín Arias, 2000). Dr. Araya Rojas was also instrumental in creating the residential Rehabilitation School for children with physical disabilities. The philosophical and conceptual basis for the school was that both the emotional and the physical needs of the child should be addressed, and it provided parent workshops and community education. This holistic view of disability and the recognition that children are part of a family and community system later became a fundamental principal in the disability movement in Costa Rica (Marín Arias, 2000).

Another significant milestone in special education in Costa Rica was the creation of the Fundamental Law of Education of 1957. Although this legislation affected the entire educational system, statutes of the Fundamental Law also clearly established the constitutional right of children with disabilities to a special education within the public school system. This law acknowledged that special education necessitated the use of special instructional techniques, methods, and materials, and that parents should receive information to assist them in providing for the needs of their child (Articles 28 and 29, 1957). The Fundamental Law was not only progressive for its time in its provision of public services for students with disabilities; it also was inclusive. That is, the special education law was simply one part of a general education law that established standards and policy throughout the Costa Rican Ministry of Public Education.

The Fundamental Law also recognized the importance of teacher education and stated that special education teachers "...should be selected carefully and have the appropriate specialized training" (Article 28, 1957). Despite this stipulation, university-level training in the area of special education was nonexistent before the 1960s in Costa Rica. Educators who wished to specialize in disability studies usually traveled to Spain or the United States, but the number of teachers who could afford the cost of an education abroad was extremely limited. The University of Costa Rica finally initiated the first bachelor's level program in special education in 1962, with an emphasis in mental retardation. The University did not expand this specialization, however, until the 1970s, when it created teacher education programs in the areas of deafness, communication disorders, and learning disabilities (Marín Arias,

The Ministry of Public Education continued to expand services for students with disabilities throughout the 1960s by creating segregated campuses, and by the early 1970s there were 20 special education schools in Costa Rica with a total enrollment of 1,928 students (Bulgarelli, 1971). Many of these schools served only particular categories of disability; separate schools were

created for students with visual impairments, auditory impairments, mental retardation, emotional disturbance, and orthopedic impairments. As was the case worldwide in the field of special education, students with learning disabilities received little attention until the mid-1960s and, until that date, many students with severe learning disabilities were grouped with students with mental retardation (Mainieri Hidalgo & Méndez Barrantes, 1992). Educational program expansion continued to be strongly focused at the elementary level and high school programs available to students with disabilities were scarce.

Development of Inclusive Educational Services

Although the first three decades of special education resulted in more specialized, and for the most part, segregated programs for students with disabilities, Costa Rica was quick to adopt practices that integrated students with special needs. Two primary factors contributed to the growth of inclusive services in Costa Rica. The first, ironically, was the limited funding available for educational services. Although a significant percentage of the national budget was allocated to education, this amount was still relatively small in gross terms. Simply, there were insufficient funds to create a large number of separate hospitals, schools, and rehabilitation centers for individuals with disabilities. particularly given the small and geographically diverse population of the country. As a result, these services, with the exception of those in special education schools, took place in the same location as those services for people without disabilities, particularly in rural areas. Second, the principles of inclusion meshed well with collective Costa Rican values. Most Costa Ricans tend to be tolerant of differences and believe that members of their society are equal, regardless of their educational background or economic status (Biesanz, Biesanz, & Biesanz, 1999). Another deeply rooted value is that family members belong together and that those with medical or physical differences are still essential members of the family and community system. As a result, from the beginning of the inclusion movement, Costa Ricans have been tolerant and supportive of educational changes that increasingly placed children with disabilities alongside their peers.

In 1973, the Ministry of Public Education established the first special education classrooms for students who had mental retardation or hearing impairments on general education campuses (Marín Arias, 2000; Stough, 1990). The actual integration of these students with their peers was limited, however, and usually only occurred during recess or school assemblies (Marín Arias, 2000). Several years later, programs in speech therapy and classrooms for students with visual impairments, emotion or behavioral problems, or who were gifted or talented were also opened on general education cam-

puses (Ministry of Public Education, 1992; 1993). The first vocational programs in high schools were established in 1978 but the proliferation of these programs was slow, in part because the overall growth of secondary education in general was slow throughout Costa Rica.

Despite the economic recession of the 1980s, special education services continued to both expand and to become more integrated. In 1980, the Rehabilitation School began a program to integrate children with cerebral palsy into general education classrooms under the direction of a special education teacher (Marín Arias, 2000). This also was the first formal implementation of a consulting teacher model in Costa Rica. The Ministry of Public Education, following this model, began to integrate students with physical disabilities without cognitive disabilities across the country into general education classrooms on their home campuses. Students with visual impairments, along with students with physical disabilities, also regularly became placed in general education classrooms (Castillo & Stough, 1988). By 1984, 11 special education schools, 103 selfcontained special education classrooms, and 15 resource rooms were providing services throughout the country (Castillo & Stough, 1988). Services for students with severe intellectual disabilities, however, continued to take place in segregated settings.

A drastic change occurred in special education services in the mid 1980s when the Ministry of Public Education began a new initiative in which it hired teachers to instruct recargo, or additional instructional loads. Rather than creating separate classrooms for students with learning disabilities, the recargo model created additional instructional periods at the end of the school day during which teachers with special education training worked in small groups with students, primarily in math and language arts (Stough & Aguirre-Roy, 1997). Students usually attended recargo class during the afternoons and thus were not pulled out of their general education classrooms. This model was also economical in that the Ministry did not have to hire new teachers to fill these positions; rather it offered existing teachers a supplemental stipend for working additional hours each day. By the end of the 1980s, recargo services had become the predominant special education delivery model in Costa Rica and more than 10,000 students throughout the country were receiving services in recargo classrooms (Ministry of Public Education, 1993; Stough, 2000). This was a significant change in special education support—only 15 years before almost all students with disabilities were placed either in special education schools or in self-contained classrooms. In contrast, although recargo services were provided in a segregated setting, the students continued to attend general education classes with their peers, rather than being pulled out of class for service delivery. However, although the recargo model was effective in providing

educational services to students with mild disabilities, students with severe disabilities primarily continued to be served in segregated settings.

Inclusionary practices for students with severe disabilities expanded during the early 1990s when the Departments of Special Education and Preschool Education began to integrate children with mental retardation into general education preschool classes (Marín Arias, 2000). Following the World Conference on Special Education in Salamanca in 1992, the Department of Special Education shifted its philosophical approach and reflected a strong educational commitment to inclusionary practice. This movement was entitled the Schools for All movement and was largely based on the principles of normalization, integration, and selfadvocacy recognized in the Salamanca Agreement (Marín Arias, 2000). A 5-year plan was developed that outlined the objectives and policies of public education for special education students and not only incorporated principles from the Salamanca Agreement, but from the Universal Declaration of Human Rights, the Declaration of Children's Rights, and the World Conference on Education for All, among others (Ministry of Public Education, 1998). The Department of Special Education adopted the following principles as part of their plan for services to students with disabilities: (a) equal opportunity to access and participate in the educational system; (b) the right to participate in decisions, planning, execution, and choices that concern them; (c) the right of nondiscriminatory treatment; (d) personal autonomy in decision-making and choice-making; and (e) the right to participate in an education that promotes their development (Monge Chavarría, 2001). These changes in educational principles were supported by the development of new models of educational service delivery.

Service Delivery Models That Promote Inclusive Practice

Four emergent and creative educational service models that extended special education promulgated in the last decade and have proved useful in assisting with the increasing inclusion of students with severe disabilities: consulting teachers, educational assistance teams, itinerant teams, and resource centers.

Consulting Teachers

The consulting teacher is a relatively new model of service delivery in Costa Rica. The Ministry of Public Education began piloting the consulting teacher model in the mid-1990s as part of its movement toward more inclusive education. In 1998, there were 50 teachers that provided consultative services to students with disabilities and their teachers within general education classes (Marín Arias, 2000). Consulting teachers assist students with special education needs in the general education classroom. They also assist general education teachers

in modifying instruction and constructing didactic materials for these students. In Costa Rica, some of these teachers are also itinerant and travel between schools in remote or rural areas of the country.

Educational Assistance Committees

Educational assistance committees are appointed at the beginning of each school year and are established at each school to make decisions related to the educational needs of all students. Educational assistance committees consist of a school administrator (usually the principal), a special educator, two general educators, and a parent at the primary level. Counselors, students with disabilities, and additional special educators are added to the appointed committee at the high school level. The educational assistance committee functions as a consultative team for students with mild disabilities and those with sensory or orthopedic impairments. Committees determine the special services required by students at each school and recommend assistive educational services or accessibility modifications to the school administration and to the teaching staff. They provide some technical training to general education teachers who have students with mild disabilities included in their classrooms and supervise the quality of the education received by these students. They also meet with teachers, parents, and students with disabilities to explain available special educational services. The educational services of students with severe disabilities is primarily overseen by itinerant teams.

Itinerant Teams

Itinerant teams are essential to the development and oversight of services for students with disabilities, in particular, those with severe disabilities. Each itinerant team consists of a psychologist (either an educational psychologist or a school psychologist), a social worker, a general education teacher, and a special education teacher (Aguilar Montoya et al., 2000). These multidisciplinary teams travel within designated regions to conduct assessments, diagnose students with special education needs, and provide technical assistance to teachers who work with children with disabilities. Students who require significant modifications, such as those with severe disabilities, receive particular attention from itinerant teams, in that they assist the school's educational assistance teams in designing the educational programs for these children.

The itinerant teams are a particularly efficient model of service delivery in Costa Rica where special educators and other educational specialists are scarce. The teams can provide workshops and arrange ongoing professional training for teachers on how to modify the state curriculum for students with severe disabilities. They also increase the possibility that students with severe disabilities can attend their home school while still

receiving direction from trained personnel. However, itinerant teams in rural areas visit remote schools infrequently and may not be able to provide sufficient technical support to allow students with severe disabilities to be successfully served in inclusive classrooms alongside their peers without disabilities.

Resource Centers

The present movement toward educating students with special educational needs in integrated settings necessitates that there be adequate supports to enable these students to have success in these environments. The Ministry of Public Education, under the directives of the Equal Opportunity Law, recently constructed The National Resource Center for Educational Inclusion to provide "assistive services...to individuals with disabilities to increase their level of autonomy and to guarantee equal opportunities to access its development" (The National Resource Center for Educational Inclusion, 2002, p. 12). The Center, the first of its kind in Costa Rica, lends technical support to general education schools so that they are prepared to meet the needs of students with disabilities who are included in general education classrooms. The Center also provides information, consultation, and training on disabilityrelated issues to special education teachers, general education teachers, parents, researchers, students, and the community. The Center is staffed with an interdisciplinary team of special educators, a preschool educator, a general education teacher, an occupational therapist, a teacher trainer, an assistive technology and didactic material's specialist, and a librarian (Ministry of Public Education, 1999). The Center will spearhead the creation of affiliate regional centers across the country that will support the inclusion of students with disabilities as part of the Ministry's Education for All movement, as well as support the inclusion of students who have traditionally been marginalized in the Costa Rican educational system, such as those who do not speak Spanish as their first language, immigrant children, and children living in poverty. A particularly interesting component of the Center is its plan to create a mediation center to assist parents and teachers who are encountering difficulties in including their children and students with disabilities. Center staff will function as intermediaries in conflicts involving students with special educational needs, and will train parents and school staff in conflict resolution.

Current Laws on Inclusion

Undoubtedly, the most significant progress in inclusive practice in Costa Rica occurred in 1996 with the passage of the Equal Opportunity Law for Persons with Disabilities. The law begins "It is declared that it is in the public interest [that] the complete development of the disabled population [should take place] in conditions that are equal in quality, opportunities, rights, and

privileges as is the case with others" (Article 1, 1996, p. 7). This piece of legislation is impressively broad in its call for civil rights for individuals with disabilities. Not only does it legislate access and nondiscrimination in employment and educational practices, but also mandates equal access to health services, transportation, communication services, and to cultural, sport, and recreational activities. The Equal Opportunity Law thus reaches across multiple governmental agencies and includes both the private and public sector in its directives.

With respect to the educational rights of students with disabilities, the Equal Opportunity Law redefines special education services to include early childhood intervention and college-level services, as well as services for students that are hospitalized. It also mandates that individuals with disabilities "...should not be excluded from any [educational] activity" (Article 16, p. 12). Perhaps more impressively, Article 18 affirms that individuals with special educational needs should receive their education in the general education system with the support of instructional and assistive services. Although it did not legislate the closing of special education schools, it did result in the Ministry of Public Education policy that "Teachers of Special Education classrooms and schools will always promote and facilitate to the extent possible, the integration of students with special educational needs into the least restrictive educationally appropriate environments." (Ministry of Public Education, 1998, p. 19). Article 18 also stresses that special education services should preferably take place in the school nearest the student's home. Again, the Equal Opportunities Law led to a significant philosophical change for the Ministry of Public Education, which had previously focused on the creation of segregated services for students with severe disabilities. Educational policy was rewritten to reflect this shift. Special education administrators began to consider how to move students with disabilities into their home schools and into inclusive classrooms. Because of the centralized nature of the public education system, these policy changes have been communicated consistently to school districts and schools throughout Costa Rica.

The Equal Opportunity Law, through its language, also illustrates an important philosophical change in the Costa Rican view of disability. Under the 1957 Fundamental Law, special education was defined as "that which is taught to children and adolescents whose physical, mental, emotional, or social characteristics are different than normal..." (Article 27, 1957). The Equal Opportunity Law, however, redefined special education so that the focus was no longer on the disability of the child but stressed the modifications and education to which they were entitled: "Special education is the combination of aids and services available to students with special education needs, whether they be temporary or permanent" (Article 73, 1996, p. 31). Similarly,

the 1957 Fundamental Law, although progressive for its time, viewed parents as the passive recipients of professional expertise. The 1996 Equal Opportunity Law revised the role of parents and students with disabilities so that they now are participants in designing the educational program: "Special education centers should provide to their students and to their parents the information necessary so that they participate, understand, and support the educational process" (Article 73, 1996, p. 31). Arias Núñez (2000) stresses that this new definition radically modified the form of both general education and special education. Specifically, special education was reconceptualized as an assistive technical resource by which the Costa Rican educational system could address the diverse needs of all of its students, rather than exist as a separate, parallel educational system.

The Equal Opportunity Law portends to change the nature of inclusion in Costa Rica and there is widespread public and political support for this change. For example, the former First Lady of Costa Rica, Lorena Clare de Rodríguez, made the law one of her volunteer projects while in office, traveling extensively and speaking throughout the country to promote public awareness about this law. However, implementation in some sectors has been shockingly slow. For example, as of June 2002, not one public bus had been modified to be wheelchair-accessible. In addition, general education teachers question who is responsible for the design and delivery of curricular modifications and look to the Ministry of Education for increased technical support. In order for the law to affect widespread change, rather than becoming another well-intentioned legal document, Costa Rica will need to enforce the law, rather than relying on policy to ensure compliance.

Current Services for Students with Severe Disabilities

As is often the case in other countries, the inclusion of students with severe disabilities in Costa Rica has occurred at a disproportionately slower rate than that of students with other disabilities. Approximately 27% of students with severe disabilities currently receive educational services in segregated special education schools (Monge Chavarría, 2001). When students with severe disabilities do attend an integrated campus, they are usually placed in a self-contained classroom. In contrast, students with high-incidence disabilities such as learning disabilities or speech impairments attend general education classrooms for most of the school day.

The Equal Opportunity Law has the potential to increase the inclusion of individuals with severe disabilities within the educational system. It clearly states that inclusion is the educational goal for all students- and lays the responsibility for the implementation of that goal on the educational system. In response, the Min-

istry of Education has redefined how educational services are conceptualized. This pedagogical approach focuses on the type of instructional modifications required by a student with disabilities rather than using categorical diagnoses to drive educational service eligibility. This change of focus situates the challenges associated with educating students with disabilities in inclusive settings on the support needs, rather on the shortcomings of the student and, as such, places the responsibility for including students with disabilities squarely in the hands of educators. Marín Arias (2000) sees this change as the recognition that instructional modifications can establish balance between what should be the same for all children (the development of their educational capabilities) and what is unique for every student (their individual learning characteristics). For students with severe disabilities, this redefinition communicates that in order for these students to be educated in an inclusive environment, the school setting will need significant modifications, and then defines an educational program as a collection of modifications that will enable them to participate in an inclusive environment.

The Ministry of Public Education describes the modifications needed by students as being one of three types: (a) modifications of access, which refer to adaptations that students with motor or sensory disabilities require to access the general education system (e.g., ramps, assistance bars, Braille, and sign language); (b) nonsignificant modifications that involve modification of didactic methods, but do not affect the level of instructional expectation in relation to the rest of the group (e.g., use of calculators, manipulatives, or assistive devices); and (c) significant modifications that require changes in objectives, methodology, and evaluation that clearly differentiate these students in terms of expectations (Ministry of Public Education, 1992). As can be seen in Table 1, the Ministry of Public Education estimates that more than 95% of special education students receive access-level modifications or nonsignificant modifications as part of their education. The 5% of students receiving significant modifications are almost always students with severe disabilities.

The development and implementation of significant modifications is centralized nationally and overseen by the Ministry's Department of Special Education. Stu-

Table 1 Number of Students Receiving Instructional Modifications in 2000

Type of modification	Preschool	Elementary	High school	Total
Access only	816	6.965	1,239	9,020
Nonsignificant	2,668	45,979	10,901	59,548
Significant	315	2,597	181	3,093
Total students receiving modifications				71,661

From Monge Chavarría, G. (2001, July). Ministry of Public Education.

dents who are thought to require significant modifications must first undergo a formal assessment by the campus-based educational assistance committee or the regional itinerant team. When students qualify for significant modifications, a special education teacher or itinerant team uses modifications and objectives approved by the National Department of Special Education to design the student's educational program (Ministry of Public Education, 1998). Because students who need significant modifications are usually placed in segregated settings, their programs are usually delivered by a special education teacher. When significant modifications are delivered by a general education teacher, a consulting teacher, the campus-based assistance committee, or an itinerant team oversees that they are appropriately delivered. All educational plans that include significant modifications are approved and overseen by the Department of Special Education or a regional specialist (Ministry of Public Education, 1998).

Special education schools have an additional mechanism for overseeing the integration of students with severe disabilities. These schools must establish a Technical Consultant Committee, consisting of the principal of the school, a special education teacher, a psychologist or social worker, and a parent, that reviews plans to integrate students into less restrictive educational environments. Students who are deaf or deaf-blind, however, are singled out in the policy regulations of the Equal Opportunity Law as perhaps requiring segregated instruction, either within the general education classroom or outside of it, to meet their educational needs. Before the passage of the Equal Opportunities Act, students with the most significant needs usually attended a special education school. However, the present paradigm is to move students with severe disabilities into special education classrooms within regular schools or into general education classrooms (Monge Chavarría, 2001). Special education schools are now recognized as being restrictive environments and, as a result of the Equal Opportunity Law, only admit students with severe disabilities or those receiving early intervention services (Marín Arias, 2000).

Challenges to the Future of Inclusive Education

Several challenges currently face the public education of students with disabilities. First, as is the case in many countries, Costa Rica has a shortage of trained special education personnel, particularly those trained to teach students with severe disabilities. The models previously discussed are used to distribute more equitably the technical expertise of special education professionals throughout the country, but a critical shortage of trained teachers remains. A related factor is the scarcity of pre- and inservice training for general educators on how to design and deliver modifications. De-

spite the relatively large percentage of the Costa Rican budget that goes to education, little is allocated for inservice teacher training (Stough, 1990). Meléndez Rodriguez (2000) notes that many principals and teachers have found that the implementation of integration has occurred without adequate training of teachers and without an increase in resources. Fueling both of these challenges is the need for higher education training that is responsive to the changing needs of the teaching field. Many university programs continue to focus on pathology and categories of disability, rather than on the modifications that are needed to provide access to the general education curriculum. As has been encountered in the United States, without appropriately trained special education personnel, students either continue to be educated in segregated settings or are inadequately educated in general education classrooms.

A second challenge is in the area of secondary education. There are fewer secondary programs for students with disabilities and they have received less attention than those at the elementary level. Currently, there are only 69 secondary programs, and the limited availability of these programs contributes to the high rate of drop out of students with disabilities from the school system after the elementary level. One of the primary difficulties in creating integrated services, rather than separate programs, at the high school level is that secondary education in Costa Rica is organizationally complex. Four types of high schools exist: academic, vocational, agricultural, and night schools. Each type of school has its own curriculum, which in the case of the vocational and agricultural schools may vary significantly from region to region. This complexity makes the integration of special education students and programs difficult and highly dependent on the expertise and flexibility of campus-level school personnel. In addition, students in high school programs, regardless of their disability, must pass standardized exit exams to receive a diploma. An alternative assessment system at the high school level has not been developed.

Similarly, evaluation of student achievement at the elementary level is controversial. Under current Ministry of Public Education policy, students with disabilities who complete their elementary-level education are entitled to a diploma at the completion of their studies. Until recently, students who received significant modifications to their curriculum received a diploma with an annotation reading that the diploma was granted under provisions made by the Equal Opportunity Law. In 2000, this practice was challenged in court, which subsequently ruled that the annotation was discriminatory and functioned as a barrier to equal access to higher education for students with disabilities (La Nación, 2000). The Ministry must now reassess how diplomas are evaluated and awarded, given an existent system that requires standardized testing as part of its graduation requirements.

Finally, the Ministry is expanding its services for students with auditory impairments by providing interpreters in general education classrooms and creating separate classrooms on designated campus. As has been an argument of the deaf community in the United States, the Ministry questions whether integrated classrooms are appropriately able to address the educational needs of deaf and hearing impaired students (Monge Chavarría, 2001), and seems to be moving toward the establishment of specialized and segregated services for them.

Conclusion

Given the progressive philosophical stance that Costa Rica holds about inclusion, why are most students with severe disabilities still segregated? Laws relating to inclusion in Costa Rica are progressive and wide ranging. Costa Ricans are generally tolerant of differences in others and supportive of individuals with disabilities. The Ministry of Public Education has established policies that support inclusive educational practice. However, almost one third of the student population with severe disabilities continue to attend segregated schools, and students with severe disabilities who are placed on general education campus usually attend segregated classrooms.

Interestingly, the primary barriers to inclusive education in Costa Rica are strikingly similar to those encountered in the United States. These include a critical shortage of trained special education personnel, the need to modify curriculum in general education classrooms, and the need for best practice models of inclusive schools. These similarities are particularly striking given the differences in economic status of the United States and Costa Rica and the inherent cultural differences that permeate the educational systems of these two countries. The two countries share, however, a similar history of exclusion of students with severe disabilities from general education classrooms, and the separate training of special educators and general educators. The inclusion movement in both countries faces barriers that have been created, in part, by the same educational system that was established to appropriately educate students with significant disabilities. The task in both countries then, is not simply to restructure special education so that it fits into an existing system, but to restructure education as a whole so that all students may fully participate. Such a goal indicates that these educational systems need more than adaptation; they need fundamental restructuring in how children are educated.

The establishment of a National Resource Center for Inclusive Education is a bold and visionary step toward changing the educational status quo in Costa Rica. The National Resource Center has adapted a broad definition of inclusive education that includes not only stu-

dents with disabilities, but those that have traditionally been excluded for reasons of differences in class, ethnicity, language, or nationality. At present, the primary focus of the Center is to address the need for trained personnel, both general education and special education teachers. A next step for the National Resource Center is to examine education in Costa Rica systemically and analyze how it might be reconstructed to truly provide "education for all."

In closing, it should be noted that, unlike many developing countries, Costa Rica has no army. Instead, a significant amount of the national budget goes to education, which advantageously affects the education of students with disabilities. In his keynote address at the TASH annual conference, Oscar Arias (2001) eloquently drew the connection between military spending and educational development:

It is my strong belief that military spending represents the single most significant perversion of worldwide priorities known today.... And yet, instead of investing in the health and education of their people, poor countries continue to supply them, all in the name of "national security." Ask any child on the streets of India, Burundi, or Myanmar whether she would rather have bread to eat and a school to go to or a fighter jet to protect her, and you will have the obvious answer that national security means nothing in the absence of human security. (p. 15)

Costa Rica, through its economic commitment to public education, in the creation of progressive inclusion laws, and in its search for new models for distributing teaching expertise, has made a significant investment in human security for its students with disabilities. The next decade will demonstrate whether this investment will result in an increased level of inclusive education for students with significant disabilities.

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