

# **HOW DOES CONDUCTIVE EDUCATION AID THE INTEGRATION OF CHILDREN WITH CEREBRAL PALSY INTO THE REGULAR ELEMENTARY SCHOOL?**

*by Vered Bracha*

Tsad Kadima, Jerusalem, Israel

One of the main goals we set for ourselves is to integrate children with CP with their non-disabled peers. This task is not a simple one, and in our attempts to do so we encounter many difficulties. But there is no doubt that this is most important in our attempt at teaching the pupils to be orthofunctional. I would like to present you with an integration model that has been used for about a year in an Israeli elementary school.

The integration project began in the school about five years ago using various methods: The integration network changes with every school year, based on the experience we have accumulated and according to the needs of the children and the school and educational perspectives. In this lecture I will refer to the following issues, from my own point of view:

1. The structure of the integration system presently used in the school - presentation of the model (where and how the 22 children are integrated within the school, the support network established for them, social integration and social-academic integration).
2. The conductive class in the regular school:
  - a.) General goals
  - b.) Specific educational goals -- ILP (individualized learning program and individualized schedule).
  - c.) Schedule:
    - Classroom
    - Club activities.
3. Difficulties
4. Solutions

# **CONDUCTIVE EDUCATION AND THE USE OF RHYTHMICAL INTENTION FOR PEOPLE WITH PARKINSON'S DISEASE: AN EXPLORATION**

*by Melanie Brown*

The National Institute of Conductive Education, Birmingham

Parkinson's, as an incurable, progressive neurological condition is traditionally managed within the medical model. The severity of the condition is assessed in terms of how much dopamine is present in the brain and how this can be maximised through treatment. The quality of life of the person with Parkinson's (PWP) focuses on the effectiveness of this treatment. The recognised long term effects of drug treatment cause a range of problems leading to a reduction in quality of life which is deemed inevitable, one of the tragic consequences of this condition.

This presentation will provide an overview of a research project carried out by the author. A project that challenges the medical model as the only possible response to Parkinson's through an investigation of the principles of CE. The investigation explores the role of an educational approach based on conscious, active learning in the management of Parkinson's across the drug cycle. It is proposed that the teaching and learning of the key principle of rhythmical intention enables a PWP to improve the quality of life and extend the effectiveness of their drug treatment.

21 PWPs were studied using a range of methodological procedures selected to bridge existing educational and medical paradigms. The results show that PWPs can be influenced by and learn to use an external rhythm in order to access their movements throughout the drug cycle. This indicates a significant role for an educational approach to this condition, a role that has not previously been recognised or explored.

CE, as a form of adult education, teaches conscious strategies for the daily management of Parkinson's thus enhancing the effects of the existing medical model. These strategies can be taught to the PWP and family members as a way of improving the quality of life for PWPs and their families.

# **CONDUCTIVE EDUCATION AND INCLUSION IN A LOCAL EDUCATION AUTHORITY SETTING.**

*by Caroline Coles & Ruth Zimmerman*  
Horton Lodge Community Special School,  
Horton, United Kingdom

## **Background**

Horton Lodge Community Special School is a Local Education Authority School providing quality Conductive Education for 60 primary aged pupils who have physical disabilities.

The school gained an excellent OFSTED report and was listed in HMCI's Annual Report as being one of the top 22 Special Schools in the country. The school was awarded a National Curriculum Award in 2000 and has become the first National Primary School with the National Primary Trust providing advice and support across the country. In September 2001 Horton Lodge School becomes a Beacon School as part of the Government Initiative.

The school has four qualified Conductor/Teachers and has good links with the Pető Institute. Staffordshire Education Authority is committed to further developing Conductive Education across the county

## **Submission**

The presentation will outline the role of a Conductive Education provider and the inclusion of pupils with physical disabilities into their local mainstream school. Staffordshire LEA commissioned Horton Lodge School and Northampton University College to undertake research into some of the key success factors of the school and its Inclusion programmes. (30% of the pupils from Horton Lodge School are successfully integrated into their local mainstream school each year.)

The presentation will outline the main findings from this research, and the

school's scheme to link with mainstream schools (Sept 2000 – Sept 2001)

An assessment criterion for placement of children into a Conductive Education provision will be demonstrated. The presentation will also outline the school's resource and training bases role and the formal accredited University Training provided for local mainstream teachers and teaching assistants.

# **THE DAILY ROUTINE OF KINDREGAR- TEN AGE MOTOR DISABLED CHILDREN**

*by Irén Deák*

International Pető Institute, Budapest, Hungary

The first step of motor disabled children's integration is the period of time spent among their peers. This is the first time when they are separated from the family, this is the age of kindergarten.

Conductive education is carried out in groups of children even in this early age, irrespective of the children's condition. The group functions as the organisational framework for education. Group activity serves not only as the practical care for the motor disabled but also the basic condition of the preparation for social integration.

The daily routine gives a framework of the development work, taking into account the motor condition, age, level and individual specialities of the children of the group. It ensures the time limits of the various but successive sessions. In most cases conductive education builds upon general requirements, or its aims are determined on this basis and the teaching of ways to meet the requirements. It specifies the times to begin the various activities and programmes, their order. The daily routine also includes self care activities, complex kindergarten programmes, symptom specific task series, special development and alternative programmes.

# DIPLOMA THESIS IN CONDUCTOR TRAINING

*by Adrienn Deák-Örkényi*

International Pető Institute, Budapest, Hungary

Full conductor-teacher training has generally been realised at the International Pető Institute in Budapest. Following the opening of the Institute in 1950, more than a decade was needed to start the training of the specialists, the conductors in 1964. Until 1986, training was carried out on higher education level and from 1987; conductor-teacher training became independent on college level. Since the introduction of training, independent from the above stages, one criterion of obtaining the diploma has been the preparation and defence of the thesis at the closing exam.

The obligation to prepare a thesis refers to both international and Hungarian students, but in certain forms of training it is up to the student's decision whether he or she submits the thesis to the College or the partner institution.

The library of the International Pető Institute has made a full collection of the theses since 1970. Although all departments offer topics for the papers candidates are free to choose a research project and a tutor helping and directing the work apart from the list offered. Candidates make a decision of their research topic in the sixth semester of the 8 semester training programme. In view of the theses submitted so far it is to be considered whether the choice of topic should be made in an earlier stage. Examinations reflect that collecting data rapidly and efficiently with questionnaires is preferred since there is little chance for continuous longer term pursuing inspection. Investigations are generally done in a small number of cases and relatively quickly and do not allow to carry out more popular, quantitative measurements and to draw up significant consequences. During the past few years a computerised data base has helped the orientation in the topics and research matters of the theses, the new qualitative method, ethnography has not taken clear shape whereas, undeclared though, most of the works have

been done according to the above methodology.

Concrete data will be given to this general summary and the most frequent topics, classification and the methods applied will be presented.



# **PROMOTION OF RESIDENTIAL PUPILS' THINKING AND KNOWLEDGE OF LIFE**

*by Katalin Demeter*

International Pető Institute, Budapest, Hungary

It has been long known that children living in residential institutions have much narrower knowledge of life and the world than their peers growing up in families. A commonly known example for that is that what they associate with 'bread' is not the loaf of bread available in the shop but the slices offered in the breadbasket. Our preliminary research in the subject has revealed the same.

Another long-standing experience is that pupils' thinking tends to be inflexible. They are only able to recall knowledge in the frame it was taught them, which is usually static, as most teachers do not adopt the psychology of learning. A classical example is Wertheimer's observation (*Productive Thinking*, 1945) according to which pupils know everything about the trapezium as long as it „stands properly” but will not recognise it if hooked up at one of its vertices. During instruction they always saw it in the ordinary position. Gaudig's paradox aptly describes learning at school: In real life those who do not know ask questions. School presents a reversed situation: The teacher, who knows, puts questions to the pupil who does not know. We can state about learning at school in general that it is always the teacher who sets tasks and asks questions.

Psychological experiments carried out in Hungary to implement the so-called variation principle (F. Lénárd et al.) proved a success. Every piece of knowledge or learning situation was taught and practised in all possible variations. A possibility to realise the said principle in the mathematics lesson was that besides solving mathematical problems presented in words, the pupils composed texts to equations. Creating texts brought two benefits in learning: Firstly, pupils' thinking became more flexible. Secondly, with the

texts they could express their knowledge of life and the world, offering teachers the opportunity of correction.

Research into this subject will start in September 2001.

# **LANGUAGE AND COMMUNICATION PROMOTION IN THE CONDUCTIVE EDUCATION PROCESS OF CHILDREN**

*by Aniko Dobszlaff\* & Otto Dobszlaff\*\**

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Institut für Sonderpädagogik, Universität Potsdam, Germany\*\*

Certain noteworthy results related to the development of pronunciation and communication in children are sought after in the process of conductive education. These results can be traced back especially to the following conditions:

1. the progress of rehabilitative movement education
2. the developmental effects apparent in the fields of senso-motor skills, memory, initiative (individual activity and motivation), control (will, concentration, stamina), and social competence
3. the method of designing the conductive process

Therefore, as is known, developmental progress in motor skills correlates not only to developmental progress in general, but also to developmental progress in language. Among other things the formal requirements of speaking and communicating are improved. For example, improved eutonia has positive effects on the formation of the necessary subglottal pressure for speech. Similarly, improved coordinated large motor movement helps stabilize the cycle of Respiration-Phonation-Articulation. Additionally, positive effects on speech-motor skills (acquisition of phonological functions) can be seen through this. Speaking or singing supported by movement makes the process of realisation easier, thus initial speaking or speech-motor inhibitions and fluency problems caused by speech-motor conditions occur less frequently. An improved rhythm of motion directly affects and regulates the fluency of speech. Speaking (or singing) which is both accompanied by and accompanies an activity (as is frequently practised)

helps both lexical and semantical development. In addition, children's preparedness to speak and their speech activity are improved. Last but not least, improved gross motor activity has a positive effect on mental awareness and on the capacity of reception, which all in all is a factor, which aids language learning.

Thanks to this factor, language and communication education is fundamentally possible in harmony with the entire development of the child. From the very beginning, several areas are treated consciously, intentionally, orderly, continually and consistently: the development of social competence, cognitive abilities, and functionality of memory, sensory motor skills, individual activity, and self-dependence. These will have various positive effects on children's language learning.

Further significant effects on language development result from the type of process design. The entire conductive education process also aids language and communication education. For one thing, a narrowing and conscious usage of many known beneficial aspects of language development result from this process. For another thing, pronunciation and communication are important tools of the education itself while also being a goal of this education. Therefore, language is learned mainly in a process-integrated way over the course of an entire day; the result of this is a complete, diverse, frequent, and user-oriented application of language.

# **THE REFORM OF HUNGARIAN HIGHER EDUCATION AND ITS EFFECT ON THE SPECIAL TRAINING OF THE INTERNATIONAL PETŐ INSTITUTE**

*by Márta Dovala*

International Pető Institute, Budapest, Hungary

At the end of the 80's a significant reform in Hungarian higher education was started. Developments in the content and the structure and modernising endeavours coincided with social, economic and political changes. Due to the change of the political system in 1990, education authorities had to face the requirements of market economy and had to phrase an educational policy better adjusting to these challenges. The establishment of educational systems better responding to the new requirements both in public and higher education became necessary.

The policy of higher education was formed taking European countries' educational, higher educational system into account. The concept was discussed by the parliament and the Higher Education Act came into effect in 1993.

The development covered the structure of higher education and the contents of training. The most important aim of the structural changes was to develop a dual and flexible institutional system making the mobility of students and lecturers possible. College qualification of practice-oriented training gives BA qualification; university level training is equal to MA qualification.

The other aim of higher education policy was to make higher education available for as many young people as possible following their secondary school studies. The number of people between 18 and 24 years of age in Hungary is over 1 million. Approx. 20% participates in college or university training, while the ratio is nearly 40% in Western European countries. In view of the trend of the development the government aims at admitting 40-

50% of this population into higher education institutions. To achieve this target some developments are indispensable, mainly to be able to serve this bigger number of students: infrastructure, personnel etc.

The Pető András Institute for Conductive Education of the Motor Disabled, Conductor Teacher Training College has a special place within the system of Hungarian higher education aiming at quality training that responds, from all aspects, to the special requirements instead of mass training. Within the college level training conductor-teacher students become able to administer two special fields: their qualification entitles them to carry out conductive education and to teach and educate children between 6 and 10. Education in integrated groups extends in Hungary and specialists with special knowledge can only carry out the teaching and education in these groups successfully. It is to be noted that this special education is important even in kindergarten, with 3 to 8 year old children. The International Pető Institute wishes to meet this challenge by launching a new branch. Conductor-kindergarten teachers will be able to successfully carry out conductive education and kindergarten education in integrated kindergarten groups.

With the help of the teaching and training programme structured in a modular system the various branches are traversable. The system is open both vertically and horizontally; it is based on a broad foundation and offers special training preparing for various tasks, ensuring up-to-date college training for the students.

# **AN APPROPRIATE STRATEGY: INTRODUCING THE PRINCIPLES OF CONDUCTIVE EDUCATION TO CHINA**

*by Marion Fang & Clare Cheng*  
The Spastics Association, Hong Kong, China

With over 60 million people with disabilities in China, the task of providing rehabilitation is an enormous challenge. However, during the past twenty years, services have been initiated with inspiring developments. These include a law to protect the rights of the disabled people (1999), and targets set at national level to establish services for people with specific disabilities. Children with cerebral palsy present the greatest challenge for the service providers. However, while the policy level is supportive the general public has little awareness of disability and even less of the rehabilitation concept. In recent years if the family can afford to pay, a child with cerebral palsy in Hong Kong may receive treatment at children's hospitals that includes massage, acupuncture and a variety of electrotherapies as well as various surgical and medical interventions. Few children with cerebral palsy attend school. Indeed, the majority of disabled children are institutionalised in welfare homes (orphanages) throughout the country.

The principles of Conductive Education have been introduced gradually, mainly to the orphanage settings over the past ten years. The Hong Kong Society has spearheaded this effort for Rehabilitation with the Spastics Association of Hong Kong, and with the endorsement of the concerned ministries in China. The staff involved is encouraged to understand the theory underpinning the practice, and establish comprehensive programmes. This paper consisting of oral and video presentation will describe the development of implementation of Conductive Education principles in China, and the transformation of the rehabilitation scene for many children with disability. It will also include exciting new initiatives in foster care programmes, and outreach services using CE principle as the model.

# **THE ROLE OF THE WAY OF HOLDING PENCIL IN THE DEVELOPMENT OF WRITING OF CEREBRAL PARETIC CHILDREN**

*by Éva Szabó Fekete & Júlia Horváth*  
International Pető Institute, Budapest, Hungary

In the pre-school education of motor disabled children the development of special skills required for writing is part of graphomotor development. Pre-school education can be considered as a preparatory stage where the development of fine movements, visual memory, and attention and hand-eye co-ordination is done. Very often, the difficulties of grasp-hold-release and finding the starting point occur in kindergarten age. Motor disabled children find it difficult to learn the basics of planar and spatial orientation necessary for reading and writing.

The customary way of holding the pencil with three fingers, the so-called dynamic hold of the pencil is often different with CP patients. The authors will show different, symptom specific ways of holding the pencil and products prepared with these techniques. By showing the hold of pencil developed spontaneously or as a strategy in school age, the special aids helping to write and the products of writing the authors wish to expand the means of the applied processes they have observed.



## **INTEGRATION IS NOT EASY...**

*by Éva Szabó Fekete*

International Pető Institute, Budapest, Hungary

„The obstacles to integration are present in our need to avoid anything strange. Integration is „not simply satisfying a humanitarian need or ideal social-political behaviour and neither is it a generous gesture of tolerance that we able-bodied should tolerate the disabled among ourselves and let them live with us.” (Milani Comparetti, 1987) „Integration must begin in our minds, we can implement only what we have done in ourselves.” (Feuser, 1985) The cause of disabled people has become a current issue in our days. The need for change and the will to improve matters are in focus at several international forums.

Questions that may be raised by teachers and special teachers these days

- Do a symptom specific institutional system and properly qualified specialists exist?
- Is integration granted by law possible or must it happen even if the standard is not satisfactory?
- The integration of the disabled into residential districts is the most developed form. This has practically not been implemented anywhere. (Separate schools for the severely disabled have been maintained even in Sweden.)
- What type and degree of disability is suitable for integration?
- What should the curriculum be? Identical and individual development or special educational curriculum? (In the case of the latter the teacher would use two curricula.)
- Does integration or separated education cost more?
- What class proportions should be like? (They show a heterogeneous picture in western European countries ranging between 5-45%, the ideal percentage would be 10-20% since 45-50% could mean reverse integration)

# HOW WE PRACTISED INTEGRATION

by *Éva Szabó Fekete*

International Pető Institute, Budapest, Hungary

Issues connected to the education of disabled children with special needs have gained great importance. „**Normalisation**”, „**segregation**” and „**integration**” concerning various disabilities specially and generally have become important. „Inclusive education” and „integration” are notions that constantly appear with reference to education.

The humanistic philosophical change of attitude provides the starting point, which took place concerning „difference” in the second half of the 20<sup>th</sup> century, namely that „difference” in itself cannot be a qualitative factor. Everyone is an individual thus the difference of the disabled can be perceived as a variation to normal. „**Imperfectness does not segregate but connects the able-bodied with the disabled.**” (G. Papp 1993)

During the first semester of the 2000/2001 academic year a group of students had the possibility to participate, within the complex education practice, in an experimental integration model performed at the Institute's practical field. They got acquainted with the organisational and planning tasks of the experiment. Within the model, pupils of the Pető Institute and Deák Diák Elementary School met five times. The course, thematic and preparations were planned and done together with the students and the students led the sessions.

The presentation will give a summary of the phases of students' preparations, the problems occurring, and special duties that are necessary for sessions where motor disabled and able bodied children are together. The sessions embraced a co-operation of a school semester from the first meeting through role games and playing at the playground to the farewell presents.

The sessions were video recorded, a shortened version will be shown at the Congress. The poster will show pictures taken at the sessions and drawings of motor disabled children.

# **CHRONO - OR PATHOSPECIFIC FACILITATION?**

*by Klára Funk*

International Pető Institute, Budapest, Hungary

Any conductive session is suitable to simultaneously generate needs, shape behaviours, transmit knowledge and improve skills and abilities; however, learning by action would not be possible without facilitation. In the present video conductive facilitation is treated according to the characteristics of the different age groups i.e. in infancy, at kindergarten and school age.

The pace of development shows discrepancies even in healthy babies. In disabled infants it is significantly influenced by the nature and severity of the dysfunction. After some time disabled babies lose motivation to act, they become unwilling and unable to move and to play. They will have no means to actively explore the world.

By planning the guidance that is expected to be necessary i.e. the facilitation, the conductor ensures that tasks are performed. Dysfunction in general means inability to act purposefully but the method of assistance has to be selected in accordance with the given age. Such facilitations are, for example, the type of occupation and rhythmical intention. In infancy the type of occupation is usually individual sessions. From kindergarten age group sessions prevail, providing the opportunity to learn proper social behaviour. At school age there is more and more emphasis on expecting individual, determined task performance supported by conductors' appropriate, consciously planned action and facilitation.

Rhythmical intention, combining speech with movement, is also a type of facilitation. At early age where the child is not yet able to speak, the conductor permanently speaks or sings and parents are instructed to do the same. At kindergarten age the conductor puts the tasks into words and the counting from 1 to 5 also appears, promoting the rhythm of performance. At

that age rhythmical intention is still not practised continuously, songs and rhymes are still present for diversity in the programme. At school age children's movement is directed by the rhythm of intentional speech. Concerted rhythm helps coordinate the elements of action in time and space.

# CONDUCTIVE EDUCATION IN MY LIFE

*by László Gál*

International Pető Institute, Budapest, Hungary

My name is László Gál, I was born in Szeged, Hungary in 1975. Due to medical malpractice I was suffocated by the umbilical cord wound round my neck and my brain did not have enough oxygen for a while. I was resuscitated but (fortunately enough) only my motor centre was injured. The doctors were totally bewildered, they did not say anything to my parents and for long months no one knew what was wrong with me. Later they suggested my parents to give up but fortunately my parents refused to do so. At that time the Pető Institute was not as known as nowadays, we even did not know about it for long. My parents heard about it by chance in a radio broadcast, although doctors should have told them about this option. Following initial contact we have attended the School for Parents for years where, beside developing tasks, we were given useful suggestions how to make everyday life easier. Each time I had new task series, I made exercises and drawings at home that I had to present at the Institute to evaluate my development.

When I reached school age I could not eat with a spoon independently and often fell over when walking. Since my mental abilities did not suffer any injury the aim was to learn integrated among normal people, possibly in my hometown. Despite of my parents' efforts primary schools refused to accept me and thus a common decision was made with the Institute to start school at the Institute, I will learn to eat and walk independently and from the second class we would try again to get in a school at home. This was a very important principle for my parents and at the Institute. I think that the essence of the Pető method is to make the best out of a condition and to open the possibility to live a full life outside the Institute. The success of this principle is all the more proven by the fact that I could eat with a spoon after the first week I spent at the Institute, which was a miracle for us. How could it happen when I could not learn it at home for so long years? The explanation is very simple: I was forced to. On the very first day I was given a spoon to eat my

soup with and a task: try to eat it! And the soup spilt, maybe more than the half of it but I ate up the rest without help! Of course, no one was left hungry, if someone could not manage alone, the conductors helped him or her but only if they really could not get along on their own. The same referred to dressing: in the morning we were given our clothes (shirt with buttons, shoes with shoe laces, all challenges!) I do not remember anymore how long time we had to get dressed, it happened 20 years ago, but it was at least 10 minutes. If there were some who could not get dressed totally, and we were quite a lot, the conductors helped us and we could start having breakfast, learning and doing the tasks. For outsiders this might seem rather tough but the conductors were very warm hearted and as far as I remember, we also loved them. At night, they played with us, played the guitar for us, were reading tales and sometimes we went for excursions. The atmosphere in the group was really warm (small children are sensible to feel this) and for myself at least this very hard work did not seem cruel. Parents cannot be expected to do the same hard work and be consequent; their heart would break to see their child suffer.

I cannot see any alternative. Just let's take my example: due to the injury of my motor centre I have co-ordination problems in moving and, in connection with this, in my speech. But due to the excellence of human brain the functions of affected areas are partly or fully taken over by other areas. This process is not instinctive but undamaged parts are to be taught. And how man learns? By practising. And this means hard work. This has to be connected with love; otherwise it may have the opposite outcome. A child's self confidence has to be encouraged and it can hardly be done rigorously and rigidly. Fortunately I did not experience such an attitude.

After the year I had spent at the Institute my condition significantly improved and my school performance was also good, I was one of the best pupils in the group from all points of view. By the end of the year, wisely enough, I was gradually taught that things would be totally different in an outside school. My conductors tried to explain it to me so that I would not be disappointed.

I went to second class in a school in my hometown but this did not go smoothly. My teacher made every effort to eject me from the class. This year was a very difficult year for my parents. Finally, my conductor and another

one came to explain the situation to the Headmaster. From that on there were no problems and from the third class another teacher took us over. At secondary school and at university my teachers and mates were clever enough to handle the problem. I realised early that I could choose only an intellectual career and have to learn as long as I can. I tried to take no notice of my problem and behave like a normal guy. I was not an excellent pupil or student and never wanted to be. I just wanted to live like others. This is what was so determining in the year I spent at the Pető Institute.

I attended aftercare sessions for long years and was followed; I was given advice or encouraged when it was necessary. I found that the practical difficulties arising during my studies (speech, bad and slow handwriting) could be overcome if the teachers are helpful and you do not expect things to be obvious and are not pretentious. This is how I passed the medium level exam in English, this is how I graduated at secondary school and this is how I obtained programming mathematician diploma at the university.

# **CELEBRATING THE ACHIEVEMENTS OF THE NEW ZEALAND MODEL OF CONDUCTIVE EDUCATION**

*by Kati Gönczy, Gyöngyi Lázár & Anne Murphy*  
Focus Ltd, Auckland, New Zealand

Nine years ago the Cerebral Palsy Society of New Zealand opened its first Conductive Education School with twenty students and one conductor. Today we have two schools, six conductors and ninety-seven children attending our programme. This level of growth has been dependent on our ability to achieve the desired results for the children, recruiting and retaining top conductors and effectively managing the growth of our school. The presentation will be broken down into the following segments:

**From small Beginnings a successful Model for Conductive Education in New Zealand was established.** Establishing a successful and working model of conductive Education for New Zealand children has been challenging and rewarding. It has required a comprehensive understanding of Conductive Education; strong management skills and effective promotion.

**Achieving Identifiable and measurable results for New Zealand children.** The children who attend and have attended our programme have achieved and continue to achieve more independence as a result of our assistance. Through case studies, we will show how particular interventions and our model for Conductive Education has encouraged young children to be the very best they can be.

**The Future for Conductive Education in New Zealand and Internationally. What we must now achieve to survive.** Our continued success is dependent on our ability to prove not only to parents but medical professionals that the Conductive Education works. To achieve this the Conductive Education Community internationally must now focus on the



undertaking qualitative and quantitative research that will prove what we have been seeing for years - Conductive Education does work.

