



**Resolution ResAP(2007)4
on the education and social inclusion of children and young people with autism spectrum disorders**

*(adopted by the Committee of Ministers on 12 December 2007
at the 1014th meeting of the Ministers' Deputies)*

The Committee of Ministers, in its composition restricted to the Representatives of the States members of the Partial Agreement in the Social and Public Health Field,¹

Referring to its Resolution (59) 23 of 16 November 1959 on the extension of the activities of the Council of Europe in the social and cultural fields;

Having regard to Resolution (96) 35 of 2 October 1996 revising the Partial Agreement in the Social and Public Health Field, and resolved to continue, on the basis of revised rules replacing those set out in Resolution (59) 23, the activities hitherto carried out and developed by virtue of that resolution, aimed at, *inter alia*, integrating people with disabilities into the community; and defining – and contributing to the implementation at European level – a model coherent policy for people with disabilities, based on the principles of full citizenship and independent living, implying the elimination of barriers to integration, whatever their nature (psychological, educational, family related, cultural, social, professional, financial or architectural);

Considering that the aim of the Council of Europe is to achieve greater unity between its members and that this aim may be pursued, *inter alia*, by the adoption of common rules in the disability policy field for the purpose of promoting the protection of political, civil, social, cultural and educational rights;

Bearing in mind the Convention for the Protection of Human Rights and Fundamental Freedoms (ETS No. 5), and its Protocol (ETS No. 9) establishing the right to education (Article 2) as well as the European Convention on the Exercise of Children's Rights (ETS No. 160);

Bearing in mind the revised European Social Charter (ETS No. 163), in particular Articles E (Part V), 15 and 17, and the Additional Protocol to the European Social Charter Providing for a System of Collective Complaints (ETS No.158);

Bearing in mind its Resolution ResChS(2004)1 on collective complaint No. 13/2002 by Autisme-Europe against France and the decision of the European Committee of Social Rights on the merits of the complaint;

Taking note of the final declaration of the 2nd European Conference of Ministers responsible for Integration Policies for People with Disabilities held in 2003 in Malaga, Spain, "Progressing towards full participation as citizens";

Bearing in mind other relevant recommendations of the Committee of Ministers to member states: Recommendation Rec(2002)8 on child day-care ; Recommendation Rec(2005)5 on the rights of children living in residential institutions; Recommendation Rec(2006)19 on policy to support positive parenting; Recommendation Rec(2006)5 on the "Council of Europe Action Plan to promote the rights and full participation of people with disabilities in society: improving the quality of life of people with disabilities in Europe 2006-2015";

Having regard to the United Nations Convention on the Rights of the Child (1989), the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities (1993) and the United Nations Convention on the Rights of Persons with Disabilities (2006);

Having regard to the International Classification of Functioning, Disability and Health (ICF) (2001), and to the International Classification of Diseases (ICD-10) of the World Health Organisation;

Reaffirming the universality, indivisibility and interdependence of all human rights and fundamental freedoms, and the need for people with autism spectrum disorders, regardless of the severity of their disorder, to be guaranteed their full enjoyment without any discrimination;

Convinced that ensuring equal opportunities for members of all groups in society contributes to securing democracy and social cohesion;

Considering that failure to promote the rights of citizens with autism spectrum disorders and to ensure equality of opportunities is a violation of their human dignity;

Emphasising the need for coherent policies at national level and co-ordinated action;

Referring to the work carried out by the Council of Europe Committee on the Rehabilitation and Integration of People with Disabilities (CD-P-RR) and by its subordinate body, the Committee of Experts on the Education and Integration of Children with Autism (P-RR-AUT);

Noting that autism spectrum disorders cannot, as yet, be identified at birth, and that the evolution of epidemiological data provides an indication, *inter alia*, of public awareness, the availability, accessibility and quality of diagnostic services;

Emphasising the need for a combination of therapy and learning in the way the education system caters to these children;

Reiterating the need to closely involve children and young people with autism spectrum disorders, along with their families, in decisions affecting their lives;

Recommends that the governments of the States members of the Partial Agreement in the Social and Public Health Field, with due regard for their own national, regional or local structures and respective responsibilities, encourage the education and social inclusion of children and young people with autism spectrum disorders and, to this end:

- a. take account, as appropriate, in their policies, legislation and practice of the principles set out in the appendix to this resolution and implement the measures advocated;
- b. with reference to the Council of Europe Disability Action Plan, take appropriate evaluation and follow-up measures;
- c. involve non-governmental organisations representing children and young people with autism spectrum disorders and their families in the implementation and monitoring of the measures advocated;
- d. promote the implementation of this resolution in areas which are not the direct responsibility of public authorities, but where they have a certain influence or play a role;
- e. ensure the widest possible dissemination of this resolution to all parties concerned, for example through awareness-raising campaigns and co-operation with civil society.

Appendix to Resolution ResAP(2007)4

Persons with autism spectrum disorders are full citizens of Europe. If provided with the appropriate level of education, they can be integrated into, and contribute to, society.

I. Introduction

1. Autism spectrum disorders are biologically based developmental disorders, which, although occurring with varying degrees of severity, always have a potentially devastating effect on the social integration of the individuals with this disorder, and their families.
2. Inclusion depends on the recognition that persons with autism spectrum disorders present specific needs that are qualitatively² different from other special needs and require specific understanding and approaches to meet them.

II. General considerations

1. Member states should adopt legislation and policies and provide enabling structures to mitigate the effects of the disorder and to facilitate the social integration, improve the living conditions and promote the development and independence of individuals with this disorder.
2. In line with the instruments of the Council of Europe and the UN Convention on the Rights of Persons with Disabilities, member states should ensure not only that education, social welfare and other public policies do not discriminate against people with disabilities, including people with autism spectrum disorder but that equality of opportunity and appropriate educational interventions are provided.
3. Member states should support wide-ranging early and accessible identification and diagnosis, individual assessment, public awareness and training for parents and the professionals concerned. They should also offer support for equal educational and training opportunities and support for social inclusion.

III. Specific considerations

1. Member states should provide a legal framework, which ensures the rights of children and young people with disabilities, including people with autism spectrum disorders to receive education – within general schemes wherever possible – that is appropriate to their needs, is non-discriminatory and works towards social inclusion. There is a need to ensure that resources are sufficient for the full implementation of relevant legislation.
2. Agencies should work together to provide a co-ordinated services for children, young people and their families. Autism spectrum disorders require a multidisciplinary approach to diagnosis, assessment and education.
3. With regard to suspected autism spectrum disorders, public authorities should provide services in order to prevent additional problems and respond to the needs of the individual and his or her family, while awaiting confirmation of diagnosis if the functional ability of the person is reduced.
4. There should be a tiered system that provides diagnosis based on recognised international criteria so that most diagnoses are made at local level in a timely manner (no later than six months from suspicion).

5. Following diagnosis, education for children and young people with autism spectrum disorders should be based on detailed assessments that identify the needs and strengths of each individual. Special attention should be paid to the education of young children with autism spectrum disorders. Steps should therefore be taken to ensure that services dealing with young children are aware of these problems as early as possible.
6. Families should be fully informed and involved in all stages of identification, diagnosis, assessment and education. In order to avoid exclusion of the child, families should be supported to enable them to maintain their child within the family and the community rather than in an institution, even where he or she displays behavioural problems.
7. Training should be available to parents to enable them to facilitate the development of their child and pre-empt or manage any challenging behaviour. Parents should also have access to continuing support from expert services and opportunities for contact with other parents, where an expert assessment is requested, according to defined eligibility criteria.
8. Initial and continuing training programmes should be introduced for professionals liable to be involved in the education of children and young people with autism spectrum disorders.
9. Political and administrative decision makers need to be made aware of autism spectrum disorders so that any relevant decisions can be taken in full knowledge of the facts.
10. Intervention to meet individual needs should be through an individual plan, which is regularly reviewed and comprises education, support and leisure. This individual plan should facilitate a co-ordinated approach to the transitions in the education system and towards adulthood and the employment market.
11. Children and young people with autism spectrum disorders should be given specific teaching in mainstream schools wherever possible and provided with opportunities to learn skills and gain understanding in order to engage in socially inclusive situations.
12. A range of schooling options, in no particular order, should be available to meet the diverse needs of children and young people with autism spectrum disorders. Support and opportunities for social integration should be provided in whatever situation best fits their current needs.
13. If possible, a database which is accurate, up-to-date and based on internationally-recognised criteria on children and young people with autism spectrum disorders should be used and made available to service planners and providers in accordance with data protection legislation.
14. Processes of internal and external evaluation should be put in place in order to assure the availability and quality of education and inclusion for children and young people with autism spectrum disorders and to provide recommendations and support at central planning and local service levels.
15. Training and ongoing support should be provided to families and educational services in order to help them to understand and manage challenging behaviour. Parents and service providers need to understand that challenging behaviour is not intrinsic to autism spectrum disorders, but arises from the interaction of the child with the environment. Typical strategies for dealing with challenging behaviour should be adapted to meet the needs of those with autism spectrum disorders.
16. Comorbidity, dual diagnosis and additional problems are common in autism spectrum disorders. This fact must be understood and recognised in the process of diagnosis and assessment with a view to meeting the individual's educational needs.
17. Specific education and support for children and young people with autism spectrum disorders should be provided to help prevent secondary consequences of their difficulties such as anxiety disorders and depression. If these, and other, mental health disorders do arise, those concerned should have access to the same medical and psychological treatment that are generally proven to be effective, but adapted to take account of their autism spectrum disorders.
18. Research should be carried out in support of the educational, therapeutic and inclusion strategies because reliable information helps to identify new problems which must be addressed, to develop solutions and to obtain satisfactory results.

Note ¹ Austria, Belgium, Bulgaria, Cyprus, Finland, France, Germany, Ireland, Italy, Luxembourg, Netherlands, Norway, Portugal, Slovenia, Spain, Sweden, Switzerland and United Kingdom.

Note ² The qualitative difference as opposed to a quantitative difference in terms of severity refers to a difference in nature rather than a difference in intensity.

Related Documents

Meetings

[1014th meeting of the Ministers' Deputies / 12 December 2007](#)

Other documents

[CM/Del/Dec\(2007\)1014/6.3E / 13 December 2007](#) 