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Exclusion Through Eligibility: How Administrative Disability Certification Limits Access to Special Education in South Korea

Rahkyung Kim [1,*] and SeonYeong Yu [2]

[1] Department of Special Education, The Catholic University of Korea, Bucheon 14662, Republic of Korea
[2] Department of Teacher Education & Curriculum Studies, University of Massachusetts Amherst, Amherst, MA 01002, USA; seonyeon@umass.edu
* Correspondence: rahkyungkim@gmail.com or kimrah@catholic.ac.kr

Abstract

South Korea identifies only about 2.2% of K-12 students as eligible for special education, compared with approximately 15% of students receiving services under the Individuals with Disabilities Education Act (IDEA) in the United States and approximately 27% of Australian students receiving educational adjustments for disability. Existing explanations have largely attributed this disparity to Korea's narrow statutory disability categories. However, this paper argues that disability definitions alone cannot adequately explain Korea's exceptionally low rate of special education eligibility. Instead, it examines how the relationship between disability registration and special-education eligibility may affect access to special education, even though the two are determined through distinct institutional processes. In Korea, registered disability status carries consequences across multiple policy domains, including eligibility for welfare benefits, employer compliance with the mandatory employment quota, and access to supernumerary university admission tracks. Using comparative institutional and legal analysis supported by official national statistics, this paper advances the administrative certification model as a new institutional framework that complements existing medical, social, and human rights models of disability. South Korea is examined as a critical case and compared with the United States, Germany, Finland, England, Japan, Canada, and Australia to examine how differences in certification arrangements relate to access to special education. Because national indicators differ in age range, identification criteria, and reporting conventions, the comparison is descriptive rather than a causal test. The analysis suggests that certification-centered eligibility may contribute to the educational exclusion of medically fragile, neurodivergent, and twice-exceptional students. This paper's theoretical contribution is to identify administrative certification as an institutional mechanism that may shape educational access beyond statutory disability categories. Its practical contribution is to identify greater separation between educational eligibility and disability certification as a potential reform option and to propose an accommodation-based tier of support, informed by Section 504 of the U.S. Rehabilitation Act, for students whose educational needs warrant support but who do not meet the certification threshold.

Keywords: special education in South Korea; special education eligibility; educational exclusion; disability certification; administrative gatekeeping

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1. Introduction

South Korea formally recognizes only about 2.2% of K-12 students as eligible for special education. By comparison, approximately 15% of public school students in the United

States receive services under the Individuals with Disabilities Education Act (IDEA), while approximately 27% of Australian students receive educational adjustments for disability. Explaining why Korea identifies such a small proportion of students has important implications not only for special education policy but also for understanding how educational systems define disability and determine access to educational support. This paper proposes that the pattern may be shaped not only by narrow disability definitions but also by an administrative architecture in which disability-related certification and eligibility processes have implications across multiple statutory domains, including special education services, welfare benefits, employment protections, and preferential university admission. Yoon's (2026) comparative institutional analysis points in a similar direction, showing how medically certified disability registration can operate as an administrative gatekeeper across income support and employment services, with implications for education.

Educational exclusion has increasingly been understood as extending beyond simple non-enrollment. UNESCO (2016) conceptualizes exclusion as encompassing multiple forms of deprivation throughout the educational process, including exclusion from meaningful participation, appropriate learning opportunities, and recognition of learning outcomes. Within this perspective, students may be physically present in school while remaining educationally excluded if the support necessary for meaningful participation is unavailable. This concern is important for children with disabilities, as special education systems were originally established to prevent this form of exclusion. A particularly underexamined problem therefore arises when students are excluded not from mainstream schooling itself but from access to the special education system designed to support them. This paper conceptualizes this phenomenon as a form of second-order educational exclusion. In South Korea, systemic exclusion occurs across both environmental and socio-cultural dimensions. Recent empirical research reveals that early childhood classrooms in Korea suffer from a limited representation of disability in learning materials (Yu & Kim, 2023), while cross-cultural comparisons with the United States underscore the profound impact of cultural context on young children's attitudes toward peers with disabilities (Yu & Kim, 2025). These findings suggest that addressing Korea's restrictive eligibility framework requires a comprehensive approach encompassing both structural reform and context-sensitive inclusive practices.

Disability has been conceptualized through several theoretical perspectives, including the medical, social, and human rights models. The medical model conceptualizes disability as an individual impairment requiring diagnosis and treatment (Oliver, 1990). The social model shifts attention from impairment to environmental barriers that restrict participation (Oliver, 1983, 1990). More recently, the human rights model has emphasized disability as a matter of equality, participation, and enforceable rights under the United Nations Convention on the Rights of Persons with Disabilities (Degener, 2016; United Nations, 2006). Together, these perspectives have influenced disability policy and special education research. Regardless of how disability is defined, one important question remains: Why do countries with similar disability definitions report very different rates of special education participation? This question also suggests that disability definitions alone cannot fully explain cross-national differences in special education participation. Disability status is not determined solely by medical diagnosis or legal definition but also through administrative processes governing access to public resources. Disability serves as an administrative category that governments use to determine eligibility for services and allocate scarce resources (Stone, 1984). These decisions are shaped by statutory rules but also by administrative practices and professional discretion (Lipsky, 1980). Likewise, Brodkin and Majmundar (2010) show that administrative procedures themselves can become mechanisms of exclusion, regardless of formal eligibility criteria. These perspectives suggest that differences

in special education participation may reflect differences in how disability policies are interpreted and implemented, rather than disability definitions alone.

International comparison further highlights this discrepancy. During the past two decades, most OECD countries have expanded special education participation through increased identification of learning disabilities, autism spectrum disorder, attention-deficit/hyperactivity disorder, and other neurodevelopmental conditions (OECD, 2015). Although national measures are not fully equivalent across countries, available statistics indicate cross-national variation in disability-related educational support: approximately 15% in the United States, 7.5% in Germany, approximately one-quarter of students receiving intensified or special support in Finland, 19.5% in England, and 27% of Australian students receiving educational adjustments for disability. By contrast, only 120,735 Korean students, approximately 2.2% of the national K-12 population, were identified as eligible for special education in 2025 (Ministry of Education [Korea], 2025). Although methodological differences warrant caution in direct statistical comparison, Korea remains a clear international outlier requiring further explanation.

2. Theoretical Framework

2.1. The Medical Model

The medical model of disability treats disability as an attribute of the individual, produced by an underlying impairment and properly addressed through diagnosis, classification, and intervention (Oliver, 1990). Within education systems organized around this model, eligibility for special education follows from meeting a clinical threshold—an IQ score, a standardized deficit measure, a confirmed neurological or sensory condition—largely independent of how a child is actually performing or what specific instructional adjustments would help. The medical model's strength is that it offers objective, replicable, professionally defensible criteria; its characteristic weakness, extensively documented in disability studies, is that it locates the "problem" entirely within the child and can therefore fail to recognize students whose difficulties arise primarily from a mismatch between their characteristics and an unaccommodating environment, rather than from a diagnosable impairment as such.

2.2. The Social Model

The social model of disability, developed initially by disabled activists and scholars including Oliver (1983, 1990), inverts this logic. Disability, on this view, is not a property of the individual body or mind but a relationship between an individual's characteristics and a social and physical environment that fails to accommodate the full range of human variation. For example, a child with dyslexia has disability not simply by a difference in how their brain processes written language, but because of a schooling system organized around a single, text-heavy mode of instruction and assessment that was not designed with that difference in mind. Applied to eligibility policy, the social model implies that the relevant question is not "does this child have a diagnosable impairment?" but "does the mismatch between this child's characteristics and the ordinary classroom environment require specialized support for the child to participate on equal terms?" This is closer to the operative logic of (Individuals with Disabilities Education Act [IDEA], 1990)'s two-part eligibility test in the United States, discussed further below, than to Korea's greater reliance on diagnosis in determining eligibility.

2.3. The Human Rights Model

The human rights model, most systematically developed by Degener (2016) in relation to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD),

builds on the social model by adding an explicit normative and legal dimension. Where the social model emphasizes the socially constructed nature of disability, the human rights model focuses on the obligation of states to remove environmental barriers and ensure equal rights. Under this framework, access to support is not a matter of administrative discretion or welfare provision but a right-based entitlement grounded in human dignity and non-discrimination (Degener, 2016). Article 24 of the UNCRPD applies this principle to education by requiring States Parties to ensure inclusive education at all levels, with reasonable accommodation and individualized supports provided as a right (United Nations, 2006). The human rights model thereby provides a normative standard for evaluating a country's disability eligibility system: do they identify individuals based on their need for accommodation and support, or do they rely on eligibility thresholds that are disconnected from the supports actually required? Comparative reviews of OECD special-education policy have used this framework to argue that equitable access to education requires differentiated, rather than purely equal, resource allocation for students with disabilities (M. S. Lee & Jung, 2004). This provides a bridge between the human rights model's emphasis on entitlement and the practical policy question at issue in this paper: a system that underidentifies students relative to their functional needs falls s short of distributive justice, regardless of how broadly its statutory categories are formally defined.

2.4. The Administrative Certification Model

The medical, social, and human rights models provide different perspectives on how disability is defined and understood. None of them, however, directly addresses a question that is critical for understanding policy implementation: who determines disability status, through what institutional process, and under what competing pressures? Early foundational work approached disability not primarily as a clinical or philosophical category but as a bureaucratic one—a status conferred by administrative certification in order to allocate scarce public resources. Stone's (1984) classic study, The Disabled State, argued that modern welfare states use "disability" as an administrative category to exempt certain individuals from ordinary work obligations and allocate benefits accordingly. She also argues that the criteria used to define disability are shaped not only by concerns of clinical accuracy but also by the state's interests in controlling the size and cost of the population eligible for exemption. Complementing this perspective, Lipsky's (1980) work on street-level bureaucracy shows how frontline officials implementing eligibility rules develop practical criteria shaped by institutional pressures and everyday administrative demands rather than merely by formal policy rules. Building on this administrative perspective, this paper proposes the administrative certification model as a complementary framework to the medical, social, and human rights models. It is intended as a conceptual explanatory framework rather than an empirically validated causal model. The model does not propose a different definition of disability. Rather, it focuses on how administrative institutions may affect the application of a formally defined disability category. The central proposition is that where registration as a person with a disability serves as a basis for access to multiple statutory entitlements, including welfare benefits, employment-related provisions, and preferential university admission, and where educational eligibility draws on the same underlying diagnostic infrastructure, the certification process may reflect considerations that extend beyond education. When certification is used across several policy domains, the institutions involved may have different administrative responsibilities and requirements. Welfare agencies administer disability-related benefits, employers may be subject to employment quota requirements, and universities may apply preferential admission provisions. As a result, a shared certification system may place greater emphasis on criteria that can be documented and applied consistently across different settings. Medically verifi-

able diagnoses may provide such a basis, whereas assessments of educational need may depend more on the student's functioning, learning environment, and required supports. The model therefore considers whether the use of a shared certification system may affect the extent to which educational needs are reflected in eligibility decisions.

The model does not assume that any individual policy directly produces restrictive educational eligibility. Rather, it identifies an institutional mechanism through which administrative arrangements may shape classification practices. When disability-related certification and eligibility processes operate across multiple policy domains with different responsibilities and incentives, eligibility criteria may tend to converge toward standards that are objective and administratively defensible. This generates a testable expectation: countries in which educational identification is more closely linked to welfare, employment, and university admission systems may exhibit lower and more medically concentrated rates of special education participation than countries in which educational identification is institutionally separated from those policy domains, regardless of how broadly disability categories are formally defined. Conceptually, the model can be represented as a pipeline: diagnosis → certification → eligibility → access to public resources → educational inclusion or exclusion. In a more institutionally separated system, the link between diagnosis and educational eligibility can be more flexible, allowing functional and need-based assessment because educational eligibility primarily determines access to educational services.

In a more institutionally coupled system such as Korea's, examined in detail below, the relationship between diagnosis, certification, and educational eligibility may be subject to stronger institutional pressures toward restrictive criteria when disability-related status also has implications for access to welfare, employment, and university admission. These pressures may arise from the different administrative responsibilities and incentives associated with these policy domains, even though disability registration and special-education eligibility are determined through distinct institutional processes.

3. Disability Certification as Institutional Gatekeeping

3.1. Korea's Coupled Certification Architecture

Formally, Korea operates two separate disability classification systems. The Act on Special Education for Persons with Disabilities governs eligibility for special education and lists eleven grounds under Article 15, paragraph 1, comprising ten enumerated disability categories (visual impairment, hearing impairment, intellectual disability, physical disability, emotional and behavioral disorder, autism spectrum disorder, communication disorder, learning disability, health impairment, and developmental delay) plus a residual clause for other disabilities prescribed by presidential decree. Separately, the Act on Welfare of Persons with Disabilities governs Korea's national disability registration system. The system currently recognizes 16 disability categories for registration and related welfare purposes, following the addition of pancreatic disability in July 2026. In 2021, when the system recognized 15 disability categories, approximately 2.65 million people were registered as persons with disabilities, representing about 5.1% of the total population. Notably, the two systems differ not only in their purposes but also in the disabilities they recognize. Learning disability, for example, is explicitly included as a category under the Act on Special Education for Persons with Disabilities but is not included among the disability categories eligible for registration under the Act on Welfare of Persons with Disabilities. Thus, registration under the welfare system does not by itself establish eligibility for special education, and some students who fall within a special education category may not have a corresponding disability registration status.

In practice, however, the formal separation between the two systems does not mean that they operate independently. Both processes draw on the same clinical infrastructure:

the diagnostic instruments and the categories of certifying professionals specified for each system overlap substantially, particularly for intellectual disability and autism spectrum disorder, which together account for more than 70% of Korea's identified special education population (Table 1). More importantly, national disability registration is linked to access to several statutory entitlements that may create incentives to obtain and maintain registered disability status, including disability pensions and welfare benefits under the National Basic Livelihood Security framework, as well as exemptions or reductions from certain fees and taxes. Two additional benefits are particularly relevant to this paper's argument. First, the Act on Employment Promotion and Vocational Rehabilitation for Persons with Disabilities imposes a mandatory employment quota on public and private employers above a certain size, with financial levies for non-compliance. Only workers with registered disability status are counted toward meeting that quota. Second, Korean universities offer supernumerary "special admission" tracks for students with disabilities, under which registered disability status is generally required for admission to reserved seats outside the regular admissions process. A related provision in the Enforcement Decree of the Gifted Education Promotion Act (Article 12, Paragraph 2) extends a similar equity-based special-admission pathway to students eligible for special education services seeking admission to gifted-education institutes, alongside students from low-income households and remote or rural areas. These arrangements illustrate how disability-related status can function as an eligibility criterion for accessing educational and employment opportunities. They also highlight the importance of ensuring that educational identification and support adequately account for students' individual profiles, rather than relying solely on disability-related status.

Table 1. Students eligible for special education (SESE) in Korea by disability category, 2021–2025.

Disability Category	2021 n (%)	2023 n (%)	2025 n (%)
Intellectual disability	51,788 (52.8)	55,867 (50.9)	59,456 (49.3)
Autism spectrum disorder	15,215 (15.5)	19,275 (17.6)	25,614 (21.2)
Developmental delay	9367 (9.5)	12,918 (11.8)	14,819 (12.3)
Physical disability	9695 (9.9)	9522 (8.7)	8987 (7.4)
Hearing impairment	3026 (3.1)	2907 (2.6)	2812 (2.3)
Speech impairment	2450 (2.5)	2645 (2.4)	2681 (2.2)
Health impairment	1799 (1.8)	1956 (1.8)	1924 (1.6)
Visual impairment	1826 (1.9)	1745 (1.6)	1678 (1.4)
Emotional/behavioral disorder	1874 (1.9)	1831 (1.7)	1643 (1.4)
Learning disability	1114 (1.1)	1037 (0.9)	1121 (0.9)
Total	98,154 (100)	109,703 (100)	120,735 (100)

Note. Data from the Ministry of Education [Korea] (2025) and corresponding 2021 and 2023 editions.

3.2. Why Coupling Narrows the Certification Threshold

Disability certification in Korea has implications beyond special education. Registered disability status serves as an administrative gateway to welfare programs, employment policies, and certain university admission programs. As a result, the same certification decision may be used in different policy settings and for different purposes. This is particularly relevant in a highly competitive university admissions environment. University admission carries considerable social and economic importance in Korea, as reflected in the extensive administrative measures taken on the day of the College Scholastic Ability Test (CSAT), when government agencies and businesses adjust working hours and transportation arrangements to reduce disruption for examinees. Disability-related admission programs operate within this broader context. Registered disability status can provide access to admission opportunities that are not available through the regular admissions process. The value of this status is therefore not limited to access to educational support. It

may also affect access to a competitive educational opportunity, which, unlike a service, is allocated in fixed numbers, so that granting one applicant's claim necessarily forecloses another's. The same issue arises in employment. The Act on Employment Promotion and Vocational Rehabilitation for Persons with Disabilities establishes employment obligations for covered employers, and registered disability status is used to determine whether those obligations are met.

Disability certification therefore has implications for employers as well as for individuals seeking benefits or services. These multiple uses of disability certification may affect how certification decisions are made. Criteria that are medically documented and consistently applied across cases may be easier to administer across different policy settings than judgments based primarily on individual educational needs, since such needs can vary according to a student's functioning, learning environment, and the type of support required, and since they may also require greater professional judgment. D. Lee (2020) documents this dynamic in the Korean context, noting that the system's exceptional and compensatory motives—particularly access to supernumerary admission—have at times created concerns about strategic certification-seeking. Yoon (2026) identifies a corresponding pressure on the administrative side: because disability certification is coupled with cash transfers, employment quota levies, and competitive university admissions, administrative gatekeepers face substantial political and financial burdens regarding entitlement integrity, and evaluators in these conditions tend toward strict, medically verifiable impairment thresholds that minimize administrative disputes. Read together, the two accounts describe the same institutional arrangement from opposite ends—pressure exerted by applicants seeking status, and pressure felt by those who confer it. Kwon and Kim (2016) note that Korea occupies an unusual institutional position, combining what the OECD classifies as a liberal disability-welfare model with a mandatory employment quota backed by enforceable levies, an arrangement adopted in 1990 on the Japanese model rather than developed from Korea's own welfare architecture. Their review observes that across European quota systems (Germany, France, Spain, Italy, Austria, and Belgium), eligibility for quota-based employment is generally restricted to individuals whose medically assessed impairment or loss of working capacity exceeds a defined threshold. The first observation suggests that Korea's institutional coupling is a product of institutional layering rather than coherent design, consistent with the argument in Section 3.4 below; the second indicates that reliance on medically verifiable criteria under quota systems is not specific to Korea. We note, however, that Kwon and Kim's comparison concerns employment outcomes rather than educational identification, and that they themselves caution that with roughly 29 observation countries, statistical comparison of this kind can be suggestive but not conclusive. We extend this caution to our use of their findings here. This distinction is relevant to Korea's special education eligibility procedure. Article 15(2) of the Act on Special Education for Persons with Disabilities requires a determination not only that an individual falls within one of the statutory disability categories but also that special education is required. Thus, the procedure includes both a disability-related criterion and an assessment of educational need.

The question is how these two considerations operate when disability certification is also connected to other policy domains. The administrative certification model proposes that this institutional connection may affect the relative importance assigned to medically verifiable disability and educational need. The present analysis does not establish that certification is restricted for this reason; the certification record shows which students were found eligible, not why any particular threshold was drawn where it was. Rather, it considers this institutional arrangement as one possible explanation for the relatively low identification of students for special education in Korea.

3.3. Decoupled Comparators

Comparison with decoupled certification systems helps clarify the institutional mechanism proposed in this paper. In the United States, IDEA eligibility is legally and administratively independent of disability benefits determined by the Social Security Administration and employment protections under the Americans with Disabilities Act, which does not establish a quota or levy system based on certified disability counts. A student's IDEA eligibility determination has no direct consequences for family welfare benefits or employer obligations. Germany similarly separates educational identification from broader disability registration. The determination of sonderpädagogischer Förderbedarf is conducted through school psychological services based on pedagogical considerations rather than welfare eligibility, while the separate Schwerbehindertenausweis system is used primarily for tax benefits and employment-quota purposes. A child can be identified as needing special educational support without entering the adult welfare-and-employment disability system.

Finland provides another example of functional decoupling through its non-diagnostic, three-tiered support model (general, intensified, and special support). Under the Basic Education Act, support was provided based on pedagogical assessment of educational need rather than formal clinical diagnosis or welfare eligibility. In 2024, 26% of comprehensive school pupils received intensified or special support (Statistics Finland, 2024), illustrating how educational support can operate independently of non-educational entitlement systems. From 1 August 2025, Finland reformed its learning-support system, replacing the previous three-tier model with a new support framework.

Australia provides a clear example of deliberate institutional decoupling. The Nationally Consistent Collection of Data on School Students with Disability (NCCD) identifies students based on the educational adjustments provided by schools in response to functional need, under the broad definition of disability in the Disability Discrimination Act 1992. This identification is separate from eligibility determinations for the National Disability Insurance Scheme (NDIS) or the Disability Support Pension, which use different assessment systems. Consistent with this institutional arrangement, Australia's NCCD participation rate has risen steadily, from 18.0% of students in 2015 to 27.0% in 2025 (Australian Curriculum, Assessment and Reporting Authority, 2025), without requiring a single certification process to serve competing administrative purposes. Canada shows a similar pattern. Special-education identification is primarily conducted at the provincial and school-board levels. Ontario, for instance, reported 17.3% of students receiving some special education program or service in 2015–2016 (Ontario Human Rights Commission, 2018). These data were collected independently of federal disability benefit programs and the Employment Equity Act, which sets proportional representation goals rather than a certification-linked quota system.

Japan represents a more comparable case to Korea rather than a fully decoupled comparator. Although Japan's officially identified special education participation rate is relatively low (approximately 3.3%), its broader disability certificate system appears more closely linked to welfare and benefit structures. At the same time, Japan's Ministry of Education estimated that approximately 6.5% of students in regular classrooms show characteristics associated with developmental disabilities without formal identification (Ministry of Education, Culture, Sports, Science and Technology [Japan], 2022). This gap is consistent with the paper's argument that tightly coupled certification systems may produce narrower formal identification than the underlying prevalence of educational need would suggest.

3.4. Institutional Incentives, Not Conspiracy

The administrative certification model advanced here does not claim that Korea's employment-quota system was designed to suppress special-education recognition, nor that any individual sector intentionally produces the outcome documented in this paper. Rather, the argument is structural. Disability registration, special-education eligibility, welfare benefits, employment policies, and other statutory arrangements are governed by distinct institutional processes. These processes, however, operate within a broader administrative system in which disability-related criteria and institutional incentives may interact. As a result, eligibility thresholds may reflect the cumulative and unintended effects of these institutional pressures. In this sense, the proposed mechanism operates through institutional incentives and administrative gatekeeping rather than through the deliberate design of any single policy. This distinction is consistent with Lipsky's (1980) account of how street-level implementation reshapes formal eligibility rules in practice, and with Stone's (1984) broader argument that disability categories in modern administrative states are shaped not only by clinical judgment but also by bureaucratic functions.

The pattern in Table 2 is consistent with the administrative certification model's central prediction. The two systems with tightly coupled certification arrangements—Korea and Japan—report the lowest participation rates and the greatest concentration of eligible students with particular diagnostic categories. By contrast, the six comparator systems with institutionally decoupled educational identification—the United States, Germany, Finland, England, Canada, and Australia—differ substantially in their statutory frameworks yet all report considerably higher participation rates, in the range of roughly 7.5% to 27%. It is important to note that the information on the eight countries presented in Table 2 is drawn from different sources; therefore, the reported percentages should not be used to establish a numerical ranking or direct statistical comparison across countries. Rather, the cross-national variation is interpreted here as a descriptive pattern that is broadly consistent with the proposed administrative certification model. This pattern does not establish that the administrative certification model has greater explanatory power than the medical, social, or human rights models. Instead, it suggests that differences in certification arrangements may be associated with differences in educational identification and indicates where further evidence would be most informative, particularly longitudinal data from systems that have altered the institutional relationship between educational identification and non-educational certification.

Table 2. National Special-education eligibility systems: participation rate, eligibility basis, and linkage to non-educational entitlements.

Participation (Age Range/Basis)	Eligibility Basis	Identification Process	Employment Quota Linkage	Admission Linkage	Welfare Linkage
2.2% (2025; K-12, formal certification)	Diagnostic/ categorical, two-step (diagnosis + committee)	Article 15 diagnosis-and-evaluation; district/provincial Special Education Operating Committee	Yes	Yes	Yes
15% (2022–2023; ages 3–21, IEP eligibility)	Need-based, two-part test (category + adverse educational impact)	Multidisciplinary IEP team evaluation under IDEA	No	No formal linkage	No
~7.5% (2019–2020; compulsory school age, Förderquote)	Need-based, pedagogical-diagnostic	School-based pedagogical assessment conducted by multidisciplinary educational authorities	No	No formal linkage	No

Table 2. *Cont.*

Participation (Age Range/Basis)	Eligibility Basis	Identification Process	Employment Quota Linkage	Admission Linkage	Welfare Linkage
19.5% (2024/2025; school age, EHC plan + SEN Support)	Need-based, integrated (EHC plan + SEN Support)	Local authority/school-based assessment; EHC plans integrate education, health, and social care	No	No formal linkage	Partial
~3.3% official (~6.5% estimated unmet need)	Diagnostic/ categorical	School-based referral; disability certificate system informs recommendations	Yes	Limited	Yes
~17.3% (2015–2016; school age)	Need-based, locally determined	School-board-level Identification, Placement and Review Committee (IPRC) process	No	No formal linkage	No
27.0% (2025; all school students, NCCD adjustment)	Need-based, functional (educational adjustment)	School-based, informed by Disability Discrimination Act 1992 definition; NCCD data collection	No	No formal linkage	No

Note. Korea data from Ministry of Education [Korea] (2025) and author's analysis of the Act on Special Education for Persons with Disabilities and the Act on Employment Promotion and Vocational Rehabilitation for Persons with Disabilities. U.S. data from the National Center for Education Statistics (2024). Germany data from the German Federal Statistical Office [Statistisches Bundesamt] (2021) and Kultusministerkonferenz (2022). Finland data from Statistics Finland (2024). England data from the Department for Education (2025). Japan data from Ministry of Education, Culture, Sports, Science and Technology [Japan] (2022). Canada (Ontario) data from Ontario Human Rights Commission (2018). Australia data from Australian Curriculum, Assessment and Reporting Authority (2025). Percentages are not perfectly comparable across countries because of underlying definitions, age ranges, and reporting conventions.

4. Special Education Eligibility and Gatekeeping in South Korea

4.1. Legal Framework and the Two-Step Evaluation

Special education in Korea is governed primarily by the Act on Special Education for Persons with Disabilities, first enacted in 2007 and subsequently amended, which requires the state and local governments to provide an inclusive educational environment and education tailored to each student's characteristics and developmental needs. Article 15, paragraph 1 lists eleven grounds on which a person may be selected as a "student subject to special education." These include visual impairment, hearing impairment, intellectual disability, physical disability, emotional and behavioral disorder, autism spectrum disorder (including related disorders), communication disorder, learning disability, health impairment, developmental delay, and a residual category covering other disabilities prescribed by Presidential Decree, including multiple disabilities. In substance, the statute enumerates ten specific categories plus one residual provision—on paper, a classification system comparable in breadth to the categories used in the United States and Germany.

Korea's statutory categories have themselves evolved incrementally, in a pattern that broadly parallels the U.S. experience. The 1977 Act for the Promotion of Special Education, Korea's original special-education statute, enumerated seven disability categories; learning disability was added only in the 1994 amendment (M. S. Lee & Jung, 2004). This is broadly analogous to the U.S. shift from ten categories under the Education for All Handicapped Children Act (1975, P.L. 94-142) to a larger set under the 1990 IDEA (P.L. 101-476), which separated autism from the existing emotional-disturbance category and traumatic brain injury from the existing other-health-impairment category, adding two categories in total. The parallel is instructive for the argument developed in this paper: both systems have

expanded their categorical coverage over time, yet the underlying eligibility structure, a qualifying disability category followed by an independent determination of need, has remained the organizing framework in Korea since 1977. This supports the paper's claim that category expansion by itself does not necessarily alter the certification architecture that may contribute to Korea's low identification rate.

Under Article 15, paragraph 2, a student who falls within one of these eleven grounds must also be independently "diagnosed and evaluated as needing special education." The final decision is made by a statutorily designated committee rather than by the diagnosing clinician alone. For students through middle school, the local superintendent of education makes the decision after review by the city, county, or district Special Education Operating Committee. For high school students, the decision rests with the metropolitan or provincial superintendent following review by the corresponding provincial committee. This two-step structure—diagnosis against an enumerated category, followed by a separate administrative determination that special education is in fact "needed"—leaves considerable discretion in the hands of evaluators and committees, and criteria for the categories most relevant to mild or functionally defined disabilities remain broadly defined and are implemented conservatively in practice (D. Lee, 2020; Ouk-Chan, 2016).

4.2. Composition, Growth, and Placement Patterns

As of 2025, 120,735 students in Korea were formally identified as eligible for special education (Ministry of Education [Korea], 2025). The distribution across disability categories was uneven. As shown in Table 2, intellectual disability accounted for 49.3% of identified students, followed by autism spectrum disorder (21.2%) and developmental delay (12.3%). Together, these three categories accounted for 82.8% of the identified population. Learning disability accounted for 0.9%, while emotional and behavioral disorder accounted for 1.4%. This distribution is relevant to the paper's broader examination of how students are identified for special education. The relatively large share of students identified with intellectual disability, autism spectrum disorder, and developmental delay contrasts with the much smaller shares identified with learning disability and emotional and behavioral disorder. These differences may reflect variations in the definitions, assessment procedures, and administrative practices associated with each category. The available statistics, however, do not by themselves indicate which factors account for these differences. A similar pattern was observed in 2019. Intellectual disability accounted for 53.4% of the 92,958 students identified for special education, while learning disability accounted for 1.5% (D. Lee, 2020).

The number of students identified for special education has increased while the overall student population has declined. The number of students enrolled in primary and secondary education decreased from 5,209,029 in 2023 to 5,015,310 in 2025. Over the same long- term period, however, the number of students identified as eligible for special education has followed the opposite direction, rising from 54,732 in 2000 to 120,735 in 2025—more than doubling even as the overall student population continued to decline (Ministry of Education [Korea], 2025; see Figure 1).

A rising number of identified students, despite a declining overall student population, is consistent with improvements in diagnostic capacity and growing willingness to identify disability. It also indicates that Korea's historically low identification rates should not be treated as a reliable baseline for underlying need, because the number of children who would benefit from special education is unlikely to have declined at anything approaching the rate of overall school enrollment. What has remained comparatively stable, however, is the basis on which students are identified. Although more children are being diagnosed, eligibility continues to depend primarily on disability diagnosis rather than on an assessment of educational need. Consequently, growth has been concentrated in

diagnostically well-defined categories rather than in the functional or borderline conditions that a more need-based system would be expected to capture. Budget data provide a further reason to question whether resource scarcity is the binding constraint on identification. Analyzing Ministry of Education annual reports from 1997 to 2020, C. W. Park et al. (2021) document that total special-education expenditure rose roughly tenfold and per-student special-education expenditure roughly fivefold over that period. They also find that special-education spending increased as a share of GDP, total education budgets, and general public education expenditure. Their central conclusion is that this growth tracks Korea's overall economic expansion more closely than the enactment of the Act on Special Education for Persons with Disabilities or the successive Five-Year Plans for Special Education Development, and that they found no evidence that those policy instruments themselves drove budget growth. For the present argument, the key implication is that a system in which per-student expenditure has risen substantially over two decades while the identification rate has remained among the lowest in the OECD cannot straightforwardly be described as one in which students go unidentified because resources to serve them are unavailable. This does not establish that resources are irrelevant. Budget adequacy at the school level is a separate question from aggregate expenditure trends, and Park et al. also document substantial and irregular variation across metropolitan and provincial offices of education. Nevertheless, these findings weaken resource scarcity as a straightforward alternative explanation to the institutional mechanism developed in this paper.

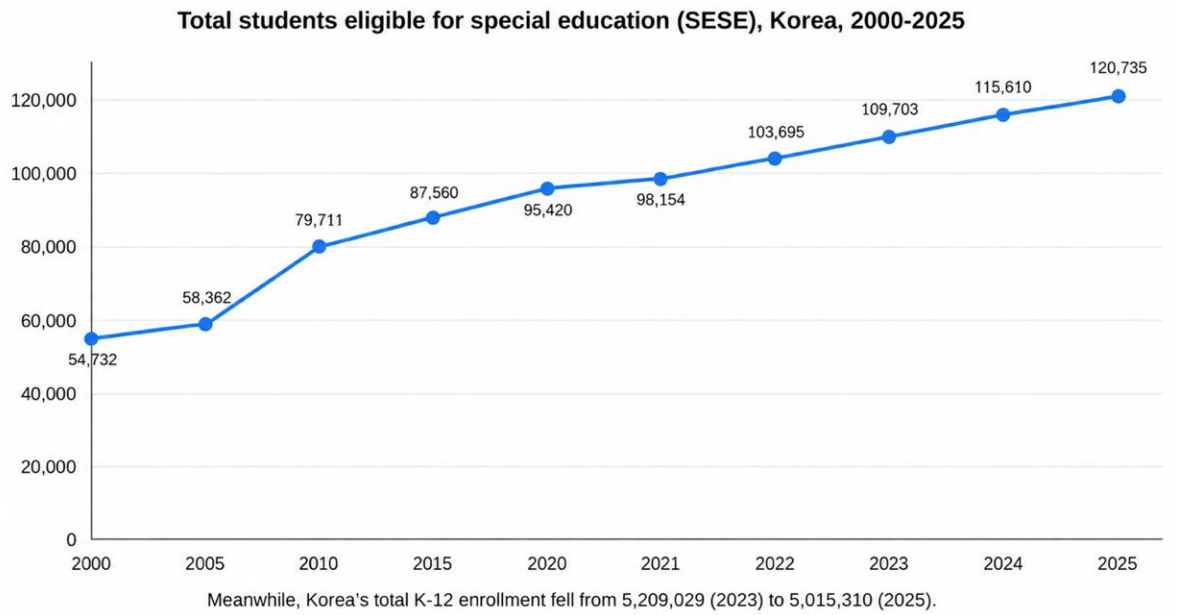

Figure 1. Growth in the number of students eligible for special education (SESE) in South Korea, 2000–2025.

Additionally, placement patterns reinforce this picture. Of the 120,735 identified students in 2025, 25.7% (31,027) are placed in special schools, 57.9% (69,908) in special classes within general schools where students receive at least part of their instruction separately, 16.2% (19,532) in full-time general classrooms ("full inclusion"), and the remaining 0.2% (268) in special education support centers. Taken together, the two general-school placements account for 74.1% of students, up from 72.2% in 2021. Most of this increase, however, reflects growth in part-time special-class placements rather than full inclusion. Korea also reports 28,445 special education teachers nationwide, equivalent to approximately 4.2 identified students per teacher.

4.3. Certification Logic Versus Need: Quota and Admission Incentives

Section 3.2 described the institutional arrangements through which disability status acquires consequences beyond education. This section considers what those arrangements imply for the logic of eligibility determination itself. Disability status in Korea is used in several policy areas, including university admission and employment. These policies have developed partly through compensatory and quota-based approaches. Disability-related admission programs provide additional pathways to higher education, while the employment quota system requires covered employers to meet specified employment obligations. These policies give officially recognized disability status consequences beyond access to educational support. The use of disability status for these purposes may have implications for how eligibility is determined. Where a disability status is used to allocate a limited admission opportunity or to determine whether an employer meets a statutory employment obligation, eligibility criteria need to be sufficiently clear and verifiable for administrative purposes. Medical diagnoses can provide one relatively standardized basis for making such decisions. By contrast, judgments about educational need may depend more on individual circumstances, including a student's functioning, learning environment, and required supports.

The distinction is one of administrative purpose rather than of generosity, and it does not mean that quota-based policies necessarily produce restrictive eligibility criteria. Rather, it suggests a possible relationship between the purposes for which disability status is used and the way eligibility is determined. When the same status is used across education, welfare, employment, and admission, criteria that can be applied consistently across these settings may become particularly important. Educational eligibility based primarily on need operates somewhat differently. Its purpose is to determine whether a student requires additional educational support, rather than to allocate a competitive benefit or determine whether an institution has met a statutory obligation. In such a system, functional limitations and educational needs may play a greater role in determining eligibility even when a student does not meet a narrowly defined diagnostic category.

From this perspective, Korea's use of disability status across multiple policy domains may be relevant to the relatively strong role of diagnostic criteria in eligibility decisions. The relationship between these institutional arrangements and identification patterns remains an empirical question, but the Korean case provides a basis for examining whether the broader uses of disability certification are associated with how educational eligibility is determined (D. Lee, 2020; Ouk-Chan, 2016).

4.4. Diagnostic Eligibility Versus Educational-Need Eligibility

The contrast between Korea and its comparators can be summarized as a difference between a diagnostic-eligibility model and an educational-need-eligibility model. In Korea's system, a formal medical or psychological diagnosis meeting a defined clinical threshold functions as the primary gateway to special-education eligibility; without one, functional evidence that a child is struggling in the classroom rarely results in recognition on its own. IDEA in the United States uses a two-part test instead: a student must have one of the enumerated disabilities, and, as a result, need special education and related services because the disability adversely affects educational performance—an evidence-based, functional determination drawing on classroom performance data and observation, rather than relying exclusively on diagnosis alone. Germany's pedagogical-diagnostic procedure and Finland's non-diagnostic, tiered support model operate on comparable functional logic.

This distinction has direct operational consequences for learning disabilities specifically. Following the 2004 reauthorization of IDEA, the United States shifted away from an IQ–achievement discrepancy model toward Response to Intervention (RTI), which was later

incorporated into broader Multi-Tiered System of Supports (MTSS) framework (McIntosh & Goodman, 2016). Although implementation varies across U.S. states, MTSS is typically defined as a tiered system in which all students are universally screened, students identified as at risk receive structured small-group intervention, and those who do not respond adequately are referred for further evaluation. In this framework, identification is informed by documented response to instruction rather than a fixed test-score discrepancy alone. Korea, by contrast, continues to rely predominantly on an IQ–achievement discrepancy approach, requiring a standardized achievement score roughly two standard deviations below grade expectation that persists despite intensive instruction, with no universal, system-wide screening comparable to RTI's first tier. Because the Korean approach identifies difficulty only after it has become severe and persistent, students who would likely be identified earlier under an RTI-style system in the United States may remain unidentified in Korea, or may be informally labeled as showing "underachievement" rather than being recognized as having a learning disability with a statutory right to services.

The narrowness of Korea's eligibility categories is reinforced by a further, largely institutional feature: special education in Korea operates as a substantially separate track from general education, organized around physical placement rather than a continuum of need-based services (D. Lee, 2020). Although curriculum development proceeded on separate tracks until the 2015 revision first synchronized the timeline for special- and general-education curricula, teacher preparation, administrative structures, and curriculum materials remain substantially separate. Preservice training for general classroom teachers typically includes only a single, two-credit introductory course in special education, despite the fact that more than 70% of identified special education students spend at least part of their school day in general schools. Administratively, special education offices are structured as subordinate units within the general-education administration, yet they are expected to independently carry out many of the same administrative functions within this structure. Similarly, national education statistics published through Korea's official education statistics portal do not routinely integrate special education data with other student statistics, reflecting the continued institutional separation of the two systems. This organizational separation can also produce jurisdictional gaps, as illustrated by disputes over responsibility for students with reading difficulties, in which general- and special-education administrators have at times each treated such students as falling outside their primary responsibility (D. Lee, 2020; S. Lee et al., 2025). These features reflect a placement-based, rather than need-based organizational logic, in which students requiring support may fall between administrative domains rather than being identified through a unified continuum of educational need.

4.5. Comparative Disability-Category Composition

Figure 2 shows that the difference between Korea and the United States is not limited to the overall proportion of students identified for special education. The composition of the identified populations also differs across the two systems. The categories shown in Figure 2, however, are not fully equivalent across countries and should not be interpreted as comparisons of identical diagnostic groups. This issue is particularly relevant for Germany. German federal statistics do not report autism as a separate national Förderschwerpunkt category comparable to the autism categories reported in Korea and the United States. Autism-related students may be recorded differently across Länder, and some state-level statistics separately identify autism. For example, Hamburg has reported autism as a separate focus of support since 2011/12, although these students are included in the national statistics under "not assigned to a focus." Figure 2 therefore uses a mapping of German categories for illustrative comparison. This mapping should not be interpreted

as evidence about the prevalence or absence of autistic students in Germany. The same caution applies to learning disability. The U.S. IDEA category of specific learning disability accounts for a substantially larger share of students served under IDEA than Korea's learning disability category. In the United States, specific learning disability accounted for about 32% of students ages 3–21 served under IDEA Part B in 2022–2023 (U.S. Department of Education, National Center for Education Statistics, 2022). In Korea, students identified with learning disabilities accounted for 0.9% of the special education population in 2025. These figures should not be interpreted as directly comparable because the definitions and identification procedures differ. Despite these limitations, the category distributions show a clear difference in the composition of identified students. Korea's 2025 special education population was concentrated in intellectual disability (49.3%), autism spectrum disorder (21.2%), and developmental delay (12.3%).

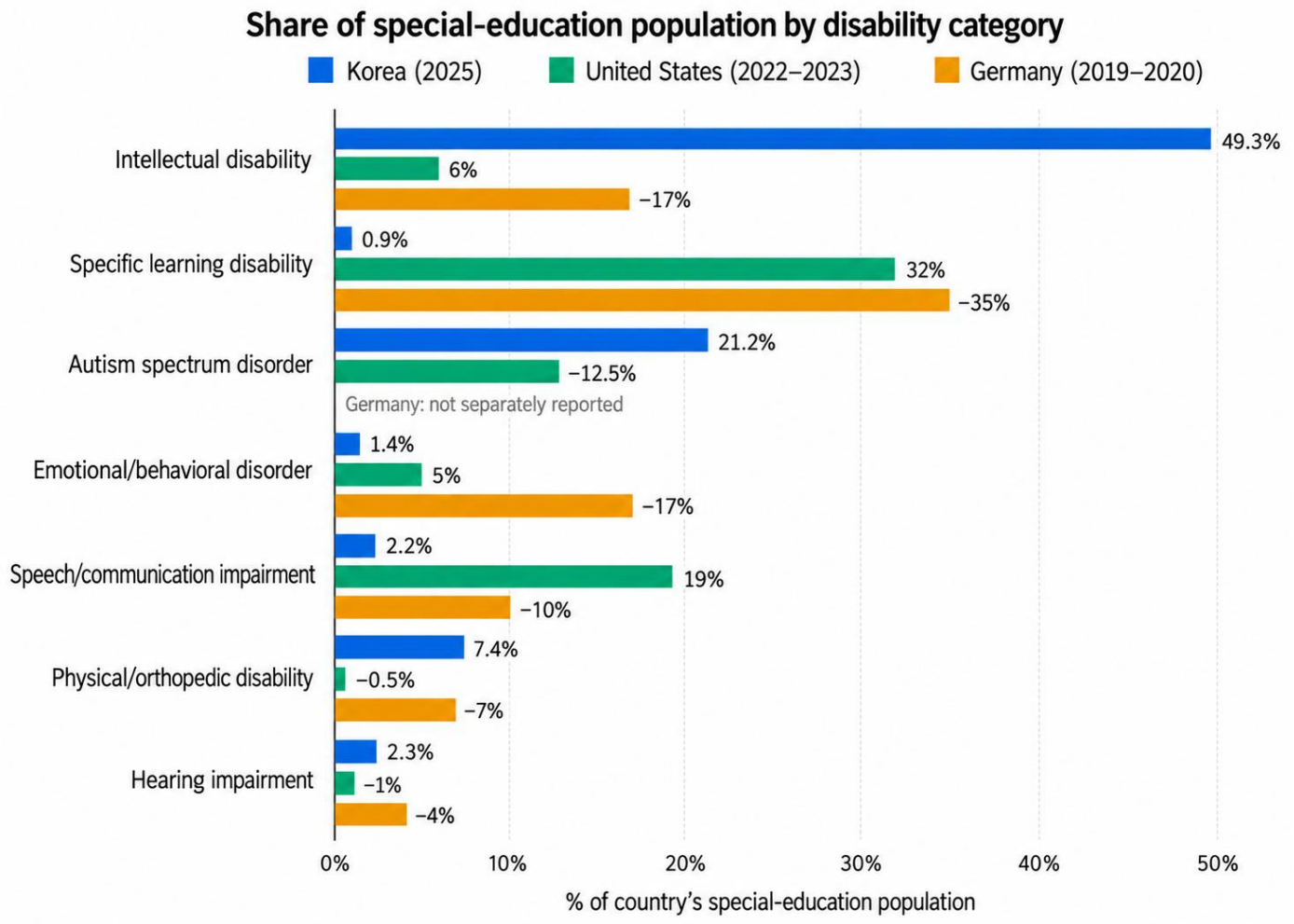

Figure 2. Distribution of disability categories among students receiving special education in Korea, the United States, and Germany.

The U.S. distribution, by contrast, includes a much larger share of students identified with specific learning disability, speech or language impairment, and other health impairment. The distribution of sensory and orthopedic disabilities also differs. In Korea, students with visual, hearing, or physical disabilities accounted for approximately 11.2% of the special education population in 2025. In the United States, visual impairment, hearing impairment, and orthopedic impairment together accounted for approximately 1.6% of students served under IDEA in 2022–2023. This difference further illustrates that the composition of identified students varies across systems, although the reasons for

these differences cannot be determined from category distributions alone. Taken together, Figure 2 suggests that cross-national differences in special education participation involve differences not only in the overall number of students identified but also in which students are identified. The category patterns are therefore relevant to examining how differences in eligibility and identification systems may be associated with the composition of special education populations.

5. Consequences of Exclusion

5.1. Educational Consequences

Non-certification is not a neutral administrative outcome; it has predictable institutional consequences. A student who is not certified as a "student subject to special education" is not entitled to an individualized education plan, is not assigned a special education teacher or itinerant support, and receives no legally mandated instructional accommodation, regardless of documented classroom difficulty. Without access to these formal supports, students experiencing persistent difficulties in reading, sustaining attention, or regulating behavior may continue to struggle in classrooms without a structured intervention pathway (S. Lee et al., 2025). Over time, these unmet needs can increase the risk of academic underperformance, disengagement, and behavioral or emotional difficulties. Within Korean schools, students who experience educational difficulties but are not formally identified for special education may instead be addressed through general-education categories such as "underachievement" or "school maladjustment" which do not carry the same statutory entitlement to special education services (Min, 2019). This is precisely the second-order exclusion this paper opened with: children excluded from the very system meant to prevent their exclusion, whose difficulties are documented, sometimes repeatedly, without ever triggering a legal entitlement to support.

The consequences plausibly compound over a schooling career. A child not identified in early elementary school, when an MTSS-style framework might address a reading difficulty before it becomes severe, is more likely to reach the IQ–achievement discrepancy threshold only after years of accumulated difficulty—by which point remediation is harder and the psychosocial costs of prolonged, unexplained struggle, including diminished self-concept and in some cases school avoidance, may already be substantial. We offer this trajectory as an interpretation consistent with the intervention literature rather than as a finding established by the present study, whose data are administrative and cross-sectional rather than longitudinal.

Non-certification also operates at a second level. Because these students do not appear in the statistics used to plan and justify special-education provision, their needs remain outside the information base on which service expansion rests: a system that does not count them has correspondingly less evidence for enlarging what it offers the next cohort facing the same threshold. The exclusion is therefore twofold—it withholds support from the individual student, and it removes that student from the aggregate record through which future support is argued for. UNESCO's (2016) account of educational exclusion—deprivation of the learning opportunities a person needs, preventing the realization of potential and limiting life opportunities—describes this pattern, and the certification-centered architecture examined here offers one institutional explanation for how such exclusion can persist in the Korean case.

5.2. Medically Fragile Students: Gaps in Certification and Services

A second and distinct barrier to inclusion arises at the intersection of disability certification and access to school-based medical support. Medically fragile students may face two related gaps: some are identified as eligible for special education but do not

receive adequate medical support, while others require ongoing medical care but may not qualify for special education certification because their health conditions do not, by themselves, meet disability eligibility criteria. For students already identified as eligible for special education, Korea's capacity to provide continuous medical support illustrates a gap between certification and service provision. As of 2019, 558 students nationwide required ongoing medical assistance, such as airway suctioning or tube feeding (Ministry of Education [Korea], 2019). Such support was most often provided by parents, school health teachers or nurses, and personal care aides, while only six students (0.9%) received support from licensed nurses (Ministry of Education [Korea], 2019). Neither the Act on Special Education nor the School Health Act (2021) provides a sufficiently clear framework for school-based medical support, leaving families and school personnel to manage significant responsibilities under uncertain legal and institutional arrangements (K. Park & Shin, 2019). Although specialist-nurse placement and school–hospital collaboration have been piloted, concerns remain regarding staffing, continuity, and long-term sustainability (Kim & Song, 2022).

A separate but related gap concerns students who require medical support but do not qualify for special education certification. For example, students requiring intermittent catheterization or ongoing management of conditions such as asthma may have substantial health-related needs at school without necessarily meeting disability eligibility criteria. They may therefore remain outside the special education system despite requiring specific support to participate safely and consistently in school. This illustrates a potential mismatch between disability-based certification and students' actual needs for school-based medical support. These cases suggest that disability certification and access to necessary medical support should not be treated as equivalent. Korea needs a framework that provides medical support based on documented student needs while also establishing an appropriate pathway for students who require school-based medical assistance but do not meet disability eligibility criteria.

5.3. Neurodivergence and Twice-Exceptionality

The categories most affected by Korea's narrow eligibility criteria—learning disabilities, ADHD, and mild emotional/behavioral disorders—overlap substantially with conditions often discussed in contemporary literature through the lens of neurodivergence. Framing Korea's exclusion problem in these terms clarifies what is at stake: Korea's diagnostic-eligibility model is less responsive to functional, highly variable profiles associated with neurodivergent learners, particularly when educational difficulties cannot be readily documented through a narrowly defined diagnostic threshold.

This gap becomes still more visible at the intersection of giftedness and disability, a population the international literature terms twice-exceptional (2e): students who simultaneously demonstrate characteristics of giftedness and disability, and whose profile may be obscured because one exceptionality can mask the other during assessments (Rizzo et al., 2025). Korea has operated a parallel gifted-education system since the Gifted Education Promotion Act of 2000, under which students are selected into gifted-education institutes primarily through standardized intelligence, reasoning, and creative problem-solving assessments. Special-education-eligible students are not formally excluded from this system: an equity provision in the Act's enforcement decree (Article 12, paragraph 2) allows students identified under Article 15 of the Act on Special Education to be considered for gifted-education selection outside the standard competitive process, alongside students from low-income households and remote or rural areas. In practice, however, this provision treats disability status primarily as an access category rather than as a distinct cognitive profile requiring a specialized identification approach. Korea does not currently

operate a dedicated assessment pathway designed to identify giftedness among students whose abilities coexist with autism, ADHD, or learning disabilities, unlike internationally developed approaches for twice-exceptional learners (Reis et al., 2014).

Because students must meet the relevant eligibility criteria to receive special education support, twice-exceptional students may face two related barriers in Korea. First, students whose disabilities do not meet the existing eligibility criteria may not receive special education support. Second, even students who qualify for special education may not have their gifted abilities identified because standard gifted-identification tools may not fully account for the effects of disability on test performance. Together, these barriers may make twice-exceptional students particularly vulnerable to being overlooked. This pattern is consistent with international research showing that twice-exceptional students are often overlooked when identification relies mainly on fixed categories and threshold-based criteria rather than on multiple sources of information and students' individual profiles (Reis et al., 2014; Rizzo et al., 2025). Addressing these barriers would require an identification pathway that assesses ability and disability jointly rather than sequentially, so that giftedness is not screened out by a disability-related profile and a disability is not overlooked because compensatory strategies mask it. Such a pathway would improve Korea's capacity to identify and support students whose educational needs reflect the interaction of ability, disability, and learning characteristics.

6. Discussion

This paper's central claim is that Korea's exceptionally low special-education participation rate is not adequately explained by the content of its disability statutes alone, whose formal categories are comparable to those of the United States and Germany. The paper therefore directs attention to the administrative architecture through which disability status is certified, and specifically to the fact that registered disability status carries consequences across multiple policy domains, including access to welfare benefits, the application of mandatory employment quotas, and preferential university admission. Sections 3 and 4 developed this argument through legal analysis of Korea's certification statutes, examination of the categorical concentration documented in official 2025 Ministry of Education data, and structured comparison with seven other national systems. These comparisons show that coupled systems (Korea and Japan) cluster at the low end of the international distribution, whereas decoupled systems (the United States, Germany, Finland, England, Canada, and Australia) cluster substantially higher, despite considerable variation in statutory designs. This descriptive pattern is consistent with the administrative certification model, which draws attention to a dimension the medical, social, and human rights models do not directly address, namely the institutional organization of certification. We do not claim on this basis that the model accounts for cross-national variation better than those perspectives, only that it identifies a factor meriting examination alongside them. The administrative certification model developed here has significance beyond the Korean case. Many rapidly developing education systems, particularly those that established welfare, employment-quota, and preferential-admission policies for people with disabilities before developing right-based, need-oriented special-education infrastructures, may exhibit similar forms of administrative coupling, even if their statutory disability definitions appear broad on paper. Japan's pattern in the comparative data presented here is suggestive of this possibility. More broadly, the model offers OECD policymakers a diagnostic question: does educational disability identification remain institutionally independent from welfare, employment, and competitive-admission certification, or has policy layering created forms of administrative coupling that may gradually generate restrictive eligibility pressures? Countries expanding disability-inclusive employment quotas or preferential admission

policies should pay particular attention to whether the certification systems underlying those policies remain separate from school-based identification, because the mechanism identified in this paper may emerge regardless of the original intent behind any individual policy. For Korea specifically, this paper's analysis implies that reform limited to expanding or loosening statutory disability categories is unlikely to be sufficient on its own, because the central constraint lies less in the formal categories themselves than in the certification process that determines access to educational services. Decoupling educational identification from welfare, employment-quota, and admissions certification—so that a student can be identified as needing specially designed instruction without that identification simultaneously determining family's welfare eligibility, employer quota obligations, or competitive admissions advantages—would reduce the institutional incentives toward restrictive, medically bounded gatekeeping documented in Sections 3 and 4.

This paper's findings also point to several complementary reforms. First, Korea could develop a universal screening and tiered intervention system, including MTSS-based approaches, so that educational need rather than diagnosis alone plays a greater role in eligibility decisions. Second, special education could be reconceptualized from a fixed, classification-first system toward D. Lee's (2020) proposed "special-support education" model, which would provide flexibility for students with underachievement, borderline cognitive functioning, or emotional/behavioral difficulties who fall outside the current eligibility categories. Third, dedicated legislation could establish a stable framework for medical support for students with complex health needs, as illustrated by the case study in Section 5.2. This recommendation addresses a distinct post-certification service gap rather than the certification-access mechanism itself. Fourth, drawing on the comparative OECD evidence reported by M. S. Lee and Jung (2004), Korea could extend family and multidisciplinary-team participation from the current committee-review stage (Section 4.1) to the initial diagnostic evaluation. In most OECD systems, families and multidisciplinary teams participate from the initial diagnostic stage, and evaluations document students' educational needs alongside categorical diagnoses, thereby linking assessment to educational programming (M. S. Lee & Jung, 2004). Korea could similarly require evaluators to document a proposed educational support plan as part of the initial evaluation, rather than limiting the evaluation to a categorical determination. Finally, Korea could develop specialized identification procedures for twice-exceptional learners, whose invisibility under the current system was documented in Section 5.3. For OECD systems more broadly, Korea's case cautions against treating expanded statutory coverage as sufficient evidence of an inclusive system. Participation rates and categorical composition, examined together as in this paper's Tables 1 and 2, provide a more informative assessment of whether formal commitments are translated into actual identification and support practices.

This study has several limitations. First, the national aggregate statistics used for cross-national comparison are not perfectly methodologically comparable across the eight systems. Accordingly, the analysis focuses on differences in certification architecture rather than on precise numerical comparisons or rankings. Second, although the cross-national pattern and analysis of Korea's institutional arrangements are consistent with the proposed administrative certification model, the cross-sectional comparative design cannot establish a causal relationship between administrative coupling and restrictive certification. Unmeasured differences across countries may also contribute to the observed pattern. Third, the analysis of certification decision-making in Korea relies primarily on policy literature and documentary evidence rather than original empirical data from clinicians, evaluators, or committee members. Thus, the proposed mechanism should be understood as an evidence-informed interpretation that requires further direct investigation. Finally, the potential educational and psychosocial consequences discussed in the paper are based

on existing literature and should not be interpreted as outcomes directly established by the present study.

7. Conclusions

Korea's special-education participation rate is not simply a matter of narrow disability definitions considered in isolation. It may partly reflect an administrative architecture in which disability certification is institutionally connected to educational services, welfare benefits, employment-quota compliance, and preferential university admission—an arrangement that may generate pressure toward a restrictive, medically verifiable eligibility threshold that a need-based identification process would not require. This paper has developed that argument through an administrative certification model situated alongside the medical, social, and human rights models of disability; through legal and statistical analysis of Korea's eligibility system based on official 2025 data; through structured comparison with the United States, Germany, Finland, England, Japan, Canada, and Australia; and through analysis of the educational consequences of non-certification, including for medically fragile students and neurodivergent and twice-exceptional learners. Addressing this issue may require more than expanding statutory categories. Greater separation between educational disability identification and the certification systems that govern welfare, employment, and competitive admission is one policy option worth considering, so that identification as a student who needs support could rest more directly on educational needs than on eligibility for unrelated statutory benefits. Whether such separation would in fact widen access remains an open question that this analysis cannot settle, and one best addressed through study of systems that have undertaken comparable reforms.

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