

# Building Inclusive Pathways

Supporting Children and Their Families with Disabilities  
from Diverse Backgrounds in Finland



**Tukena**





# Tukena as part of disability services in Finland



## We are working for a good life!

Tukena Foundation and Tukena Ltd provide support and services all over Finland. Our aim is to find individual solutions and to create high-quality services to support people with intellectual disabilities or special support needs and their families.

### Here's how Tukena makes a difference:

- 🌱 **Person-centered Support:** Tukena provides a wide range of housing and care services tailored to the unique needs of each individual. We offer support for families, respite care for caregivers, and opportunities for independent living.
- 🌱 **Advocacy and Empowerment:** Tukena actively advocates for the rights of people with intellectual disabilities, ensuring their voices are heard and their needs are met. We work with decision-makers, legislators, and other NGOs to create positive change.
- 🌱 **Building a brighter future:** Tukena goes beyond direct services, investing in development projects and training programs that empower individuals and strengthen communities. They believe in building a society where everyone can thrive.

## Empowering Lives, Building Futures

- Tukena Foundation is a Finnish non-profit organization dedicated to **improving the lives of people with intellectual disabilities and their families.**
- Established in 1992 by families, Tukena is committed to promoting equal opportunities and fostering inclusive communities.
- Tukena is a member of **EASPD - The European Association of Service providers for Persons with Disabilities** and an affiliate member of **Inclusion International.**

## Creating Sustainable Social Impact

Founded in 2005, Tukena Ltd is a social enterprise. With almost 50 service units across Finland, we work closely with individuals, families, and local authorities to provide high-quality, sustainable services.

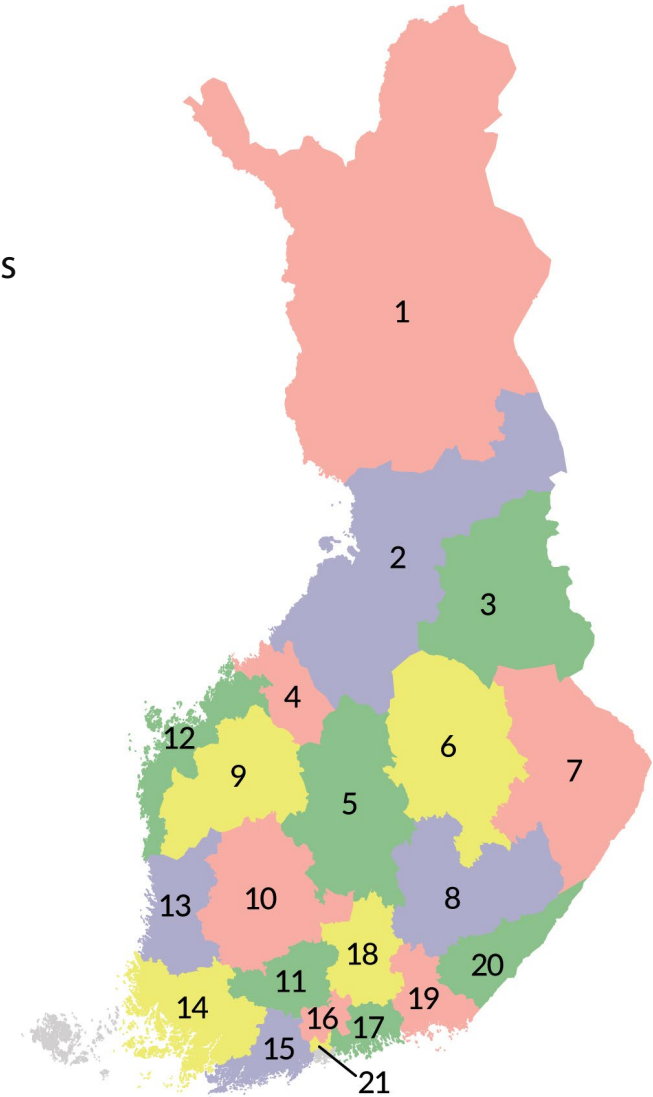
**Tukena is driven by a passionate team of over 1000 professionals** committed to making a difference. Our focus is not on profit but on creating a lasting positive impact on the lives of people with intellectual disabilities.

[Supporting for Good Life - video](#)

# Finnish social and health-care system and disability services

## Social and healthcare reform in Finland

- The responsibility for organising healthcare, social welfare and rescue services was transferred from municipalities and joint municipal authorities to wellbeing services counties on 1 January 2023.
- There are 21 wellbeing services counties, and the division into counties is mainly based on the division into regions.
- The region of Uusimaa is divided into four wellbeing services counties. The City of Helsinki will continue to be responsible for organising health, social and rescue services.



## The Finnish Welfare System

- Follows the Nordic model
  - most services are funded and provided publicly
- Disability services are the responsibility of local authorities (welfare services counties)
- The focus of disability policy is to promote the inclusion of disabled people in mainstream education, social and health care, not on the provision of special services.
- Finnish disability services are provided in according to the laws. However, in practice, receiving all these services may be sometimes complicated.



## Legislation

- Services for people with disabilities are governed by the
  - Social Welfare Act,
  - the Act on Disability Services and Assistance
  - the Act on Special Care for People with Intellectual Disabilities.
- The legislation on services for people with disabilities has been reformed. The reformed legislation has entered into force on 1 January 2025.
- The key elements of the new Act on Disability Services and Assistance are the inclusion, equality and non-discrimination of persons with disabilities, and individual services that meet the needs of persons with disabilities and support their independent living.
- New services under the new act are the specific support for inclusion and supported decision-making. In addition, the current services will be extended to certain new groups of people. The services will continue to be mainly free of charge.

# Disability services

- Assistive device services
- Home modifications
- Personal assistance
- Transport services
- Service housing
- Day activities
- Adaptation training and rehabilitation guidance
- Special services for people with intellectual disabilities
- Rehabilitation
- Institutional care
- Family care
- Support for informal care
- Interpretation services
- Financial support
- Employment


A personal service plan is drawn up for people with disabilities in order to identify the services and support measures they need.



- Many different services and support available
- Many services are free of charge
- Services and support for the whole family, in family's own home
- New Disability Services Act (2025) brings new opportunities
- Active NGO's provide many kind of support



- Access to services can be difficult, especially if the diagnosis is not clear
- Many different kind of services need a lot of administrative work also from the families
- Regional inequality in availability of services
- Still children living in institutions
- It is difficult for the service system to respond to diverse support needs



## Context and guiding idea of Diverse Backgrounds

- In Finland, just under one-third of children in early childhood education and almost one-quarter of pupils in basic education come from multilingual homes.
- When a linguistic background intersects with an intellectual or developmental disability, the child's rights can only be realised through both disability policy and integration expertise.



## Legal foundation (the “safety net”)

### Key Act

Constitution § 6

Non-Discrimination Act 1325/2014

Early Childhood Education & Care Act 540/2018

Basic Education Act 628/1998

Integration Act 681/2023

New Disability Services Act 675/2023 (in force since 1 Jan 2025)

### What does it guarantee?

Equality

Prohibits language- and disability-based discrimination

Right to ECEC (early childhood education and care) + support

Free schooling, support for learning and school attendance, Finnish as a Second Language instruction

Integration plan, reimbursement for interpreting

Diagnosis-neutral, child’s own voice, personal assistance also for children

### Special relevance to immigrant families

Language, culture and disability may not hinder access to services

Obliges authorities to provide reasonable accommodations

Service counselling with an interpreter (Sec 16)

Preparatory education and mother-tongue lessons

Enables language and everyday support for the whole family

Emphasises culturally sensitive communication support

## Early identification & service coordination

- Child-health clinics, family centres of the wellbeing services counties and municipal **service counsellors** map support needs.
- Using an interpreter is both a **right of a guardian and an obligation for staff** (Administrative Procedure Act § 26).
- The Hilma Centre and Kela's (*Social Insurance Institution of Finland*, is a governmental agency that provides basic economic security for everyone living in Finland) medical rehabilitation provide free AAC devices in several languages.

## Early childhood education & pre-primary

- **Language-aware pedagogy:** visual supports, plain language, making the child's own language visible.
- The **three-tier support model** (general, intensified, special) also covers multilingual children; decisions can include interpreting and communication services.
- Co-operation with guardians is carried out in ECEC curriculum discussions with an interpreter; video and messaging apps (WhatsApp in plain language) are used.

## Early childhood education & pre-primary

### 5 Basic education (grades 1–9)

- 🔹 **Inclusion** is primary: the pupil attends the local school and receives S2 instruction and special-needs support in the same classroom.
- 🔹 An individual **IEP/HOJKS** (individual educational plan) is drawn up by a multiprofessional team (teacher + S2 teacher + special-needs teacher + family + interpreter).
- 🔹 If necessary, a **personal assistant** or **sign-language interpreter** is funded for the school day.
- 🔹 Large cities employ **multilingual instructors**; in Helsinki they rotate through day-care centres, schools and playgrounds, supporting both children and guardians.

## Social & health services and leisure-time support

- The wellbeing service county's **disability services** arrange housing support, transport and short-term care – decisions may include **cultural adaptations** (e.g. diet, religious needs).
- Municipal **multicultural service centres** (e.g. Helsinki) offer hobbies and peer groups in several languages.
- Kela (Social Insurance Institution of Finland) also reimburses interpreting services for a child with a hearing impairment whose family language is not Finnish or Swedish.



## On-the-ground challenges and professional response

## Challenges inside the target group

- **A double language barrier** – the child learns Finnish as S2 (second language) while AAC (augmentative and alternative communication) symbols must be translated into the family's language.
- **The highest autism risk** is found in the children of mothers who have migrated from the Middle East and Africa to Finland. According to HUS (Helsinki university hospital) research, their risk of having a severe autism spectrum disorder is approximately 50 times higher compared to children of Finnish mothers. The risk was elevated in all immigrant groups, except for those from the Nordic countries.
- **Diagnostic delays** – cultural differences in expressing symptoms and lack of parental knowledge postpone referrals.
- **Resource pressure** – shortage of special-needs teachers and interpreters for rare languages.
- **Coordination difficulties** – school, social services and healthcare use different IT systems, complicating joint planning.

## Cultural challenges and preassumptions

**Parental assumptions rooted in home-country norms** – in parts of Africa and the Middle East, disabled people traditionally stay at home without schooling or work because society offers no support.

These beliefs may accompany families to Finland, delaying early rehabilitation, schooling and leisure participation. Professionals must support the community and families to:

- correct the misconception that “Finland is the same,”
- highlight the child’s right to an active life, and
- support families in accepting the diagnosis and seeing opportunities.

## Disinformation that can slow down a family's integration

- ✎ In Sweden 2021 there started to be rumours on social media claim that child-protection workers in the Nordic countries “take Muslim children away from their parents”. The story was repeated by certain Turkish and Arabic-language channels, making it look credible.
- ✎ The “child-kidnapping” story began in Sweden in late 2021, accusing social services of removing Muslim children without cause. Swedish authorities and the Psychological Defence Agency have labelled it a coordinated disinformation campaign.
- ✎ Many parents have past experiences of corrupt or violent authorities. A scary story about “kidnapping” strengthens their instinct to avoid officials and parents might keep their children at home, skip school meetings or refuse disability services.
- ✎ This slows down language learning, therapy and everyday integration.
- ✎ Trust in authorities drops.

# Root Causes Behind Parental Assumptions & Trust Barriers

## Root cause

**Stigma & shame** – disability seen as a curse or punishment.

**Family honour & gendered blame** – mother held responsible.

**Fatalistic or faith-based perspective** – e.g.: “This is how God intends it; human help is unnecessary.”

**Legacy of corruption & weak governance** – prior public services unreliable or bribery-based.

**Authority trauma** – war-time or police abuse memories.

**System unfamiliarity & digital divide**

**Economic precarity & benefit confusion**

## How it appears in Finland

Child is kept at home; parents avoid ECEC (Early childhood education and care) and public spaces.

Delay in diagnosis; father may step back.

Low motivation for rehab, language learning and integration in general.

Fear of hidden costs, data misuse, child removal; paperwork triggers anxiety.

Uniforms or child-protection terms trigger fight-or-flight.

Rumours override official info; online portals left unopened.

Long work shifts cause therapy no-shows; fear benefits stop if child “improves.”

## Professional response

Use peer groups, local community and positive role models; frame disability through strengths.

Invite extended family or cultural mediator; normalise the diagnosis.

Engage trusted community members who understands “new norms” and keep the child’s and family’s best interests foremost.

Map the process transparently, guarantee free-of-charge services, provide written safeguards.

Ensure continuity of staff, use calm settings, offer home visits.

Train cultural peer mentors; demonstrate the service path with visuals/videos.

Bundle benefit counselling with care; clarify that rehab does not cancel allowances.



# Opportunities & promising practices

## Finland combines a *universal welfare state* with strong disability and integration legislation.

- 🌱 **Wellbeing services counties** (since 2023) deliver all social and healthcare services, including disability services, interpreters and family counselling.
- 🌱 **Municipalities** remain in charge of early-childhood education, basic education and leisure services; they work under *inclusive* “nearest school” and three-tier support principles.
- 🌱 The national Social Insurance Institution **Kela** (Social Insurance Institution of Finland) finances disability allowances, rehabilitation and interpreting for deaf or speech-impaired children, while **THL** (Finnish Institute for Health and Welfare) issues guidelines and monitors quality.
- 🌱 A diagnosis-neutral Disability Services Act (in force 2025) and a rights-based Integration Act (2023) oblige (should) authorities to remove both disability- and language-related barriers.
- 🌱 By law, families have the **right to a professional interpreter** at every stage, from vaccination visits to IEP meetings, and all public services must offer *plain-language* communication on request.



## Examples of practices that already work for immigrant children with disabilities in Finland

### Practice

**Multilingual instructors and *cultural mediators***

**Peer mentoring & Hilma Support Centre**

**Language-aware pedagogical tools (*KieliPeda / LangPeda*)**

**New pathways in legislation (Disability Services Act 675/2023)**

**Digital & plain-language services**

**Leisure & cultural inclusion (Kaikukortti + Liikkuva koulu)**

**Data-driven development**

### What is done in practice?

City-funded staff speak families' languages, help with enrolment, e-services and forms, and are present in playgrounds and schools.

Disabled migrants run language cafés and support groups (Arabic, Ukrainian, etc.); families share experiences and rights information.

Staff use a three-part instrument to map the child's whole language repertoire, learning environment and S2 progress.

From 1 Jan 2025, personal assistance is possible for under-6s, including communication coaching in the family's language.

THL guidelines for accessible e-health paths; InfoFinland offers disability-service content in 12 languages with plain language and videos.

Free cultural tickets via Kaikukortti; schools adopt an "active day" model through Liikkuva koulu.

Municipalities combine KieliPeda results, absence data and disability-service records to allocate resources and support research projects.

### Why it works

Provides familiar "trusted faces," lowers the threshold to approach authorities, and gradually builds families' self-sufficiency.

Peer role models reduce stigma, normalise schooling and support, and spread accurate information inside communities.

Turns "language awareness" policy into daily practice and records the home language in the IEP/HOJKS.

*Enables* intensive early-stage support and secures interpreting within the service decision.

Cuts bureaucratic loops, is mobile-friendly, and increases comprehension for families with varying literacy.

Low-cost way to combat social exclusion and strengthen parents' belief in the child's right to be visible.

Objective data guides funding, reduces "who shouts loudest" bias, and underpins evidence-based policy.

## Using visual storytelling to bridge cultures and explain neurodevelopmental topics

Complex ideas like executive-function challenges or autism can feel abstract—especially when parents and children are processing them in a second language. Professionally produced visual guides and short videos turn these concepts into concrete, shareable stories that work *across* cultures:

- 🔹 **Pictures speak first.** Animation, icons and step-by-step graphics bypass vocabulary gaps and invite viewers of any literacy level to follow along before a single word is spoken.
- 🔹 **Familiar cues spark recognition.** When the video shows, for example, a child covering their ears in a noisy canteen or showing strong special interest on certain things, parents can connect these scenes to behaviours they observe at home; often realising *“That’s our child”* long before any clinical terminology sinks in.
- 🔹 **Emotion on screen builds trust.** Seeing diverse families, recognisable routines and respectful body language reassures parents that the message fits their own values, not just “Finnish norms.”
- 🔹 **Layered information.** Voice-over or on-screen text can be swapped for multiple languages, while the core visuals stay the same—saving production costs and keeping content consistent.
- 🔹 **Modelling everyday strategies.** A 90-second clip that shows a parent using a visual schedule or an AAC symbol at breakfast is far more persuasive than a written leaflet about “structured routines.”

## Two short example videos

### "What is Nepsy?"

Animated everyday scenes that illustrate executive-function and sensory-profile differences.

"Nepsy" (neuropsychiatric) traits are normal variations—recognising them early lets us use simple supports that help every child succeed.

### "Autism Spectrum"

*"People on the spectrum experience the world differently; with understanding and structured supports they can thrive."*

Child-friendly visuals showing how autism can affect communication, social cues and sensory processing—balanced with strengths such as focus and pattern-recognition.



“we wouldn't ask why a rose that grew from the concrete for having damaged petals, in turn, we would all celebrate its tenacity, we would all love its will to reach the sun, well, we are the roses, this is the concrete and these are my damaged petals

— Tupac Shakur, The Rose That Grew from Concrete

## Recommendations for Future Development

## Radar List for the Next 3-4 Years

### Anticipated change

### Why it is coming

### What to start doing now

**EU Disability Card becomes mandatory in services**

EU legislation is expected in 2025-26; the card will entitle holders to discounts and accessibility benefits across the Union.

Plan a *one-click linkage* between the card and the wellbeing region's client database so entitlements activate automatically. • Train ticket, transport and cultural-sector staff early.

**EU Child Guarantee indicators for multilingual children's support**

Finland must report on implementation in spring 2026, covering ECEC, school and care access for children at risk of poverty.

Tag HOJKS and KieliPeda data with "Child Guarantee" identifiers to show how multilingual disabled children are reached. Prepare to tap ESF+ funding windows.

**Wellbeing regions' e-services converge into a single national model**

The Ministry of Social Affairs and Health's digital roadmap calls for unified service paths and online guidance.

Include disability and interpreting services in early pilots. Invest in accessible UX (user experience) and test with multilingual families.

**EHDS links social, health and school data in one view**

The European Health Data Space is due in 2025, enabling cross-border data use.

Build an interface so ECEC records, HOJKS and Kela decisions appear to families after a single login. Create a multilingual plain-language consent form.



## Anticipated change

**AI-based multilingual voice assistants**

**Countering disinformation becomes a formal family-centre task**

**New migration waves (climate + geopolitical instability)**

**Economic pressure    outcome-based funding for support**

**Remote therapy & hybrid rehabilitation become mainstream**

## Why it is coming

Testbeds already trial Finnish-Arabic speech-to-speech translation; the national AI-DOC programme is scaling skills.

Rumours like “child-kidnapping” spread from Sweden showed the risks in the big scale.

Increased arrivals predicted from the Horn of Africa and South Asia, 2025-30.

The Ministry of Finance will pilot results-based social-service funding in 2025.

Post-Covid practices persist; new Kela reimbursement rules in 2026 further lower the remote threshold.

## What to start doing now

Pilot a voice-controlled application bot for disability services. Ensure data protection and bias testing for smaller languages.

Appoint a permanent *information-resilience contact* to monitor social-media keywords and issue rapid fact sheets. Link local channels to the Nordic psychological-defence network.

Expand interpreter pools (e.g. Tigrinya, Pashto). Update KieliPeda language lists and family-centre language offerings.

Define clear impact metrics for disabled immigrant children (e.g. rehab starts < 3 months, EU reimbursements claimed). Be ready to demonstrate cost-benefit figures.

Develop a *home-handbook* for culturally sensitive tele-therapy. Test a VR language environment where the child practises S2/AAC skills at home.

## Closing Thoughts

**Every child's life and potential is a shared responsibility.**

When disability expertise meets cultural sensitivity and clear communication, families move from uncertainty to confidence and children move from the margins to the mainstream.

- 🌱 Invest early: diagnose, inform, empower.
- 🌱 Build trust: one multilingual conversation at a time.
- 🌱 Act together: schools, all social and healthcare sectors and communities pulling in the same direction.
- 🌱 In addition to legislation, there must be national initiative and a duty, to put the legislation into practice across the entire country.



“Every one of us is, in the cosmic perspective, precious. If a human disagrees with you, let him live. In a hundred billion galaxies, you will not find another.”

— Carl Sagan, *Cosmos*



# Thank you,

Jarno Lehtonen

Development Manager

Development of Services for Children and Families

[jarno.lehtonen@tukena.fi](mailto:jarno.lehtonen@tukena.fi)