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## **One Stop Early Intervention Centres (OSEICs) in Sarawak: Success Factors and Challenges**

Case Study

Submitted by:

Inclusive Development Partners

January 2026

## 1. Introduction & Context

Children with disabilities in Malaysia—especially those with developmental delays or learning disabilities—often lack access to early childhood development (ECD) and early intervention services due to policy gaps, limited resources, personnel shortages, and social stigma. Although the Persons with Disabilities Act (2008) provides a broad definition of disability, many children remain unregistered or unidentified, contributing to underestimates of true prevalence. In Sarawak, learning disabilities make up the vast majority of childhood disability registrations, reflecting a substantial unmet need for structured early intervention. Evidence consistently shows that early intervention improves developmental outcomes and strengthens caregiver capacity, yet access remains uneven, with geographic disparities, long wait times, and limited qualified professionals.

Sarawak has expanded its support system through One Stop Early Intervention Centres (OSEIC), designed to provide coordinated diagnosis, intervention, and rehabilitation for children aged one to six who have or show behaviors associated with learning disability (including attention deficit hyperactivity disorder or ADHD) and autism spectrum disorder (ASD), and for children aged six months to six who have down syndrome.<sup>1</sup>

### Key Stats

- 805,500 persons with disabilities registered in Malaysia out of 34.1 million total population (2.36 % of population). [DOSM 2024]
- 54,083 persons with disabilities in Sarawak (2%). [DOSM 2024]
- 16,024 children (≤18) registered with disabilities in Sarawak; 13,154 (~82%) have learning disabilities. [KPWK Sept 2025]
- 1,561 children aged ≤6 registered with disabilities; 1,254 (~80%) have learning disabilities in Sarawak. [KPWK Sept 2025]

The purpose of this case study is to complement the baseline findings report for the UNICEF sponsored **longitudinal study and impact evaluation of early intervention centres in Sarawak for children with developmental delays** by providing additional information specifically about OSEIC Sarawak. The case study covers OSEIC governance and institutional arrangements, the OSEIC model, human resources and capacity, community and family engagements, monitoring and evaluation, and financing and resource mobilization. A final section includes a table summarizing success factors and enablers as well as challenges and bottlenecks for each section, followed by a set of recommendations.

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<sup>1</sup> Children with Down syndrome are admitted earlier because their diagnosis is evident earlier than those with other delays or disabilities, which typically do not begin to present until age one.

## 2. Governance & Institutional Arrangements of OSEICs

OSEIC Sarawak was **established** in 2020 as a joint development project between the Sarawak Government and Petroliaam Nasional Berhad (PETRONAS), an oil and gas company, as the latter's corporate social responsibility (CSR) programme. After the first year, funding has come from the government of Sarawak. OSEIC Kuching opened first and a second centre in Dalat opened in 2023. OSEIC Sarawak's **mission** is to provide early intervention access to children with developmental delays through 1) early educational awareness to the community; 2) parent engagement and participation; 3) professional and world-class best practices; and 4) provision of a safe and conducive environment.

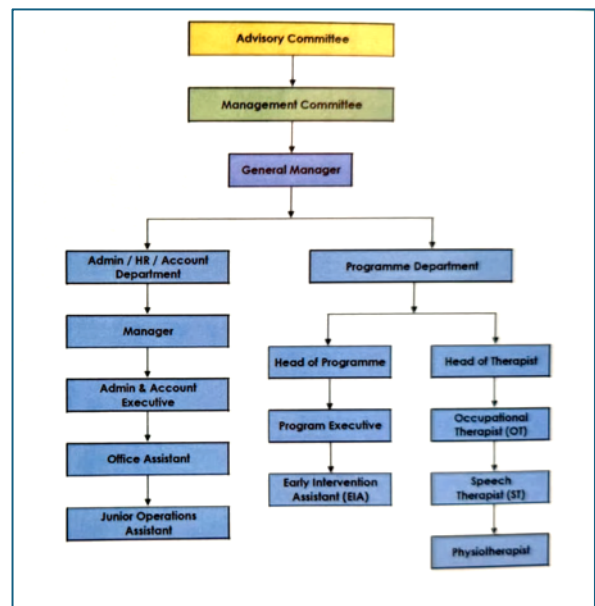
The OSEIC **theory of change** can be articulated through its **objectives**:

*IF* OSEIC Sarawak...

1. Engages and supports parents in nurturing and improving their children's development;
2. Provides appropriate professional intervention programmes as early as possible;
3. Identifies the special needs and process of the child's achievement and ability through IEPs;
4. Optimises the growth and functional development of children for total well-being; and
5. Provides space and appropriate intervention opportunities in a safe and conducive environment,

*THEN* children with developmental delays will be enabled to grow and develop in a holistic and integrated manner, thus achieving their optimum potential in life.

OSEIC Sarawak is **overseen** by an Advisory Committee and a Management Committee. The Advisory Committee is comprised of nine members and is chaired by the Minister of Women, Early Childhood and Community Wellbeing Development (KPWK). Other members include additional KPWK officials (Deputy Minister, Permanent Secretary, Head of Early Childhood Development) as well as the Director of the Social Welfare Department of Sarawak, the General Manager of SeDidik (early childhood education centres owned by the Government of Sarawak), the President of Sarawak Society for Parents of Children with Special Needs (PIBAKAT), a paediatrician and head of Clinical Research Centre at Sibu Hospital, and a lecturer at Universiti Kebangsaan Malaysia.



The Management Committee is comprised of seven members and led by the PIBAKAT President (who sits on both committees). Other members include a Vice President, a Secretary and

Assistant Secretary, a Treasurer, and two at-large members. The Management Committee prepares a report covering operational and financial updates, as well as various staffing and enrollment statistics, and submits it to the Advisory Committee **three times per year**.

These reports can include proposals and budget scenarios for various events such as parent support workshops. In 2025, for example, OSEIC held two such workshops. In some cases, the Advisory Committee suggests expanding the scope of the event to include more people, when budget allows. Sometimes OSEIC Kuching hosts events in its large upstairs space, but for larger participation, typically collaborates with a partner on another venue.

OSEIC Sarawak has **partnerships** with a few entities, as described below. KPWK manages all partnerships and collaborations on behalf of OSEIC.

- **PIBAKAT:** The Sarawak Society for Parents of Children with Special Needs, originally formed in 1991 by a group of parents of children with learning disabilities, manages OSEIC Sarawak. The organization provides an early intervention programme (EIP) for children with developmental delays and a youth and adult services (YAS) for those with learning disabilities. In addition, the organization conducts numerous fundraising and advocacy/awareness raising activities on behalf of children with disabilities and provides support to parents. PIBAKAT also runs a bakery and a launderette which is staffed by people with disabilities who underwent the YAS programme.
- **UNIMAS:** Universiti Malaysia Sarawak (UNIMAS) acts as a strategic academic partner in collaboration with OSEIC Sarawak. UNIMAS contributes academic expertise in knowledge translation, while also supporting capacity building through training and potential collaborative research. This partnership helps ensure that OSEIC implementation is evidence-informed, contextually relevant, and aligned with professional standards in early intervention practice. Together with medical personnel from Sarawak General Hospital, UNIMAS academics from the Faculty of Medicine and Health Sciences run a parental workshop three times a year for OSEIC to train parents in managing children's behaviour. The Child and Adolescent Learning and Wellbeing Centre (CALW), under the Faculty of Cognitive Sciences and Human Development (FCSHD), recently established institutional collaboration in early diagnosis, inclusive education, and intervention services for children with developmental needs with OSEIC. On the other hand, OSEIC offers internship for students from nursing science and cognitive science programmes of UNIMAS.
- **Other higher education institutions:** OSEIC has also provided internship for students in psychology, early childhood care and education from Universiti Malaysia Sabah, i-CATS University College and SEGI University & College.
- **TOY8:** TOY8 is a Japanese healthcare and education company focused on child development. One of its service and product offerings is a digital developmental screening tool that can identify delays in children ages 0-3. Through a partnership with OSEIC Sarawak and working with support from the Inclusive Network for Sarawak (iNET) and the National Early Childhood Intervention Council (NECIC), TOY8 has pilot tested its screening tool with children on the

OSEIC waitlist. This screening has led to identifying some who did not need individual intervention but rather, could instead enroll in a mainstream centre. As a result, TOY8 has helped to reduce the long and growing OSEIC waitlist and aims to continue this work. In addition, TOY8 provides the salary for a full-time speech therapist at OSEIC Kuching and is working with the centre to develop a new electronic case management system, which will replace the current paper-based system. TOY8 anticipates that this will create more efficiency and reduce some of the administrative burden on OSEIC staff.<sup>2</sup>

### 3. The OSEIC Model

**Open Door Policy:** Unlike many other EICs, OSEIC does not require children to have a formal diagnosis of disability or developmental delay to apply or enroll in the program. This means that many children do not have to wait as long to begin receiving intervention support. It can also mean that those who apply and do have a diagnosis have a lower chance of being offered a spot.

**Teaching Methods:** Newly enrolled children are observed by their assigned Early Intervention Assistant (EIA) for the first month. This allows the EIA to understand the child's specific needs across developmental domains. After this observation period, the EIA works with the child's parent(s) to develop the IEP, which they follow for six months before re-evaluating and adjusting the plan as needed.

Intervention techniques involve visual schedules, demonstrations (e.g., how to crawl), hands-on activities, consistent routines, and positive reinforcement. OSEIC Sarawak employs individualized education plans (IEP), emphasizing tailored assessments and programming based on each child's specific needs and developmental level. Each child undergoes an assessment, and there are short term and long-term goals. For example, some children need very basic toilet training and other self-care skills as the main focus in the initial period at the center.

The curriculum covers a wide range of developmental areas that are customized for each child's specific needs:

**Self-Care/Activities of Daily Living (ADL):** This is highly emphasized, sometimes even prioritized over academics, as a foundational skill. It includes toilet training, handwashing, independent eating (self-feeding), teeth brushing, packing belongings, and following simple routines. Progress is often tracked with scoring systems.

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<sup>2</sup> Information from TOY8 website and from discussion with TOY8 staff working with OSEIC Sarawak, held on 19 November, 2025.

**Gross Motor Skills:** This is a core component utilizing gym routines with activities like jumping, usually on the trampoline, crawling, climbing, balancing, throwing and catching balls, and pushing gym balls. These activities aim to improve coordination, balance, and physical strength. OSEIC Kuching has two large play spaces (sensory integration rooms) with specified routines for children of varying ages and skill levels, and OSEIC Dalat has one play space.

**Fine Motor Skills:** Activities focus on hand-eye coordination and dexterity. Common exercises include using scissors, pre-writing activities like scribbling and tracing, pinching (e.g., clothes pegs), screwing and unscrewing, and manipulating small objects within materials like clay or playdough.

**Numeracy & Literacy:** Basic concepts are taught step-by-step. This includes recognition and matching of numbers (1-10) and letters (A-Z), counting objects, recognising shapes, and phonics for verbal children.



**Communication Skills:** For non-verbal children, OSEIC EIAs consistently use simple, short verbal instructions (e.g., "sit down," "open"). They also use visual communication strategies, such as picture cards (PECS), to encourage children to make requests (e.g., toilet use) as well as "book sharing" - showing them books with pictures and supporting them to learn to name what they see.

**Social-Emotional Skills:** This is fostered by having group activities, social classes, circle time, and free play to teach crucial social skills like sharing, turn-taking, and interacting with peers. EIAs guide children in expressing emotions and managing aggression, for example asking the child 'Why are you sad?' 'Are you angry?'. In OSEIC Kuching, there is a calming room, and children may be taken there when the need arises.



An EIA at OSEIC Kuching noted, *"Some children come to the centre tired because they have already been attending another care or learning centre before coming. The child may be throwing a tantrum, so we take the child to the calming corner for 5 minutes or so, then only do the activities."*

**Programming changes in 2026:** In an effort to reduce the waiting list and ensure that OSEIC's interventions are being provided for children who need them, in 2026 OSEIC has plans to place



children in their level 2 program (one teacher working with two children, lasting 2 hours) into one of three categories based on their degree of readiness to transition into or be enrolled exclusively in a mainstream preschool. OSEIC staff have observed that many children grow sufficiently from the intervention that they no longer need one-on-one support from the EIC, yet parents are very reluctant to give up their child's spot in the centre before they age out.

The new transition program is designed to help parents see that their child is ready and “able to survive” outside of OSEIC. The centre is working with Prof. Dr Hasnah Toran (on Advisory Committee) to develop modules for this transition program. Children who are assessed and placed into group 1 are ‘highly ready’ to transition out of OSEIC after one more month of intervention. Those in group 2 are ‘ready’ and will transition out in two months. Those in group 3 are ‘not yet ready’ and will receive three more months of intervention. Children in the transition program will be placed in small groups of several children from the same readiness category and together they will receive targeted support to build school-readiness skills.

#### 4. Human Resources & Capacity

OSEIC staff includes a General Manager, a deputy General Manager, five staff in the Admin/HR/Account Department, and 30 in the Programme Department (27 at OSEIC Kuching and three at OSEIC Dalat), including EIAs and four therapists (speech, occupational, and physio).

OSEIC's policy of assigning an EIA to a child for the duration of their intervention (seeing the same EIA every week) and maintaining this consistency to the extent possible allows staff to observe growth and witness the outcomes of their work. This is important not only for the child, but also for the EIA, who is able to learn from experience what intervention approaches work to foster the child's growth and development.

During the study, three OSEIC staff participated in key informant interviews and shared examples of success from their work. The depth of detail and understanding they were able to demonstrate through these stories shows their dedication to the children they support, and the pride they feel about



their work. Factors contributing to success include **attention** to the individual needs and growth of each child, **consistency** of interventions, **competency** in how to tailor supports, and **patience**, as progress can sometimes emerge slowly over time.

**Limited Resources and Staffing.** EIAs hired to work at the OSEIC may not necessarily have existing background knowledge on early intervention and children with developmental delays. Many have some experience with, or knowledge of, early childhood education, but most receive training in early intervention on the job. While OSEIC management does not assign new staff to work directly with children until they have completed initial onboarding and training (shadowing existing EIAs) and has expressed confidence in the EIA's ability to successfully support children's growth, management has also noted the need for more formalized training to increase staff skills.

**Potential for Burnout.** OSEIC Sarawak struggles to recruit and retain qualified teachers, partly due to the perceived difficulty of the job and sometimes lower pay compared to other jobs in private or government settings. This directly limits the number of children they can enroll. This also can mean that EIAs often manage a large number of children over the course of the workday, which can push their related duties, such as documentation of session notes, to the margins between sessions or at the end of the day before they are able to go home. Staff noted that a typical weekday involves arriving to work at 6:30am and leaving at 5:00pm. OSEIC Kuching recently added Saturday sessions in order to serve more children. EIAs come to work for half a day, making their total workweek five and a half days. While this provides a slight increase in their income that many feel they need, it reduces their personal time away from work. One need expressed by staff, which would require additional funding, is an assistant for each classroom (OSEIC Kuching has 11 classrooms) to help with managing supplies, cleaning up between sessions, and supporting documentation.

**Personal and Emotional Strain.** OSEIC staff noted that the job is physically demanding, and emotionally draining, with teachers sometimes experiencing disappointment from slow progress and lack of parental participation and continuation of activities at home. Ensuring the safety of both children and staff during activities is a constant concern due to the unpredictable movements of some children.

## 5. Community & Family Engagement

**Outreach.** Information about OSEIC Sarawak is mostly provided to the community through doctors or nurses in hospitals. An internet search for early intervention in Sarawak, Kuching, or Dalat also yields the OSEIC website, and the centre maintains an active profile on Facebook. One mother noted hearing about OSEIC Kuching through a friend whose child was already enrolled, and there has also been some media coverage at various points. The long waitlist suggests that demand for services currently outpaces the available supply, which may account for limited outreach efforts beyond these.



**Caregiver Support.** In terms of support provided to caregivers, OSEIC Sarawak staff formally meet with parents about their child's progress every six months and provide them with guidance and strategies for continuing the intervention efforts at home. While OSEIC staff expressed some frustration with their perception of parental involvement, namely that many parents do not partner with them in continuing the EI strategies at home, parents in the study expressed a desire for more direct guidance and opportunities to form community with other parents.

While some parents are able to informally meet each other when they happen to be at the centre at the same time during their child's session or during occasional information sessions, OSEIC Sarawak does not facilitate any formal parent or caregiver connections on an ongoing or regular basis. Staff at OSEIC Kuching noted hosting a workshop for parents of children with ASD, through the partnership with UNIMAS and SGH, three times per year, and also said they hold an annual session for caregivers on how to transition to primary school, which includes representatives from the Ministry of Education.

**Stigma Reduction.** Many parents interviewed for the study shared personal stories of social stigma in relation to their child's disability or delay. Some also shared that their time at OSEIC helped them to overcome their own biases or misunderstandings about disability through gaining greater insight and understanding of their own child.

**Local Networks.** As noted above in partnerships, PIBAKAT and KAA are two of many organizations in Sarawak that exist to support parents of children with disabilities. However, because many parents of children enrolled at the OSEIC do not consider their child to have a disability, in particular those who do not have an ASD diagnosis, they are less likely to join or engage with such groups.

## 6. Monitoring, Evaluation & Learning

In addition to tracking its spending against the annual budget and reporting to the AC three times per year, OSEIC is in the early stages of evaluating its work through an annual assessment of its staff using an evaluation form and one on one meetings, as well as through informal dialogues with OSEIC management staff a few times each year, when staff are encouraged to share any challenges or observations. The staff evaluation criteria were being fine-tuned as of the writing of this case study.

Children Graduated from SEIC Sarawak							
YEAR GRADUATED	ALIRAN PERDANA		PROGRAM PENDIDIKAN KHAS INTEGRASI (PPKI)		SEKOLAH KEBANGSAAN PENDIDIKAN KHAS (SKPK)		TOTAL GRADUATED
	PROGRAM PENDIDIKAN INKLUSIF PENUH (SEMUA SUBJEK – KELAS BIASA)		KUCHING	DALAT	KUCHING	DALAT	
	KUCHING	DALAT					
2022	2		17		7		26
2023	12		24		11		47
2024	24	6	37	3	21	0	91
2025	22	3	88	5	15	0	133
TOTAL	69		174		54		297

## 7. Financing & Resource Mobilization

As noted above, many OSEIC staff are not specially trained in early childhood development, special needs education, or early intervention techniques prior to being hired. OSEIC Management noted the need for funding to provide “upskill” training to its staff. In 2025, OSEIC applied for a sponsorship from the Sime Darby Foundation (YSD) and in early 2026 received Rm 350,000 to support such training (and other programming expenses).<sup>3</sup> The training involves 15 days of intensive capacity building as well as one year of mentoring. Staff who receive the training will be contracted (“bonded”) to work for OSEIC for three years in exchange for the free training.

After five years of operation, OSEIC Sarawak has seen substantial success in providing an affordable way for families to access early intervention services in both Kuching and Dalat. There have also been many lessons learned. The success factors and enablers as well as challenges and bottlenecks discussed above are summarized in the table below.

	Success Factors & Enablers	Challenges & Bottlenecks
<b>OSEIC Model</b>	<ul style="list-style-type: none"> <li>Children need not have a diagnosis to apply and enroll in OSEIC, which reduces the long wait times that many families experience before</li> </ul>	<ul style="list-style-type: none"> <li>The open-door policy can also result in children with a diagnosis waiting longer to be enrolled</li> </ul>

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	Success Factors & Enablers	Challenges & Bottlenecks
	<p>receiving a formal diagnosis and seeking support.</p> <ul style="list-style-type: none"> <li>• OSEIC interventions are evidence-based and individually tailored to each child's specific skills and needs.</li> <li>• The new transition program is likely to reduce the waitlist by transitioning children out of OSEIC into mainstream preschools sooner.</li> </ul>	<p>compared to EICs that require a diagnosis.</p> <ul style="list-style-type: none"> <li>• Families are reluctant to accept that their child no longer needs OSEIC services and wish to stay enrolled until their child reaches the maximum age.</li> </ul>
<b>Human Resources &amp; Capacity</b>	<ul style="list-style-type: none"> <li>• OSEIC staff provide personalized interventions tailored to each child.</li> <li>• Staff are extremely dedicated to their work, taking pride in the growth they see among the children they support.</li> </ul>	<ul style="list-style-type: none"> <li>• OSEIC has limited resources and staffing, with most staff being trained on the job rather than being hired with a background or diploma in special needs education or early intervention.</li> <li>• The work takes a personal and emotional toll on staff. Staff work long hours and there is potential for burnout without more supports or better pay.</li> </ul>
<b>Community &amp; Family Engagement</b>	<ul style="list-style-type: none"> <li>• OSEIC provides both formal and informal opportunities for families of enrolled children to meet. This happens through informational and training events a few times per year as well as during waiting periods when children are in session.</li> </ul>	<ul style="list-style-type: none"> <li>• Caregivers expressed wishing for more direct support from OSEIC to parents, while OSEIC staff said that more parental support at home to reinforce interventions would help the child and the centre staff.</li> <li>• There is more demand for OSEIC services than currently available services.</li> </ul>
<b>Monitoring &amp; Evaluation</b>	<ul style="list-style-type: none"> <li>• OSEIC tracks its operations regularly and encourages staff to share feedback on their work experiences.</li> <li>• OSEIC collects basic data on where its graduates transition to, which provides a starting point for closer tracking (collecting school names and locations) and collaboration (referrals and more direct support from OSEIC to these schools during transition).</li> </ul>	<ul style="list-style-type: none"> <li>• Formal staff evaluations, which can provide standardized feedback to staff that is valuable for improving performance, are still emerging.</li> <li>• To date, OSEIC does not collect information on how well its graduates complete their transition or have direct collaborative relationships with schools receiving children from the OSEIC.</li> </ul>
<b>Financing &amp; Resource Mobilization</b>	<ul style="list-style-type: none"> <li>• The Sarawak government has invested substantially in early intervention.</li> <li>• OSEIC has successfully applied for sponsorships that provide additional funding for special programming or staff training.</li> </ul>	<ul style="list-style-type: none"> <li>• The OSEIC budget does not provide for staff training; the centre's management has to seek outside and supplemental funding sources to ensure that staff have the skills needed to perform at their best for the children in their care.</li> </ul>

Based on these insights, there are several policies or practices that are important to consider retaining and scaling, with adjustments or caveats, when planning for additional OSEICs to be opened across Sarawak. These recommendations include:

1. **Continue individualized support.** The success of early intervention relies on children receiving tailored interventions based on assessment data, information provided by caregivers, and teacher expertise. OSEIC does this well and should continue and scale this approach.
2. **Test and refine transition pathways.** OSEIC's newly developed modules for categorizing children into groups based on how ready they are to transition out of the OSEIC may need refinement through practice. Careful documentation of assessment criteria as well as following up with families after their child transitions can help generate evidence that this approach is suitable for moving children through their interventions in a thorough but timely manner.
3. **Set reasonable expectations for duration of enrolment.** Retain the open-door policy allowing undiagnosed children to apply and enroll but clearly communicate to caregivers from the beginning OSEIC's assumption that children will gain skills that allow them to transition out of the centre and into mainstream preschool settings as soon as possible. Set realistic caregiver expectations so they know they are unlikely to be enrolled until their child reaches the maximum age.
4. **Increase staff skills and qualifications.** While receiving sponsorships such as that recently awarded by YSD is a valuable benefit and opportunity, ideally, formalized staff preparation and training can take place prior to hiring or after hiring, with consistently budgeted funding. OSEIC leadership may wish to seek ways to institutionalize training programs that are currently funded externally and may not be consistently available. This can happen through diversified funding streams or partnerships with universities who offer relevant degree programs, but consistency is key.
5. **Retain and increase low teacher to child ratios.** Well-trained staff have the confidence and knowledge to perform their roles efficiently and effectively, but large caseloads and long hours can present challenges to any staff member. Hiring more early intervention staff to reduce caseloads as well as to increase the number of children served and number of sessions offered can mitigate potential burnout and ultimately create more sustainable working conditions and positive child outcomes.
6. **Scale caregiver support and training programs.** The OSEIC's current practice of offering a few large information or training sessions to caregivers each year is commendable and important to retain and scale. Scaling can be accomplished in small ways, too, by providing space and some structure to caregivers whose child attends the OSEIC and who will be waiting at the centre during their weekly sessions. The OSEIC can facilitate community building among families through informal but structured activities or places to gather during these waiting periods.

7. **Formalize staff performance evaluations to support consistency and growth.** Staff need quality feedback and support to grow in their skills. This is especially true when many staff are trained on the job and lack a professional or academic background in early intervention. Formal and regular staff evaluations can improve consistency of interventions and identify training and support needs.
8. **Collect information on transition outcomes for OSEIC graduates and formalize links with receiving schools.** Families can benefit from guidance on what school(s) could be a good fit for their child to attend after transitioning away from OSEIC. Understanding where its graduates go next and details about the transition can help OSEIC provide referrals and guidance to enrolled families. A more formalized collaborative relationship between OSEIC and these schools could also result in receiving schools being better prepared to include OSEIC graduates.
9. **Audit current budget for potential inefficiencies.** Before requesting a larger budget, OSEIC can analyze its current budget to identify areas for greater efficiency or savings. This will support the justification for an increased budget request.
10. **Increase budget to cover needed professional development.** The current OSEIC budget does not provide for formal staff training and skill development, but these are necessary provisions. Advocate for increased budget to include activities or services that are currently covered by external funding sources and therefore are sporadic or intermittent.