**ORIGINAL ARTICLE**

**Who Intends to Leave Residential Institutions for Persons with Disabilities in Korea?**

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**ABSTRACT**

This study explores what proportions of the institution residents intend to leave institutions and to live in community settings, and which factors influence their intention to leave, using a survey data collected in Busan, Korea in 2014. The results are: first, deinstitutionalization services were the most significant factor on the intention to leave. Therefore, if the institution residents are to be deinstitutionalized, the residential institutions have to provide them with more deinstitutionalization services. Second, the residents with physical disabilities or with brain lesion disabilities are more likely to have intentions to leave than those with developmental disabilities. The survey result that almost 20% of the institution residents have disabilities other than developmental disabilities shows backwardness of welfare for persons with disabilities in Korea. Deinstitutionalization of persons with disabilities is a policy for persons with developmental disabilities in most OECD countries. However, a substantial number of the institution residents with other disabilities remains in Korea. Korean governments should pursue these programs for persons with developmental disabilities as well as for persons with other disabilities: how to assist their independent living in community settings, and how to improve their intentions to leave residential institutions. In conclusion, persons with disabilities, even with developmental disabilities, should be deinstitutionalized as soon as possible. It is almost impossible for people to enjoy human rights fully in any institutional settings.

&lt;Key-words&gt;
residential institutions for persons with disabilities, deinstitutionalization, intention to leave, deinstitutionalization services, developmental disabilities
I. Introduction

Deinstitutionalization has been a policy since 1970s in the United States, Canada, and Western Europe. In the United States, institutional beds have reduced from 194,650 in 1967 to 48,496 in 1999 (Taylor, 2001). In Ontario, Canada, residential institutions for adults with developmental disabilities decreased from 16 in 1987 to 0 in 2009 (Lemay, 2009). Support for community-based services derives “both from a values base and from empirical research that has demonstrated the relative benefits of community living” (Stancliffe & Abery, 1997). The large number of comparative studies has shown that community-based services were more effective on adaptive behavior and challenging behavior than the institutions (Mansell & Beadle-Brown, 2009).

On the contrary, deinstitutionalization has not spread widely yet in Asia. In Japan, the development of group homes as a basis for transition to community life lags. Supports and societal resources for persons with intellectual disabilities living in communities are insufficient (Tanaka, Hosokawa & Inagaki, 2011).

In Korea, deinstitutionalization has not even been a policy yet though it may be considered as a direction which Korean governments are pursuing in that a chapter on independent living was included in Act on Welfare of Persons with Disabilities in 2007. Deinstitutionalization, however, cannot be considered as policy yet since the government has not spent any substantive expenditure to implement it.

Welfare benefits for people with disabilities in Korea have been expanded as the Pension for Persons with Disabilities\(^1\) in 2010 and the Activity Support Services for Persons with Disabilities\(^2\) in 2007 were introduced. However, residential institutions for persons with disabilities still remain as a dominant form of service provision for persons with severe disabilities, especially with developmental disabilities. Worse than that, residential institutions are widely considered as inhumane\(^3\). They have been criticized to violate resident’s human rights. But, their violations of human rights are not easily detected since they accommodate too many disabled residents per institution and the staff has focused on controlling rather than caring for and supporting them. Some institutions even became lucrative businesses for deviated operators.

Though the level of government expenditure on deinstitutionalization is still quite low, deinstitutionalization needs to be a main policy direction for persons even with severe developmental disabilities. Jo(2012) argued 53.42% of residents who were staying at living facilities for persons with disabilities intended to move from institutions to community settings and become independent even after they were explained of

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\(^1\) Pension for Persons with Disabilities is a public assistance program, while Disability Pension is a social insurance program under the National Pension.

\(^2\) The Services were originally planned as personal assistance services to support disabled people’s independent living.

\(^3\) In 2011, a movie “Dogani” was released and was a mega box in Korea. The movie was dealing with brutal violence against deaf people in a residential institution.
difficulties in independent living in community settings. Therefore, it is evident that deinstitutionalization should be a policy for persons with severe disabilities, and the governments must support persons with severe disabilities who intend to become independent. However, it is clear that not all the institution residents intend to leave institutions and to become independent. Thus, this study explores what proportions of institution residents intend to leave institutions and to live in community settings, and which factors influence their intention to leave, using a survey data collected in Busan, Korea during the summer of 2014.

II. Research Methods

A survey was conducted for this study from July to September, 2014 in Busan, Korea. Questionnaires were sent to 65 residential institutions for the persons with disabilities in Busan, and 48 of them were returned, producing 73.8% of the response rate. The residential institutions which returned the completed questionnaires were consisted of 21 living facilities, 25 group homes, and 2 short-term care homes. In addition, short questionnaires for residents were sent to the institutions accompanied with institution questionnaires, and 1,278 residents participated in the survey with the assistance of the institutions' staff.

The questionnaire for the institutions included questions such as the number and the working hours of the staff, the total number of the residents and the number of the residents per direct service worker, the number and the size in area of rooms, and programs to support residents leaving the institutions. The questionnaire for the residents included questions such as socio-demographic information, experiences of living in the institutions, and intention to leave the institution.

For analysis, socio-demographic characteristics and experiences at institutions are compared between residents who intended to leave those who did not, using t-test. A logistic regression is conducted to investigate which factors influence the residents' intentions to leave. The dependent variable in the logistic regression is a binary variable: whether a resident intends to leave or not. Independent variables are sex, age, types of disabilities, length of stay at the current institution, number of services for supporting to be deinstitutionalized, and degrees of satisfaction with roommates and with living in the current institution.

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4 Busan is the second largest city, and the biggest port in Korea, with the population of 3.5 million.
5 Coded as 1 'very satisfied', 2 'satisfied', 3 'not satisfied', 4 'not satisfied at all'.
III. The Results of the Survey

1. The organizational characteristics of the residential institutions

Social welfare foundation is the most common type of entities operating residential institutions for persons with disabilities, 47.9% of all the organizations. It is a dominant type for living facilities because the governments may trust them more than other types of entities. Government subsidies for living facilities are much bigger than group homes and short-term care homes because the residents of the former are generally much more than those of the latter. It is a very common entity in Korea which operates welfare organizations providing with various social services, including social services for disabled people. On the contrary, individuals are 48.0% among entities operating group homes since the sizes of group homes are small and government subsidies for them are minimal. Short-term care homes are supposed to function as a respite home for disabled people and their families for a short-term, up to 2 weeks, but it is not the case in reality. Short-term care homes are not different at all from living facilities in terms of residents and the ways of operation. As a result, there are very few short-term care homes in a literal sense all over the country.

### Table 1

| Types of Entities      | Living Facilities | Group Homes | Short-Term Care | Freq. | Percent |
|------------------------|-------------------|-------------|-----------------|-------|---------|
| Social Welfare Foundation | 81.0%             | 24.0%       | -               | 23    | 47.9%   |
| Foundation             | 9.5%              | -           | 50.0%           | 3     | 6.3%    |
| Trust Corporation       | -                 | 28.0%       | 50.0%           | 8     | 16.7%   |
| Individuals            | 4.8%              | 48.0%       | -               | 13    | 27.7%   |
| School Foundation       | 4.8%              | -           | -               | 1     | 2.1%    |
| Total                  | 100.0%            | 100.0%      | 100.0%          | 48    | 100.0%  |

Source: Lee, Kim, Jang et al. (2014)

Living facilities for persons with disabilities in Korea are categorized into six types: facilities for persons with physical/brain lesion disabilities, facilities for persons with visual disability, facilities for deaf persons, facilities for persons with intellectual/autistic disabilities, facilities for persons with severe disabilities, and facilities for infants with disabilities. However, there are only 5 types of living facilities in Busan. Living facilities for persons with intellectual/autistic disabilities occupy more than a half of all the living facilities, while group homes for persons with intellectual/autistic disabilities take up almost 90% of all the group homes.
Most of the institution residents with disabilities stayed at living facilities, which are usually large residential institutions. Only 7.5% of the institution residents with disabilities stayed at group homes which are considered as community settings. Though the influences of normalization and independent living movement have greatly expanded in Korea, most of residential institutions are living facilities which are located at remote areas in general. Their residents do not integrate well into surrounding communities.

The mean residents per institution were 57.3 persons at living facilities, 4.0 persons at group homes, and 12.5 persons at short-term care homes. Thus, too many residents were staying together at a living facility for persons with disabilities. Moreover, the maximum number of the institution residents was 141, which is more likely to result in various institutional neuroses than smaller institutions.

### Table 2: Types of Disabilities of Residential Institutions

| Types of Disabilities | Living Facilities | Group Homes | Short-Term Care | Freq. | Percent |
|-----------------------|-------------------|-------------|-----------------|-------|---------|
| Physical/Brain lesion | 19.0%             | 12.0%       | -               | 7     | 14.6%   |
| Visual                | 4.8%              | 4.0%        | -               | 2     | 4.2%    |
| Intellectual/Autistic | 57.1%             | 84.0%       | 100.0%          | 35    | 72.9%   |
| Severe                | 9.5%              | -           | -               | 2     | 4.2%    |
| Infant                | 9.5%              | -           | -               | 2     | 4.2%    |
| Total                 | 100.0%            | 100.0%      | 100.0%          | 48    | 100.0%  |

Source: Lee, Kim, Jang et al. (2014)

### Table 3: Types of Disabilities of the Residential Institutions

| Types of Institutions | Living Facilities | Group Homes | Short-Term Care Homes | Total |
|-----------------------|-------------------|-------------|-----------------------|-------|
| Sum of Residents      | 1,203             | 99          | 25                    | 1,327 |
| Percent               | 90.6%             | 7.5%        | 1.9%                  | 100.0%|
| Mean Residents        | 57.3              | 4.0         | 12.5                  | 27.7  |
| S.Dev. Residents      | 32.9              | 1.1         | 3.5                   | 34.1  |
| Maximum Residents     | 141               | 8           | 15                    | 141   |

Source: Lee, Kim, Jang et al. (2014)

### 2. The characteristics of the residents

According to Table 4, about 60% of the institution residents with disabilities were men, and 40% of them were women. The residents in their 30's and 40's were 50.2%, and those who were less than 30 years old were 37.6%. However, the residents in their 20's (19~29 to be exact) were over 50% among the group home residents and the short-term care home residents. The residents in their 40's and over were less than 15% among the
group home residents and the short-term care home residents.

Overall, most of the residents were persons with intellectual disabilities (80.2%), and the residents with brain lesion disability were 8.9% of all the residents. However, the residents with intellectual disability were 100.0% among the short-term care home residents.

| Types of Institutions | Total | Living Facilities | Group Homes | Short-Term Care Homes |
|-----------------------|-------|-------------------|-------------|-----------------------|
| Gender                |       | Male              | Female      |                       |
| Male                  | 685 (59.1%) | 54 (59.3%) | 9 (33.3%) | 748 (58.6%) |
| Female                | 474 (40.9%) | 37 (40.7%) | 18 (66.7%) | 529 (41.4%) |
| Age                   |       | Less than 18      | 19–29       | 30–39                 |
| Less than 18          | 184 (15.9%) | -                | 3 (11.1%) | 187 (14.7%) |
| 19–29                 | 233 (20.1%) | 43 (51.8%) | 14 (51.9%) | 290 (22.9%) |
| 30–39                 | 283 (24.4%) | 30 (36.1%) | 6 (22.2%) | 319 (25.1%) |
| 40–49                 | 308 (25.1%) | 7 (8.4%) | 3 (11.1%) | 318 (25.1%) |
| 50 and over           | 151 (12.2%) | 3 (3.6%) | 1 (3.7%) | 155 (12.2%) |
| Types of Disability   |       | Intellectual      | Brain Lesion | Physical |
| Intellectual          | 922 (79.5%) | 76 (83.5%) | - | 114 (8.9%) |
| Brain Lesion          | 111 (9.6%) | 3 (3.3%) | - | 76 (5.9%) |
| Physical              | 73 (6.3%) | 3 (3.3%) | - | 34 (2.7%) |
| Autistic              | 26 (2.2%) | 8 (8.8%) | - | 29 (2.3%) |
| else                  | 28 (2.5%) | 1 (1.1%) | - | - |

The lengths of the stay at the current institutions were relatively long. The residents who have stayed for 20 years or longer were almost one-third (34.3%). Those who have stayed for 10 years or longer were 59.2% of all the residents, and were 64.2% of the living facility residents.

| Types of Institutions | Total | Living Facilities | Group Homes | Short-Term Care Homes |
|-----------------------|-------|-------------------|-------------|-----------------------|
| Less than a year      | 43 (3.4%) | 31 (2.7%) | 6 (7.1%) | 6 (22.2%) |
| 1~3 years             | 155 (12.2%) | 115 (9.9%) | 22 (26.2%) | 18 (66.6%) |
| 3~10 years            | 321 (25.3%) | 269 (23.2%) | 49 (58.3%) | 3 (11.2%) |
| 10~20 years           | 316 (24.9%) | 309 (26.7%) | 7 (8.4%) | - |
| 20~30 years           | 339 (26.7%) | 339 (29.4%) | - | - |
| 30 years or longer    | 96 (7.6%) | - | - | - |
Meanwhile, the number of the new residents who have entered into the residential institutions was 286 during the last three years. More than a half of them have entered into living facilities, and one-fifth of them into group homes, and a quarter of them into short-term care homes. More than three quarters of them have intellectual disabilities, 12.4% of them have brain lesion disabilities, and 7.8% of them have autism. Thus, more than eight-tenths have developmental disabilities.

According to their income statuses, 46.8 percent of all the new residents were the beneficiaries of the National Basic Livelihood Security (NBLS), while 45.2% of them did not receive any public assistance. However, more than 70 percent of the new residents of the living facilities were NBLS beneficiaries, while only 23.4 percent of them did not receive any public assistance. Thus, disabled people from the lowest income group still account for the absolute majority of the residents for the living facilities.

| Types of Institutions | Living Facilities | Group Homes | Short-Term Care Homes | Total |
|-----------------------|------------------|-------------|----------------------|-------|
| Total Residents       | 158 (55.2%)      | 56 (19.6%)  | 72 (25.2%)           | 286 (100.0%) |
| Types of Disability   |                  |             |                      |       |
| Intellectual          | 114 (71.3%)      | 40 (72.7%)  | 60 (88.2%)           | 214 (75.6%) |
| Brain Lesion          | 26 (16.3%)       | 4 (7.3%)    | 5 (7.4%)             | 35 (12.4%) |
| Autistic              | 11 (6.9%)        | 8 (14.5%)   | 3 (4.4%)             | 22 (7.8%) |
| else                  | 9 (5.6%)         | 3 (5.5%)    | -                    | 12 (4.2%) |
| Income Status         |                  |             |                      |       |
| NBLS Benef.           | 94 (73.4%)       | 9 (16.4%)   | 14 (20.9%)           | 117 (46.8%) |
| Second to bot.        | 4 (3.1%)         | 2 (3.6%)    | 14 (20.9%)           | 20 (8.0%) |
| No Assistance         | 30 (23.4%)       | 44 (80.0%)  | 39 (58.2%)           | 113 (45.2%) |

Meanwhile, 187 residents were discharged during the last three years. Discharged residents from the living facilities were 81.3% of all the discharged residents, while those from the short-term care homes were only 4.3%. The reasons of discharging from the residential institutions were to become independent (17.6%), to be with their parents (38.5%), and to move to another living facility (26.7%). Thus, more than a half of the discharged residents went back to community settings.
<Table7> Discharged Residents in the last Three Years

| Types of Institutions | Total Residents | Living Facilities 152 (81.3%) | Group Homes 27 (14.4%) | Short-Term Care Homes 8 (4.3%) | Total 187 (100.0%) |
|-----------------------|-----------------|-------------------------------|------------------------|-------------------------------|--------------------|
| To become independent | 28              | 5                             | 0                      | 33 (17.6%)                   |
| To parents            | 48              | 18                            | 6                      | 72 (38.5%)                   |
| To another living facility | 46          | 3                             | 1                      | 50 (26.7%)                   |
| else                  | 30              | 1                             | 1                      | 32 (17.1%)                   |

3. Factors of Deinstitutionalization

Deinstitutionalization has become a trend in Korea since the movie ‘Dogani’ was released. Seoul Metropolitan Government assists residents at living facilities for persons with disabilities to be deinstitutionalized and to become independent. It is operating the Transition Service Center for Persons with Disabilities. The center helps disabled people use institutions suitable for their disabilities, and provides housing transition services for their independent living. The center identifies disabled persons who are living at living facilities and want to live independently, and provides them with trial housing for independent living. Disabled persons who want to use trial housing may stay for up to 24 months. Three to four residents live at a trial housing, in which one resident occupies one room. The residents at trial housing may apply for independent living home at which they may, if accepted, stay two to five years. They may apply for subsidized housing on a deposit basis (Lee, Kim, Jang et al., 2014).

Though deinstitutionalization has become a trend, Seoul is the only one among 16 provinces and metropolitan cities that operates a transition service center for persons with disabilities. Busan, though it is the second largest city in Korea, is not operating a transition service center yet. Thus, the burdens of assisting disabled residents to become independent are on the residents themselves or on the staff working for living facilities.

Living facilities for persons with disabilities provide residents with programs for independent living such as training for using community services and facilities, programs for helping them find and maintain jobs, trial home for independent living, and training for cooking.

According to <Table8>, residents who intended to move out of institutions were 10.6% among male residents, while 7.4% among female residents ($\chi^2 = 3.758, p = 0.062$). By ages, residents who are in their 40s and 30s want to go out most, 13.8%, 13.4%, respectively ($\chi^2$...
= 28916, \( p = 0.000 \)). Types of disabilities and whether a resident intends to leave institution are seemed to be related \( (\chi^2 = 12.771, p = 0.012) \). Residents with physical disability intended to leave most, with 15.8% of them intending to leave, while residents with autism have the lowest ratio, with 0% of them intending to leave. By level of disability, residents with disability levels 3-6 intended to leave most, with 25.0% of them intending to leave institutions, while only 6.0% among residents with disability level 1 intended to leave \( (\chi^2 = 49.149, p = 0.000) \).

| Table 8 | Intention to leave by Categorical Characteristics of Residents |
|---------|---------------------------------------------------------------|
|         | Yes (\%) | No (\%) | Total (\%) |
| Gender  |           |          |            |
| Male    | 79 (10.6%)| 669 (89.4%)| 748 (100.0%)|
| Female  | 39 (7.4%) | 490 (92.6%)| 529 (100.0%)|
| Age     |           |          |            |
| 18 or Less | 6 (2.9%) | 198 (97.1%) | 204 (100.0%) |
| 19–29   | 17 (5.7%) | 282 (94.3%) | 299 (100.0%) |
| 30–39   | 45 (13.4%) | 292 (86.6%) | 337 (100.0%) |
| 40–49   | 41 (13.8%) | 257 (86.2%) | 298 (100.0%) |
| 50 and over | 9 (6.9%) | 122 (93.1%) | 131 (100.0%) |
| Type of Disability of | | | |
| Intellectual | 87 (8.5%) | 938 (91.5%) | 1,025 (100.0%) |
| Brain Lesion | 16 (14.0%) | 98 (86.0%) | 114 (100.0%) |
| Physical | 12 (15.8%) | 64 (84.2%) | 76 (100.0%) |
| Autistic | 0 (0.0%) | 34 (100.0%) | 34 (100.0%) |
| else | 3 (18.8%) | 13 (81.3%) | 16 (100.0%) |
| level of Disability of | | | |
| level 1 | 46 (6.0%) | 721 (94.0%) | 767 (100.0%) |
| level 2 | 39 (11.0%) | 316 (89.0%) | 316 (100.0%) |
| levels 3–6 | 33 (25.0%) | 99 (75.0%) | 99 (100.0%) |

Table 9 compares mean ages, mean lengths of stay, mean numbers of services, and mean satisfaction levels with roommates and the current institution between residents who intended to leave and residents who did not intended. The former was older than the latter, and the former has been staying longer than the latter.

The residents who intended to leave were living at institutions that provided more services for supporting for deinstitutionalization than the residents who did not, and the former was less satisfied with roommates and with institution than the latter.
| <Table 9> Intention to leave by Continuous Characteristics of Residents |
|------------------|----------------|----------------|-------------|----------------|
| Want to leave     | N              | Mean           | St. Dev.    | statistics    |
| Age               |                |                |             |               |
| Yes               | 118            | 37.1           | 10.0        | \( t = 4.974 \) |
| No                | 1,151          | 32.1           | 14.3        | \( \mu = .000 \) |
| Length of stay    |                |                |             |               |
| Yes               | 118            | 18.2           | 10.2        | \( t = 2.946 \) |
| No                | 1,153          | 14.9           | 11.5        | \( \mu = .003 \) |
| Number of services|                |                |             |               |
| Yes               | 118            | 4.27           | 2.65        | \( t = 5.284 \) |
| No                | 1,160          | 2.91           | 2.67        | \( \mu = .000 \) |
| Satisfied with roommates | | | | |
| Yes               | 113            | 1.98           | 0.65        | \( t = 3.824 \) |
| No                | 970            | 1.77           | 0.55        | \( \mu = .000 \) |
| Satisfied with institution | | | | |
| Yes               | 114            | 1.79           | 0.79        | \( t = 3.057 \) |
| No                | 964            | 1.56           | 0.56        | \( \mu = .003 \) |

Subsequently, a logistic regression analysis was conducted to investigate factors influencing residents’ intention to leave the residential institutions. As a result, the number of services that were provided to support for deinstitutionalization by the institutions was the most significant independent variable on the intention to leave. The more services the institutions provided with, the more likely the residents had intentions to leave. Types of disabilities are matters, too. The residents with physical disabilities or with brain lesion disabilities were more likely to have intentions to leave than those with developmental disabilities. In addition, the less satisfied the residents were with roommates, the more likely they were to have intentions to leave.

| <Table 10> Logistic Regression on the intentions to leave |
|------------|----------------|----------------|-------------|----------------|
| B          | S.E.           | Wals           | Sig.        | Exp(B)         |
| Male\(^1\) |                |                |             |                |
| .246       | .222           | 1.232          | .267        | 1.279          |
| Age        |                |                |             |                |
| .007       | .009           | .631           | .427        | 1.007          |
| Length of stay |            |                |             |                |
| .014       | .009           | 2.329          | .127        | 1.014          |
| Number of services | | | | |
| .142       | .039           | 13.023         | .000        | 1.153          |
| Physical\(^2\) |           |                |             |                |
| .776       | .360           | 4.633          | .031        | 2.172          |
| Brain\(^2\) |                |                |             |                |
| .975       | .325           | 9.028          | .003        | 2.652          |
| Else\(^2\) |                |                |             |                |
| 1.569      | .719           | 4.754          | .029        | 4.800          |
| Satisfied with roommates | | | | |
| .404       | .204           | 3.924          | .048        | 1.498          |
| Satisfied with institution | | | | |
| .239       | .187           | 1.637          | .201        | 1.270          |
| Constant   |                |                |             |                |
| -4.643     | .500           | 86.378         | .000        | .010           |

Reference group: 1) Female; 2) Developmental Disabilities
IV. Conclusions and Policy Implications

A survey was conducted to investigate what proportions of institution residents intended to leave the institutions, and which factors influenced their intentions.

The results are:

First, deinstitutionalization services were the most significant factor on the intention to leave. Therefore, if the institution residents are to be deinstitutionalized, the residential institutions have to provide them with more deinstitutionalization services.

Second, the residents with physical disabilities or with brain lesion disabilities were more likely to have intentions to leave than those with developmental disabilities. The survey result that almost 20% of the institution residents has disabilities other than developmental disabilities shows backwardness of welfare for persons with disabilities in Korea. Deinstitutionalization of persons with disabilities is a policy for persons with developmental disabilities in most OECD countries. However, a substantial number of the institution residents with other disabilities remains in Korea. It is very reasonable that the residents with physical disabilities or with brain lesion disabilities have more intentions to leave than those with developmental disabilities. The question is why they still have to remain in the residential institutions. Moreover, Korean governments should pursue housing programs for persons with developmental disabilities: how to assist their independent living in community settings, and how to improve their intentions to leave residential institutions. Without expanding housing for persons with developmental disabilities in community settings, it is meaningless to improve their intentions to leave residential institutions.

In conclusion, persons with disabilities, even persons with developmental disabilities, should be deinstitutionalized as soon as possible. It is almost impossible for people to enjoy human rights fully in any institutional settings. Persons without disability do not intend to live in institutional settings unless unavoidable. Then, why should persons with disabilities do?
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