



MODELLING INCLUSIVE EDUCATION.

CHILD LED RESEARCH.
A LEARNING PAPER.

A BRIGHT FUTURE BEGINS WITH A GOOD EDUCATION.

Everyone has the right to make the best of the life they are born in to: for most of us that journey begins with an education.

Going to school is not just about acquiring knowledge to help you find a job, it's also about developing the skills for building successful relationships, discovering friendships and exploring identity.

Denying disabled children an education causes lifelong harm.

Exclusion reinforces separation between disabled and nondisabled children. Exclusion fuels the fear and misunderstanding of difference and strengthens the stigma that disabled children can't learn. Exclusion condemns millions of disabled children to a future of poverty, dependency and isolation.


Since 2012, we have been working with disability activists in Tanzania to deliver a rights-based response to inclusive education. We work together to empower disabled children and their families to access an education; we work with teachers and schools to help them deliver inclusive environments, and together we hold powerholders to account to deliver on their obligations. Together, we have helped enrol 808 children and train 708 teachers.

To review the impact of our inclusive education work we undertook a ground breaking research project.

To our knowledge, this was the first time in Africa, children with disabilities conducted peer led research to tell us how we are doing - what is working and what more needs to be done. This paper outlines the lessons they want to teach us and how we can build a collective path forward so that no child is left behind.



Rose Tesha,
Tanzania Country Director



'I always seek help from others when crossing the road. As children with hearing impairments we just pray to God to reach to school and home safely.'

Girl with hearing impairment.

'Most of my fellows don't love me even they don't want to play with me, they don't want to sit with me in a desk. They say that we cannot sit with someone who doesn't know how to read and write'.

Girl with intellectual disabilities.

'When a teacher is in class, I can't hear, when he gives an exercise I also don't understand, even when I attend in the group discussion I can't grasp anything because I can't hear, I need somebody to translate for me through sign language'

Boy with hearing impairment.

GROUND BREAKING CHILD LED RESEARCH.

For the first time in Africa, children with disabilities were empowered to be at the heart of a research process to improve outcomes for themselves and their peers.

We trained twelve children, aged 8-17 years, with diverse impairments, as researchers. We supported them to gather information and evidence from teachers, peers and the wider community; we helped them analyse the results themselves; and we supported them in presenting their findings to their schools and communities. In doing so, this pioneering approach challenged everyone's perceptions about what disabled children can achieve.

The use of a very inclusive participatory approach which assumes that people with disabilities can do things rather than they can't, particularly children, is challenging and new. Prevailing developmental models, which focus heavily on academic attainment and 'normal' child development can be very exclusionary of anyone who is different.

All the child researchers had been a part of ADD International's 'Modelling Inclusive Education' intervention in Tanzania, which supported disabled children to enrol in primary education. The group was gender mixed with 6 boys and 6 girls as well as a mix of abilities including: Albinism (3), Mild visual (3) Hearing (4), Physical (4), Learning (2) With some children falling into more than one category. There were no children with multiple/complex impairments in the group and this could be representative of the types of children who have so far been successfully included in mainstream schools. Introducing inclusive education programmes is often an incremental process with the 'easy to include' children admitted first.

HOW IT WORKED:




TRAINING. A 3 day workshop helped the children to get to know each other, learn about research ethics, practice a variety of data collection games/tasks, develop questions to ask other children, practice interviewing and running focus group discussions, take notes and use audio recorders/cameras.



DATA COLLECTION. 12 focus groups were run with disabled and nondisabled children to understand: How children perceive and experience school and inclusion within their community? The peer researchers led and facilitated the running of 4 key activities in each focus group session as well as warm up games and motivational songs and dances.



ANALYSIS & PRESENTATION. We guided the peer researchers through a 3 day review and analysis process during which they collated and summarised the data they had collected. They produced a research poster to present their findings and developed role plays informed by their experiences and those they had heard about during the focus groups. During a dissemination event they presented their poster and performed their role plays for an audience of parents, local education officials and local disabled people's organisation partners.



This training was good because it unites all children with disabilities and makes them feel valued. I'm happy because my child's thinking capacity has increased. We've got to meet other children with disabilities as well. I congratulate all who designed this programme.
Parent of participant.

Participatory research is very useful, especially when the research is done by children. It removes adult imposed ideas, opinions and views on different issues pertaining to the research.
ADD International staff.

The research was a lesson in itself. It was noted that all the children have not been included in conducting research so learning to do it was interesting and has helped the children to find their voice.
ADD International staff.

KEY FINDINGS. SCHOOLS.

TEACHERS.

Good.

- Some teachers love CWDs and teach very well.
- Teachers teach non-disabled children to respect CWDs.

Bad.

- Some teachers are rude and bitter and call CWDs bad names.
- Teachers don't give CWDs their rights.
- Teachers don't have the tools and skills to teach CWDs.

ENVIRONMENT.

Good.

- There are libraries in some schools and nice gardens.

Bad.

- No electricity.
- Not enough books or desks.
- Very few male teachers.
- No food at school.
- Not enough toilets and many are broken with no locks.
- Trash everywhere.
- Too many steps.

PEERS.

Good.

- Collaboration.
- Cooperation.
- Learning together.
- Loving each other.
- Playing together.

Bad.

- Discrimination.
- Fighting
- Not being listened to.
- Being mistreated and disrespected.
- Being called bad names.
- Being accused of stealing / lying etc.

WALKING TO SCHOOL.

Many children identified a range of difficulties with walking the road to school:

- Snakes, wild animals & dogs
- Strangers on the road
- Dangerous traffic

DREAMS ABOUT SCHOOL.

Provide school transport, more classrooms, desks and books. More teachers. Better accessible toilets, sign language interpreters and teachers who sign. Ban corporal punishment. School committee to address challenges of CWDs. Dormitories, boarding schools, lunch at school.

KEY FINDINGS. COMMUNITIES.

ADULTS.

Good.

- Provide education.
- Help us access health.
- Love.
- Provide food.

Bad.

- Too much work at home.
- Discrimination.
- Not being sent to school.
- Disrespected
- No Love
- Called bad names
- Bus conductors are rude to CWDs

FAMILY.

Good.

- Family protect us.
- Security.
- In a family there.
- Good cooperation CWD get support and assistance in the family.

Bad.

- Low understanding of CWD.
- No right to school.
- No outings.
- No good shelter.
- Not good learning environment for CWDs; too many household chores.
- Trash everywhere.
- Too many steps.

PEERS.

Good.

- Some like to play with us.
- Some help us by pushing bicycles and wheelchairs.

Bad.

- Calling bad names.
- Discrimination while playing.
- Do not listen to us.
- Fear that they will get a disease.
- Beat us up.

DREAMS ABOUT COMMUNITY.

Community shop, Cooperation, Centre for people with disabilities, Good houses, Electricity, Clean safe water, Tarmac roads, More hospitals, Community members to provide the rights of CWDs, Everyone know how to read and write Education/awareness about children with disability, local gov to provide assistive devices to CWD.

FACTORS AFFECTING THE SUCCESSFUL INCLUSION OF CHILDREN WITH DISABILITIES.

STRUCTURAL.

- International and National policy environment
- Ministry of education commitment to IE – linked to district level action
- Teacher training on inclusion (attitude and skills)
- School resources
- (assistive devices/accessible environment)
- Links with early child development surveillance and provision
- Adequate health related services for referral (e.g. eyes, ears, neurology, orthopaedics, child development)

FAMILY.

- Recognition of disabled child as a person
- Recognition of child's right to education
- Equal share of family resources
- Children with disabilities loved and supported by family

COMMUNITY.

Community acceptance and support for people with disabilities as equal citizens.

CIVIL SOCIETY.

Support and collaboration between Disabled People's Organisations and Civil Society Organisations.

Children with disabilities included or excluded in school, families and community.

RECOMMENDATIONS.

The findings suggest a number of recommendations and actions to inform ADD International's work on inclusive education and disability awareness. Some of these recommendations are disability specific others relate to poverty and a lack of resources.

TEACHERS.

- More teachers, particularly male ones.
- More specific disability and impairment related training for teachers.

SCHOOLS.

- Cleaner and better maintained school environments: accessible, clean and secure toilets with locks; better play and sports area and more gardens; cleaner and more welcoming classrooms.
- More school transport so that children can get to school, tarmac roads and improved road safety.
- Dormitory accommodation so that children who live remotely, and have long and unsafe journeys to school, can stay over if needed.
- More learning resources such as computers and books in the library, electricity.
- More assistive devices i.e. hearing aids, magnifying glasses, mobility aids, Braille machines.

COMMUNITY.

- Increased awareness raising about disability rights to reduce exclusion, teasing and stigma.
- Continued involvement of disabled people's organisations, support and capacity building on these issues.

GOVERNMENT.

- District and national level lobbying on rolling out inclusive education (especially impairment types such as children with severe physical, learning, visual impairments, or multiple / complex impairments who are not yet included) .
- District and national level lobbying about availability of impairment related services such as assistive devices, hearing and vision testing. All of which will enable children to benefit from attendance at school.
- Streamlining and improving impairment referral systems.

CONCLUSION.

The innovative participatory methods used in this project were enjoyed and appreciated by both the children, and the programme staff.

Staff reported that they had learnt a great deal and had been challenged to work in a truly inclusive way with children with a variety of skills and abilities. Their assumptions about the competencies of disabled children was challenged and they learnt new skills in working in a less hierarchical and more appreciative way.

Overall the peer researchers, and many of the group participants, demonstrated and expressed positive attitudes about themselves and others, high self-esteem and aspirational ideas about their futures. They had a strong sense of the importance of education and had a range of ambitions in relation to work and their future lives.

Their discussion demonstrated their awareness of the possibility of 'a better life' which could be achieved if there were more resources, both at school and at the family/community level and also in relation to what is provided by government, health, education, environment and infrastructure authorities.

It was observed that the majority of children knew about and understood the concept of rights, although possibly child (UNCRC) rather than disability (UNCPRD) rights - these were not clearly differentiated and they could name a number of different rights.

OUR NEXT STEPS.

We have been delivering inclusive primary education in Tanzania since 2012. In this time, we have helped enrol 808 children and trained 708 teachers. We are now working to deliver inclusive pre-primary education in 252 schools. We will incorporate some of the approaches developed here, in this new project. We will carry out a 'tracer study' to follow the progress of children with disabilities included in pre-school as they move up through primary school. We hope to involve the children who received training during this research project to share their skills with other children with disabilities.





IT'S TIME FOR ACTION.

The chronic exclusion of disabled children from education is not a crisis that will not be resolved overnight. Systematic change is required to create environments where children with disabilities can thrive.

Achieving this will require a global response.

We will pilot programmes to evidence what works and we will use that learning to lobby powerholders and development agencies to take action; to research best practice; to ensure plans and budgets are in place to resource inclusive education; to build the capacity of community and service providers to deliver inclusive environments, and to make long term investments in tackling social stigma and transforming attitudes.

There is a lot of work to do. It will require sustained global focus, momentum and action. But if we are serious about fulfilling the aspiration to 'leave no one behind' then it must be done.

WHAT ACTION WILL YOU TAKE?
Let's start a conversation today.
info@add.org.uk



International

ADD International is a disability rights organisation.

We partner with organisations of disability activists in Africa and Asia and help them access the tools, resources and support they need to build powerful movements for change.

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