Inclusive Education in Kenya
Assessment Report
Kenya/ Somalia program
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Introduction

The 2011 World Disability Report (WHO) estimates that people with disabilities comprise 15% of the global population. Of the 77 million children who are currently excluded from education globally, one third of these are children with disability (Education for All, Global Monitoring Report 2010).

For the first time in 2009 Kenya included disability indicators in its census. According to the Kenya housing and population census (2009) there are 647,689 males (3.4 %) and 682,623 females (3.5%) with a disability living in Kenya, thus giving a total of 1,330,312 or 3.5% of the total population. This statistic is way below the international average (15%). It is speculated that the reasons for this discrepancy are related to poor questioning techniques by census enumerators and issue of PWD being hidden due to community stigma and discrimination.

There are currently 1.3 million people in Kenya living with a disability. Of these people, only 39% have attended a mainstream primary school, and only 9% have attended high school (Kenya National Survey for Persons with Disabilities, 2008). According to Draft Education policy (2012) the enrolment of learners in special institutions and units currently stand at 102,749 students, of which 21,050 are in special schools and 81,649 are enrolled in integrated special units at both primary and secondary schools. According to estimates this enrolment figure represent about one-third of the expected number of learners with special needs (NESSEP draft 2012). Such exclusion from education further perpetuates the cycle of disability and poverty.

Education and the inclusion of children with disability in the education system is a key focus of Handicap International, which (as of July 2012) had inclusive education projects in 17 countries around the world. In 2009, HI Kenya began its first project aimed at enhancing the participation in the education of children with disability in two low income areas of Nairobi. The project ran from October 2009 to October 2012 and achieved a number of successful outcomes, one being that 381 children with disability who would otherwise have remained in their homes, started school.
1. Methodology

This report is based on an ‘investigation phase’ of information-gathering with a view to future inclusive education projects in Kenya. HI staff have conducted a number of interviews with key stake-holders and authorities in the Kenyan education system as well as local NGO’s and CBO’s in order to better understand the current challenges and initiatives in place surrounding inclusive education in areas of Nairobi.

This is not intended to be an in-depth analysis of inclusive education in Kenya, but a summary of various discussions and meetings to keep a record of the information gathered. It is hoped that this document can be developed and added to over time to inform future inclusive education projects in Kenya. This document is also not intended to be static, but a dynamic document that can be continually added to and enhanced as more people are interviewed and as more information on the education of children with disabilities comes to light.

The assessment process covered the following steps:

- Collection, reading and analysis of the key document related to education in Kenya and more specifically education of children with disabilities
- Interviews with key parties and stakeholders in the education system and community including: The Ministry of Education; City Education; local community based organizations and larger NGO’s; the Teacher Service Commission; Kenyatta University amongst others
- Analysis of the interview material to deduct key points
- Analysis of the material to develop a problem tree depicting the main barriers to the education of children with disability and the factors influencing these barriers

The assessment process was followed by a compilation of an assessment report detailing this process and the findings.
2. Summary of important documents influencing the education of persons with disability in Kenya

This section looks at international and national legal frameworks, policies and documents that bind the government of Kenya in recognizing the rights of persons with disability.

a- International policies

UN Convention on the Rights of Persons with Disability
The UNCRPD is an international convention aimed at protecting the rights of persons with disabilities. This International Convention promotes and protects the rights of every Kenyan living with a disability thanks to the ratification on 19th May 2008 by the government of Kenya. By ratifying this convention the state of Kenya commits itself legally to make the words written in the text a reality, thus improving the lives of all Kenyans.

Article 24 of the UNCRPD requires state parties to recognize the right to education for CwDs and education free from discrimination it states that “state parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, state parties shall ensure an inclusive education system at all levels and lifelong learning”. The article further states that children or adults with disability cannot be excluded from the education system on the basis of disability and PWDs must be given the opportunity to learn the life and social development skills they need. To ensure this education is free from discrimination and is on the basis of equal opportunity state parties are required to provide an inclusive education system. Refer to annex I for full article 24 of UNCRPD.

The Convention on the Rights of the Child is the first legally binding international instrument to incorporate the full range of human rights—civil, cultural, economic, political and social rights. The four core principles of the Convention are non-discrimination; devotion to the best interests of the child; the right to life, survival and development; and respect for the views of the child. The Convention protects children’s rights by setting standards in health care; education; and legal, civil and social services.

Articles 23, 28 and 29 focuses on children with disability and the right to education respectively. Article 23 on Children with disabilities states that children who have any kind of disability have the
right to special care and support, as well as all the rights in the Convention, so that they can live full and independent lives. Article 28 – 29 looks at implementation of the right of the child to be heard in education and school setting. Article 28: (Right to education): All children have the right to a primary education, which should be free and Article 29 (Goals of education) children’s education should develop each child’s personality, talents and abilities to the fullest.

By agreeing to undertake the obligations of the Convention (by ratifying or acceding to it), the Kenya government committed to protecting and ensuring children’s rights and have agreed to hold themselves accountable for this commitment before the international community. States parties to the Convention are obliged to develop and undertake all actions and policies in the light of the best interests of the child. The Kenya government should ensure therefore the right to education for all children including those with disability free from discrimination.

**b- National frameworks and policies**

**The Constitution of Kenya, 2010**

Kenya adopted a new constitution in August 2010 that contains a substantially improved Bill of Rights and represents a real change in the protection of the right to equality and non-discrimination in Kenya. A commitment to the principles of equality and non-discrimination is expressed throughout the Constitution with equality being listed as one of six essential values upon which governance should be based on. These expressions of principle are given legal force in article 10 prohibiting discrimination on an extensive list of specified grounds namely race, sex, pregnancy, marital status, health status, ethnic or social origin, colour, age, religion, conscience, belief, culture, dress, language, birth or disability.

The 2010 Kenya Constitution commits the government to making sure that people with any sort of disability can access relevant education and training and that all schools are able to include children with disability. The Constitution of Kenya has provisions for children’s right to free and compulsory basic education, including quality services, and to access educational institutions and facilities for all persons including those with disabilities. According to the Constitution, there should be adequate participation and representation of minorities and marginalised groups in all spheres of life, Article 43(1) of the Constitution states that every person has the right to education, Article 53(1) b states that every child has the right to free and compulsory basic education and Article 54(1) b states that a person with any disability is entitled to access educational institutions and facilities for persons with disabilities that are integrated into society to the extent
compatible with the interests of the person. Finally, Article 56 on minorities and marginalized groups requires the state to put in place affirmative action Programmes designed to ensure that minorities and marginalized groups are provided special opportunities in educational and economic fields.

**Persons with Disabilities Act, 2003**
The Persons with Disability Act which was passed by Parliament in 2003 and came into force in 2004, is the national law relating to persons with disability in Kenya. It recognizes that persons with disability face discrimination in various forms and that the government shall take steps to the maximum of its resources to achieve the realization of the rights of persons with disability as set out in the Act.

Persons with disabilities Act (2003) article 18 states that no person or a learning institution shall deny admission to a person with disability and learning institutions shall take into account special needs of PWDs.

**Special Needs Education policy**
The special Needs Education policy 2009 was developed in Kenya to address critical issues related to education for learners with disability. The policy states that the overall goal of education is to achieve Education for All (EFA) by 2015 in line with global and national commitments. The policy has a mission to create a conducive environment for learners with disabilities in order for them to have equal access to quality and relevant education. The policy was launched in 2010 but was not well disseminated nor was it implemented as resources were not allocated to it.

**Education plan 2013 – 2018, Education Act 2013**
The Education Act 2013 outlines the need to increase access, enhance retention, improve quality and relevance of education, strengthen early identification and assessment and ensure equal opportunities in provision of education for CWDs. In this document there is still a lot of focus on special institutions and special needs education and this does not bring out implementation of inclusive education in the Kenyan education system.

According to draft Education policy (2012) the enrolment of learners in special institutions and units currently stand at 102, 749 students, of which 21,050 are in special schools and 81, 649 are enrolled in integrated special units at both primary and secondary schools. According to estimates this enrolment figure represent about one-third of the expected number of learners with special needs (NESSP draft 2012). The overall goal in special
needs education according to the policy is to enhance access, equity, relevance and quality of education for learners with special needs.

Education Act (2013) Article 44 (4) states that the cabinet secretary will ensure that every special school or educational institution with learners with special needs is provided with appropriate trained teacher, non-teaching staff, infrastructure, learning materials and equipment suitable for learners with disability. Article 46 (1) cites the duty of county education Boards in consultation with relevant county government to provide for Education Assessment and Resource Centers (EARC's) including a special needs service clinics to: study of children with special education needs, giving advice to parents and teachers on appropriate methods of education and giving advice to county education boards regarding assessment of the needs of any child.

The Learners with education bill (2012) that was fronted by DPOs and disability rights organizations was approved as part of Education Act 2013 and is a binding document. Each directorate/council is currently developing guidelines to operationalize the Act.

c- Other additional documents

The World Disability Report, 2011

The World Report on Disability is a joint initiative by the World Health Organization (WHO) and the World Bank Group, to provide a comprehensive description of the importance of disability and the responses based on the best available scientific information and recommendations for action. The scope of the World Report is broad and it tackles the very complex measures to improve accessibility and equality of opportunity; promoting participation and inclusion; and increasing respect for the autonomy and dignity of persons with disabilities. The WHO World Bank Report (2011) estimates the prevalence of disability to be at 15% of the world population. Chapter seven of the report focuses on education and gives statistics of 50.6% of males with disability having completed primary school, compared with 61.3% males without disability and 41.7% of females with disability having completed primary school compared with 52.9% of females without disability. Such statistics highlight a gap in the enrolment for PWD in basic education compared to those without disability.
**Education for All and Millennium Development Goals**

In the year 2000, the world’s governments adopted the six EFA goals and the eight Millennium Development Goals (MDGs), the two most important frameworks in the field of education. Education is a right, like the right to have proper food or a roof over your head. Article 26 of the 1948 Universal Declaration of Human Rights states that “everyone has the right to education”. Education is not only a right but a passport to human development. It opens doors and expands opportunities and freedoms. It contributes to fostering peace, democracy and economic growth as well as improving health and reducing poverty. The ultimate aim of Education for All (EFA) is sustainable development.

**Kenya Vision 2030**

Kenya Vision 2030 is the country's development programme covering the period 2008 to 2030. Its objective is to help transform Kenya into a “middle-income country providing a high quality life to all its citizens by the year 2030”. Kenya Vision 2030 recognizes that education and training of all Kenyans is fundamental to the success of the Vision. In order to realize the national development goals, relevant and quality education and training is required to meet the human development needs of a rapidly changing and a more diverse economy. It cites a major challenge that remains of ensuring and enhancing access, equity and education standards especially in marginalized regions and deprived urban areas.
3. Brief presentation of the education system focused on the access to school for children with disabilities

The education system in Kenya is headed by the Ministry of education that oversees education, development and implementation of policies and procedures. The ministry has different departments, semi autonomous agencies and council that takes charge of implementation of different aspects of education.

a- Education authorities

Ministry of Education
The Ministry of Education is the government body overseeing education across the country, from basic primary education to high school and further adult education. All policies and procedures relating to the education of students in Kenya must go through the MoE. The MoE has many employees across different departments, from the city offices working on policy and quality assurance to officers on the ground monitoring continuity and adherence to the policies in place. The various policies can be found on the MoE website: [http://www.education.go.ke/Home.aspx?department=5](http://www.education.go.ke/Home.aspx?department=5)

Strategic objectives, programmes and policy priorities:
The overall sector objectives are to ensure equitable access, attendance, retention, attainment and achievement in education, science, research and technology by ensuring affordability of services. The MoEST seeks to mobilize resources for sustainable and efficient delivery of relevant educational research, technological and other educational services. The Ministry will ensure co-ordination of the provision of education and training for efficient delivery of services between government, donors, NGOs and communities. It will promote and popularize a Science and Technology Culture.

From the Ministry of Education website:
Vision:
“To have a globally competitive quality education, training and research for Kenya’s sustainable development.”

Mission:
"To provide, promote and co-ordinate lifelong education, training and research for Kenya’s sustainable development. To focus on priority areas within overall education goals, notably towards attaining ‘universal primary education’ by 2005, within the context of the wider objective of ‘Education for All (EFA)’ by 2015."
The MoE has set specific targets against key priorities:
- Universal Primary Education (UPE) by 2005 and Education for All (EFA) by the year 2015;
- Achievement of Transition rate of 70% from Primary to Secondary from the current rate of 47% by 2010;
- Enhanced access, equity and quality in Primary and Secondary Education supported through capacity building for 45,000 education managers by 2005, and construction / renovation of physical facilities/equipment; and
- Developing a National Strategy for technical and vocational education and training in 2004, leading to the rehabilitation of physical facilities and equipment and making sure that Vocational and Technical Institutions are appropriately equipped by 2010

**Ministry of Education – Quality Assurance and Standards Department**

The Quality Assurance Department of the MoE is responsible for maintaining standards according to the education policies in place. Currently, the Quality Assurance department is responsible for the correct implementation of the national curriculum and issues of student access to the curriculum as well as student retention. Because they oversee all students, this department is also responsible for children with disability accessing the curriculum and their retention in school. This department will be key in any review of the Special Needs Education policy that is conducted.

Quality Assurance Officers at the ground level conduct assessments of schools to make sure they comply with policies and that children are accessing the curriculum. However, their knowledge on disability is limited so they may overlook barriers and challenges for children with learning needs.

**Background:** Quality Assurance and Standards in Education in Kenya, is a function of the Directorate of Quality Assurance and Standards
which is the professional arm of Ministry of Education. Though there existed a supervisory system during the colonial period on the formal schooling system which was established by 1927, the modern Inspectorate in independent Kenya was initiated through the recommendations of the Kenya Education Commission of 1964. The directorate was set up over 30 years ago.

The directorate was renamed recently so in 2003 (it was formerly the Inspectorate Division) after the rationalization of the operations of the Ministry of Education headquarters staff and the setting up of the five directorates manning education. These included the Directorate of Basic Education, Directorate of Policy and Planning, Directorate of Quality Assurance and Standards, Directorate of Higher Education and the Directorate of Technical Education (the latter two have since been moved to the Ministry of Higher Education and Ministry of Science and Technology). The mandate of the Directorate subsequently changed from that of control to the one of quality audit and quality development with a view to providing support services to all education institutions and stakeholders.

**The objectives of the Quality assurance and Standard Department are to:**

- Have a regular reporting to the Ministry of Education on the general quality of education in Kenya at national, provincial, district and school levels with reports on specific aspects of education as required.
- Monitor the performance of teachers and educational institutions in accordance with all-round standard performance indicators.
- Ensure the equitable distribution of teachers by working out the curriculum based establishment (secondary/college) and class-based staffing (primary).
- Carry out regular and full panel quality assurance and standards assessment of all education institutions on a regular basis.
- Advise on the provision of proper and adequate physical facilities in all educational institutions.
- Ensure that the appropriate curriculum is operational in institutions.
- Organize and administer co-curricular activities with a view to developing an all-round child.
On 1st September, 1984, the Government of Kenya set up 17 Educational Assessment and Resource Centres (EARCs) as a national project funded by DANIDA. On 16th January, 1987, an agreement was signed between the Government of Kenya and the Government of Denmark extending the EARC project. As a result of this agreement, each of the 41 districts in Kenya established its own EARC in 1988. By 1991, an additional 250 sub-centres had been established.

The EARC project was set up to provide support to children with special needs and disabilities. Due to the success of the EARC programme, expansion of provision has taken place to a level where currently, every district in Kenya either has an EARC or can access the services provided by an EARC.

The total number of operational EARC is currently 200.

**Administration of EARC:** Since 1987, overall responsibility for the administration of the EARC Programme has been with the Ministry of Education, Director of Quality Assurance & Standards, (Special Education and Assessment Unit). However, when the Ministry was divided into Directorates, Basic Education also established a Special Needs Education section. The two Directorates now jointly manage the activities of EARC’s in relation to administration, maintenance of standards, professional development and quality assurance.

At the District level, EARC are directly line managed by the District Education Officer (DEO).

The EARC are lead and managed by a coordinating assessment teacher assisted by assessment teachers who are trained in different disciplines of special educational needs and disability. These teachers and other professionals form the assessment team.

The main purpose of EARC is to ensure the early identification, assessment, intervention and placement of children and young people with special needs and disabilities in an appropriate education or training setting or programme.

The assessment of a child involves several resource persons and professionals including the following:- a doctor, nurse, clinician, counsellor, physiotherapist, vision therapist,

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1 The following information was obtained from a report from the Ministry of Education on the role of EARC. More information can be found in the full report in the annex of this document.
special needs education teacher in the school or at the Educational Assessment and Resource Centre (EARC), regular teacher, parents, a social worker, audiologist, ophthalmologist, paediatrician and any other relevant professional. An EARC consists of a co-ordinator and teachers trained in special needs education who work together and liaise with other professional staff to support children and young people with special needs and disabilities.

EARCs specifically support children and young people by:

- Referrals of children with disabilities to special schools if their needs cannot be met in a regular school or special unit;
- Referrals of children with disabilities for medical examination and/or treatment;
- Integration and inclusion of children with disabilities into regular mainstream schools;
- Regular visits to special schools and other schools where the children are included in order to give extra support where necessary;

They may also be referred to a paediatrician, to appropriate therapists or a hospital for treatment of their disability if this is necessary.

Peripatetic services are also based at the EARCs.

**Other services provided by the EARC.**

For parents:
- Awareness raising on the rights of children and young people with special needs and disabilities to receive education and training; guidance, counselling and information on supporting their children;
- Advise parents on where to seek for help; form groups of parents of children with disabilities, who live close to each other for purposes of sharing information and supporting each other; practical demonstrations on how to manage their children within the home and how to make assistive devices which will help their children;

For other professional groups:
- Advice, guidance, seminars and in-service training courses for teachers, health and social workers on how best to manage disability and integrate/include children and young people with special needs in a regular school setting;
- Short courses, seminars and workshops on supporting children and young people with special needs and disabilities.

For communities:
From the City Education website:

VISION
Quality Basic Education for National Development

MISSION
To provide, Promote and Manage Basic Education in Nairobi.

PREAMBLE
Education Department is mandated:
To provide quality basic education to all children of schools’ going age in the city through collaboration with the communities, the private sector and other providers.
To improve access, retention, transition and completion rates for all school going children.

City Education (http://www.nairobicity.go.ke)

Education Department is charged with the function of providing, managing and administering Basic Education in the City.

The authority is derived from the Education Act Cap, 211 Section 5 of the Laws of Kenya whereby the Minister responsible for Education has delegated the Management of the schools in seven selected Municipalities to Minister for Local Government.

Guided by the various governments’ policies like the free Primary Education one, the Department has realized remarkable achievements. Our delivery of education is geared towards the Child, as we ensure that all Children in Nairobi get access to quality Education. We endeavour to provide the finest, dedicated, superior services and support to the child.

The functions of the department are:
- Overall management, promotion and administration of Basic Education, namely:
  - Early childhood Education (age 3 – 5 years)
  - Primary Education (age 6 – 14 years)
  - Special Education

- Awareness raising on the rights of children and young people with special needs and disabilities;
- Advice and guidance on how best to support children and young people with special education needs and disabilities and enable them to participate fully in the community;
- Establishment of small homes for children who wish to attend school but they are deterred by the long distance from school to home; provision of hearing aids and other assistive devices to children with disabilities, (in collaboration with partners, donors)

For planning, information and research:
- EARCs collect data and information from surveys and research on children and young people with special needs and disabilities;
- Planning and development of schools
- Repair and development of schools
- Supervisory and Advisory Services to schools
- Guidance and counselling of teachers, parents and pupils
- Organization and management of in-service courses for teachers
- Development and co-ordination of co-curricular activities, (sports, Music, Drama...etc.)
- Administration of KCPE
- Overseeing the teaching staff disciplinary matters
- Agent of Teachers Service Commission
- Implementation of the Free Primary Education

City Education Officers oversee a number of schools under their jurisdictions. They manage such things as infrastructure, multi-school events, and any issues relating to the running of the school.

Kenya Institute of Special Education (www.kise.co.ke)
Kenya Institute of Special Education (KISE) is a semi autonomous government agency of the Ministry of Education, Kenya. It was established through a Legal Notice No. 17 of 14th February 1986. The Institute is currently run by a council appointed by the Minister for Education. The Head of the Institute is the Director who is also the Secretary to the Council.

The Kenya Institute of Special Education is the only institution in Kenya providing courses for teachers in Special Needs Education. KISE is still very much focused on the ‘special school / special class’ system, training teachers to work with students with disabilities in such institutions. At their own cost, teachers can complete a KISE course to become a special needs teacher (they will get paid a higher salary in this role) but it is very rare for a teacher to complete a KISE course and then want to remain in a mainstream class.

The Institute has been mandated to carry out the following core functions;
- conduct teacher training courses for teachers of children with special needs and disabilities
- conduct in-service courses for personnel working in all fields of special needs education
- prepare and conduct correspondence courses for personnel in the field of special needs education
- run an educational and psychological assessment centre for the training of teachers of children with special needs and disabilities
- run an orientation and mobility centre for training and demonstration purposes
- run a model training unit for the integration and inclusion of children with special needs and disabilities into the regular school schools
- run a pre-school department where training and the stimulation of young children with special needs and disabilities can be carried out for the purpose of teacher training
- function as a resource centre for the production and dissemination of information to the general public on special needs and disabilities
- run a documentation and resource centre on special needs and disabilities
- conduct research in special needs education
- maintain, repair, design, produce and assemble special materials and equipment for persons with special needs and disabilities.

Teacher Service Commission (http://www.tsc.go.ke/)
The TSC is responsible for teachers in the public education system - in mainstream, integrated and special schools. The TSC manages all aspects of teacher placements, complaints, salaries and assesses and responds to any issues relating to teachers in schools. The TSC does not fall under the responsibility of the MoE, but the two institutions work in partnership around policy-related issues. The TSC does not provide training and professional development for teachers, but will grant study leave for appropriate trainings.

At the time of this report, Josephine Oliwa was the person responsible for staffing in the Special Needs system – she deploys SNE teachers to special units and schools, but is a strong believer in inclusive education when the right resources and supports are in place. Josephine is currently writing a paper to support extra pay for teachers who have completed SNE training, regardless of where they are placed. She initially asked for this for all teachers, but was told to limit it to just teachers in the special units.

Head Teachers
Head Teachers are the head of the individual schools. They are reportable to the Ministry of Education and have the responsibility of complying with the education policies set in place by the Ministry of Education. They control the day-to-day running of the school and manage student welfare, student and parent issues, teachers, maintenance etc.
During the assessment phase it became clear that the ‘attitude’ or perceptions of the head teacher has a great amount of influence on the attitude and perceptions of the teachers and school community. It is therefore important and necessary when working with a school on a concept such as Inclusive Education, to make sure that the Head Teacher is willing and open to the concept and enthusiastic to support it and project that support to the entire school community.

b- United Nations

UNICEF

*(To be completed when meet)*

c- Civil Society

In the recent years there has been a lot of awareness creation and advocacy on recognition of their rights and inclusion of persons with disability in the society by DPOs and civil society organizations. The NGOs/INGOs involved in Inclusive education projects in Kenya include: Leonard Cheshire Disability, Sight Savers International, Girl child Network, Peace Corps, Save the Children, Voluntary Services Overseas and sense International. The interventions of these organizations in education for children with disability in Kenya are summarized in the table below:

<table>
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<th>Name of Organization</th>
<th>Interventions</th>
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<tr>
<td>1. Leonard Cheshire Disability</td>
<td>LCD is working in the area of IE. project activities included: teacher training on I.E, physical accessibility, assessment and rehabilitation, child to child groups, establishing parents support groups</td>
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| 2. Sight Savers International | Works with the Ministry of Education and the Kenya Society for the Blind to break down the many barriers that stop blind and visually impaired children from attending school and give them the opportunities they need.  
  ● Identification of blind or visually impaired children who need help  
  ● Provision of necessary support  
  ● Training of parents and teachers and advocacy |
<p>| 3. Voluntary Services         | Implementing Strengthening Citizens’ Participation in                                                                                                               |</p>
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<tr>
<th><strong>Overseas</strong></th>
<th><strong>Governance of Education project. Key activities include: training community institutions, PTAs and SMCs in accountability, governance and advocacy; training DPOs and local level partners; and lobbing the MoE to increase the SNE resources, etc</strong></th>
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<tr>
<td>4. <strong>Sense International</strong></td>
<td>SI works predominantly with deaf-blind persons around community based rehabilitation, parent support groups and vocational education activities. SI is planning to implement ‘Community-Based Education’ for deaf-blind children where education is taken into the home environment.</td>
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<tr>
<td>5. <strong>Girl Child Network</strong></td>
<td>GCN main goal is to promote access to education for all children especially children with disability.. Some GCN projects include: Education project, School sanitation project, Stop violence in girls, Meru project, School Health and nutrition, and Somali project. Their main donor is Save the children Finland.</td>
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Disabled persons of Kenya, Kenya Association of the Intellectually Handicapped, Action Network for the Disabled, Nairobi Family Support Services, Deaf Empowerment Kenya to mention but a few. This has helped to change the negative attitudes though there are still cultural beliefs that hamper these efforts.

Through the efforts of the disability movement in Kenya, a lot of sensitization and advocacy has been done towards the government in providing equal and inclusive education for children with disability.

**United Disabled Persons of Kenya**

In 1989, the National umbrella organisation, UDPK—*United Disabled Persons of Kenya*—was formed by national and community based DPOs. Traditionally many of the organisations have been charity based and the medical rehabilitation model with homes and centres for PWD has to a large extent dominated the scene. Lately, however, there has been a shift towards a more typical human rights based movement, according to the 2007 report from DRPI—*Disability Rights Promotion International*. UDPK is made up of 194 disabled persons’ organizations and aims to address disability equality concerns through legislation, advocacy and awareness-raising. Over the past years UDPK has worked closely with the Government in policy review, planning and evaluation. However,
the strength of the organisation and the strength of many of the individual DPOs are heavily challenged by internal conflicts and power struggles, making the total disability movement appear rather fragile and fragmented.

Although the disability movement has been very dynamic since late 1980s with the formation of hundreds of DPOs and self help groups, and the advent of an umbrella organization (UDPK, 1988) that groups about 200 DPOs, the effectiveness of the movement to promote inclusion of people with disability in civic processes is impeded by its low capacity and its poor networking. Historically, the DPOs at central level have worked rather isolated from each other with an impairment-specific focus and less attention to advocacy issues. In addition, access to education and information that could support the further development of DPOs in Kenya is very limited. Hence, the majority of DPOs do not have a comprehensive view of disability and recent developments and strategies adopted in the international disability work, such as the rights-based approach and the strategy of disability mainstreaming. Consequently, their skills in effective advocacy and communication are limited with little impact on mobilizing initiatives and action on disability or bringing about a change in attitudes and practices in society.

Elimu Yetu Coalition

One coalition in the recent years that has brought together several organizations (DPOS, NGOs and INGOs) is Elimu yetu coalition that is involved in advocating the government for an inclusive education system. Elimu Yetu Coalition (EYC) was established in 1999 as the national coalition of civil society organizations, professional groupings, education and research institutions and other non state actors in Kenya’s education sector to lobby for the implementation of EFA goals as articulated in the Jomtien Declaration and Dakar Framework of Action.

EYC currently brings together over 90 CSOs involved in efforts to domesticate the Jomtien Declarations and other related global conventions for the attainment of quality basic education for all in Kenya. The disability movement in Kenya through UDPK has been engaging with EYC on advocating for right to education for CWDs. Despite these efforts there is still a long way to go in terms of the government implementing international and national policy on inclusive education.
Example of a DPO

**Nairobi Family Support Service**

Nairobi Family Support Service (NFSS) is a community based non political organization that has been working in the slums of Nairobi, Kibera, Mukuru and Dagoretti to provide community Based Rehabilitation services to children with disabilities for over 20 years. It was started by parents of children with disabilities (CWDS) as a local CBO in 1982 with the support of Action Aid Kenya. Nairobi Family Support Services has since developed and was registered as a local NGO in 1996. A committee comprising parents of children with disability and other professionals, elected by members runs the NGO for a period of three years.

Nairobi Family Support Services were a key implementing partner in Handicap International’s Inclusive Education Project (2009 – 2012). NFSS staff were the community link between schools, parents, village leaders and others in the community and supported most of the project’s initiatives A comprehensive explanation of NFSS’ role in the project can be found in their final evaluation report, attached to this document. - attach

### ACTIVITIES CARRIED OUT AT NAIROBI FAMILY SUPPORT SERVICES.

1. **Capacity Building:** The workshops targets persons with disabilities, Area leaders, Peer educators, Community volunteers, parents and guardians of children with disabilities during the workshops issues on reproductive health, disabilities and HIV and AIDS are discussed. The participants are expected to have positive attitude towards persons living with the HIV and AIDS.

2. **Integration of persons with disabilities into the community:** One of the critical challenges, which persons with disabilities suffer, is social isolation and exclusion from community activities and equal opportunities, since not many people seem to understand them. This is facilitated by communication break-down (as for the cases of hearing impaired persons and to other persons who does not fall in the same category and probably do not know sign language). Nairobi Family Support Services works to ensure that the persons with disabilities are well integrated into the community by adopting an inclusive approach to service delivery and sensitizing other development practitioners to include persons with disabilities in planning and design of the development interventions.

3. **Home Visits:** During home visits, parents, caretakers and families are taught different ways on how to care of their children with disabilities.

4. **Mobility Appliances:** Persons with disabilities and young children with disability require mobility aids for them to improve and be able to perform some activities/daily cores. We assist these persons with disabilities to acquire training these appliances.

5. **Public Awareness Forums:** Nairobi Family Support Services has been able to organize public awareness meetings/forums to educate and sensitize the public on HIV and AIDS and disability with the aim of creating awareness on the plights/rights of persons with disabilities, in Dagoretti Division.

6. **Rehabilitation and Epilepsy Clinics:** Nairobi Family Support Services runs three rehabilitation clinics for children with disabilities in Kibera and Waihaka.


This network provides an opportunity for joint action and lobby towards to an inclusive society and as a peer review mechanism to measure attainment of inclusive environment cognizant of the needs of persons with disabilities among network members.
**Conclusion:**

Based on the commitments that Kenya government has made signing international conventions and their legal instruments (Constitution of Kenya, Persons with Disabilities Act and Kenya Vision 2030), Kenya is obligated to ensure that persons with disabilities access quality inclusive education free from discrimination.

Policies that govern the education system in Kenya include the Kenyan Constitution, Persons with disabilities Act and the UNCRPD. However, the emphasis on a segregated system is still very strong. Special Schools and Special Units are mentioned throughout the documents and there is little (if any) mention of inclusive concepts and mainstream learning for children with disability. A Special Needs Education policy was drafted but never passed in parliament or subsequently implemented. A ‘Learners with disabilities’ Bill exists but again, the focus is on special schools and special units, not on inclusive concepts.

Despite efforts to have a legal framework in Kenya to ensure access to education to CWD they are still under represented in the education system. Little has been done to implement these legal frameworks and thus many CWD as compared to non-disabled access education. Not much effort has been given on collection of accurate data on the number of CWD in school including drop out and transition rate thus leading to inaccurate information on the situation in CWD in the Kenyan education system.
4. Handicap International and Inclusive Education in Kenya

Handicap International in Kenya started implementing inclusive education project in 2004 with Joseph Kangethe primary school that has a deaf unit by creating awareness and sensitization in the school and training teachers and parents on Kenya Sign Language. In the year 2009 HI received funding through Canadian Agency for International Development to implement a three year project that ended in September 2012.

Handicap International’s position on inclusive education
HI recognizes that there is no single definition of ‘Inclusion’. Inclusive education is an ever-evolving concept and there is no strict methodology of implementation. Rather, IE should be a flexible concept that can adapt to different environmental, cultural and societal contexts.

In September 2012, HI released its most recent policy paper on inclusive education. This document aims to present the challenges and possibilities when working in the field of inclusive education and is built on many years of data collection and analyses of HI projects across the globe. The document emphasizes that any HI project based around inclusive education should conform to the guidelines presented.

In the HI policy document, inclusive education is defined as:
*A system in which the entire education system considers the measures it must take in order to provide an appropriate education with all children learning together.*

The definition emphasizes the support links that need to be made with both the ‘special’ and ‘mainstream’ systems and that IE should encompass all levels of the education system, not just a school-by-school approach. Inclusive education increases participation and reduces exclusion, taking into account the learning needs of all marginalized and vulnerable children, including: street children; girls; children from ethnic minorities; children from economically disadvantaged families; children from nomadic / refugee / displaced families; children with HIV/AIDS; and children with disabilities. IE aims to ensure that all children realise their right to access a quality education.

HI’s policies on inclusive education are drawn from the following documents:
- The International Convention on the Rights of Persons with Disabilities (CRPD), particularly Article 24. (see Annex I)
- The Millennium Development Goals
- The UNESCO Education for All goals

The following key principles underpin HI’s work in inclusive education:
- Children with disabilities have the right to access a quality inclusive education
- Learning environments must respond to the physical, social, intellectual and emotional needs and personal aspirations of the individual child
Education policy and practice must reflect and respect the diversity of learners, especially children with disabilities. While the segregated system of separating ‘special’ from ‘mainstream’ systems still exists in many countries, the WHO World Report on Disability (2011) states that inclusive education is gradually becoming a more economical, viable and accepted option in education systems, the benefits experienced not only by the child themselves, but by the entire school, wider community and at the government level. Handicap International, while recognizing the ‘broad’ sense of inclusion being that education can take place in a range of settings (including special classes or schools), supports the stance that inclusive education entails identifying and removing barriers and providing reasonable accommodations to enable every learner to participate and achieve within mainstream settings. HI generally does not work in isolation with Special Schools, but may work with Special Schools to develop their capacity to act as a resource for inclusive education in the community.

In a planned IE project, HI intervention should have a focus on:
- Direct support to children with disabilities and their families as part of local inclusive community development
- Improvement of services (such as education, social and health)
- Inclusive education policy development at the national level.

Cross-cutting themes that should also be considered in a planned intervention are described in the HI Policy Paper (Annex II)

b- Handicap International’s Inclusive Education Project (October 2009 – September 2012)

Given the concerning statistics surrounding the number of children with disability accessing quality primary education in Kenya, Handicap International developed a proposal for a project with the goal of enhancing participation and achievement in the education of children with disability. The aim of the project was to not only give children with disabilities access to their right to education, but to contribute to the overarching goal of a more educated and inclusive society.

The project started in October 2009 and ran until October 2012 and while it had its challenges in the form of getting approval from City Education (thus a delay in the implementation of activities) and the project starting during the school examination period (thus difficulties engaging teachers and students at that time), positive outcomes were achieved overall.

The project focused on two low-income areas of Nairobi (Kibera and Dandora) and specifically on three schools and their surrounding local communities. The schools were made physically accessible through modifications to the buildings and surrounds,
selection of teachers were trained on inclusive practices through workshops and information sessions, local CBO’s were given the support to develop parent trainings and community sensitization events, and a best-practice ‘exposure visit’ to a school in Rwanda was commissioned.

HI worked closely with two partner organizations in the target areas (Nairobi Family Support Services in Kibera, and Deaf Empowerment Kenya in Dandora), supporting them to implement many of the activities at ground-level (such as community awareness sessions and parent trainings). This proved to be a very successful angle as the local organizations were able to connect with the communities in which they were based.

As a result of the IE project: 381 CwD who may otherwise have remained at home, were enrolled in school; 2800 parents, teachers, students and school staff were sensitized on IE philosophy and practice; 352 community leaders and members attended trainings and information sessions on inclusive practices; 6 schools were modified to allow children with physical disability to better access the school environment; 102 assistive devices were purchased and disseminated to CwD and their families; 6 sub-committees were formed (one in each pilot school) with a direct focus on ensuring IE practices in the schools; and 2 resource centres were established as hubs for resource materials, information and interaction in an inclusive environment.

The project also strengthened the collaborative relationship between the Ministry of Education (MoE) and the schools, teachers, teacher training institutions and other stakeholders, although an evaluation of the project noted that the relationship with education authorities needed to be stronger in order for the project to have more than just a localized effect.

Other recommendations to come out of the final project evaluation included:

- A stronger focus on government policy implementation through networking with already-established advocacy groups such as the Elimu Yetu coalition.
- Advocacy for the government to provide teachers with more relevant and practical skills to give them the confidence and knowledge to appropriately implement inclusive practice around a more flexible curriculum.
- A wider breadth of schools and communities, targeting counties outside of Nairobi with a focus on local governments considering the new system of devolution that will soon be introduced in Kenya.
- A longer time frame (of 5 years) to ensure that all activities will be sustained beyond the project’s duration.
- A focus on strengthening the parent support groups to become larger and louder in their promotion of IE philosophy in the community.
• Continued use of the local partner organizations to connect with the communities, using those from the first phase to train and mentor new additions in the second phase.

• A stronger and more specific focus on gender-related issues for CwD and their impact on a child’s right to access education.

As this was a pilot project, the lessons learnt and insights gained from the last three years are a sound platform to move to a more established ‘second phase’ of an IE project. There is still a significant amount of work to be done, (especially in the implementation of government policy and in broadening the outreach of IE awareness and understanding) in order for Kenyan society, and the education system in particular, to be fully inclusive. This project has provided a springboard for future projects to continue the sound initiatives that have already been established and to expand the reach so that more schools and communities can achieve greater inclusion of children with disability.

A more detailed description of the activities and outcomes of HI’s Inclusive Education project can be read in the End Term Report (http://disabilityinclusionandmainstreaming.files.wordpress.com/2013/05/end-of-project-report-kenya-inclusive-education1.pdf).
5. Analyse of the current situation

The information gathered across the interviews was analysed together to identify themes and commonalities with regard to the barriers to education for children with disability. After all of the points were placed into categories, four main barriers emerged. There were a number of influencing factors that fell under these barriers, thus forming a problem tree (inserted below).

Based on the discoveries in the first phase of the project, and the information collected from the stakeholder interviews, the following are considered to be the four major barriers to children with disability accessing mainstream education:

- Girls and boys with disabilities lack ‘school ready’ life-skills (such as feeding, toileting and hygiene; appropriate social behaviour; communication skills etc.)
- Parents are not ready to send their children to school (for reasons of poverty; a lack of psycho-social support; and negative attitudes towards disability)
- Lack of knowledge and understanding of disability leading to negative attitudes towards disability (from the parents/family; the community and wider school community (teachers, students, etc)
- The education system is not prepared to have children with disabilities in schools.
a- Girls and boys with disabilities lack ‘school ready’ life-skills

This theme was mentioned by a number of stakeholders, in particular the EARC officers who emphasised the point a number of times. It is apparent that many children with disability do not have the appropriate skills required to attend a mainstream primary school, therefore the school refuses their enrolment or the child is disadvantaged in the classroom. It is accepted within the mainstream school system in Kenya, that children who attend school must have the independent abilities to participate in all aspects of school life. This includes activities of daily living (such as dressing, toileting, feeding and hygiene) and behaviour. As many children with disability remain hidden or isolated in their early years, when they are identified and referred to school, many have not had the opportunity to socialise with other children or learn the important skills (even basic reading or writing) that would allow them to join their peers in a mainstream class. This becomes even harder as time goes on. For example, a child identified and referred to school at 12 years of age and who has not had any interaction with other children will most likely lack the practical, academic and social skills needed for him or her to ‘fit in’ with same-age peers at a regular school.

The interviews revealed that the above issue is a direct result of a lack of early identification and rehabilitation of children. A lack of community awareness surrounding disability means that some parents do not know what to do or where to go if they notice their child isn’t developing normally, and community stigma surrounding disability means that parents are scared to reveal their child and look for help. In addition, there is a lack of information available on the rehabilitation and identification services that do exist in the community, meaning that parents do not have access to information on the available services, what the services provide and how to access them. All of this means that if and when a child with a disability is identified, they will often have under-developed life and social skills which in turn puts them at a disadvantage when they are to start school. Subsequently, such children are left to either attend special schools (often expensive and inaccessible for many families) or special units.
The role of the EARC officer being so essential yet so weak is also a major factor at play in this theme area. The EARC role is severely under-resourced and not well supported, thus the identification, assessment and referral of CWD is also weak and not well supported. It was echoed by a number of stakeholders (including the EARC’s themselves) that if the EARC role was better resourced and strengthened in terms of assessment and referral, children would receive a much better service in terms of rehabilitation and placement in schools.

**b- Parents are not ready to send their children to school**

This particular issue was mentioned a number of times throughout the stakeholder interviews. It relates to parents’ abilities and motivations around getting the support they need in order for their children to attend a mainstream school. This support is not only for their children, but also for themselves in terms of counselling and psychosocial support. A negative attitude towards disability in the community is one significant barrier to parents’ willingness to enrol their child in school. Fear of stigma and discrimination often means that parents would prefer to hide their child indoors than allow them to be seen and associated with the family. Often, traditional cultural beliefs surrounding disability and inaccurate information are behind such beliefs.

Poverty is another significant factor which impacts on parents’ ability to send their child to school. While basic education in Kenya is generally considered ‘free’, parents are still required to pay for uniforms, books and materials. These costs are often out of reach for many families in low income areas.
Many parents also lack social and psychological support and as a result in the communities in which the investigation focussed on. This may be due to a number of factors including a lack of services in the area, lack of information on what services are available, lack of understanding of what the services provide, a cultural resistance to talking about problems and feelings and a lack of financial or logistical means to access services. No current data seems to be available, but mental health problems are presumably present in many parents of children with disability who are also affected by poverty. It would be very difficult for a parent who is experiencing mental health issues to have the capacity and means to efficiently seek support for their child. In addition, many families of children with disability are shunned by their neighbours and extended family members, thus compounding the feelings of isolation that may be present for some parents.

c- Lack of knowledge and understanding of disability leading to negative attitudes towards disability

Disability is something that is beginning to be introduced into mainstream Kenyan awareness through the media and other means (such as articles in the newspaper on people with disability). However, at the local level (especially in rural areas), a lot of myth and inaccuracy surrounds disability, particularly intellectual disability. Traditional beliefs that view disability as a curse or the result of witchcraft are still present as well as the belief that disability is contagious. It is the fear of the unknown that seems to drive the negative perceptions of the community with regard to persons with disability.

A lack of knowledge is a significant barrier to persons with disability being included in many sectors of the community as without knowledge on inclusion anyone from an architect to a teacher to a health worker can struggle with how to better include someone with a particular need. In the case of the education system, a lack of knowledge and understanding on disability at all levels of the sector means that disability and particularly inclusion is not considered from policy making right down to the practical implementation level. Teachers who did general teaching degrees do not learn about inclusive practices in their training curriculum. There are components of disability,
but no comprehensive learning on how to include CWD in the classrooms. How can we expect teachers to include CWD and be open and positive to teaching CWD when they do not have the skills to do so? The Quality Assurance department of the Ministry of Education admitted in the interview that they require more knowledge and understanding on disability. They noted that they are willing to learn and requested HI’s support in doing this.

**d- The education system is not prepared to have children with disabilities in schools**

This is the most complex theme to emerge from the investigation interviews, with many factors influencing this issue. Physical accessibility of the school, negative teacher attitudes and the fact that mainstream schools are not obligated to accept CWD into their classrooms by nature of the policies in place and / or their accountability, all lead to many schools being reluctant or resistant to CWD being included in their classrooms. The lack of obligation and accountability can be attributed to the Ministry of Education’s Quality Assurance Officers not including disability in their annual assessments of schools or making sure schools are appropriately including CWD in their access to the curriculum and school opportunities.

Teacher attitudes are also a main factor influencing the inclusion of CWD at school. The lack of financial incentive is a large contributor to this. However, limited resources to teach a child with disabilities, a rigid curriculum, little or no skill in teaching children with different learning needs and no classroom support all culminate in a large amount of resistance from teachers when they are asked to support a CWD in their classroom.
Teacher training curriculum and the lack of incentives for teachers

Most public primary school teachers obtain their teaching degrees through teacher training colleges, while high school teachers are usually university trained. Primary teaching degrees just focus on basic education and there are no special needs or disability components included in the curriculum. Subsequently, teachers graduate with little or no knowledge of inclusive concepts or skills around supporting a child with a disability in their classroom.

Teachers who want to work in Special Needs Education must complete a course at the Kenyan Institute of Special Education (KISE), either full-time or part-time as they continue to work. This course is intended to train teachers to work in Special Schools or Special Units and teachers must fund the course themselves.

Special Needs teachers get paid more than mainstream school teachers and this is often the incentive for them to complete the KISE courses. They are often very disappointed if they do not get placed in a special school or unit after completing the course. It is very rare for a mainstream teacher to complete a KISE course just to build their skills in supporting children with disabilities in their classroom as there is no financial incentive in doing this.

In-service trainings for teachers occur sporadically, but any disability-specific training are limited to particular impairments and only given to the special needs teachers. EARCs are supposed to provide trainings for mainstream teachers but they are so under-resourced that this rarely occurs.

Education Assessment officers

The role of the Education Assessment Officer is explained in detail in section 3 page 13. While this role looks comprehensive and professional on paper in terms of the assessment, referral, placement and support of children with disability, in reality, this is not the case. The EARC’s role was well resourced at the time of the DANIDA project. It is not clear about the circumstances, but the project / funding for these positions ended with the project while the EARCs still remain, they have very little funding available. They are so under-resourced that they can barely carry out even one or two of their role’s objectives and they do not seem to ‘fit’ under one body – e.g. the Teacher Service Commission pays their salaries but they fall under the responsibility of the Ministry of Education. Even at the Ministry level, the Quality Assurance Department admits that the EARCs have not had a defined ‘place’ in the system. However, they do say that things are intended to change in the future with EARCs given a department to fit in to and more funding for their positions. The Quality Assurance department has requested support in a needs assessment for the EARC role to better inform where extra funding should be focused.
In an email sent by Anne Musalia of the Quality Assurance Department at the MoE on March 19, 2013, she stated: “In brief, my desire for now is to operationalize the EARCs in the perspective of the new Education Act, 2013. I am therefore looking for technical support to develop quality standards in the following areas:

- Early Identification Procedures and Intervention Strategies
- EARC Equipments
- Staff Development in line with the new education Act
- Special Education/Inclusive education Placements Provided by EARC
- Specialized Health Support Services/medical interventions in School Settings
- Educational and Other Assessments,
- The Identification, Placement, and Review Processes

The EARC role is essential in the appropriate assessment, placement and referral of children with disability. However, they are extremely under-resourced (to the point where some can’t even afford to photocopy their assessment tools). In order for the EARCs to competently carry out their important role, the Ministry of Education needs to disseminate more funds to these positions and manage the quality of the assessments and recommendations being made.

**Weak implementation of the UNCRPD**

Another major factor influencing not just CWD in the education system, but all persons with disabilities in Kenya is the Kenyan government’s weak implementation of the UNCRPD guidelines. Even though Kenya is a ratifying nation to this document, in reality, many of the stipulations in the document are not followed-through with at the community and policy level. While it is somewhat difficult to ascertain the exact reasons behind why this is the case, the assessment has identified a number of possible influencing factors such as:

- A lack of understanding of the roles and responsibilities of different government bodies
- Weak advocacy and lobbying about disability and education issues and weak co-ordination between the various community advocacy groups
- A severe lack of data on disability and statistics around CWD in the education system. interviews

**6. Objective tree**

The above detailed problem tree has been turned into an “Objective tree” presented in the table below.
## INCLUSIVE EDUCATION - OBJECTIVES AND SUB OBJECTIVES

<table>
<thead>
<tr>
<th>School/community level</th>
<th>County level</th>
<th>National level</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Boys and girls with disabilities are ready to be integrated and to remain in mainstream schools</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys and girls with disabilities are trained to be independent in activities of daily living (ADL) skills</td>
<td>Training on daily living skills are made available and accessible to boys and girls with disabilities at county level and are monitored</td>
<td>National guidelines on daily living skills for boys and girls with disabilities exit and is disseminated</td>
</tr>
<tr>
<td>Boys and girls with disability are equipped with assistive devices to enable them to go to school</td>
<td>Assistive devices are available at county level</td>
<td></td>
</tr>
<tr>
<td>Boys and girls with disabilities are provided with psychosocial support through counseling to raise their self esteem, confidence and reduce self stigma, cope with difficulties that they face in school</td>
<td>Psychosocial counselor skills to support boys and girls with disabilities is monitored at county level</td>
<td>Psychosocial counseling training curriculum integrate a section on disability</td>
</tr>
<tr>
<td>Boys and girls with disabilities have the required basic/standard equipment to go to school (uniform)</td>
<td>The Government give allocation to parents of children with disabilities to purchase basic/standard equipment to go to school (uniform)</td>
<td>The Government give allocation to parents of children with disabilities to purchase basic/standard equipment to go to school (uniform)</td>
</tr>
<tr>
<td>Boys and girls with disabilities have access to transport to go to school</td>
<td>Accessible transport for boys and girls with disabilities are made available at county level</td>
<td>Policy on accessible transport for boys and girls with disabilities is implemented at national level</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Parents and families are ready to send their children with disabilities (boys and girls) to mainstream schools</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parents of children with disabilities have access to psychosocial support through counseling</td>
<td>Psychosocial counselor skills to support parents of boys and girls with disabilities is monitored at county level</td>
<td>Psychosocial counseling training curriculum integrate a section on disability</td>
</tr>
</tbody>
</table>
Parents understand disability and are sensitized to reduce stigma and discrimination towards children with disabilities – demystify cultural beliefs and myths

Information campaign on disability are organized at county level

Information campaign on disability are organized at national level

Information on accessible services is available (where to access what)

A directory of services available for boys and girls with disabilities is created, updated and disseminated at county level

A directory of services available for boys and girls with disabilities is created, updated and disseminated at national level

DPOs are able to create parents support groups/ parents support groups and mentor parents are available

Parents support groups are registered at county level

Umbrella of parent support group exist at national level

Parents of children with disabilities understand the UNCRPD and the rights of their children

Policies in line with the UNCRPD are implemented

<table>
<thead>
<tr>
<th>3 Boys and girls with disabilities have access to services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services providers are trained on early identification of disabilities</td>
</tr>
<tr>
<td>Service providers have good understanding of disability (reduce stigma and discrimination)</td>
</tr>
<tr>
<td>Service providers are accessible (distance, cost and infrastructure) to boys and girls with disabilities and their families</td>
</tr>
<tr>
<td>Service providers offer quality services to boys and girls with disabilities at community level</td>
</tr>
<tr>
<td>Services providers have good networking and coordination</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Community has access to information related to disability</td>
</tr>
<tr>
<td>Local authorities have a good understanding of disability</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4</th>
<th><strong>The Kenyan education system is inclusive for boys and girls with disabilities</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Schools are well informed and aware about the role of EARC officer</td>
<td>EARC officers assess, refer and place children with disabilities in schools and monitor use of funds</td>
</tr>
<tr>
<td>School infrastructures are accessible</td>
<td>Accessibility of school is monitored at county level</td>
</tr>
<tr>
<td>Teachers are trained in inclusive practices</td>
<td>Monitor implementation of teacher training curriculum</td>
</tr>
<tr>
<td>Teaching material is accessible and inclusive of children with disability</td>
<td>Standardized accessible and inclusive teaching material is developed and available in every school</td>
</tr>
<tr>
<td>Attendance and performance of boys and girls with disability in school are monitored and submitted to county Education</td>
<td>Data and statistics at county level on attendance and performance of boys and girls with disability in school are available and analyzed</td>
</tr>
<tr>
<td>Children with disability have access to examination</td>
<td>Exams administered at county level is accessible</td>
</tr>
</tbody>
</table>
7. Suggested intervention

This section looks at the suggested interventions based on barriers that were identified through the interviews conducted with stakeholders and literature review. The suggested interventions were formulated to address the barriers in access to education for CWD. Six results areas were identified as follows to address these barriers:

- Early identification of and rehabilitation support to CwD is strengthened through enhanced access to information, available services and assistive devices
- Parents and DPOs are empowered with the knowledge, attitude and information required to enable them to send CwD to school
- Knowledge and understanding on disability and inclusion by the community and sectors of the education system is improved
- The education system at the policy and implementation level is better prepared to receive and retain children with disability in mainstream primary schools.
- 5 schools in the target areas are better prepared to include children with disability in their classrooms and community.
- Conduct a baseline survey of disability-related data in the target community to inform the project and local services

Result 1: Early identification of and rehabilitation support to CwD is strengthened through enhanced access to information, available services and assistive devices

1.1. Conduct a mapping of the rehabilitation services for children with disability in the target area and at national level.

1.1.1 Update the Kenya disability directory

The Kenya Disability Directory is a publication by Handicap International that includes information on organizations and institutions catering for the needs of persons with disabilities. It was first introduced in 2003 and has been a publication updated every two years with any new organizations and service providers on disability in Kenya. The last version of the Directory was published in the year 2010 and disseminated to 1000 government agencies, development partners, DPOs, CBOs and NGOs in Kenya.

The Directory is an open tool that serves as a reference publication and also a networking tool which ensures that those who seek assistance know where to source it from. The aim of this tool is to ensure that all users in their routine tasks, strengthen their reference base, enhance coordination and networking as well as diversify intervention measures in disability work. It is important to update the Disability directory so that any new organizations in the field of disability and service provision are captured as this is becoming a new area of focus to ensure equal participation by PWDs.
1.1.2 Mapping of the rehabilitation services and school for CwD in the target areas

The objective of the mapping exercise is to provide information on existing rehabilitation services and schools for CwD to parents, DPO and service providers located in the area in order to ease the referral of identified CwD to the nearest available service provider or school. The mapping will include maps, phone numbers, physical location etc. When finalized, the mapping will be disseminated to the relevant stakeholders along with a user-friendly “service provider” guide. It will also be done in an electronic internet version to make it accessible to the wider community.

The mapping will be done by local community-based organisation and associated volunteers who will conduct an investigation of services and schools for CwD in the area. This will involve walking the streets to locate services and interviewing existing services. A map will be needed to mark services and a paper recording tool will be developed to record information about the service, current contacts etc.

The mapping exercise will only be done in the targeted areas for implementation of the project while the Kenya Disability will have information on disability actors countrywide who are involved in any disability related activities and services not necessarily on education, assessment and rehabilitation.

1.2. Develop and disseminate IEC material on disability and early identification

At the community level parents lack information on what to look out for as signs of impairment during the development stages of a child from birth. As a consequence, impairments are identified too late and corrective measures, when they take places, cannot prevent the development of the condition.

In order to address this gap information, education and communication materials (e.g. posters, fliers, small flip books with monthly calendar) on disability and early identification will be developed and disseminated amongst the community. It is expected that IEC materials will create more awareness on different types of impairments and signs and symptoms to look out for so that parents can take their children for assessment at an early age and intervention is also provided.

The IEC materials will be developed thanks to the support of a panel of experts on different type of impairment and will be disseminated through DPO’s, Pharmacies, doctors’ clinics, schools, health facilities, churches and mosques, the Ministry of Education offices, etc. For each impairment presented, information on how to identify such a disability and the services / supports available in the area, websites etc. will be provided.

1.3 Support the provision of assistive devices and rehabilitation therapy for CwD

Access to rehabilitation and therapy by CwD is located in district hospitals with a few services being offered at the local health facility. To access rehabilitation and therapy services a parent has to travel long distances with the child as well as pay a fee to be offered this service which is not affordable to most families at low income areas. HI though the partner organizations with network with government health facilities to provide therapist once a week to identified CwD at a location closer to their families.
HI will support the funding of assistive devices and rehabilitation therapy (including psychosocial support) for children with disability and their families to give them the skills and equipment necessary to enable them to attend school. This activity will be done through providing strengthening a local CBO with already existing therapy services (who provides rehabilitation) to disseminate to CWD who are needy (based on an assessment tool) through identification and assessment. Provision of assistive devices will help support CWDs who face difficulties to better access school and participate effectively in learning. A distribution log for the assistive devices will be developed and signed by the beneficiaries and photographs taken during the time when the devices are handed over. Handicap International will conduct field visits and monitoring to the local CBOs and also give prior approval before purchase of any assistive device.

**Result 2: Parents and DPOs are empowered with the knowledge, attitude and information required to support CwD**

**2.1 Development and dissemination of a facilitation manual aimed at supporting the parents of CwD through the parents support group**

Parents of CWD face various challenges ranging from stigma and discrimination from the community, cultural beliefs on disability, lack of information on disability, lack of proper medication and assistive devices for CWD, inaccessible services and lack of information on where to access services.

In order to support the parents, parent support groups have been formed through the DPOs or formed by parents themselves to bring together parents of CWD to share their experiences and how they have dealt with different situations and challenges facing their children.

With the help of specialist, HI would like to develop a facilitation manual to provide simple and practical information to parents of CwD on such areas as: disability and rights, advocacy, mental health, behaviour management, diet & nutrition etc

During a first stage, the manual will be tested in the areas targeted by the project. It will be discussed during parents support groups and the content will be amended based on the feedback received from the field. It will then be disseminated to other parents support group in the country. This will be shared as a best practice by

**2.2 Support the creation of “Parent mentor” within the DPOs**

When a family give birth or welcome a child with disability, they might feel alone and isolated with little knowledge about what to do and who to seek support from. In order to break this isolation and quickly involve the parents in a supportive group that can help them to face the challenges they might encounter, the family could benefit from a “parents mentor” allocated by the locally established parents support group. Parent mentors would give support to new parents on how to care for their CWD, where to access services, how to overcome stigma and discrimination as well as how to advocate for the rights
of CWD. Once a new parent or family is identified the parent mentor will conduct home visits and encourage the new parent to join their PSG as well as to give support through accompanying the family on acceptance and access to services.

In the respect, the DPO’s working in the target area will be supported in the provision of training to the parent mentors on how to support new parents, basic psychosocial support and information on services and accessing services. Mentor parents will be the key contact for new parents needing support and advice.

2.3 Strengthen the capacity of the DPOs located in the target area to better advocate of an inclusive education

HI will organise training to the DPOs working in the areas targeted by the project and their umbrella organization (UDPK) in order for them to improve their knowledge and understanding of an inclusive education and be able to better advocate for its implementation at the local and national level.

The initial training will be followed by refresher training and the willing candidate will be offered a Training of Trainers (ToT) to be able to capacity built other DPO’s nation wide

Result 3: Knowledge and understanding on disability and inclusion by the community and sectors of the education system is improved

3.1. Develop a practical Inclusion of CWD in school Guideline

The interviews conducted during the assessment phase with stakeholders in the community, schools and ministry of education showed a lack of knowledge and understanding on disability issues and a practical way of how to include CWDs in school. A practical inclusion guideline will be developed that provides information on various disabilities and practical recommendations on how to include persons with disability at school level. HI will constitute a working group (from the community, school, MOE level) comprised of people with specialist knowledge in the select areas to develop the guidelines. Through various meetings by the working group with leadership from HI the document will be produced in accessible format (Braille, pictorial and print)

An official launch and dissemination of the document to all relevant stakeholders will be conducted. To further disseminate the guidelines the advocacy group already formed will promote the guidelines to all levels of the community (see the advocacy group in result 4). It is expected that the guidelines would be used by community leaders, DPOs and CBOs, school administrators, teachers and policy makers. The guideline will have on practical tips and ways on how to include CWDs in school.

3.2. Conduct a national – level disability / inclusion sensitisation campaign

Negative attitudes and beliefs, stigma and discrimination towards disability are still major factors that hamper access to education for CWD. A national campaign on disability and inclusion will be conducted
through the use of the media (radio and television) to create awareness amongst the community, reduce negative attitude and stigma and improve the understanding of the community on disability issues.

HI together with partners will conduct radio talk shows with local FM stations in the target areas to reach the community. A video documentary will be developed to be aired in national TV station and sessions conducted with targeted groups in the community to allow for interactive discussions in selected regions of the country.

3.3 Support the organization of a sensitization and awareness campaign on disability and inclusion by the children of the target schools

Under the supervision of the teachers and with the collaboration of the DPOs, children committees/ clubs will be created and supported in the willing school targeted by the project. Through the children committees/ clubs, Children will be involved in the creation of sensitization and awareness campaigns (songs, theatre, street procession, etc.) on disability and inclusion that will be presented within the school but also in the community. The Children committees/clubs will create an environment free of discrimination as well as acceptance by the school community to CWDs. The project will make use of extracurricular within the school calendar to involve both children with and without disability

Result 4: The education system at the policy and implementation level is better prepared to receive and retain children with disability in mainstream primary schools.

4.1 Develop standards and norms on Inclusive Education through capacity building of the MoE

During the stakeholder meetings held with the Ministry of Education in February 2013 various gaps and needs were expressed by the MoE including: Quality Assurance Officers lack the skills to assess, identify and make recommendations for schools around students with disability, lack technical skills to improve the tracking and follow-up of students. On the other hand teacher training colleges need an improved IE component in the curriculum at the teacher college level.

Based on this information and the requested support by the Ministry of Education, HI will work closely and strongly with the MoE Quality Assurance Officers (at the ground level) to build their knowledge on disability, inclusion and give them the appropriate skills and resources to enable them to thoroughly assess whether a school is appropriately following the policies and to make recommendations thereafter. This will be done through training and meetings with Quality Assurance Officers and in collaboration with other INGOS and NGOs implementing Inclusive Education projects.

A consultancy firm (EEnet) will be hired to develop a training manual on introduction to disability and Inclusive education, using the inclusion guideline developed in activity 3.1. A five days training will be
conducted for 25 quality assurance officers and at the end of the five days training the assessment tool used by MoE will be adapted to incorporate disability. Follow up sessions will be conducted on a one on one basis to review the use and suitability of the assessment tools before one is adapted and finalized for submission for use by MoE countrywide.

4.2. Development and implementation of an inclusive education policy

The education system in Kenya has an Education Act Amended in 2012 that guide Kenya’s education system. The act has focus on access to education for learners with disability but there is still a lot of focus on special schools, special units or integrated classrooms and little is mentioned on inclusive education. HI will support the MoE to strengthen their knowledge of disability and inclusion and support the development and implementation of a more inclusive policy in the NESSEP, including the addition of a disability component in annual school assessments. A working group will be formed with leadership by the MOE that includes HI, Elimu Yetu Coalition and DPOs

4.3 Reinforcement, strengthening and resource of the role of EARCs

According to MoE, EARCS are currently very under-resourced and with the current restructuring of MoE as well as devolved government their role is going to be reviewed.

HI will Support the Quality Assurance department of the MoE to develop, strengthen and resource the role of the EARCs to improve the assessment, referral and follow-up of CWD in the education system. A needs assessment/situational analysis session will be conducted with quality assurance department and EARCS. Two priority areas will be identified to train and guide MoE on what resources to be purchased for EARCs in the selected areas. A report will be developed on the gaps and weaknesses and recommendations to improve the role of EARCs by MoE.

Hi will monitor and support the implementation of the identified areas together with Quality assurance department of MoE.

4.4. Support the writing of a joint position paper to the government

In coordination with a working group, comprised of Elimu yetu coalition members, the Quality Assurance department of the MoE will be supported in order to write a joint position paper with recommendations to the government on how to address the issue of assessment of CWD and the teacher financial incentive, both elements being a hindering factor for inclusive education in Kenya.

4.5 Develop and disseminate a guideline on accessible school building

During the first phase of project implementation HI modified the school environment of six pilot schools in collaboration with city Education Engineering department. Indeed, the design of the schools built today in Kenya is not accessible for persons with disability.

In order to tackle this problem from its origin, HI and the University of Nairobi (UoN) architecture department will develop specific and detailed designs and guidelines for the construction of an
accessible school environment. The design and guidelines will be presented to the MoE for their adoption and implementation.

The University of Nairobi will work on this project with HI as part of their curriculum, to initiate the process, HI will organize a training on disability and accessibility for the student of the UON, architecture department.

**Result 5: 5 schools in the target area are better prepared to include children with disability in their classrooms and community.**

5.1. Development of a set of standards and norms for accessibility for schools in Kenya

The inaccessibility of the school environment in Kenya for CwD has been identified as one of the main obstacle for the inclusion of CwD. HI will work along with the University of Nairobi school of architecture on the design of an accessible school environment that will be used for the construction of new schools, the already constructed schools need adjustments to welcome all the children, including the one with disability.

In partnership with the University of Nairobi, architecture department, HI will conduct an accessibility audit of the schools targeted by the project. This audit will draft recommendation to improve the accessibility of the school and accessibility work will be undertaken under the supervision of the architecture student. Doing so, HI is pursuing two objectives:
- Improve the accessibility of the school
- Raise awareness of the architecture student on disability and accessibility issues

The results will then be used to develop a set of standards and norms for accessibility in schools to be adopted by MoE.

5.2. Training of the education professionals on inclusive education

Using the developed Inclusion Guideline document (see activity 3.1) the head teachers, teachers, assistant teachers and education officials will be train to acquire skills and resources required to adequately support CWD in schools and classrooms. Two five-day training will be conducted, one for 20 head teachers and education officials and the other for 30 teachers and assistant teachers. The training of teachers will be conducted separately from the head teachers’ and education officials in order to respect the seniority and the hierarchical relation between those two groups. Four follow ups meetings and a two days refresher training will be conducted for each of the two groups. HI TA referent on IE and a consultant will be hired to conduct the training.

5.3. Introduce an inclusive education award
HI will collaborate with MoE to boost the recognition of inclusive schools and teachers to sensitize the community and government that inclusive education is possible. There has been a prize giving day annually to recognize teachers and students on different achievements that is held nationwide.

Hi will support MoE to establish an award for each pilot school for demonstrated excellence by teachers in inclusive education practices to be presented at the prize-giving day.

**Result 6: Knowledge, attitude and practices survey on access to education for children with disability in Kenya**

**6.1. Support the dissemination of the data to relevant stakeholders**

At the beginning of the project phase HI will conduct a baseline survey to inform the project and stakeholders on the number of CWDs in the target schools, challenges they are facing, Knowledge attitude and practice of the community, school and MoE officials.

The data will be analysed and shared with the target schools, partner DPOs and the MoE this will help inform HI, partners and MoE on the progress of project implementation. The same information will be developed into an informative booklet that can also be used for advocacy.

**6.2 Support the development of a database to store the data collected and to assist in the recording and tracking of client data for local service providers.**

HI will research what data collection tools and processes already exist within MOE to ensure that whatever statistics HI collects with partners becomes part of the national level data. HI will support local partner DPOs Kenya Association of the Intellectually Handicapped (KAIH) and NFSS and EARCs to develop a database with client information on names, contact information, physical location, and referral to local service providers. The data will help in tracking and follow up of clients and also give information on the number of CWD reached and accessing schools and health services.

HI will also work closely with EARCS and Quality Assurance department to improve on their data collection and develop or strengthen a database to collect data on children with disability in schools to inform their planning and needs within the schools.
**Strategy**

**Advocacy:** To implement this project Handicap International (HI) will use an advocacy based strategy to ensure that the government recognises the right to education for children with disability. Through advocacy the government will be better informed about the adoption and implementation of inclusive education policy in key documentation. To adopt this strategy HI will strengthen the connection between UDPK and Elimu Yetu Coalition to lobby and advocate for inclusive practices to be included in the NESSEP policy. Elimu Yetu coalition through this support will hold the government accountable to national and international disability legislation regarding the education of CWD and link with the Quality Assurance department of the MoE to write a joint position paper. Pilot schools will be supported through advocacy for placement of trained IE assistant teachers in classrooms. HI will train UDPK and DPOs on IE for local advocacy.

**Partnership:** HI will work with partners in implementing this project and will also work with key stakeholders in Ministry of Education, City Education, Teachers Service Commission and schools in the target area. HI will work with these partners and existing systems in government through building their capacity to be more inclusive.

**Integrated strategy**

All type of actors involved

**Bottom top and top bottom strategy**

Meaning that we work:
- at the ground level for practical implementation of an inclusive education and proof that it is possible
- at Top level (ministry/ government) expecting the result to trickle down to the ground level but at a nationwide scale
Conclusion

The intention of this assessment was to provide an overview of the main barriers to education facing children with disabilities and their families. It involved a review of policy documentation and interviews of a number of key stakeholders. The findings and subsequent problem tree were based on the information collected by these means as well as from information gleaned during the previous IE project. The findings of this assessment are intended to not only provide one with an understanding of the current context of the education system and disability policy in Kenya, but also to inform the development of future IE projects in the country.

Some clear themes emerged during the course of this assessment, identifying four main barriers to children with disabilities accessing their right to quality basic education. These four areas had a number of influencing factors that could become potential areas of focus for future IE projects.

Kenya still has a long way to go in terms of providing quality and inclusive education for all children, and there needs to be a strong intervention focus at all levels – from the individual to the family, school, and community and at the government policy level. This push for the government to be more aware of and more sensitive to the needs of children with disability is vital and this should be an area of significant focus in the future. The UNCRPD and its guidelines must be adhered to at this level and the government must be seen to be taking such conventions seriously and publicly in order for the recommendations and interventions to flow throughout society and ultimately benefit those who need to see them most at the ground level.
Appendixes

Annex I: UNCRPD Article 24
Annex II: Handicap International’s policy paper on Inclusive Education

REFERENCES

8. Sight savers, Policy paper, Making Inclusive Education a reality, July 2011