



The right of children with disabilities
to education:
A rights-based approach to
Inclusive Education

POSITION PAPER
(Draft)

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Ms. Lansdown was the founder and director, in 1992, of the Children's Rights Alliance for England, established to promote implementation of the United Nations Convention on the Right of the Child. She has published and lectured widely on the subject of children's rights. Her dedication in writing this paper and integrating a wide range of inputs from various organizations and UNICEF country offices throughout the consultation process has been highly appreciated.

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PREFACE

Inclusive Education – Focus on Children with Disabilities

The democratic and human-rights based intent of Inclusive Education as defined in the Salamanca Statement, and represented in the “recognition of the need to work towards ‘schools for all’ – institutions which include everybody, celebrate differences, support learning, and respond to individual needs”¹ is central to UNICEFs’ work in the Central Eastern Europe and Commonwealth of Independent States Region. Inclusive Education systems are those that have developed schools based upon

*a child-centered pedagogy capable of successfully educating all children, including those who have serious disadvantages and disabilities. The merit of such schools is not only that they are capable of providing quality education to all children; their establishment is a crucial step in helping to change discriminatory attitudes, in creating welcoming communities and in developing an inclusive society. A change in social perspective is imperative*².

While UNICEF conceptualizes Inclusive Education as first proposed by the Salamanca Statement and Framework for Action in 1994 (above), the realities of the CEECIS Region require specific approaches, positions, and solutions. With its long history of universal access to education, most countries in this region place great value on education and have high attendance rates. However, this Region is also steeped in long-standing traditions based on defectology and residential institutions and, in this Region, children with disabilities as well as Roma children are often unaccounted for, unwelcomed, or simply ignored.

This paper proposes to provide UNICEF Country Offices as well as their national counterparts and partners with a philosophical framework on the very specific issues that affect the inclusion of **children with disabilities** in the CEECIS region. Children with disabilities form a significant proportion of the out-of-school population that has particular educational needs and issues which require explicit positions and solutions. Children with disabilities are here presented as a **priority target group**, one that is subject to severe discrimination, segregation, and exclusion from all social aspects of life. The purpose of this paper is to provide clear strategy options for programming in the area of inclusive education, while keeping in mind the need for system-wide approaches designed to address the needs of ALL children.

The approach to Inclusive Education proposed in this paper is better understood within the UNICEF Child Friendly Schools framework. “The Right of Roma Children to Education – Position Paper” published in April of 2011, and this publication, help to address the issue of Inclusive Education in the CEECIS Region by targeting the needs of two of the most vulnerable and marginalized groups of children.

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CHAPTER I

Inclusive Education: the way forward

Education for All (EFA), which represents an international commitment to ensure that every child and adult receives basic education of good quality, is based both on a human rights perspective, and on the generally held belief that education is central to individual well-being and national development. However, EFA has not, to date, given sufficient attention to some marginalised groups of children, in particular those seen as having ‘special educational needs’ or disabilities³. Children with disabilities have remained relatively invisible in the efforts to achieve universal access to primary education. UNESCO’s EFA Global Monitoring Reports, for example, do not engage in any great depth with the educational status of children with disabilities, although other vulnerable groups, such as girls, have been part of more mainstream efforts. It has become clear that, without targeted measures to help them overcome the barriers, the goals of EFA will not be achieved for children with disabilities.

1.1 Emerging recognition of the need for change

In response to the perceived failures to date of EFA, a growing focus has been placed on inclusion as the key strategy for promoting the right to education, including for children with disabilities. While EFA offers the goal of universal entitlement, inclusion can be understood, not merely as a vehicle for ending segregation, but rather as a commitment to creating schools which respect and value diversity, and aim to promote democratic principles and a set of values and beliefs relating to equality and social justice so that all children can participate in teaching and learning⁴. In so doing, it brings the education agenda much closer to the broader understanding of the right to education embodied in the key human rights instruments. UNESCO defines inclusive education as ‘*a process of addressing and responding to the diversity of needs of all learners through increasing participation in learning, cultures and communities, and reducing exclusion within and from education. It involves changes and modifications in content, approaches, structures and strategies, with a common vision which covers all children of the appropriate age range and a conviction that it is the responsibility of the state to educate all children*’⁵. **Inclusive education is not a marginal issue, but is central to the achievement of high-quality education for all learners and the development of more inclusive societies.**

Recognition of inclusion as the key to achieving the right to education for all has strengthened over the past 20 years. The 1990 World Conference on Education for All in Jomtien first highlighted the numbers of children excluded from school and the need for more inclusive approaches to education to overcome the barriers face by children whose needs were not currently being met⁶. Subsequently, the 1993 UN Standard Rules on the Equalisation of Opportunities for Persons with Disabilities required Member States to provide education for people in integrated settings and ensure that education of disabled children is an integral part of the education system. And in 1994, UNESCO’s Salamanca Statement and Framework for Action, signed by 92 governments, affirmed and strengthened these provisions with an unequivocal call for inclusive education, and an explicit principle that ordinary schools should accommodate all children regardless of their physical, intellectual, emotional, linguistic, or other requirements⁷. The Committee on the Rights of the Child identified the need for action to bring an end to segregation in education in its General Discussion Day in 1997 on the rights of children with disabilities, with a recommendation that: ‘*States should review and amend laws affecting disabled children which are not compatible with the principles and provisions of the CRC, for example, legislation which compulsorily segregates disabled children in separate institutions for care, treatment or education*’⁸. And since 1997, it has consistently recommended the development of inclusive education systems in its concluding observations following examination of States Parties reports⁹.

Since 2002, EFA has acknowledged that if it is to succeed in its goal, it must extend to children with disabilities, and adopted a flagship *'The right to education for persons with disabilities: Towards inclusion'* in order to champion efforts to share knowledge and build global partnerships to ensure that disabled learners are included in EFA national plans. In other words, it must incorporate children with disabilities as subjects of rights, including the right to education, on an equal basis with all other children. The Convention on the Rights of Persons with Disabilities (CRPD), which came into force in 2008, incorporates these commitments into international law, placing explicit obligations on States Parties to introduce inclusive education.

However, while the inclusive education debate has undoubtedly played a significant role in raising concerns about disabled children in international forums, it is important to understand it not as a philosophy or educational approach exclusively for children with disabilities, but as an approach that is fundamental to achieving the right to education for children from all marginalised groups – for example, girls, Roma children, or working children. In 2008, UNESCO argued that a broad concept of inclusive education *'can be viewed as a general guiding principle to strengthen education for sustainable development, lifelong learning for **all** and equal access of all levels of society to learning opportunities so as to implement the principles of inclusive education'*.¹⁰ Furthermore, children with disabilities are not a homogeneous group. They may identify more strongly with other aspects of their overall identity, such as their gender, economic status, or ethnicity, or a combination. Belonging to one or more of these groupings significantly increases their vulnerability, and investment in addressing the right to education needs to take account of such multi-vulnerabilities¹¹. It is helpful to acknowledge disability as one of many issues of difference and discrimination, rather than an isolated form of exclusion, and inclusion as a strategy for addressing all forms of exclusion and discrimination.

Disability, of course, can be understood very differently across different communities and cultures. In order to pursue a coherent approach to addressing inclusive education for children with disabilities, a definition of disability is required. Article 1 of the CRPD describes persons with disabilities as *'those who have long-term physical, mental, intellectual, or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others'*. This approach is consistent with the WHO's *International Classification of Functioning, Disability and Health*, known more commonly as ICF, which conceptualizes a person's level of functioning as a dynamic interaction between her or his health conditions, environmental factors, and personal factors. Both approaches allow for a broad approach to disability which acknowledge the importance of the context and environment in enabling or disabling individuals from participating effectively within society.



1.2 Understanding inclusion

There have, traditionally, been three broad approaches to the education of children with disabilities: segregation in which children are classified according to their impairment and allocated a school designed to respond to that particular impairment; integration, where children with disabilities are placed in the mainstream system, often in special classes, as long as they can accommodate its demands and fit in with its environment; and inclusion where there is recognition of a need to transform the cultures, policies and practices in school to accommodate the differing needs of individual students, and an obligation to remove the barriers that impede that possibility. It has been argued that inclusive education is not only about addressing issues of input, such as access, and those related to processes such as teacher training, but that it involves a shift in underlying values and beliefs held across the system¹². It requires that all children, including children with disabilities, not only have access to schooling within their own community, but that they are provided with appropriate learning opportunities to achieve their full potential. Its approach is underpinned by an understanding that all children should have equivalent and systematic learning opportunities in a wide range of school and additional educational settings, despite the differences that might exist.

Inclusive education provides a fundamentally different pedagogical approach to one rooted in deviance or difference. In other words, it stresses¹³:

- a. the open learning potential of each student rather than a hierarchy of cognitive skills;
- b. reform of the curriculum and a cross cutting pedagogy rather than a need to focus on student deficiencies;
- c. active participation of students in the learning process rather than an emphasis on specialized discipline knowledge as key to teachers expertise;
- d. a common curriculum for all, based upon differentiated and/or individualized instruction, rather than an alternative curriculum being developed for low achievers;
- e. teachers who include rather than exclude.

Radical changes are required in education systems, and in the values and principles of the people involved in delivering education, if the world's most vulnerable and disadvantaged children are to realise their right to gain access to their local school¹⁴. Central to an inclusive approach are a commitment to¹⁵:

- Putting inclusive values into action
- Valuing every life equally
- Helping everyone feel a sense of belonging
- Promoting children's participation in learning and teaching
- Reducing exclusion, discrimination and barriers to learning and participation
- Developing cultures, policies and practices to promote diversity and respect for everyone equally
- Learning from inclusive practice to share the lessons widely
- Viewing differences between children and between adults as a resource for learning
- Acknowledging the right of children to locally based high quality education
- Improving schools for staff and parents as well as children
- Emphasising the value of building positive school communities as well achievements
- Fostering positive relationships between schools and their values and surrounding communities
- Recognising the inclusion in education is one aspect of inclusion in society

1.3 The case for inclusion

Clearly there is a human rights and principled case for inclusion, but there are also strong social and educational benefits¹⁶:

- It can produce positive changes in attitudes within schools towards diversity by educating all children together and leading to greater social cohesion.
- Children with disabilities are less stigmatised, and more socially included
- Children without disabilities learn tolerance, acceptance of difference and respect for diversity
- Children with disabilities have access to a wider curriculum than that which is available in special schools.
- It leads to higher achievement for children than in segregated settings. Indeed, there are educational benefits for all children inherent in providing inclusive education, through major changes in the way schooling is planned, implemented and evaluated.
- Education is a means to ensure that people can enjoy and defend their rights in society and contribute to the process of democratisation and personalisation both in society and in education.

Furthermore, there are powerful economic arguments in its favour. One of the messages emerging from the General Discussion Day on the rights of children with disabilities, held by the Committee on the Rights of the Child in October 1997, was the importance of recognising children with disabilities as contributors to society, not burdens. The World Bank has estimated that people with disabilities may account for as many as one in five of the world's poorest people (1999), while a 2005 World Bank study also concluded that *"disability is associated with long-term poverty in the sense that children with disabilities are less likely to acquire the human capital that will allow them to earn higher incomes"*. Educating children with disabilities is a good investment. A World Bank paper notes that it reduces welfare costs and current and future dependence. It also frees other household members from caring responsibilities, allowing them to increase employment or other productive activities.

It is in the economic interests of governments to invest in the education of children with disabilities in order that they can become effective members of the labour force as they grow up. Lack of education often prevents young people with disabilities from entering the job market resulting in the state needing to absorb the costs of young people who remain in residential care or must otherwise support those who are not self-sufficient. A 2009 UNESCO study found that up to 35.6% of global GDP lost due to disability is estimated to take place in Europe and Central Asia.¹⁷ Given that a study in Canada, for example, shows that if persons with disabilities are kept outside of the labour market, the production loss amounts to 7.7% of GDP (\$55.8 billion), this represents a huge loss of potential. The World Bank further acknowledges that the total value of GDP lost due to disability is between \$1.4 and \$1.9 billion dollars (US)¹⁸. This could be lowered by reducing lost productivity, lost human potential and lost health and well being. In addition, the OECD acknowledges that improving the equity and quality of education systems is "vital to the maintenance of a flourishing economy and society".¹⁹



CHAPTER II

Overview of Children with Disabilities and Education in the CEECIS Region

The challenges facing the region, in creating environments in which the education rights of children with disabilities are respected, are considerable. Despite significant efforts to address their exclusion from mainstream schooling, and many examples of positive practice, many countries are still struggling to address the issue of equitable and inclusive access for children with disabilities. Recent reviews of the education of children with disabilities by both OECD and UNICEF have found a wide gap between official recognition of inclusive education in the form of international treaties and legislative frameworks, and the actual situation on the ground.²⁰ The causes are multiple: lack of co-ordination and collaboration between ministries providing services to children with disabilities, the prevailing influence of the concept of defectology on the design of education provision for children with disabilities; limited availability of social service providers, lack of reliable and detailed data and indicators, inadequate financial and human resources, and hostile public attitudes. It is apparent that legal reforms which, in theory, create the opportunity and means to claim rights, legislation alone will not be capable of challenging the deep-seated discriminatory practices which currently impede change. Measures are needed to build the capacity of the system as a whole in order to challenge inequity, and meet the obligations to promote and protect the rights of children with disabilities undertaken by all countries in the region.

2.1 The historical context

Throughout the CEECIS region, during the Soviet era, children with disabilities were treated through the lens of 'defectology', a term developed in the Soviet Union by Vygotsky in the 1920s and based on the philosophy that disabilities are faults that can be corrected if appropriate services are provided²¹. Defectology is a discipline rooted in a medicalised approach in which children with disabilities are considered 'defective' from the norm. It has evolved as a distinct and separate discipline from educational science, and employs clinical, physiological, psychological, and pedagogical approaches to determine the means of correcting and compensating defects through a system of special education.

The consequence of this approach has been the systematic placement of children, according to type of disability, in residential institutions, so that they can grow and develop with support, and protected from general society. The medical profession, trained in 'defectology', would typically recommend institutional care as the best solution for caring for newborns or young children with disabilities, an approach reinforced by the virtual complete lack of any community based care or services available to support families who chose to ignore this advice. Children who are classified as 'handicapped' are those with mental or physical defects that are thought to hinder their optimal development within the conventional educational system. This policy led to very significant numbers of children with medium and severe disabilities being placed in residential schools, transferring as they got older to adult institutions where they would spend the rest of their lives. Invariably these facilities each catered for large numbers of children, segregated from their communities and cut off from families²². A variety of types of institutions existed, including infant homes, hospitals, special institutions or *internats* (boarding schools) run by the education ministry, boarding homes for the severely disabled operated by social services, and children's homes administered by the health department. Children with milder learning disabilities were typically disregarded altogether or sent to special schools with a remedial curriculum, where they were unlikely to receive appropriate support for their needs. Those who were deemed 'uneducable' were sent to institutions or confined to the home. Children who did stay in their families had little chance of a normal life, given that streets and buildings were not accessible, community-based education and recreation were largely unavailable, and children with disabilities and their families were often shunned in public spaces or so shamed that they avoided venturing out in public. This, then, was the context, which informed

social and educational policy for children with disabilities, at the fall of the Communist regimes 20 years ago, the consequence of which was that children with disabilities were highly marginalised and largely invisible. Regrettably, it remains very much the picture today in many parts of the region.

2.2 Prevalence of disability

The total number of children across the region who are now officially recognized as disabled, tripled from about 500,000 at the onset of transition, to 1.5 million in the 27 countries. This surge is largely due to greater recognition of disability rather than to actual increases in impairments. The total child population is estimated at just over 1000 million.²³ Given that the international benchmark for the prevalence of disability among children is assumed to be a rate of 2.5%, this figure of 1.5 million suggests that over a million children with disabilities are not included in the data. UNICEF estimates that 2.4 million of all children of primary-school age are missing from school in the whole of the South Eastern Europe (SEE), Central Europe (CE), and Commonwealth of Independent States (CIS) region²⁴.

The information that does exist, both in relation to prevalence and access to education, derives largely from the following sources:

- hospital registries of children that are identified at birth as having a disability;
- data on the number of children living in institutions or attending special schools or classes;
- lists of children registered by parents or doctors as having disabilities, which leaves out all children whose parents do not or are ashamed to register them.

However, the data provided by these sources is seriously flawed:

- Significant numbers of children in institutions are often not counted in disability registers or education data as they are considered uneducable²⁵.
- The data does not generally include those children with disabilities that develop after birth.
- Shame and stigma leads to many parents failing to register their children as having disabilities.
- Responsibility for children with disabilities is commonly split between government ministries (education, social, health, labour) leading to a lack of co-ordination in data collection.
- Many children with disabilities, even when living at home, do not attend school and are therefore not visible in the system²⁶.
- While data does exist for children in special schools, and to some extent for children in special classes in regular schools, the number of children with disabilities with milder disabilities in regular classes is often not collected.

The problems are compounded as a result of different definitions of disability and different terminology to describe impairments. These conflicting definitions arise not only regionally, but also within countries between different ministries and organizations. Official definitions of disability across the region generally remain medically-based and anchored in functional limitations; that is, that an individual is incapable in some basic way. The perpetuation of an approach which persists in understanding disability as a medical condition, inherent to the child, that can be repaired, renders it almost impossible for governments to envision what children with disability can accomplish in mainstream school settings.

II - OVERVIEW

There is a pressing need for more data on the education of children with disabilities in the region. Overall, the available data across the region on the learning achievement or school success of children with disabilities either in inclusive classrooms or in special schools is extremely limited, with very few systems set up for collection. Where it does exist, it indicates that children with disabilities generally receive a very restricted education. In many countries, national level education data often fails to include information on numbers and placements of children with disabilities. In Kazakhstan, for example, which is not untypical, there is a lack of national indicators and agencies that do collect data are not coordinated.²⁷ Overall, the problem of acquiring accurate information on educational outcomes for children with disabilities is compounded by the fact that children from many socially vulnerable families, including Roma children, are placed in special schools.



2.3 Policies towards disability since transition

In the last 20 years, culminating in the adoption of the CRPD in 2006, there has been an accelerating shift internationally towards the recognition of people with disabilities as holders of rights rather than problems to be solved²⁸. Alongside this development, the disability community has promoted adoption of a 'social model' of disability. This approach challenges the medical model where the focus is on changing the individual with a disability. Instead, it emphasizes the extent to which the physical, cultural, communication, attitudinal, transportation barriers in the environment serve to disable people, and therefore need to change. However, CEECIS countries, overall, still conceptualize disability as primarily a chronic medical condition of the individual, for which the solutions are health care, rehabilitation, institutionalisation, or social supports such as special education and pensions. Little differentiation is made between impairment, illness and disability. And despite universal ratification of the Convention on the Rights of the Child (CRC) across the region, strong encouragement to promote inclusion and programmes of de-institutionalisation in accession countries, the overwhelming majority of countries signing and ratifying the Convention on the Rights of Persons with Disabilities (CRPD), and many countries

having introduced progressive legislation to strengthen the rights of children with disabilities, progress remains patchy.

De-institutionalisation

Institutionalisation remains the overwhelming policy approach across the region, with defectology continuing as the academic discipline governing the care and treatment of children with disabilities. Consistent with this context, the number of children in institutional care in the region is the highest in the world²⁹. UNICEF estimates that across CEECIS, a child with a disability is almost 17 times as likely to be institutionalised as one who is not disabled.³⁰ More than 626,000 children reside in these institutions. The rate of children in institutional care in CEECIS has on average been almost stagnant since 2000. But in 12 countries, the rate *increased* between 2000 and 2007³¹. This means that despite ongoing reforms, institutional care is becoming more frequent in more than half the countries. In Kyrgyzstan, for example, as recently as 2005, there were still long waiting lists for placements in institutions and special schools³². It appears that countries which place a higher share of children with disabilities in institutions are those countries where the institutionalization of children such as orphans and children with disabilities is generally accepted. Indeed, there is a significant demand in a number of countries to build new institutions to accommodate newly identified need.

Following the collapse of Communism and greater exposure to, and support from the West, conditions in institutions for children in the region did begin to improve. However, some countries, faced with severe economic difficulties, have experienced challenges in finding the necessary resources to maintain improved standards in institutions, with children often suffering from poor diet, lack of heat, insanitary conditions and inadequate staffing levels. The UN Study on Violence against Children highlighted profound concerns about conditions in institutions including violence, neglect, dangerous environments, including children being left for hours on urine soaked mattresses, or physically or medically restrained, understaffing and lack of monitoring or independent scrutiny³³. Research undertaken in 2001 found that the death rate among institutionalized disabled children in several countries in Eastern Europe was almost twice that for children in the general population and for disabled children who are kept at home³⁴. Despite this evidence, the high levels of poverty in many of the countries leads to some parents arguing that institutions meet their child's needs better than they can – providing rehabilitative services as well as diet. And, there are positive examples of some institutions building opportunities for children to connect more closely with their local communities.

De-institutionalisation depends on the development of effective alternative community-based services. Such services have improved since the early 1990s, but still have a long way to go. A survey by UNICEF published in 2005 found that there were substantial differences both among and within countries, with a significant divide between CEECIS sub-regions, north and south, richer and poorer countries, urban and rural populations³⁵.

Early assessment, identification and care

The emphasis in assessment, throughout CEECIS, remains strongly medically focused. The CEECIS still largely retains its legacy of rigid Soviet style screening commissions, and in most countries, children receive only a medical diagnosis at birth and a medical screening around age 6. In Uzbekistan, for example, children are examined before attending kindergarten at around 3 years old, and children determined to have any disability are usually sent to the special school at this

point. In Tajikistan, children are not assessed until 7 to 12 years of age, leaving many children without crucial early intervention services earlier in their lives. Routine assessments tend to overlook the developmental and behavioural dimensions of health, and few countries provide comprehensive assessments with a coordinated multidisciplinary team. The problem is particularly acute in peripheral and especially rural areas. There is only limited training for health and other social service professionals about disabilities.

Efforts have been made to reform the commissions, to include social, emotional, and educational, as well as medical factors, when determining an appropriate educational plan for children. For example, Belarus has a National Development Plan which addresses disability, and a range of policies, agreements and standards have been developed to ensure the quality of early childhood intervention services (ECI) for vulnerable children and their families.³⁶ Nevertheless, a recent UNICEF survey revealed that in many countries throughout the region, they continue to rely on the defectology model to determine disability classifications and educational capabilities for the child, and are rarely followed by a more comprehensive assessment or a re-examination of the original diagnosis.³⁷ Furthermore, in many parts of the region, screenings are not compulsory and parents have to pay for them, resulting in the most at-risk children not receiving supportive services and being placed in inappropriate educational settings.

Even where early assessments are provided, they can prove detrimental. When any kind of development difference is noticed at birth, there is still a widespread practice of immediate separation of the child from the mother, depriving the child of essential breastfeeding support, bonding and contact. Once a diagnosis of disability is made, it is very hard to change it. This is especially true for children deemed 'uneducable' and placed in institutions. The commissions can pass down disability labels that are virtually impossible to appeal.



Education

The pattern of early years' education varies considerably across the region. While day care for under 2s was not universally available in the region prior to transition, it has now fallen to levels of between 10-15%.³⁸ However, there is no accurate information on the extent to which children with disabilities have access to such services. In Hungary, for example, only one third of nursery schools ensured places for children with disabilities, and they comprised 1% of total enrolment and only 0.1% of children under the age of two.³⁹ These low levels are of concern given the particular importance of early years' education for young children with disabilities.

There does, however, appear to be a growing understanding throughout the countries of the region that all children have a right to education under international and national law; that all children are capable of being educated; and that it is a government's responsibility to provide educational settings that respect these rights and capabilities⁴⁰. The national education laws in the majority of countries in the region do now state that all children have the right to receive an education in mainstream schools along with individualized instruction appropriate to their abilities⁴¹. Most of the countries also have laws or regulations specifically designed to ensure equal opportunity for children with disabilities to receive full benefits of education at all levels.

There is also a trend toward inclusive education policy in the region. A number of countries include a component on 'inclusive education' in their national education strategic plans and national education reports - for example, Armenia, Azerbaijan, Belarus, Bosnia-Herzegovina, Georgia, Kosovo⁴², The former Yugoslav Republic of Macedonia, and Serbia. However, budgetary support, action frameworks, indicators, and implementation commitments are not included and inclusive education is generally not harmonized with general education planning⁴³. Indeed, Bosnia-Herzegovina and Georgia are the only two countries in the region that have actual strategic plans for 'inclusive education' in place. Inclusive education is a stated priority of education strategic planning in Kosovo and Georgia, and Azerbaijan is reforming pre-school education to be inclusive and a law for inclusive education was submitted to the central government in 2009. In Armenia, inclusive education is prioritized in the State Programme of Education Development, 2011-2015.

However, policies towards and understanding of inclusion vary considerably. The concepts of integration and inclusion are not always clearly distinguished from each other and are often used interchangeably. Belarus, Moldova, The former Yugoslav Republic of Macedonia, Ukraine, and Russia, for example, do not make a distinction between 'inclusion' and 'integration,' and their strategies clearly indicate that the majority of children with disabilities are serviced by special facilities. Albania, in an otherwise comprehensive education strategy plan, makes only one mention of inclusive education in relation to curriculum development. Serbia is currently conducting a study on the costs of implementing inclusive education policies, which will feed into the development of a per-capita financing formula, a major element of the ongoing reform of its education system. Some countries such as Kosovo, Russia, Serbia, Armenia, Belarus and Uzbekistan, indicate an intention to transform special schools into resource centres for inclusive education support in mainstream schools, while Montenegro, for example, has mobile teams which travel among mainstream schools to offer advice on educating students with special needs. In Armenia, the Ministry of Education and Science is currently piloting full inclusion of students into mainstream education in one region. Pre-primary and early primary education is the focus of most of the regional inclusion efforts, for example, in Bosnia- Herzegovina, Azerbaijan, Georgia,

The former Yugoslav Republic of Macedonia, Montenegro, Serbia, and Russia⁴⁴. And there seems to be little expectation that students with disabilities will go on to mainstream secondary or higher education. Post-secondary opportunities for students with disabilities, when available, seem to consist predominantly of vocational training.

Furthermore, there is a gulf between policy and practice on the ground⁴⁵. Current provision ranges from special schools, institutions, and 'correctional education centres' to special classrooms, supported home schooling, day care centres, inclusive classrooms, and individualized curricula in special classes in general education schools. Some inclusive classrooms do exist in all countries, either by government policy or as a consequence of NGOs or donor organizations piloting inclusive education programmes, although the total numbers of students involved is very difficult to ascertain⁴⁶. In general, it is children with mild or moderate degrees of disability who are deemed to be candidates for inclusive education. And, although there have been some moves towards inclusion in mainstream schools, the reality is that there has been a bigger demand for and creation of special schools for children with disabilities in many countries and in practice, segregation of children with disabilities in special schools is still the predominant practice, with the majority of children with disabilities systematically excluded from mainstream education. In Armenia, a search in two provinces by an NGO identified 1,277 children with disability, of which 22% were in inclusive classrooms in mainstream schools; however, 11% had incomplete schooling, had never received schooling or were not registered at all, and only 31 students had graduated from school⁴⁷. In an oblast in Russia, 24% of an identified population of children with disability attended regular classrooms, however, another 11% are educated at home, and a full 22% received no education instruction at all⁴⁸. In Serbia, school completion rates for students in special schools were very low with 12% finishing elementary and only 30% of those graduating from secondary schools⁴⁹. According to research by USAID, The former Yugoslav Republic of Macedonia, Montenegro, and Kosovo have addressed inclusion primarily by the addition of specialized classes to mainstream schools. However, it is not clear whether these approaches actually involve individualized instruction and opportunities to participate with non-disabled students.

Institutes of Defectology continue to administer the majority of training for teachers who will teach children with disabilities. Some efforts have been made towards renaming these institutes. However, these shifts are not generally accompanied by appropriate paradigmatic changes towards an inclusive philosophy⁵⁰. Overall, the traditional Soviet approach to education that valued the use of uniform methods and standardized curricula is still very much in evidence. Pre-service teacher training in the region is a long way from succeeding in teaching inclusive pedagogy. Countries report an acute shortage of high quality in-service training programs. Nine countries of 22 in the region report having teachers trained to teach inclusively⁵¹. And only four countries have pre-service teacher training programmes that incorporate inclusive education as a specific skill component. Often sponsored by NGOs, these programmes are rarely widespread and organizations rarely have the resources to scale them up.

The quality of training is further hampered by the inadequacy of practical experience during pre-service training across the region. In some countries, teachers have as little as one day to practice teaching before they are hired as teachers, with very few ever have the chance to observe an inclusive classroom in action.

2.4 Stigmatisation and prejudice

Children with disabilities often live outside of mainstream society - in residential institutions or at home with family members, with little contact with society or the outside world. Discrimination and negative attitudes toward disability continue to permeate the region, which, in part, can be traced to the Communist past, when individuals were valued according to their productivity and contributions to the advancement of the state. These attitudes impede progress towards inclusion. The language widely used to describe disability serves to perpetuate negative stereotypes and prevent full inclusion. Professionals, as well as the wider society, commonly use derogatory terms such as 'defective', and 'imbecile' when referring to disability, while the belief that these 'defects' must be corrected prevails in the region.

Implementation of inclusive education is hampered by persisting negativity towards disability among the professionals in the education system. Government commitment to inclusion initiatives and the philosophies supporting them are very new, and counter many deeply held beliefs about education. The majority of teachers continue to have the same discriminatory attitudes towards disability as those evidenced in the majority population. A recent baseline study on education in The former Yugoslav Republic of Macedonia based on the child friendly school framework found the 69% of teachers that teach children with disabilities and 50% of all teachers feel that they do not belong in mainstream classrooms. Similarly, UNICEF Kyrgyzstan found that 63.5% of teachers felt that it would be impossible to include children with visual impairments, 44.2% that it would be impossible to integrate students with wheelchairs, and 34.6% that it would be too difficult to include children who walk with difficulty.⁵²

Attitudes towards disability⁵³:

- 'Children should be supported as a gesture of solidarity and not because it is a basic child right.'
- 'Society believes that [children with disabilities] should live in parallel worlds... disability is a punishment from god.'
- 'Beliefs and traditions continue to exclude people with disabilities from society.'
- 'Parents reprimand and blame themselves for the disability.'
- 'Regarded as a tragedy... depressing because of society and prejudices and is shameful.'

However, some countries in the CEECIS region have made significant efforts to raise awareness about children with disabilities, create tolerance and emphasise the value of inclusion. In 2009, UNICEF Serbia surveyed over 1,000 of its citizens about their opinions towards those with disabilities and found overwhelming positive responses.⁵⁴ Fourteen of the 22 countries in the region have used targeted campaigns that debunk myths about disability and present disability in a positive light to change attitudes and raise general awareness about the importance of inclusive education. Successful disability campaigns in the region contain clear, contextualized messages that quickly and effectively relay information using innovative techniques with an overall aim to ensure that children with disabilities are more present and accepted in societies.



CHAPTER III

A human rights-based approach to inclusive education for children with disabilities

“All children and young people of the world, with their individual strengths and weaknesses, with their hopes and expectations, have the right to education. It is not our education systems that have a right to certain types of children. Therefore, it is the school system of a country that must be adjusted to meet the needs of all children.” (B. Lindqvist, UN Special Rapporteur for Persons with Disabilities, 1994)

3.1 The relevant human rights standards

All governments in the region have ratified the Convention on the Rights of the Child (CRC), a holistic human rights treaty addressing the social, economic, cultural, civil, political and protection rights of children. It emphasises both the right to education on the basis of equality of opportunity, and the broad aims of education in terms of promoting the fullest possible development of the child. In its General Comment on the aims of education, the Committee on the Rights of the Child has emphasised that *‘the education to which every child has a right is one designed to provide the child with life skills, to strengthen the child’s capacity to enjoy a full range of human rights and to promote a culture which is infused by human rights values’*⁵⁵. Article 2 of the CRC introduces, for the first time in an international human rights treaty, an explicit obligation on governments to assure the realisation of **all rights to every child without discrimination, including on grounds of disability**. In addition, Article 23 of the CRC specifically addresses the right of children with disabilities to assistance to ensure that they are able to access education in a manner that promotes their social inclusion. The Committee on the Rights of the Child, in a General Comment on children with disabilities, has further stressed that inclusive education must be the goal of educating children with disabilities⁵⁶.

Fulfilment of the obligation to ensure the equal right of all children with disabilities to education necessitates an approach based on a holistic understanding of the CRC. The Committee on the Rights of the Child has identified four rights which must also be understood as general principles to be applied in the realisation of all other rights – non-discrimination, the best interests of the child, the optimum development of the child and the right of the child to be heard and taken seriously in accordance with age and maturity⁵⁷. These principles need to underpin all actions to promote the right of children with disabilities to education. In addition, it is necessary to take account of all other relevant rights. For example, many children with disabilities will continue to experience barriers in realising their right to education, unless measures are taken to provide early assessment and access to early years provision, to tackle prejudice and discrimination, to provide protection from bullying and violence, and to develop appropriate support and services for families.

Despite these commitments, the rights of children with disabilities continue to be widely neglected and violated. The UN Convention on the Rights of Persons with Disabilities (CRPD) was drafted, not to introduce new rights – the rights of persons with disabilities are exactly the same as those of every other person – but to re-affirm those rights and introduce additional obligations on governments to ensure their realisation. Within the region, as of July 2011, 16 countries have ratified the CRPD: Armenia, Azerbaijan, Bosnia and Herzegovina, Croatia, Czech Republic, Hungary, Latvia, Lithuania, Montenegro, Moldova, Romania, Serbia, Slovakia, Slovenia, Turkey, Turkmenistan. The remaining countries have all signed except Kyrgyzstan and Tajikistan.⁵⁸ The CRPD includes detailed provisions on the right to education, stressing more explicitly than in the CRC, the obligation of governments to ensure *‘an inclusive system of education at all levels’*. It also introduces a range of obligations to remove the barriers that serve to impede the realisation of rights for people, including children, with disabilities, and to ensure more effective protection and a stronger voice for children with disabilities to claim their rights.

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The following box elaborates the key relevant articles in both Conventions which, given the numbers of signatories and ratifications, can legitimately be applied as a framework to underpin and guide legislation and policy across the region, towards the goal of a right to quality inclusive education for every child with a disability⁵⁹.

CRC	CRPD
Education Article 28 - education must be provided to every child on the basis of equality of opportunity States must: • make primary education compulsory and free to all • make secondary school available and accessible to every child and take measures to make it free • make higher education accessible to all on basis of capacity • make vocational information available and accessible to all children • take measures to increase attendance and reduce drop-outs. All appropriate measures must be taken to ensure that school discipline respects children's dignity and complies with other rights in the UNCRC, and States must encourage international cooperation. Article 29 - Education must be directed to the development of children to the fullest potential, respect for human rights, respect for the child's parents and their values, the values of their own and others' societies, preparation of the child for life in a free society and respect for the natural environment.	Article 24 - affirms the right of people with disabilities to inclusive education, at all levels, without discrimination and on the basis of equality of opportunity. States must ensure that children with disabilities: • are not excluded from the general education system and can access inclusive, quality and free primary and • secondary education on an equal basis with others in the communities in which they live • are provided with reasonable accommodation of their needs • receive the support they need within the general education system • are provided with individualised support measures, consistent with full inclusion. States must also take measures to enable people with disabilities to participate equally in education and their communities by supporting learning of all alternative forms of communication, and enabling deaf, blind and deafblind children to learn in the most appropriate languages and modes and in environments that maximise their development. The education system must enable people with disabilities to achieve the full development of their personality, talents, creativity and mental and physical abilities, a sense of dignity and self-worth, respect for human rights and effective participation in society.
Non-discrimination Article 2 – the right to non-discrimination on any ground, including disability, and the obligation of States to take all appropriate measures to protect children from all forms of discrimination.	Article 2 – defines discrimination on the basis of disability as any exclusion or restriction that prevents the realisation of rights on an equal basis with others. Article 3 – non-discrimination, equality of opportunity and equality between men/boys and women/girls are general principles of the CRPD. Article 4 – duty on States to eliminate discrimination. Article 5 – prohibition of discrimination on grounds of disability, and obligation on States to provide reasonable accommodation to promote equality and eliminate discrimination. Article 6 – obligation to take measures to address the multiple discrimination faced by women and girls with disabilities. Article 7 – guarantees children with disabilities respect for rights on an equal basis with other children Article 8 – States must adopt wide-ranging measures to raise awareness of the rights of people with disabilities, combat prejudice and discrimination, promote positive images of disability, encourage respect for people with disabilities in the education system and provide awareness training on disability.

III - INCLUSIVE EDUCATION

Best interests Article 3 – the best interests of the child must be a primary consideration in all actions concerning children taken by public and private bodies. Services, facilities and institutions caring for children must comply with appropriate standards in respect of health, safety, quality of staff and proper supervision.	Article 7 – reaffirms that the best interests of the child with disabilities must be a primary consideration. Article 16 – all facilities and programmes for people, including children with disabilities, must be monitored by independent authorities
Participation Article 12 – the right of every child capable of forming a view, to express views and have them given due weight in accordance with age and maturity. Article 23 – right to active participation within the community.	Article 3 – full and effective participation is a general principle of the CRPD. Article 7 – affirms the right of children with disabilities to express views and have them given due weight in accordance with age and maturity, on an equal basis with other children. They must be provided with disability and age- appropriate support to realise this right.
Support for parents Article 18 – both parents have equal responsibilities for their children and should have children’s best interests as their primary concern. States must provide assistance, support and services to help parents bring up their children.	Article 23 – States must provide appropriate assistance to parents with disabilities to help them care for their children. Children with disabilities have equal rights to family life and States must provide early information, services and support to children with disabilities and their families to prevent concealment, abandonment, neglect and segregation.
Protection from all forms of violence Article 19 – children have the right to protection from all forms of violence, neglect, exploitation and abuse, and States must take all appropriate measures to protect them from such violence.	Article 16 – affirms the right to protection from violence, and requires States to provide forms of support to people with disabilities to help them avoid violence and abuse, and it must be accessible and appropriate to children with disabilities, as well as gender sensitive. All protection services must be age, gender and disability sensitive. States must introduce child-focused legislation and policies to ensure that violence against children with disabilities is identified, investigated and prosecuted where appropriate.
Play, leisure and access to cultural life Article 31 – the right to play and recreation and to participate in cultural and artistic life	Article 30 –ensures that children with disabilities have equal opportunities with others to play, recreation, leisure and sporting activities
Implementation Article 4 – obligation on States to take all appropriate legislative, administrative and other measures to implement the UNCRC. With social, economic and cultural rights, measures must be taken to the maximum extent of available resources.	Article 4 – sets out detailed obligations to take all appropriate measures to implement the CRPD, including: • legislation • protection of rights of people, including children, with disabilities in all policies and programmes • avoidance of actions inconsistent with the CRPD • measures to eliminate discrimination • promotion of universal design, research into new technologies and provision of information and services on available aids and devices • training professionals on the CRPD • consulting with people with disabilities, including children, on all legislation and policies to implement the CRPD • • with regard to economic, social and cultural rights, implementation to the maximum of available resources (<i>education is a social right</i>). Article 31- obliges states to collect data on the number of persons with disabilities and to disaggregate data in their national statistics. Article 33 - requires states to designate a focal point for implementation of the Convention and to fully involve organizations of persons with disabilities and their representative organizations to participate fully in this process.

3.2 Principles underpinning a rights-based approach to education

A rights-based approach to education is informed by seven basic principles of human rights. These principles need to be applied in the development of legislation, policy and practice relating to the right to inclusive education:

- **Universality and inalienability:** Human rights are universal and inalienable, the entitlement of all people everywhere in the world. An individual cannot voluntarily give them up. Nor can others take them away.
- **Indivisibility:** Human rights are indivisible. Whether civil, cultural, economic, political or social, they are all inherent to the dignity of every person
- **Interdependence and interrelatedness:** The realization of one right often depends, wholly or in part, on the realization of others.
- **Equality and non-discrimination:** All individuals are equal as human beings, and by virtue of the inherent dignity of each person, are entitled to their rights without discrimination of any kind.
- **Participation and inclusion:** Every person and all people are entitled to active, free and meaningful participation in, contribution to and enjoyment of civil, economic, social, cultural and political development.
- **Empowerment:** Empowerment is the process by which people's capabilities to demand and use their human rights grow. The goal is to give people the power and capabilities to claim their rights, in order to change their own lives and improve their communities.
- **Accountability and respect for the rule of law:** A rights-based approach seeks to raise levels of accountability in the development process by identifying 'rights holders' and corresponding 'duty bearers' and to enhance the capacities of those duty bearers to meet their obligations.

3.3 Obligations to ensure the right to education for children with disabilities

When governments across the region ratified the CRC and signed or ratified the CRPD, they undertook to take all necessary measures to ensure that the rights they contain are realised. This involves action:

- **To fulfil the right to education** - for example, by ensuring that quality education is available for all children, promoting inclusive education, and introducing positive measures to enable children to benefit from it, for example, making physical adaptations to buildings, providing accessible transport, adapting the curricula to the needs of all children, and providing necessary equipment and resources.
- **To respect the right to education** – for example, by avoiding any action that would serve to prevent children accessing education, for example, legislation that categorizes certain groups of children with disabilities as uneducable, school entry testing systems that serve to categorise children with disabilities as not ready for school.
- **To protect the right to education** - for example, by taking the necessary measures to remove the barriers to education posed by individuals or communities, for example, resistance by teachers to accepting children with disabilities, or violence, abuse or bullying in the school environment.

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However, in order to achieve inclusive education, action is needed, beyond national governments, to involve stakeholders at every level.

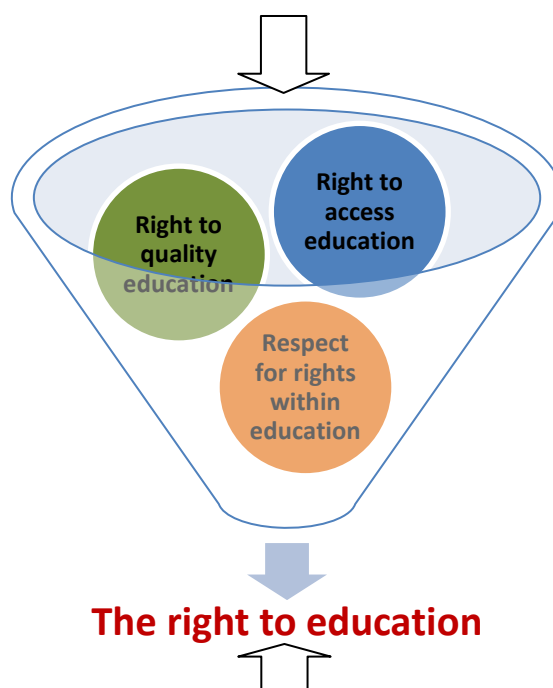
- **For local authorities** - the development of local policies for implementation of inclusion; appropriate support for individual schools; provision of funding; securing the necessary building adaptations and the provision of resource centres.
- **For individual schools** - the introduction of an inclusive educational environment which addresses the culture, policies and practices of the school to ensure that the basic conditions exist in which all children can participate and learn.
- **For parents** – sending all their children to school, and supporting them both in their education, and in helping ensure that schools comply with the principles of an inclusive approach.
- **For children** – to take advantage of opportunities to participate and learn, support their peers and co-operate with the values of inclusive schooling.
- **For civil society**- supporting the development of community-based inclusive education and contributing to an environment of respect and acceptance.



3.4 A conceptual framework for promoting the right to inclusive education

These basic principles and overarching government obligations can be applied to develop a clear conceptual framework to pursue the EFA goals within an inclusive approach, and ensure that children with disabilities are able to realise their right to education. A rights based approach to education requires more than '*business as usual*'. First, it necessitates a rigorous approach to establishing entitlement of every child to education, together with a systematic approach to identifying and removing the barriers and bottlenecks that impede access. Second, it needs recognition that education provided must be of a quality and standard that provides a relevant curriculum, is delivered through a pedagogy which reflects the way children learn, and creates a learning space which includes rather than excludes children. Finally, it needs to be delivered in an environment which is respectful of the cultural, protection and participation rights of children - in other words, an environment in which they are safe, their physical integrity respected and their voices heard and taken seriously. A commitment to inclusive education would embrace this three dimensional approach. It requires an understanding of inclusion as an approach to education for all children. In addition, this approach needs to be underpinned by a broad strategic commitment across government to create the necessary environment for ensuring the rights of children with disabilities.

Commitment to the right of every child with a disability to inclusive education through: Legal reform; Policy and guidance; Service delivery; Attitudinal and cultural change; Respect for human rights; Training and support for teachers; Participatory engagement with children and families



Cross –departmental government structures; De-institutionalisation; Data collection; Financing; Capacity building; Participation and partnerships; Transparency and accountability;

Right of access to education

Every child has the right to education on the basis of equality of opportunity. Children with disabilities are particularly at risk of being marginalised or discriminated against in the realisation of this right. Governments need to invest in the following universal and targeted measures to ensure that children with disabilities are equally able to realise the right to education alongside other children:

- **Removing the barriers including** physical, mobility, communication, and attitudinal barriers to education faced by children with disabilities, and which impede access to education.
- **Working to support parents** in order that they can support their children's access to education.
- **Early identification and assessment** to ensure that any developmental delay, impairment or particular difficulty experienced by the child is identified addressed as early as possible in order to ensure the provision of appropriate support and care.
- **Early years education** for every child with a disability to ensure that they are able to benefit as fully as possible from their formal education and achieve a positive transition.
- **Ensuring access to and availability of inclusive education** for all children, supported by the necessary resources, measures and adaptations within schools to accommodate differing needs.
- **Creating inclusive learning environments** in which children learn together, and which enable children with disabilities to acquire the core academic curriculum and basic cognitive skills, together with essential life skills.

Right to quality education

It is not enough to provide access and equal opportunities to education. That education has to be of the highest possible quality to help every child reach her potential, and that quality should be consistent across regions, different populations, and urban and rural settings. Quality in education can only be achieved through the development of child-friendly inclusive learning environments that are dedicated to a holistic approach to children's development. All learning environments and educational content, teaching and learning processes should reflect human rights principles. This means addressing children's multiple rights, using strategies that build links between the school and the family and community. Although there is no single definition of 'quality education', it is broadly understood to incorporate the opportunity for both effective cognitive learning, together with opportunities for creative and emotional development. In order to achieve these goals, education for children with disabilities must encompass:

- **Positive learning opportunities** providing appropriate support for all children
- **Investment in and support for teachers** to enable them to teach within inclusive environments.
- **Rights based learning and assessment** in which assessment processes are sensitive to the situation of children with disabilities, including their language, culture.
- **A child friendly, safe and healthy environment** to enable all children to reach their full potential, and which adopts a holistic approach to their education, health and well being.

Respect for rights within education

Human rights are "inalienable". In other words, they are inherent to each human being, and must be respected within learning environments, as in all other contexts. In order to realise the right of children with disabilities to education, other key rights must also be respected, including:

- **Respect for identity** by recognising, for example, the right of deaf and blind children to respect for their culture and language through provision of learning in sign language.

- **Respect for participation rights** – the right of children, including children with disabilities, to be involved in matters concerning their education, at the level of individual decisions affecting them, in the way that their school is run and in relation to broader education policy and delivery.
- **Respect for integrity** – children with disabilities have the right, both within school and when travelling to/from school, to be protected from all forms of violence, bullying or harassment, school discipline which is respectful of their dignity.

3.5 Child friendly schools and the right to inclusive education

The concept of child-friendly schools (CFS), developed by UNICEF, was designed to get all children into school, while guaranteeing both the quality of learning opportunities and results, and the protection of children's rights within school. It thus provides an effective operational model for taking forward the right based approach to inclusive education for children with disabilities. *"The CFS framework is a means of translating the Convention on the Rights of the Child (CRC) into school management and classroom practice, and ensuring the right of all children to have access to quality basic education."*⁶⁰ The CFS framework is an approach that conceives of the learning environment and all of its components as an interdependent whole, rather than concentrating discreetly on different aspects of the learning environment. This holistic approach is fundamental to the creation of inclusive environments in which children with disabilities can learn effectively. It provides the bedrock for ensuring a quality learning environment for children. It encompasses a multidimensional concept of quality and seeks to address the total needs of the child as a learner and active participant.

Similar to the CFS principles and focus, inclusive education is seen as a process towards creating a system of education that meets the rights and needs of all children and adolescents, recognizing that many different groups are currently excluded and denied their rights to a quality education and learning.

A child friendly school⁶¹

For preschools, schools and education systems to be child-friendly they should:

- Be **inclusive** of all children, particularly children with disabilities, girls in some countries – boys in some others - and children with a disadvantaged social background.
- Offer good **quality** teaching and learning processes with individual education appropriate to the developmental level, abilities and learning capacities and outcomes of all children; the curriculum and education content are relevant to the needs of the society – its social cohesion and labour market.
- Provide a **safe, healthy and protective** school environment in which children are protected from violence, abuse and harm and in which essential life skills and values of respect, tolerance and democracy are promoted.
- Be **gender-sensitive** and promote gender equality in both enrolment and achievement;
- Promote the **participation of stakeholders** – children, families, communities – in all aspects of school life;



Chapter IV

Government wide strategies to promote the right to education for children with disabilities

4.1 Political will and good governance

The realisation of rights relies on political will and commitment, together with mechanisms for ensuring good governance, defined by the UNDP as: *'The exercise of economic, political, and administrative authority to manage a country's affairs at all levels and the means by which states promote social cohesion and integration, and ensure the well-being of their populations. It embraces all methods used to distribute power and manage public resources, and the organizations that shape government and the execution of policy. It encompasses the mechanisms, processes and institutions, through which citizens and groups articulate their interests, exercise their legal rights, meet their obligations and resolve their differences.'*⁶² In other words, governments need to be accountable, transparent, ensure access to justice and the rule of law, and enlist stakeholder participation. A commitment to principles of good governance, across all relevant ministries, and at all levels of government, is a vital prerequisite for change.

4.2 Government structures and cross ministerial strategies

Many of the challenges involved in promoting an equal right to education for children with disabilities derive from the way in which responsibility for disability is addressed within governments across the region. A number of problems exist, including the ministries which deal with education of children with disabilities, lack of co-ordinated strategies across government, and devolution without adequate support. Where possible, a comprehensive national action plan needs to be put in place committing governments to the necessary structures, laws, policies, and partnerships, which are not only transparent and accountable, but also backed up by appropriate levels of financing

Structures to support inclusive education

In many countries in the region, mainstream schooling and special education have traditionally been managed under different administrations, with primary responsibility for disability, including education, often resting within ministries of social welfare. This has resulted in their exclusion from mainstream education legislation, policy, planning and resourcing, and a lack of overarching and coherent structures in place to support inclusive education. Inclusive education demands that ministries of education have responsibility for the education of all children.

Furthermore, without co-ordinated action across a number of government ministries being embedded in the strategies for introducing inclusive education, the system will remain or become entrenched in an 'able-bodied' culture and ethos. This will subsequently be far harder to change. Overall, ministries need to be aligned in their understanding of the commitment to inclusive education in order to achieve an integrated and holistic approach where they are working collaboratively towards a shared agenda. **Inclusion needs to be understood as integral to the whole of the education system – not just an add-on.**

This will require, for example:

- Close liaison between ministries responsible for social work services, social protection, employment and vocational training.
- Co-ordination between ministries of health, for example, maternal and prenatal health services and early childhood education services, to ensure early identification and assessment, and rehabilitation services.
- Engagement of ministries responsible for school building, maintenance and improvements need to ensure that the design of schools is consistent with the commitment to inclusion – that play areas, sports facilities, corridors, doors, classroom layout, and access to buildings are accessible.

IV - GOVERNMENT WIDE STRATEGIES

- Co-operation between finance ministries and those developing the policy to ensure the allocation and oversight of budgets for inclusive education.
- Collaboration with Ministry of Transport at national and local levels, to ensure that accessible and affordable transport systems are in place consistent with the numbers of children needing provision.
- Awareness on the part of ministries responsible for child protection to the rights of children with disabilities in school.

Devolved government structures

There are strong arguments to be made for devolving government responsibilities to the local level. It enables services to be adapted to local needs, and allows for greater local democracy and accountability. It also lends support and encouragement for innovative practices to meet the specific needs of communities, schools, and learners within local communities. It can be argued that decision-making should, *“take place at the level most appropriate for the issue, usually the lowest level possible”*⁶³. However, there are challenges in so doing. It can result in wider variations in quality and type of services resulting in inequalities. Local decision makers may establish priorities and make decisions that act to exclude rather than include children with disabilities from education. And the capacity at local level for developing inclusive education may be limited. The devolved budgets need to be sufficient to enable local authorities to provide adequate levels of service.

Overall, addressing these challenges imply the need for the following government frameworks:

- National policy frameworks for inclusive education that support the policy, practice and culture of inclusion across all levels of the mainstream system are needed.
- Principles of universal entitlement to inclusive education must be established at national level, and supported by clear guidance on how they must be applied at the local level.
- Local authorities need to be provided with capacity building for local officials, dedicated budgets for investing in the necessary services and programmes, transparent reporting and enforcement mechanisms to ensure accountability and policies that provide incentives for innovative and promising practice that builds on local strengths.



4.3 Ending institutionalisation

A broad consensus now exists across the international community that large residential institutions are damaging for children⁶⁴. Psychiatric and psychological research has consistently demonstrated the severely negative impact on children of placement in such institutions, with children under the age of four at particularly high risk of cognitive and psychological damage⁶⁵. All available data show that children in institutions do far worse socially, educationally, medically and psychologically than children raised in supportive community settings. The World Report on Violence against Children notes that the impact of institutionalization can include *“poor physical health, severe developmental delays, disability and potentially irreversible psychological damage.”*⁶⁶

Contemporary research has documented many problems in young children adopted out of institutions in Eastern Europe. Abnormalities include a variety of serious medical problems, physical and brain growth deficiencies, cognitive problems, speech and language delays, sensory integration difficulties, social and behavioural abnormalities, including difficulties with inattention, hyperactivity, disturbances of attachment, and a syndrome that mimics autism.⁶⁷

In its General Comment on children with disabilities, the Committee on the Rights of the Child outlines its concern that the care provided in institutions is, too often, of an inferior standard, lacks adequate monitoring and exposes children with disabilities to physical, and sexual abuse and neglect⁶⁸. The CRPD also acknowledges the problem and affirms, in Article 19, the right of people to live in the community, and in Article 23, the equal right of children with disabilities to family life. The latter is backed up by specific obligations on governments to undertake measures to prevent segregation and support families to care for children with disabilities at home, and where families cannot care for children, to make efforts to provide alternative care within the community in a family setting. Furthermore, the right to education without discrimination, on the basis of equality of opportunity and in inclusive systems at all levels, as demanded by Article 24 of the CRPD, cannot be provided for children living in institutions.

However the reality is that hundreds of thousands of children across the region remain in institutions and the demand for places is increasing, with too many hospital staff continuing to recommend such placements from birth for babies born with impairments, and often discouraging mothers from breastfeeding in order to facilitate the separation. These practices reflect not a lack of concern for children, but rather the perpetuation of outdated practices based on inadequate understanding and knowledge about child development. Strategies to bring the practice to an end are a prerequisite for fulfilling the right to inclusive education for every child with a disability.

Closing institutions is not enough⁶⁹

In 1999, a policy initiative was undertaken in [Romania](#) to assess all children in special schools as a means of speeding up the process of inclusion. Data from 2001 indicate that nearly 50,000 children were assessed, as a result of which 18,000 children were placed in mainstream settings. However, only 16% only of were still in mainstream settings one year later, and with a large number of children ending up without access to any education at all.

It became clear from this experience that without significant investment in community- based services, preparation, training and support for staff, involvement of parents, adequate time for planning and adaptation of schools, and commitment to the development of the necessary policies for building inclusive education environments, the outcomes for children with disabilities in mainstream settings are inevitably going to be poor.

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Deinstitutionalisation needs to be recognised as a long-term process that requires a well-planned and structured transition process, involving government departments with responsibility for all policy areas that affect the lives of children with disabilities. Simply closing institutions without appropriate planning, support, information, and community-based infrastructure, examples of which exist across the region, could be counterproductive. Children themselves might suffer further damage, exclusion and loss of education where this happens. The following actions need to be considered in order to achieve a properly managed transition towards de-institutionalisation⁷⁰.

□ **Managing the transition:** Investment needs to be made in a gradual process in which plans are made to address resistance to change, to challenge prejudices and remove barriers. During this process, a continued focus must be given to children with disabilities to ensure that they are not left behind in institutions, while other children are found community-based alternatives. Priority must also be given to preventing children under three years old being placed in institutions. It will almost always be necessary to run the systems in parallel until the policies, services, and capacities are in place to enable the closure of institutions. During the process of transition, measures should be introduced to ensure the equal recognition of the rights of children living in institutions, their situation should be subject to periodic review, with the best interests of the child as the paramount consideration, and the child's parents should be supported as much as possible to support the harmonious reintegration of the child into the family and society.

□ **Creating the necessary legislative and policy framework:** Consideration should be given to the introduction of specific legislation backed up by policies and services to underpin the ending of institutional care. This should potentially involve:

- no further funding or approvals being given to proposals for building new institutions. All future policy needs to be directed towards the creation of community-based services and the deinstitutionalisation of those who are currently in institutions.
- mandating the responsible authorities to develop community-based care provision. A deadline needs to be established at which point the admission of children to institutionalised forms of care will cease.
- co-ordinating all new legislation, policy and guidance to ensure that they are applied equitably on behalf of children with disabilities, and that a commitment to disabled children, and the promotion of their best interests, is implicit in all legislation and government protocols.
- appointing, or strengthening, the role of a children's ombudsperson or commissioner to ensure that children and families have accessible opportunities for complaints and investigation when their rights are violated.
- introducing a timescale for legislative change with specific objectives and milestones against which progress can be monitored.

□ **Strengthening cross-sectoral community- based services** underpinned by proper social work mechanisms to provide the necessary coordinated multidisciplinary interventions, which is at the core of the support to children with disabilities and their families. This would necessitate:

- a national, multidisciplinary system for identifying and assessing abilities and needs as early as possible;
- case management as the key intervention to ensure inter-sectoral cooperation from birth, alongside the whole lifecycle, with the access to so-called "life project tools" such as diagnosis health care and rehabilitation, individual care, social assistance allowances, individual education plans, targeted job opportunities

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- improved governance of social services and NGOs working in the social care field in order that they are transparent and accountable to the children and families to whom they provide services.
- providing guidance and training to all relevant staff to ensure that their practice supports, rather than hinders the overall goal of community-based care.

□ **Transforming residential institutions into inclusive resource centres** which recognise that the needs of children, including those with disabilities, are not uniform and that they require differentiated services. This might include combinations of short term care, respite care, fostering, and adoption support services as alternatives for full time residential care of children with disabilities, as well as support services for schools and community services. The advantages of this conversion are:

- everyone formally working within institutions can then be looked to for guidance
- the centres can support children, parents and communities, and help ease the transition for children formerly living in such residential care.

The shift from institutions to resource centres

Kyrgyzstan's Ministry of Education and Science expressed a commitment to transform some of its residential institutions into community and family-type alternative childcare services. UNICEF helped to support the transformation of the Uch-Korgon residential institution into a Temporary Care Centre for children deprived of parental care. During the project implementation, the number of children in the residential institution dropped from 112 in 2005 to 57 in 2009.

The **Romanian** government, among others, now also actively supports the transformation of institutions to resource centres, following a period in the late 1990s when large numbers of children with disabilities were transferred from institutions to mainstream schools without any support or preparation, resulting in very high dropout rates.

□ **Support for families:** families will need considerable additional community based support if they are to be able to support their children at home. Such support needs to be available as soon as a child is born to help them deal with possible feelings of shame and rejection. Systems need to be introduced to provide:

- peer support programmes for parents;
 - provision of psychosocial, educational, respite and pedagogical support services;
 - appropriate consideration of the individual needs of children and their families;
 - continuity of services and planning of periods of transition (childhood to adolescence, pre-school to school, school to adulthood);
 - active involvement in, and ownership of, the situation by families.
 - social protection measures to address poverty and the reduction of social exclusion in order that families are able to support their children effectively within the community.
- (see section on Socio-economic barriers for more details on support for families)

□ **Consultative participatory processes:** throughout the process of de-institutionalising and developing community based alternatives, it is imperative that the views, concerns and experiences of children and their families inform the process. Organisations of parents and NGOs representing them, as well as children themselves, should be consulted throughout, and their expertise used throughout the process of transition.

4.4 Financing

Costs of inclusion

Opponents of inclusive education have often defended the maintenance of a segregated education system on the basis that inclusive education is not economically viable and that the associated costs would be prohibitive. A recent review of inclusive education in the region found, for example, that Albania, Serbia, Moldova, Russia, and Ukraine all mention the lack of financial guidelines and limited funds to mainstream schools, as factors inhibiting implementation of inclusive education⁷¹. Georgia, The former Yugoslav Republic of Macedonia, Montenegro, and Kosovo mention the decreased level of funding available for education in general, and Bosnia mentions the limited funds available for specialist training such as therapists and psychologists. Inclusive education does not get specific budget commitments in most countries. The real problem often lies with the historical investment in separate, segregated systems of 'special' schools, the lack of political will to make inclusive education available to all, and the uncertainties of some parents that inclusion will benefit their children⁷².

However, countries are now increasingly realizing the inefficiency of multiple systems of administration, organizational structures and services, and that it is the option of special schools which is financially unrealistic⁷³. 60% children with special educational needs can be educated with no adaptations, and as many as 80-90% can be educated in regular schools with minor adaptations such as teaching strategy training, child-to-child support and environmental adaptations.⁷⁴ Furthermore, a growing body of evidence undertaken during the 1990s points to inclusion as being more academically, socially and cost effective than segregated schooling⁷⁵. An OECD report in 1994 estimated average costs of segregated placements to be 7 to 9 times higher than placement for children with disabilities in general education classrooms⁷⁶. More recent OECD research found that special education per capita costs were around 2.5 times that of regular education. This is mainly accounted for by salaries, since teacher: pupil ratio is more favourable for students with disabilities. In inclusive schools this figure fell to 2.0, although there is substantial variation between countries.⁷⁷ And in 2009, UNICEF Armenia commissioned a study examining the costing structures of institutionalization, which also found that transitioning away from residential care towards more community based services will save money both in the long and short term.⁷⁸ Governments need to recognise that spending large amounts of money initially on system reform such as teacher and staff training, improving infrastructure, and revising curricula, learning materials and equipment that meet the needs of inclusive education, will be the most efficient use of funds, as it has the potential to lead to an improved education for all students.

Models of funding inclusive education

The traditional funding systems throughout the region are cumbersome and politically contentious with regard to reform, as there are financial and other incentives for teachers, school administrators and defectologists which serve to defend the status quo. The systems in the CEECIS region are highly centralised and, while governments are slowly beginning to decentralise authority, it is taking longer to decentralise financing. Yet in order for community-based financing mechanisms to work effectively, both political authority and finances must be decentralised. Some progress is taking place. At least nine of the countries have initiated some kind of per pupil funding scheme. In Turkey, a special fund exists to accelerate private inclusive education interventions. The World Bank has piloted per pupil funding structures in several CEECIS countries, including Bosnia and Herzegovina,

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Uzbekistan, and The former Yugoslav Republic of Macedonia. The process is far from straightforward: in Serbia, where the federal government funds 85% of the education system, with the municipality covering the remainder, local governments sometimes are not functional enough to proceed without solid capacity building efforts. In Armenia, where decentralization efforts have been underway for several years, there has been a growing gap in the linkages between policymakers and practitioners, due to the failure to establish clear roles and definitions prior to decentralizing many processes.

Overall, it is clear that it is not just the level of resources for the education of children with disabilities that is the issue, but also the means of distribution and allocation of the funds that are available. In other words, the fiscal policies and the incentive or disincentives they create for investing in inclusive education can be as important in affecting provision as the actual amounts allocated⁷⁹. There are three broad approaches to funding education for children with disabilities:

- **Input or per capita models:** these funding formulas identify the number of children having special education needs and allocate funds from central government on the basis of the child counts. Countries with high proportions of students in special schools most often use this funding formula⁸⁰. The funds are paid to regions or municipalities either as a flat grant, or a pupil-weighted scheme, or as a census based count in which all students are counted and an equal percentage of special needs students is assumed across municipalities. A weakness of the model is the focus on the disability label rather than educational needs: the numbers of children with disabilities is not an accurate indicator of actual costs. In addition, this model can serve as an incentive to inflate the numbers of children with disabilities in order to increase funding: accurate auditing is therefore important alongside measures to provide disincentives to submit false data. Overall, the per capita model of funding is the most frequently used, but, in some countries, has been found to result in less inclusion, more labelling, and a rise in costs due to the need to diagnose and identify individual students⁸¹.
- **Resource-based models:** this model, also known as a “through-put” model because funding is based on services provided rather than on child counts, involves fiscal policies that mandate qualified units of instruction or programmes. For example, teachers in classes including a given number of children with disabilities might be allocated extra time depending on the severity of the disabilities⁸². It has been criticised by some researchers as containing a built-in incentive to fit students to existing programmes, rather than to adapt programmes to meet student needs. Furthermore, schools may be penalized for success when students no longer need services, and funding is lost⁸³. However, recent studies indicate an increasing trend away from child-based models toward resource-based models of funding. In general, resource-based models encourage local initiatives to develop programmes and services and are considered as having great potential because funding focuses on teacher resources and support to provide quality education for students with disabilities. However, without some evaluation or monitoring mechanism, there is no incentive to produce quality programmes or to seek improvements.
- **Output-based models:** This model involves linking funding to cost effectiveness in terms of outcomes for students. None of the countries in the region employ an output-based model. It is exemplified in the US programme, No Child Left Behind which ties funding and school accreditation directly to student achievement scores, with severe economic sanctions for failure. In the UK, “league tables” based on student test scores in individual schools are published as a means of holding schools to account, providing parents with information on

which to select a school. 'Unsuccessful' schools will lose students and therefore funding. The policy has been linked to increasing the numbers of special needs students in segregated settings, as it provides a built-in incentive for schools to refer students to special education programmes in order to avoid down-grading their overall results⁸⁴. Output-based models of funding can also serve to penalize schools for circumstances beyond their control, such as high mobility and absentee rates of students, inadequate funding for current textbooks and adapted curriculum materials⁸⁵.

Every funding model has advantages and disadvantages. The determination of the most appropriate approach will be informed to a significant degree by the existing educational environment. Given the starting point in the CEECIS region, where the majority of funds for the education of children with disabilities are currently tied into the special education sector, a commitment to per capita funding is likely to be the most effective model to help achieve the goal of inclusive education, particularly if it⁸⁶:

- introduces a system of differential weighting which takes account of different impairments or degrees of severity. Other variables might also be considered such as urban versus rural cost differences.
- ensures that the weighting attached to children with disabilities is higher if that child is attending a neighbourhood or mainstream school.

With these conditions in place, per capita funding would enhance⁸⁷:

- **Incentives for schools:** Funding and resources follow the child which would encourage local schools to accept children with disabilities, and overcome some existing concerns about capacity to provide the necessary support.
- **Equity:** Funding is provided on the basis of a consistent, clear, and transparent framework, and children with disabilities throughout the country are treated equitably based on their education needs.
- **Effectiveness:** By introducing differential weighting for mainstream schools, it would result in a transfer of resources away from segregated settings, thus acting as a fiscal vehicle for pursuing government commitment towards inclusive education.
- **Monitoring:** Because the funding allocated for the education of children with disabilities is consistent, it allows for improved tracking of the use of funds and the consequent outcomes. In this way, the educational and social outcomes associated with placement in institutional and mainstream schools can be more easily compared.

Overall, it is evident that while a commitment to adequate funding levels for inclusive education is important, the ways in which it is allocated can produce powerful influences on implementation.

Models of funding are needed which:

- are underpinned by a framework of commitment to the universal right to education, and the obligation to provide it on an inclusive basis at all levels;
- take into account the academic and social benefits of inclusion, as well as economic factors;
- provide an adequate flexible funding and fair allocation formula, which are vital at the school and community levels for the initial program start-up and continuation, staff incentives and salaries, parent/caretaker support, training, special equipment, and community organizations/services;

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- guarantee both a minimum level of support through fixed grants, which are adjusted according to poverty/wealth indices at the national level, and resource-based formulas to allocate funding for needed services at the local level to meet the needs of individual classrooms and learners;
- recognise that while initial investments in inclusive education programmes can be high, they are more efficient in the longer term as they benefit the wider general education system and a larger number of students⁸⁸;
- provide incentives towards a unified system of education service and one which encourages investment in preventative approaches in education, as well as effective support for learners identified as having specific needs;
- do not require that children are labelled and categorised in order to receive appropriate services - rather they should be geared towards providing flexible, effective and efficient responses to learners' needs;
- promote inter-sectoral collaboration from relevant services.



Ensuring appropriate, and effective use of funds

Processes for allocating funds to promote the right to inclusive education for children with disabilities need to be transparent and accountable in order to ensure that they are used for that purpose that they were assigned. This will require systems being introduced within existing financial structures and delivery processes to identify any misuse of funds and corruption. Monitoring should take place at both central and local government levels to follow expenditure. Where budgets are devolved, the case for transparent monitoring and evaluation is of particular significance. The allocation of funds and mechanisms for their expenditure should be accompanied by clear policies promoting inclusion and non-discrimination.

Budgets are useful in assessing how well a government is fulfilling its commitments in respect of inclusive education. Moreover, transparency in funding, alongside proper legislation, policies, enforcement, and civic participation is a key dimension in combating corruption.

4.5 Guaranteeing the right to non-discrimination

Governments should be encouraged to ratify the Convention on the Rights of Persons with Disabilities, and its associated Optional Protocol, and to introduce enacting legislation to render it accountable with domestic law. In particular, they need to introduce explicit provisions, within their constitutions and legislation, prohibiting discrimination on grounds of disability, and introducing accessible mechanisms through which children with disabilities and their families can challenge violations of their right to non-discrimination.

To be effective, such provisions must be widely known about and understood. Children with disabilities and their families need access to information about their rights to non-discrimination, as well as where to go and what to do if those rights are not respected. Support to enable them to become self advocates, in claiming their rights and challenging governments when those rights are neglected or violated, is an important part of building self-reliance and autonomy. They can be supported in this process by ombudspersons and human rights commissioners, where they exist, as well as national and international NGOs working on human rights. Compliance with the right to non-discrimination also relies on lawyers and judges being appropriately trained in the relevant national, regional and international human rights legislation, the obligations it places on governments and how to hold them to account through the courts.

4.6 Strengthening information systems

Article 31 of the CRPD requires the collection of information, in order to identify and address the barriers faced by people with disabilities in exercising their rights. However, there is a severe shortage of quality data and research about children with disabilities in the region. Not only are there no accurate data on prevalence of children with disabilities, but nor is there sufficient quality research and data as to their access to education, or the outcomes associated with it.

Definitions and classification

One of the initial challenges is to develop a common definition of disability, currently lacking both within countries and across the region. It can be helpful to address the link between philosophy of a social model of disability, information systems and data to help countries understand the importance of a coherent conceptualisation of disability. Information used to identify children with disabilities, to understand prevalence of disabilities and to define disability in education systems

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needs to be represented consistently. A continuing problem in collecting meaningful data on disability in education systems is the fact that disability definitions still rely on a categorical approach which labels children inflexibly from birth, despite claiming to reject the medical model.⁸⁹ Data which is based on such definitions and subsequently used for statistics and indicators will fail to provide meaningful information on social or educational dynamics or progress. Instead, information on disability should be “fit-for-purpose”. For example, a focus on impairments or a health-perspective when children are diagnosed at birth might be adequate, but is inappropriate when planning for teaching and learning. Equally, while a description of functioning linked to specific target groups may be useful for interdisciplinary teams developing a common framework to provide health, education and social services at the community level, it will not help a teacher to make decisions on educational priorities or goals.

The International Classification of Functioning, Disability and Health (ICF) provides a useful model⁹⁰. It is a classification of health and health related domains relating to the body, individual and societal perspectives by means of two lists: a list of body functions and structure, and a list of domains of activity and participation. Since an individual’s functioning and disability occurs in context, the ICF also includes a list of environmental factors. This system acknowledges that disability is not something that only happens to a minority of people: everyone can experience some degree of disability. It thereby ‘mainstreams’ the experience of disability and recognises it as a universal human experience. Significantly, it shifts the focus from **cause** to **impact**, and places all health conditions on an equal footing allowing them to be compared using a common metric – the ruler of health and disability. By taking into account the social and contextual aspects of disability, it goes beyond an exclusively medical or biological dysfunctional approach and recognises the impact of the environment on the person's functioning.



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Data collection

There are five major questions to be addressed if quality data is to be collected⁹¹:

- ❑ **Why is data necessary?** Realising the right to education for children with disabilities relies on reliable information gathered through quality research and data, which can then be translated into sound policy. Without such data, it is not possible to assess need, identify levels of unmet need, or measure progress.
- ❑ **What data are needed?** A number of types of qualitative and quantitative data are needed. Information is needed on prevalence, for example, the nature and extent of impairments, barriers encountered and support provided, and impact on the family's situation. Specific disaggregated education information is also needed including patterns of enrolment, attendance, completion and attainment, as well as experiences of inclusive education. Governments, for example, might need to gather quantitative data on the numbers of teachers trained in inclusive education, the number of schools with inclusive policies, or the percentage of children with disabilities based in inclusive classrooms. Data might also be collected on whether legislation, policies and guidelines have been developed and are known about, resourced and implemented effectively. Relevant information can also be gathered from data collection practices already in place such as inspection reports or Individualised Education Plans.
- ❑ **How do you identify children with disabilities?** First, it is necessary to agree on a common definition of disability. Once this is decided, the next challenge is to locate all children with disabilities to ensure their inclusion in data collection. Many children with disabilities are hidden from view and not registered, so it is important to ensure that coverage is as complete as possible. The stigma and shame still associated with disability can lead to denial of a child with an impairment. Efforts need to be made to ensure that children in all settings are identified, whether at home or in institutions, including those not registered in education.
- ❑ **Who can provide the necessary data?** Primary sources of data will include ministries of education, health and social welfare. Action can be taken at the local level to identify children with disabilities. Local authorities, schools and local communities can undertake local mapping or child-search activity in the school catchment area which locates children, particularly pre-school and early primary age, who are not receiving education.
- ❑ **When does data need to be collected?** Decisions need to be made as to the frequency with which data needs to be collected. Regular collection will be necessary in order to identify patterns of change, and monitor whether policies are achieving their desired impact.

Some countries have now initiated sound data collection methods, which need to be replicated across the region. For example:

- **Croatia** has three different sources for collecting data about children with disabilities: 1) the Central Bureau of Statistics, 2) Croatian Health Services Yearbook, and 3) the Ministry of Science, Education, and Sports database. All three sources collaborate and have user-friendly websites, which provide the public with reliable data.
- **Tajikistan** has developed a soft database for statistics, which integrates all available data on children with disabilities aged of 5 to 16 from 2007 to 2009 electronically.
- In 2008, after realizing a severe lack of knowledge and data regarding inclusive education, **Bosnia-Herzegovina** commissioned a comprehensive self-assessment dedicated to mapping out all of the components and requirements for implementing inclusive education. This process began with a comprehensive collection of qualitative and quantitative collection of data. The final report details the current status of IE and provides sufficient information to replicate many of the effective practices.

Education information systems

Governments need to develop comprehensive education information management systems which are disaggregated sufficiently to provide reliable information on the needs of all children, including children with disabilities. Clear indicators of inclusive education are needed. It is also important to construct appropriate indicators against which to measure progress in realising the right to inclusive education for children with disabilities. Such indicators need to address:

- **Structures** such as legislation, policies and teacher training in place to support the development of inclusive education
- **Processes** such as evidence of the numbers of teachers trained, or the implementation of policies
- **Outcomes** such as changed attitudes and practice on the part of teachers, or greater numbers of children in inclusive environments

Illustrative indicators	
1. CRPD Inclusion Benchmarks for Education ⁹²	2. Success Indicators for EFA
Article 24.2: Education (a) Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;	• Removal of legislative and policy barriers to the inclusion of children, youth and adults in ECCE, primary, secondary, post-secondary and adult education; • Ministry/Department of Education has a clear mandate for the primary and secondary education of all children and youth (including those with disabilities) in one system; • Human rights laws recognize right of children with disabilities to education in the regular education system; • Law and policy ensure that children with disabilities not only have access to education but also to the supports, accommodations and adaptations required to assure success; • An explicit commitment to the necessary policies, resources, facilities and training programs needed to enable children with disabilities to realise an effective education in schools.
(b) Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;	• Constitutional guarantee of free and compulsory basic education to all children, without discrimination on the basis of disability; • Repeal of any existing legislation which defines any group of children with disabilities as 'in-educable'; • Recognized right to early identification and assessment to ensure that children with disabilities are able to acquire the educational support and services they need from the earliest possible age; • Accountability mechanisms in place to monitor birth registration, school registration and completion by children with disabilities; • Data gathering and reporting mechanisms on school access and completion disaggregated by disability.

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A suggested conceptual framework of performance indicators for an inclusive education system⁹³

The framework can be used to review the stage of development within a national or district education system. This requires an engagement with statistical and qualitative data, including the views of students and their families. In this way, evidence can be used to formulate plans for moving policy and practice forward.

Theme 1: Concepts	Theme 2: Policy	Theme 3: Structures and systems	Theme 4: Practice
• Inclusion is seen as an overall principle that guides all educational policies and practices. • The curriculum and its associated assessment systems are designed to take account of all learners. • All agencies that work with children, including the health and social services, understand and support the policy aspirations for promoting inclusive education. • Systems are in place to monitor the presence, participation and achievement of all learners.	• The promotion of inclusive education is strongly featured in important policy documents. • Senior staff provide clear leadership on inclusive education. • Leaders at all levels articulate consistent policy aspirations for the development of inclusive practices in schools. • Leaders at all levels challenge non-inclusive practices in schools	• There is high quality support for vulnerable groups of learners. • All services and institutions involved with children work together in coordinating inclusive • policies and practices. • Resources, both human and financial, are distributed in ways that benefit vulnerable groups of learners. • There is a clear role for specialist provision, such as special schools and units, in promoting • inclusive education.	• Schools have strategies for encouraging the presence, participation and achievement of all learners from their local communities. • Schools provide support for learners who are vulnerable to marginalisation, exclusion and underachievement. • Trainee teachers are prepared for dealing with learner diversity. • Teachers have opportunities to take part in continuing professional development regarding inclusive practices.

Such information which will enable the collection, management, and tracking of data related to children with disabilities in mainstream schools in order to strengthen their ability to plan for and assess progress of achieving the right to inclusive education for all children with disabilities. This information is necessary, for example, at national level to evaluate whether legislation is appropriate, policies are effective, and at local level to assess whether local authorities are translating policies into practice and whether funding mechanisms are working to promote or discourage inclusion. It is needed to identify where teachers need more training or support, and to provide local communities with evidence of the value of inclusion for both children with and without disabilities, or to highlight where it is failing to provide children with meaningful inclusive environments. For this purpose, information on the progression of students through the educational system is needed. In gathering this data, governments should be mindful of Article 33(3) of the CRPD which requires recognition of civil society organisations and, in particular, people with disabilities and their representative organisations in the process of monitoring implementation of the rights in the CRPD.

A meaningful system to organise information on disability should⁹⁴:

- allow adequate representation or mapping of all important components relevant for a specific knowledge domain
- provide a way to not only understand entities but also the relationship between them
- be as complex as necessary and as simple as possible
- enable linkages to other information systems
- provide a reliable linkage between data (e.g. data gained through observations or assessment instruments, self reported data) and knowledge domains (e.g. concepts, theories, models)
- represent knowledge which is meaningful for many people
- provide a framework for data collection that can be used for different purposes
- limit coverage so that information remains manageable

4.7 Learning from what works

Many innovative programmes have been developed across the region to promote inclusive education.⁹⁵ The lessons from these programmes need to be written up, learned, shared, replicated and scaled up as widely as possible. It is not sufficient to rely on NGO initiatives operating on a small scale at local level.

Center for Social Adaptation and Labor Rehabilitation—SATR Center (Almaty)⁹⁶

I'm Among You: Including Children with Autism in the Community

The SATR Center's "I'm Among You" project aims to prepare teachers, parents, and children with infantile autism for mainstream school so these children can have access to quality inclusive education.

The project provides training sessions on appropriate methodologies for teachers and specialists working with children with autism, and seminars so that local and international experts from Russia and elsewhere share their experiences and best practices. The project also introduces parents and families to methods of working with autistic children in inclusive education settings, thus promoting a wider understanding and acceptance of autism and the issues around it. As a result of this work, 15 children involved were successfully included into mainstream education, and plans have been made to extend and broaden services including a resource centre and specific early years training for both teachers and parents. One of the strengths of the project is its systematic approach to the needs and challenges of the target group and the potential of the model to be extended through existing teacher training institutes and school networks. The project offers the possibility of scaling up both in Kazakhstan and in the Central Asian region, as well as demonstrating previous experience of work with autistic children and their families.

When an intervention is shown to be working, governments need to take action to expand its impact. Evidence-based advocacy should be used to increase the scale of impact through, for example, scaling up, legislative and policy change, and resource allocation. When there are gaps or when goals are not being met, or if for instance, policies are being misinterpreted and implemented incorrectly, action will be needed to adjust, correct, and provide the necessary technical and financial support, and additional measures to refocus the programme. Key factors that have been linked with success in scaling up innovative local initiatives on a national level include:⁹⁷

- Political leadership
- Effective and coordinated local-to-national human resources and public management strategies;
- Local delivery mechanisms engaging local communities and civil society organizations;
- Mobilization of private sector engagement, support and investment;
- Effective monitoring of progress against national goals and benchmarks; and
- Long-term, predictable funding commitments and technical assistance from donor agencies.

Governments need to be encouraged to take responsibility for mainstreaming the emerging lessons into models of inclusion across the government education sector. NGOs, other civil society agencies as well as the private sector can contribute to piloting of different ways of working. Governments and international agencies need to invest in local and national organisations engaged in working to experiment with different approaches, partnerships and structures to achieve better educational outcomes for children with disabilities. Such initiatives need to be monitored and evaluated and scaled up where the findings are positive.

4.8 Partnerships and participation

Inclusive education needs to be driven by strategic partnerships between diverse actors, including families and communities, local, national, and regional NGOs, international organizations, and governments, and in particular, organisations of people with disabilities, families and children with disabilities themselves.

Families must be recognised as active partners: their role throughout the life cycle for children is essential, especially in the early years. Governments across the region increasingly recognise both the importance of parental involvement in education of children with disabilities, and the extent to which negative attitudes of parents towards inclusion, often influenced by a lack of awareness of their children's rights serves as a major barrier towards inclusive practices.⁹⁸ Many additional barriers have traditionally impeded their involvement: lack of awareness of the educational alternatives for their children; fear of stigmatization and hostility from within their communities; family poverty motivating placement in residential special schools, thus transferring financial responsibility to the government, and lack of placement options near to home, particularly for families living in rural areas. Some evidence indicates that growing awareness of the potential for community based services is very gradually leading to parents becoming more assertive about their children's education. And with greater understanding about the nature of disability, parents, both with and without children with disabilities can become more accepting of inclusion of children with disability into mainstream schools.⁹⁹ However, resistance within parental attitudes still remains powerful.¹⁰⁰

Governments are required by Article 4(3) to '*consult and actively involve people with disabilities, including children, through their representative organisations*'. This provision clearly extends to education. Experience since the adoption of the UNCRC has demonstrated the importance of consulting directly with children in order to ensure the best possible decisions, policies and legislation. The Committee on the Rights of the Child has emphasised that, too often, adults with and without disabilities make policies and decisions related to children with disabilities, while the children themselves are left out of the process¹⁰¹.

NGOs and independent human rights institutions can play a key role in empowering children with disabilities and their families to claim their right to education – to be acknowledged as citizens not merely consumers. In order to achieve this goal, parents and their children need access to information and support on:

- their legal rights - both the commitments governments have made under international law, as well as national legislation and regulations;
- what services are available and how to access them;
- where and how decisions affecting their education are made;
- how to advocate, lobby and influence local and national political agendas;
- how to challenge violations of their rights - local complaints procedures, courts and the international mechanisms
- using the media to challenge prejudice and discrimination
- available research and evidence to support their advocacy to realise education rights.

Community participation can play a key role in leading to greater demand and capacity for more inclusive education, and has strengthened across the region in response to policy and legal changes, increased focus on human rights, and citizens' demands for more and better services. Many NGOs are supporting communities to become more active in inclusive education, with local

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and international NGOs piloting projects in all of the countries in the region. These initiatives which include, for example, pre- and in-service teacher training, school administrator training, equipping classrooms, supplying demonstration sites, printing informational booklets, attitudinal and disability awareness training, networking and advocacy, and providing practical guides for IE practices, have been widely supported by governments, and encouraged to continue.¹⁰² Disability-specific international organizations are working in all countries in the region, providing opportunities for people with disabilities to be heard, supply technology and specific equipment, and advocate for better services.¹⁰³

However, support needs to be given to the formation of strong networks of these local and national NGOs together with regional and international NGOs, and Disabled People's Organizations (DPOs) to advocate for disability rights and increase the profile of individuals with disabilities to secure rights and services for themselves¹⁰⁴. The host of international and local disability organizations which are present in countries across the region need to be united in their support of national disability issues. Coalition-building between stakeholders lays the foundation and builds critical mass for strong advocacy efforts, establishes a system for monitoring government responsibility and accountability, and encourages sustainability.

A growing range of partnerships across the region

Bridge of Hope, a disability rights organisation in Armenia, has collaborated with UNICEF, OSI, and the government in closing special schools and developing community centres.

Hayot, an NGO based in Samarkand, Uzbekistan, has launched several successful awareness campaigns in partnership with universities and the local governments. They have also teamed up with businesses in the creation of a successful initiative, which encourages employers to employ young people with disabilities.

In **Russia**, parent groups have been a 'critical driver for change; in improving the situation for children with special needs.¹⁰⁵ However, there seems to be an overall shortage of parent driven organizations in the region. Azerbaijan and Tajikistan described a severe shortage of parent organizations in their countries.

In **Uzbekistan**, UNDP and UNESCO have jointly contributed to developing standards and curricula for IE schools, and have led initiatives to train IE professionals. These partnerships are especially helpful across the different stages of the life-cycle as they can have a more broad focus.

Twelve CEECIS countries described parent workshops that have been developed to help parents support their children and to learn about existing partnerships that they can join – many of these in partnership with donor organizations and governments. Seventeen countries reported that NGOs provide direct services to families of children with disabilities.

Other international organizations have been very active in promoting inclusive education throughout CEECIS, notably the **Victor Pineda Foundation, EveryChild, Eurasia Foundation, Open Society Institute, and the Soros Institute**.

International organizations also sponsor specific campaigns that raise awareness of inclusive education, such as UNESCO's Education for All campaign and the Decade for Roma campaign, which - while not exclusively devoted to children with disabilities – have specific recommendations and goals for children with disabilities.

4.9 Capacity building

Achieving the right to inclusive education for children requires that all levels of government, public officials, those delivering services, and other duty bearers have the capacity, commitment and resources to implement the laws, policies and programmes in place to support that goal. Governments need to invest in awareness-raising to promote understanding of the nature of disability, the social model of disability, and the strengths of inclusive education. They also need to provide training to inform all relevant duty bearers of their responsibilities under the law, and to provide an understanding of the rights of children.

In particular, as responsibilities and budgets are devolved to local authorities, they will require capacity building to enable them to function effectively. The skills, knowledge and understanding necessary to implement inclusive education policies and practice will include:

- Understanding of the concept of inclusive education and its aims
- Knowledge of the relevant international and national legislation and policies
- Development of local IE plans, involving all relevant departments including health, education, social services, finance, planning and transport
- Development and management of budgets for IE
- Collaboration and partnerships with children with disabilities and their parents, as well as DPOs
- Provision of support, guidance and supervision of local schools
- Communication with media and the wider public on the aims and objectives of inclusive education
- Monitoring and evaluation

Peer exchanges at the international level, providing opportunities within CEECIS to learn from service providers with long experience of inclusive education can be of significant value. Article 4(h) of the CRPD states that governments must '*promote the training of professionals and staff working with (children) with disabilities in the rights recognised in the present Convention so as better to provide assistance and services guaranteed by those rights*'. In addition, the Committee on the Rights of the Child emphasises the importance of training for all professionals working with children including in the field of education, to ensure that they have the necessary expertise on their rights¹⁰⁶.



Chapter V

Establishing the necessary education policies and strategies

Within the framework of the broader government strategies to create a positive environment for the right of children with disabilities to inclusive education, specific education policies and strategies are also needed to address access to and availability of education, the quality of the provision and to ensure that their human rights are respected within that educational environment

5.1 The right to access education

The right to education on the basis of equality of opportunity imposes obligations on States to establish the legislative and policy framework, together with sufficient resources, to ensure access for every child with a disability. Achieving this goal will necessitate the following action:

Early childhood care and education services

Article 6 of the CRC requires governments to ensure *‘to the maximum extent possible the survival and development of the child’*. The early years offer a unique window of opportunity to foster that development, as 80% of the brain’s capacity develops before the age of three. Early childhood development is widely recognized as the foundational stage to developing effective life skills, to socialization and education, and to access and inclusion into the regular educational system¹⁰⁷. An accumulating body of evidence now exists to indicate that early childhood interventions to remedy disadvantage are more effective than interventions that come later in life. The first few years of a child’s life are the most critical period of human development, and early disadvantage, if left untouched, is shown to lead to academic and social difficulties in later years. **Indeed, investing in disadvantaged young children is a public policy initiative that simultaneously promotes fairness and social justice for the families involved, while promoting productivity in the economy and in society at large**¹⁰⁸. Investment in early childhood services impacts positively on both educational returns and those from the social, economic, and labour market spheres¹⁰⁹. Furthermore, the gains are shown to be highest for those with maximum disadvantage. Early neglect has lasting disabling effects. Poor nutrition leads to early childhood stunting, and coupled with low stimulation, it contributes to poor cognitive and educational performance¹¹⁰. Following birth, early detection systems, combined with family-based early intervention, support and referrals, help to identify developmental delays and can prevent other potential health risks. Among them, low birth weights, micronutrient deficiencies, and infectious disease can all contribute to developmental delays, particularly among the region’s lowest income populations.

Access to early childhood intervention, support and education is of particular significance for children with disabilities as it can serve to reduce disabling conditions and significantly increase capabilities of children with disabilities. For example, whereas hearing children are exposed to language from birth, deaf children are not and will need help in acquiring skills in communication and opportunities to catch up on the learning they inevitably miss out on. By the time that a child enters school, the gap between disadvantaged learners and their peers is already substantial and more difficult to close. However, only five countries in the region apply classification information to determine preschool placement of children (Russia, Turkey, Romania, Turkmenistan, and Uzbekistan) and many affirm that the education sector was not involved at all during this process.¹¹¹ The majority of countries report a complete disconnect between early assessments and early education opportunities.

The Committee on the Rights of the Child, in its General Comment on early childhood, states that it interprets the right to education during early years as beginning at birth, and closely linked to the child’s right to maximum development, as elaborated in Articles 6 and 29 of the UNCRC¹¹². It calls on governments to ensure that young children have access to programmes of health, care and education designed to promote their well-being, and stresses that the right to optimum development implies the

right to education during early childhood, with systematic and quality family involvement. And in the General Comment on children with disabilities, the Committee emphasises the particular importance of early childhood education as the means by which early identification and assessment can be undertaken and responded to.¹¹³ Such provision needs to be inclusive and designed to respond flexibly to the individual needs of children. Article 23 of the CRPD also demands that governments provide early and comprehensive information, services and support to children with disabilities and their families.

Governments need to consider introducing:

□ **Investment in early assessment and intervention:** In order to guarantee the necessary support to families, an inter-disciplinary team, with a remit to define a life project with the family from the early days of life of the child, should be involved. This will also help avert the possibility of institutionalisation. Early assessment and intervention initiated well before children become eligible for preschools and schools is most effective when families are closely involved in the process, enabling them to seek appropriate diagnostic and therapeutic services to support their child's well-being and development. Through early assessment coupled with intervention, families gain relevant information about interventions that will optimize children's learning potential. This also increases the chances that children with disabilities can participate and flourish in inclusive mainstream educational settings. Evidence suggests that one in three infants and toddlers who receive early intervention services do not present later with a disability or require special education in a preschool¹¹⁴.

However, it is important to ensure that assessments are not discriminatory in directing children to special schools, increasing the labelling of children and contributing to negative attitudes on the part of parents and other family members with regard to their child's potential and rights. International good policy practice stresses that early identification should act in the best interest of the child, by being aligned with international testing standards, by being as flexible as possible and by being offered at more than one point in the child's life.



Positive examples of assessment

There are positive models which have been developed in the region.

In **Romania**, a child receives an ‘expertise and school guidance certificate’ after receiving a referral from a physician to a specialist and then a comprehensive evaluation involving the family.¹¹⁵

Armenia has experienced success with its pedagogical assessment centres that opened in 2007, which link parents with teams of experts, creating a more participatory process.

Azerbaijan provides screenings at birth and then conducts an additional education screening around the age of 3, involving a team of health workers, education experts, psychologists, and local experts convening and discussing the best educational plan with the family based on the child’s individual needs.

In **Croatia**, a team of experts called ‘First Instance Expertise’ analyse documents collected by parents, diagnose disability and learning difficulties, establish eligibility for social allowances and determine maternity leave for mothers. They may also provide support for parents, such as leave from work and an assistant to support the family.

In **Uzbekistan**, an early identification centre for children was established in Tashkent, which also serves as the country’s Resource Centre on Inclusive Education.

In **Belarus**, inter-disciplinary Early Childhood Intervention Centres have been developed, providing child-centred and family focused programming, using a mixed health and education approach. They provide outpatient services to children with or at risk for developmental delays, disabilities and related special health needs. Services include early nurturing and stimulation activities, health monitoring, medical treatment, special therapies, developmental and family support, and parent education.¹¹⁶

The former Yugoslav Republic of Macedonia, Russia, and Kazakhstan are transitioning away from the rigid classification systems of the past, into using the ICF classification of disability and functioning.

□ **Comprehensive ECCE providing care, stimulation, parental support and access to relevant services:** These programmes will enhance the effects of interventions for children with disabilities¹¹⁷. Positive transition from home to preschool can be promoted by ensuring that early childhood programmes allow for child-centred pedagogy and necessary individualised support to address effectively the diverse learning needs and abilities of children with disabilities¹¹⁸. Indeed, early childhood programmes that are responsive to individual needs and respectful of diversity benefit all children and contribute to building the foundations of an inclusive society¹¹⁹. In addition, it is essential to support parents to enable them to feel confident and positive, and to challenge strong societal pressure to perceive themselves as having failed for producing a “defective” child. Parental self-esteem, attitudes and actions have a strong positive, or negative, influence on the child’s developing sense of identity and self-esteem.

□ **Universal access to inclusive pre-school provision:** Comprehensive and inclusive early education experiences, particularly those including parenting components, can enhance all children’s cognitive development, although will be of particular benefit to children with disabilities¹²⁰. Early childhood education experiences can provide an important opportunity for creating inclusive environments, and encouraging parents, and professionals understand the potential benefits. It is an important stage for the development of attitudes, social sensitivity and altruistic behaviours. Inclusive preschool benefit BOTH children with disabilities and typically

developing children. Also, when disabled children can participate in education early, they are likely to get into “the rhythm of schooling” – enabling an easier transition to primary school.

Lessons from an Early Childhood Intervention programme in Belarus¹²¹

Belarus has introduced a major system of health, medical and education services to strengthen early childhood intervention (ECI) for children with disabilities including polyclinic-based early childhood intervention centres, child and adolescent psycho-neurological dispensaries, medical rehabilitation centres, infant homes, development centres of the Ministry of Education, a wide range of preschools for children with disabilities and family services of the Belarusian Association of Assistance to Children and Young People with disabilities.

The key lessons learned from their experiences include:

- Strong policy support, a legal basis for the ECI system, and inter-sectoral agreements and guidelines promote the development of sustainable, culturally appropriate, comprehensive and continuous ECI services.
- Former defectological systems, concepts and methodologies should be revised to ensure an effective special education and health system can be developed.
- Service eligibility criteria should remain broad.
- Outreach services are essential to identify and serve all special needs children.
- Inter-agency early identification, assessment, case management, tracking and follow-up systems are needed to ensure children are not “lost” in the system.
- Individualised family and child service plans should include the informed consent and active participation of parents in all programme activities.
- Comprehensive centre- and home-based ECI services should feature the full range of service intensities plus child care and respite care, as needed.
- Year-round ECI services are essential given continuous child and family support needs.
- Belarusian parent education, counselling and support services have proven to be effective and highly used by the parents of special needs children.
- Parent involvement in ECI services and centres is correlated with client satisfaction.
- ECI’s Interdisciplinary Teams helped to achieve well integrated services.
- Guidelines are needed to manage ECI learning resources.
- Careful planning for the transition of children and parents from ECI services to inclusive preschools and primary schools is essential.
- Flexible approaches should be used for pre- and in-service personnel training.
- Inter-agency coordination roles and Commission meetings should be revised to ensure, among other matters, that parents are able to decide on the futures of their children.
- The cost of institutionalising children with developmental delays and disabilities far exceeds the cost of providing preventive and supportive child-centred and family based services for families with special needs children. The costs related to infant homes and orphanages should be progressively shifted to the ECI and Special Education System along with the provision of high-quality parent education and support services to ensure children will be well cared for and nurtured. Care must also be taken to ensure the transition is well programmed to provide quality care in residential environments as children are gradually transitioned to new foster homes or are adopted.
- In addition to current institutional monitoring requirements, ECI services should design and implement results-based programme evaluation systems in order to assess programme outcomes.
- Strategies for ECI programme advocacy are needed.
- In addition to public sector services, it is essential to provide support for NGOs, universities, professional associations and other civil society organisations.
- Basic research is needed on child status, ECI systems and policy impacts. In addition, recommendations are provided for regional training, exchange and networking in order to promote the development of ECI services, special education programmes, and inclusive preschools in other countries.

Ensuring access to and availability of inclusive education

Both Article 28 of the CRC and Article 24 of the CRPD assert the right to education on the basis of equality of opportunity for every child. The CRPD also emphasises that this must be provided in inclusive systems at all levels. It explicitly requires that children with disabilities are not excluded from the general education system on the basis of disability. They are entitled to inclusive, free and quality education on an equal basis with others in the communities in which they live. And inclusive education needs to be seen as one part of the bigger whole of making society more just and less discriminatory for all marginalized populations through education delivery. It is not simply a technical or organizational change, but involves a cultural and philosophical change of approach based on a commitment to respect for every child, and recognition of the obligations of the education system to adapt to accommodate and address their needs.

Consequently, legislation across all public sectors should lead to the provision of services that enhance developments and processes working towards inclusion in education. It is important that the commitment to inclusion is elaborated in detail in legislation, if governments and municipalities are to work towards a common approach and are able to be held accountable to ensuring its implementation for every child. Thus, for example, provisions such as the recent special education law enacted in Turkey which states that special schools must be established for *'individuals whose conditions force them to have special education in a separate school in line with their deficiencies and characteristics'*¹²², need to be reviewed. Similarly, Uzbekistan's *'social adaptation centres'* where children go to receive rehabilitative services, place an inappropriate emphasis on 'changing the child' rather than creating an adaptive and inclusive education system, and will need revision.

In particular, there should be one legal and policy framework covering inclusive education in all educational sectors and levels. It needs to be comprehensive, co-ordinated and address fully issues of flexibility, diversity and equity in all educational institutions for all learners. Key elements to be addressed are that its provisions:

- Comply with international human rights standards
- Include a clear definition of inclusion and the specific objectives it is seeking to achieve. Inclusion principles and practices need to be considered as integral to reform, and not simply an add-on programme. Provisions, for example, which define certain categories of children as 'uneducable' need to be repealed.
- Guarantee children with and without disabilities the same right to access mainstream learning opportunities, and assure access for individual learners to mainstream education and necessary support services within all levels.
- Develop a policy framework for inclusive education at the central level that supports the policy, practice, and culture of inclusion across all levels of the mainstream education system.
- Ensure that policy, provision and support are consistent throughout the country.
- Recognise the need for reasonable accommodations to support inclusion, based on human rights standards rather than on the efficient use of resources
- Ensure that all legislation that potentially impacts upon inclusive education within a country should clearly state inclusion as a goal
- Provide a consistent framework for the identification, assessment, and support required to enable children with disabilities to flourish in mainstream learning environments
- Introduce an obligation on local authorities to plan and provide for all disabled learners within mainstream settings and classes, including in the most appropriate languages and modes and means of communication.

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- Provide guidance to education institutions on how to fulfil their duties through increased inclusive education provision.
- Require the creation of partnerships and coordination between all actors, including different agencies, development organizations, and NGOs and specifically with parents and individuals with disabilities.



Perspektiva, a Russian Disability NGO, Promotes and Supports the Development of Inclusive Education

Perspektiva and its nearly 30 regional partners (members of the National Disability Advocacy Coalition) have been implementing projects to promote inclusive education since 2003. The main goal is the full inclusion of children with disabilities into their communities and local mainstream schools and the provision of adequate supports for these children, as well as the participation of people with disabilities and parents in the process of making schools and communities more inclusive, accessible and accepting. Its programmes include:

Disability awareness training for children at mainstream schools, led by young disabled trainers. The trainings target children aged 7-10 and 11-15 and introduce school children to people with disabilities, helping them overcome stereotypes, concerns and prejudices. Facilitators use games and role playing and promote dialogue in which each child learns about the barriers disabled people face. Most importantly, they learn that disabled people have the same goals, aspirations, and abilities as others, but often need technical aids to meet their goals.

Training for mainstream teachers through a series of disability awareness and inclusive education trainings designed to introduce disability to teachers, discuss the social model of disability, disability etiquette and terminology. It aims to break down the myths and stereotypes, discuss barriers that people with disabilities will face within mainstream schools and ways to break down these barriers. Trainings are led by disabled trainers. Teachers are encouraged to voice and discuss their fears as they learn about the lives of the disabled people in Russia.

National Disability Advocacy Coalition has been founded and supported throughout Russia. It promotes the full inclusion of PWDs into the community, including into mainstream schools. Its 30 partners lead simultaneous activities to promote and advocate for inclusive education, and share resources: films, public service announcements, posters, literature, trainings manuals and curriculum on inclusive education.

Public education and media campaigns, such as “Children Should Go to School Together.” These activities include public events aimed to educate teachers, administrators, policy and decision makers and the wider community about disability and inclusive education issues. Nearly 100 disability films – feature and documentary – from more than 20 countries are screened at each of the festivals, and screenings are also organized at inclusive schools where they are screened and discussed.

Monitor and advise on accessibility and assess mainstream schools for readiness to include children with disabilities. They provide recommendations, and also help to raise funds to make infrastructural accommodations.

Inclusive activities, including, for example, inclusive football teams of children with and without disabilities. The project slogan is “All are equal in sports.” Another initiative is *Building Bridges: Cameras in the Hands of Children*, a project that aims build bridges between children with disabilities who have never attended school, and their non-disabled peers.

Legal support to both parents of disabled children regarding their rights to education, and to teachers and school directors regarding their schools.

Parents of disabled children are supported to develop leadership, raise awareness in the community, collaborate with schools to improve educational opportunities for CWDs. Parents serve as trainers, activists and peer support counselors and empower other parents to speak out for their rights. They also work with key partners and professionals in their communities: school principals, teachers, Department of Education officials, local special educators and special schools or residential institutions for children with intellectual disabilities to ensure that parents are represented at key activities.

Removing the barriers to inclusive education

The right to education will not be achieved by measures to ensure the provision of places for children with disabilities in schools, unless such action is also accompanied by a commitment to removing the other barriers which impede access. Children with disabilities face barriers in relation to the physical environment in schools, accessible transportation, communication and attitudes which serve to prevent the realisation of the right to education on an equal basis with non-disabled children. Local authorities, in partnership with families and organisations of people with disabilities, need to undertake an analysis of where the barriers to education lie, in order to take the necessary action for their removal.

Creating social opportunities for children with disabilities outside of home and school¹²³

Serbia's toy libraries give children with disabilities the opportunity to interact with other children, play and practice creativity. The libraries are safe places for all children and parents, and allowing parents to both network and share resources in a casual setting, while their children play and socialize with other children both with and without impairments. For children out of school, this may be their only opportunity to form relationships with their peers. Sponsored by Save the Children and UNICEF, many teachers volunteer their time in the centre to keep costs down. In many of the toy libraries, children create arts and crafts, such as terra cotta ornaments, which are further sold to support the running of the centres.

Mobility, physical and sensory barriers

Providing accessible education does not just mean securing physical and mobility access but also sensory, communication and information access.¹²⁴ Without accessible and low cost means of transport, it can be impossible for many children with disabilities to get to school. And even if that is provided, schools throughout the region lack the necessary adaptations to render them accessible to children with a range of different disabilities. The architecture of schools is one of the most pressing obstacles in creating more physically accessible schools. Refurbishing these schools with accessibility features, such as ramps and lifts, is expensive and may require innovative solutions. As yet, progress is slow with only superficial changes being made, such as ramps into buildings. There is major resistance in initiating these projects¹²⁵. Widespread lack of interest in or awareness of the need for change prevails, and as a consequence, policymakers are failing to allocate funding for these renovations and features.

Nevertheless, globally, in recent years, significant lessons have been learned on how to design, construct and/or modify physical structures to assist participation and inclusion for persons with disabilities. There is now an emerging application of this approach on physical structure modifications to achieve universal design in education to ensure that instructional practices, materials, and educational environments meet the wide range of student needs, learning styles, and capacities. Key issues include flexibility and adaptation to each student's unique characteristics and interests.

As indicated earlier, costs should not be a significant barrier to accessible design. Indeed, research has demonstrated that the cost of accessibility is generally less than 1% of total construction costs¹²⁶. One critical factor which does increase costs is the introduction of accessibility features too late in the process, or designs and construction which are poorly managed. Early planning is therefore crucial, and again the World Bank has produced useful guidance on measures for local and national planners and key stakeholders to reduce costs in initiatives to guarantee accessibility¹²⁷.

Removing physical barriers¹²⁸

In the 2004-2009 national program of school development, **Uzbekistan's** government included a physical accessibility requirement, providing ramps and other physical accessibility features for all schools. This has led to many more schools that are equipped for inclusion of all children both from renovating older buildings and constructing new ones with these requirements included in the plans. **Romania** has overcome this obstacle by creating local budgets that allocate money to specific infrastructure projects, mirroring the effect of localizing school funding, and allowing districts to finance their own projects. Also, the **Croatian** government has refurbished older schools and deemed 200 of them to be 'barrier free'. UNICEF is working with local communities in Croatia to empower them to mobilize resources to include more physical accessibility features in their community's own schools.

A broad range of measures need to be taken to create a more physically accessible environment:

- Investment should also be made to develop public spaces that are both safe and inclusive, in order that children can take part in day to day life to complement their school experience. A holistic education requires that children can learn and capitalise on their schooling through wider engagement within their communities. Ideally all places frequented by families and children should be rendered accessible as far as possible, for example, community centres, playgrounds and shopping centres. Investment in creating accessible communities allows children with disabilities to enjoy social interaction with other children in daily activities.
- All environments which children inhabit should be equipped with physically accessible features in order for children to easily enter classrooms and other facilities, and have the necessary surrounding conditions for learning, with attention paid to mobility aids, devices and assisted technologies, Braille text books and other reading materials. Universal design standards should be applied in the construction or refurbishment of buildings, meaning that all classes, sanitary facilities, labs, and libraries along with external and recreational settings should be accessible to the widest range of individuals, regardless of their physical disabilities.
- Design of schools, facilities, materials and equipment is developed through the input of the local community, disabled people's organizations, parents, teachers, children and other stakeholders.
- Desks, seating, and classroom design needs to reflect the needs of different learners, and the importance of collaborative and group working. It can be valuable to involve children with disabilities themselves to help in creating accessible design. This can help others better understand some of the obstacles that they may face, but also can help others appreciate a new perspective.
- Measures need to be taken to ensure that children are able to get to school regularly, on time and without difficulty. This might involve, for example, adapted public transport systems to facilitate wheelchair access, taxis, motorised wheelchairs.

Attitudinal barriers

Despite the growing political will to embrace inclusive education, discrimination and negative attitudes toward disability continue to permeate the region. There does seem to be a growing body of evidence which indicates that it is through contact with children with disabilities, that these attitudes can most effectively be changed. A 2007 study in Australia, for example, found that the most effective way to influence thinking about disability is personal contact with people with disabilities. This evidence highlights the importance of starting inclusive initiatives as early as

possible, along with strengthening learning and participatory processes.¹²⁹ However, as yet, these contacts are rare in CEECIS as children with disabilities often live outside mainstream society. Accordingly, most members of society will, typically, have had little exposure to children with disabilities, and therefore not had the opportunity to develop an acceptance of diversity.

Negative attitudes at all levels of society can have significant impact on accessing education. They can lead parents and teachers to believe children with disabilities are not capable of learning, and will damage the education of non-disabled children. They can and do feed into the low priorities afforded to disability issues by policy makers and government officials. They encourage the bullying, taunting and social exclusion of children with disabilities by their peers. In general, building strong and tolerant societies will support inclusive education in the region, decreasing society's fear and ignorance of disability and increasing social justice for all citizens. Article 8 of the CRPD requires governments, as a matter of urgency, to adopt measures to raise awareness of people with disabilities, and challenge negativity.

"It's About Ability" campaign in Montenegro¹³⁰

When the Government of Montenegro sought to move children with disabilities from institutional to family-type care, they were thwarted by discriminatory attitudes and threats. A UNICEF KAP found that almost two-thirds of parents said it was unacceptable for a child with disabilities to attend the same class as their child. Almost every second person said that children with disabilities should go to special educational institutions and it is in their best interest to live in institutions, not families.

In response, UNICEF launched a three month social and behaviour change campaign titled *"It's About Ability"* to address the discriminatory attitudes. 100 billboards and city lights with images of children with disabilities were posted all over the country; a 30-second TV commercial showing a child with disability in a loving family environment was broadcast on all TV stations for three months; UNICEF publications for students and teachers *"It's About Ability"* were published in Montenegrin and distributed to all primary schools who began organizing sessions of the school parliaments on inclusion; special sessions on building inclusive local communities were held in 8 municipal parliaments together with representatives of school parliaments and parents' associations; One minute juniors produced by Montenegro's children with disabilities were shown on national TV stations and at municipal parliaments' special sessions on inclusion; an inter-generational dialogue on inclusion was held between more than 30 children from school parliaments, ambassadors, senior diplomats, and government; more than 150 children with and without disabilities played basketball together at an event organized with the Special Olympics; a study visit to UK centres for children with disabilities and inclusive schools was organized for high government officials.

More than 160 reports were made on the campaign on the evening news of all Montenegrin TV stations and more than 130 articles were published in three dailies during the three month period. One hour talk shows on the two most watched national TV stations were dedicated to the campaign and had children with and without disabilities discuss live about inclusion. As the average Montenegrin watches 5 hours of television per day, this coverage, as well as having children with disabilities speak out about inclusive education on TV proved to be a highly effective communication channel for the general public. It influenced perceptions of inclusive education and provided the children with an extraordinary opportunity to challenge the stereotypes that many people had about them as helpless and/or incapable.

According to the KAP evaluation survey conducted immediately after the end of the campaign, social distance towards children with disabilities decreased by 10%. The percentage of people who found it acceptable for a child with disability to go to the same class with their child increased from 36% to 46%. The percentage of people who found it acceptable for a child with disability to be best friend of their child increased from 23% to 33%. The number of people who believed that children with disability should only be in special institutions almost halved.

Action to tackle negative attitudes needs to be developed in collaboration with DPOs as well as children with disabilities and their families, and can include:

- **Public awareness campaigns** to encourage receptivity, and increase social awareness of the potential and abilities of people with disabilities. Leaflet, posters, and messages can be targeted at locations where the public are most likely to see them, such as doctors' surgeries, town halls, social security offices, child care centres, schools where parents receive services for children. Community theatre, art exhibitions of paintings and drawings by children with disabilities can also be valuable means of communicating positive messages. Making children visible and creating opportunities for them to articulate their own messages can be a powerful vehicle for change.
- **Fostering an attitude of respect** to combat stereotypes and harmful practices and promote the rights of people with disabilities. This needs to be reflected in all official and public documents, communications and policies.
- **Using appropriate language.** Language plays an important role in reinforcing or challenging negative stereotypes of disability. People with disabilities have struggled for many years to challenge terms that are degrading and insulting. For example, 'defect' and 'handicap' are commonly used throughout the region by professionals and the wider society when referring to disability. The belief that these 'defects' must be corrected prevails in the region. In those countries in the region, for example, where ICF classification has not officially replaced the sets of classifications used during the Soviet time, the term 'imbecile' continues to be used by doctors for official classification of disabilities. It is important that governments, the media, professionals and people in their day to day lives are encouraged to use language that is acceptable to people with disabilities.

The media can also be encouraged to play a critical role in challenging the barriers to inclusion:

- **Respecting integrity** – the media has a responsibility to avoid reinforcing negative or patronising stereotypes, and should never allow programming or articles that insult, denigrate or abuse people with disabilities.
- **Raising visibility** – many negative attitudes towards people with disabilities are sustained because they are largely invisible throughout society. The media should make efforts to create opportunities for full participation in all forms of the media employing disabled people (including children) as presenters, journalists, editors and commentators, and including characters with disabilities in soap operas, plays and comedies.
- **Promoting access** – much of the media is inaccessible to people with disabilities. The media should be encouraged to consult with representatives from organisations of people with disabilities, including children, on how to make the media more accessible through a wide range of communication forms and technologies.
- **Challenging rights violations** – the media has an important role to play in exposing rights violations, and challenging governments to fulfil their obligations under the CRPD.

Some countries in the CEECIS region have made significant efforts to raise awareness about children with disabilities, create tolerance and emphasise the value of inclusion, with 14 of the 22 countries in the region having engaged in developing campaigns to debunk myths about disability, present it in a positive light to change attitudes and raise general awareness about the importance of inclusive education. Some of the lessons learned include the importance, wherever possible of getting government backing, developing clear, contextualized messages that quickly and effectively relay information using innovative techniques, working across sectors.

Country-level initiatives to promote awareness of the rights of children with disabilities

In **Kyrgyzstan**, Magic Journey, a popular Kyrgyz television show for young children introduced a character in a wheelchair. While no formal evaluation has been conducted on the impact of the character, the results seem positive.

This series has since been translated into **Turkish** and now also airs on national Turkish television where there are also television campaigns and telethons that raise both positive awareness and money for disability initiatives.

Perspektiva launched a recent participatory campaign in **Russia**, giving children with disabilities cameras to capture the world as they see it.

In 2007, **Ukraine** hosted a 5 day workshop for young people to create one minute films advocating for disability awareness. Encouraging youth to participate in campaigns can help to break down stereotypes early in their lives before more permanent perceptions take hold.

In **Kosovo**, the government has played a significant role in disability awareness, including sponsoring national campaigns linked to the International Day of Disability Awareness.

Bosnia and Herzegovina has a Day of Autism, with purpose of informing the public about the autism spectrum.

The **Croatian** UNICEF country office launched their *First 3 Are Even More Important!* campaign in 2009 which aimed to raise awareness about the needs of children with disabilities in their first three years and their families. It also advocates for the social inclusion of children with disabilities, supports good practices in early intervention and encourages the development of widely accessible national early intervention networks. UNICEF also launched an awareness campaign for health workers in maternity wards, after reports that health workers often inform parents about their child's disability in a negative, discriminatory manner. Although only initiated in 2009, the preliminary findings are positive.

An extensive awareness campaign in **Uzbekistan** uses billboards, video, and radio spots to promote inclusive education and the rights of children with disabilities.

For new parents of children with disabilities, **Tajikistan** publicized the reform of the classification system with spots on national television and widespread brochure distribution.

Romania has run a campaign focusing on a child's right to a family, and that children cannot be separated from their families due to disability, developed in partnership with UNDP and UNICEF Child Protection.

Socio-economic barriers

Disability is both a consequence and a cause of poverty. For many families, the costs associated with disability can serve to impede access to education: these costs may include transportation, technology, medication, or other learning resources. Many countries across the region are now providing a form of social allowance, which can help families defray those costs. The methods of distributing the allowances differ – some require comprehensive paperwork, while others are processed automatically. Many are attached to specific conditions, such as requiring the registration of a child on a national disability register. Only after registration are families eligible to collect the payments. Eleven CEECIS countries offer some form of social cash transfers, ranging from more comprehensive systems differentiated by disability (Uzbekistan) to general allowances given to socially vulnerable families (Turkey), many unrelated to actual disabilities.

V – POLICIES AND STRATEGIES

There are challenges associated with social allowance payments. The registration process can alienate many families who are reluctant to register because of the stigma attached to disability and the reliance on disability classification systems¹³¹. There is a risk that, once categorised, children will remain tied indefinitely to their labels. It can also be difficult for parents to officially register their children. For example, in Georgia, families must prove both birth and disability registration to receive the social allowance; this is often impossible for at-risk and minority families. Similarly, in Russia, children must first obtain disability status, which is a cumbersome process involving lengthy government office visits and paperwork. Furthermore, the amount provided is often insufficient to significantly alleviate costs. However, if implemented sensitively, these payments can provide much needed support to families without perpetuating stigmatization.

Governments need to consult with families to identify the barriers to claiming payments and introduce simplified and accessible mechanisms for claiming them.

Making social allowance payments user-friendly for parents¹³²

In January 2009, Romania increased its social allowance to families with children with disabilities by 100%. Children with disabilities from 0 to 2 years receive monthly payments of 400 Lei (128 USD) and between 3 and 18 years receive 84 Lei (40 USD), or double the amount of the normal child allowance (Law 448/2006). They have also improved the distribution of the payments by creating an automatic payment system, where payments are directly deposited every month after a child enters the disability registry. In addition, the state provides a complementary personal budget, which varies in relation to the degree of 'handicap', and in cases of severe disability, the state provides an accompanying person or personal assistant. According to UNICEF Romania, they have not found any evidence that this programme increases stigmatization of families with children with disabilities.

Creating inclusive learning environments

Special schools were originally established to address the needs of children which ordinary schools could not serve. Therefore, regular schools which have not adapted to address the needs of children with disabilities cannot be viewed as serious alternatives to special schools¹³³. Inclusive education must be understood as a service delivered, not a place. It requires comprehensive school restructuring at all levels of educational systems and governance. Recognising and valuing diversity and individual differences, rather than merely tolerating or accepting them is central to that philosophy, along with adaptations of curricular content and pedagogy relevant to children's learning needs and capabilities¹³⁴. Furthermore, it is mandated by the CRPD which demands that governments '*ensure an inclusive education system at all levels*'¹³⁵

In order to achieve this change, attention needs to be given to:

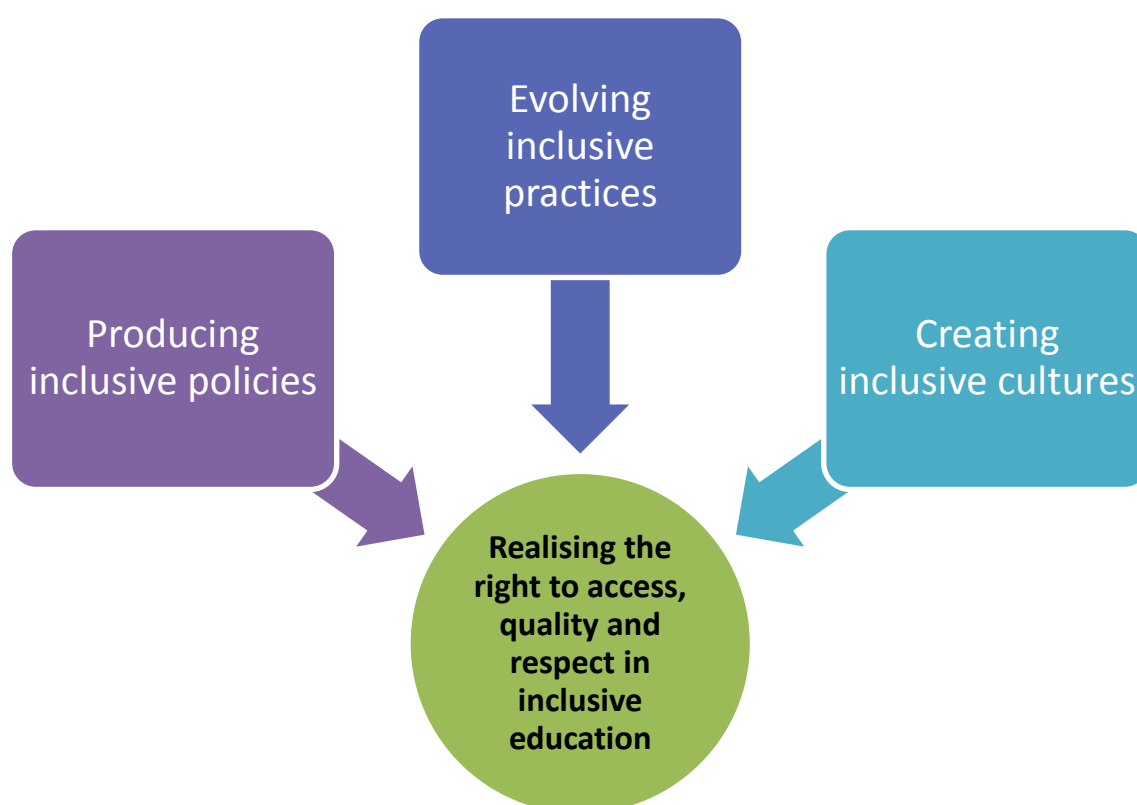
- Building inclusive cultures within schools
- Ending segregation within schools

Building inclusive cultures within schools

Each school will need to translate national policies of inclusion into school based policies setting out both the commitment to non-discrimination and inclusion, and the strategies to be adopted to promote a culture and practice of inclusion. The limited evidence that is available does indicate that children learn to be accepting of children with disabilities in the classroom, and demonstrate positive helpful and loving behaviours towards them.¹³⁶ This supports the general experience that younger children particularly are more accepting of differences, and only change as they learn discrimination and prejudice from adults in their society.¹³⁷

Individual schools should look at their state of readiness to become more inclusive, and identify the steps needed to go forward¹³⁸. In so doing, consideration can be given to the cultures, policies and practices that are needed. This might include the development of a CFS Framework, school self-assessments as well as school development plans. It will also involve analysis of existing resources and initiatives in their schools, including the availability of community and parental support. All members of the school community should be involved in developing the policy – teachers, administrative staff, children and their parents - as this will strengthen ownership and understanding. The process of its development is also an opportunity to address the issues and learn why they are important, and to develop skills in negotiation, listening, and understanding different points of view and types of experience. Efforts will also need to be made to address teacher associations, school boards, parent-teacher associations, and other functioning school support groups with programmes to increase their understanding and knowledge of disability so they are willing to accept children with disabilities into mainstream schools.

Achieving the necessary environment to promote inclusive schools¹³⁹



(see section on School Assessment for more details on indicators against which to measure inclusive schools)

The policy should be reflected in all aspects of the life of the school: classroom teaching and relationships, school and board meetings, teacher supervision, school trips, playground behaviour, budgetary allocations, and any interface with the local community or wider public.

Checklist on attitudinal change¹⁴⁰

- Is the concept of inclusive education well known and accepted?
- Do parents take an active role in education?
- Have awareness programmes been launched to support inclusive education?
- Are the local community and the private sector encouraged to support inclusive education?
- Is inclusive education seen as an important factor for economic and social development?
- Are competencies available at special schools or institutions well used to support inclusion?

Ending segregation within schools

Even when children with disabilities are provided with education in regular schools, they are often placed in segregated classes, in which they are simply taught a remedial curriculum or not taught at all. Underlying notions of ‘individual deficit’ and persistent discriminatory attitudes often serve to limit their curricular options, and deny them equal and meaningful education.

Efforts are needed to ensure that children with disabilities are educated within mainstream classes, with additional support to teachers where necessary. Education needs to be inclusive *‘whereby all students participate together in the classroom and the teacher effectively and efficiently reaches all students in a heterogeneous environment.’¹⁴¹* To be inclusive, educational systems must offer differentiation, accommodations and modifications within the general curriculum and include early training in orientation, mobility skills and alternative communication¹⁴². Family involvement is critical in promoting inclusion of children. More should be done to engage parents, communities and people with disabilities in policymaking and practice for inclusion.

Action is needed to:

- Include a commitment to inclusive classroom teaching.
- Develop municipal policies for inclusive classroom environments. Schools, teachers, municipal officials, school administrators, parents and children, as well as other stakeholders should be involved in that process.
- Provide support within mainstream classes to children with disabilities.
- Monitor schools on a regular basis to ensure that segregation is not taking place either formally or informally. Monitoring should involve parents of children with disabilities in order that systems are transparent and accountable to them and their children.

Working with and supporting parents

The active participation of parents in their children’s education is a key factor in ensuring both the child’s continued engagement in their education, as well as successful educational outcomes. The problems of exclusion and stigma, impacting eventually on the right to education can, and often do begin at home, and from the beginning of the child’s life. Support for and engagement with parents, therefore, needs to be addressed by all services, including health and social services, as well as education, from the moment of the child’s birth. Considerable investment may be needed to build the capacity of parents to provide the necessary support. Families often break down when a mother gives birth to a child with a disability, leaving many single mothers to raise the child alone. They are often isolated, experience exclusion and stigma from wider family and social networks,

and lack confidence that their child will be treated positively when accessing services, including education¹⁴³.

School and local authorities need to make positive efforts to actively seek them out and involve them as partners in their child's education. Mechanisms to support parents and encourage their increased participation can include:

- Parental education programmes to help parents support their child's learning. Many services might be provided by the preschool or schools' professional team, through parent-to-parent counselling, mother-child clubs, or civil society outreach through house to house visits;
- Recognition of and respect for parents as experts in the knowledge and understanding of their own children;
- Building partnerships between them and local schools, encouraging them to join school boards and developing programmes which explicitly address their concerns.
- Gradual and respectful inclusion of parents into preparation of children for schools; parents' expertise and knowledge of their child's condition needs to be recognised and respected.



5.2 The right to quality education

Education has to be of the highest possible quality to help every child reach his or her potential, and to achieve effective transitions both from pre-primary to primary and from primary to secondary school. Governments must ensure that children with disabilities in all schools, including preschools, are able to receive the same quality of education as all other children.

Positive learning opportunities

The Committee on the Rights of the Child emphasises the importance of child-centred education that is of direct relevance to the child's social, cultural, environmental and economic context, and to his or her present and future needs, taking full account of the child's evolving capacities¹⁴⁴. It must therefore be inclusive and adapted to the needs of children in different, and in difficult circumstances. A broader notion of all and a greater appreciation of difference in the education system is the key to improving the quality of education for all children¹⁴⁵.

Securing the appropriate individualised support for children with disabilities

One of the key strategies for providing the necessary support for children with disabilities in inclusive settings is the use of individual education plans (IEPs), which are plans developed for a child by a team of professionals, in collaboration with parents and children themselves, to map the curricular goals, required curricular adaptations, and benchmarks and assessment strategies that correspond to the child's learning needs. Although IEPs are a tool that has been introduced in the CEECIS region, they are not yet widespread. Recent research indicates that a number of countries have explored their use, but many have experienced difficulties in sustaining and applying them effectively¹⁴⁶. In some countries, IEPs had been developed but were not actually applied to inform the instruction of the children involved, and teachers are unsure how to use them.

Acknowledging diverse learning needs in the classroom¹⁴⁷

In **Georgia**, inclusive teaching methodologies include interactive learning and creating a welcoming and positive learning environment. 'Equalizing the needs in the classroom' and 'accessibility to all students' are central themes in inclusive teaching. This provides a promising start to incorporating inclusive methodologies into classes.

In **Azerbaijan**, every child with a disability has an individualized learning plan developed for them, which teachers use to help guide their lesson plan development and individual work with each of their students.

In **Croatia**, teachers are often supported in the development of the plan by in house school pedagogues. The pedagogues visit classrooms and observe learning behaviour and then discuss how to best differentiate classroom material for individual assessment.

An individual plan should be a working document, useful to all staff working with the pupil and constantly at hand: its design should allow for regular updates and comments by teachers, assistants and parents¹⁴⁸. In order to make them as practical and effective as possible, consideration should be given to ensuring that:

- individualized education is considered a universal right and not a special education need.
- the targets set for an individual child are achievable, short-term and specific, so that everyone can see when each one has been met;
- progress towards the IEP targets should be monitored with the child and parents on a regular basis;

- the pupil is involved in the setting of targets whenever possible, as well as all relevant staff and parents;
- IEP targets are relevant to the whole school day and are capable of being generalised in different settings;
- targets are described in jargon-free language and clear to all concerned, allowing children themselves to be able to measure when they have succeeded and made progress;
- teaching/behaviour management strategies are described with details of who will deliver them, when and where necessary resources are listed;
- all staff need to be aware of relevant IEP targets;
- there is a date for review, and the names of people involved in reviewing.

Beyond IEPs, some children with disabilities will need a holistic package of care involving support, not only in their education, but also in the provision of health or social care services, technical assistance, and psychological support.¹⁴⁹

- Partnerships between service providers, NGOs, research and teaching institutes should be established and properly resourced in order to support regular providers of education, health care and social care to provide the best possible all round care to enable children to benefit to the fullest possible extent from their education.
- Individualized support programmes involving multidisciplinary partners in schools, supported by a commitment to dissemination of research and an evidence base for practice, through the work of national and international centres of excellence and university affiliated programmes. At regional level, agencies and professions should work closely together.
- Registers standardised to allow information to be aggregated at regional and national level. It should be stored in a format that allows it to be accessed in the context of international comparisons and research, subject to appropriate data protection protocols¹⁵⁰.

Developing inclusive curricula, teaching and learning methods

An inclusive school environment involves a commitment to adapt schools to children, rather than requiring children to adapt to norms, styles, routines and practices of inflexible schools. Across the region, there tends to be an expectation that all pupils must learn the same things, at the same time and by the same means and methods. In a recent UNICEF survey of all the countries in the region, 18 out of 19 countries responded that they did not have adequate tools or materials to support schools in inclusive education.¹⁵¹ Even in schools with limited resources, the innovation and motivation required for using existing materials to differentiate lessons was often absent. Several countries expressed frustration that even the limited materials provided to schools and classrooms were under-utilized due to the lack of understanding of inclusive teaching.

An inclusive rights-based approach requires a broader and more flexible understanding of the aim of education. Looking at education through an inclusive lens involves seeing how the education system can be adapted to support the individual child. It seeks to discourage teaching which is based on a criterion of averages¹⁵². It requires an accessible and flexible curriculum designed to serve every child, and capable of providing possibilities for adjustment to individual needs. It should also stimulate teachers to seek solutions that can be matched with the needs and abilities of each and every pupil¹⁵³.

Significant benefits can be achieved at all levels by adopting an inclusive approach to learning¹⁵⁴

Benefits for all Children:

- Children become more self-confident and develop greater self-esteem.
- They take pride in themselves and their achievements.
- They learn how to learn independently both inside and outside of school.
- They learn to understand and apply what they learn in school to their everyday lives, such as in their play and in their home.
- They also learn to interact actively and happily with their classmates and teachers.
- They learn to enjoy being with others who are different from themselves, including how to be sensitive to and adapt to these differences.
- Children improve their communication skills and are better prepared for life.

Benefits for Teachers:

- They have more opportunities to learn new ways to teach different kinds of students.
- They gain new knowledge, such as the different ways children learn and can be taught.
- While looking for ways to overcome challenges, they can develop more positive attitudes and approaches towards people, children, and situations.
- Teachers also have greater opportunities to explore new ideas by communicating more often with others from within and outside their school, such as in school clusters or teacher networks, or with parents and community members.
- By applying these new ideas, teachers can encourage their students to be more interested, more creative, and more attentive. As a result, the children and even their parents can give teachers more positive feedback.
- Teachers can experience greater job satisfaction and a higher sense of accomplishment when ALL children are succeeding in school to the best of their abilities.

Benefits for Parents

- Parents learn more about how their children are being educated.
- They become personally involved in and feel a greater sense of accomplishment in helping their children to learn.
- As teachers ask them for their opinions about children, parents feel valued and consider themselves as equal partners in providing quality learning opportunities for children.
- Parents can also learn how to deal better with their children at home by using techniques that the teachers use in school.
- They also learn to interact with others in the community, as well as to understand and help solve each other's problems.
- Most importantly, they know that their children—and ALL children—are receiving a quality education.

The development of inclusive learning environments will therefore need considerable investment in helping teachers modify and adapt what they teach, how they teach it, and in both providing the necessary resources and equipping them with the skills to use them creatively.

- **Active learning:** Every child should be valued as an active contributor to his or her own learning. This recognition of the inherent value of each child is particularly important in building confidence and self esteem among children. The role of teachers, and others involved in creating or strengthening learning opportunities, is to facilitate participatory learning rather than simply transmitting knowledge. A human rights-based education requires that learning environments are sensitive to the needs of children with disabilities, and conducive to the optimum development of their capacities. A child centred methodology would allow children, in part, to follow their own interests, discovery and learning. This involves interactive teaching methodologies. For example, when teaching a math lesson, the teacher may have several different tools, such as marbles, clay, calculators, or markers that children can use to help them to understand the concept in a way that works best for them. It is also helpful for a resource teacher to be available to assist teachers to adapt elements of the curriculum for students with disabilities and to provide extra resources to the regular classroom
- **Teaching methods:** Teachers need to adopt creative approaches towards working with children at the pace appropriate to their needs. This might involve, for example:
 - providing a flexible time-frame for pupils studying particular subjects
 - allowing children to work in groups or individually
 - partnering children with and without disabilities as peer educators to enable mutual learning
 - cooperative learning
 - multi-ability grouping for instruction
 - giving greater freedom to teachers in choosing their working methods
 - allowing teachers the opportunity of giving special support in practical subjects, such as orientation or mobility, over and above the periods allotted for more traditional school subjects.
 - allotting time for additional assistance for classroom-based work
- **Curriculum content:** Children with disabilities, alongside all other children, have a right to acquire the core academic curriculum and basic cognitive skills, together with essential life skills which equip them to face future life challenges, make well-balanced decisions, develop a healthy lifestyle, good social relationships, critical thinking and the capacity for non-violent conflict resolution. The curriculum must develop respect for human rights and fundamental freedoms, and promote respect for different cultures and values, and for the natural environment. Text books should also incorporate positive images of adults and children with disabilities and be offered in various formats.



Checklist for Inclusive Curricula

- Are principles of non-discrimination, appreciation of diversity and tolerance being fostered through the curriculum?
- Are human rights and children's rights part of the curriculum?
- Does the curriculum address the co-existence of rights with responsibilities?
- Is the curriculum inclusive of all children (for all required ages)?
- Is the content of the curriculum relevant to the needs and future of children and youth?
- Are the programmes, learning materials and teaching methods relevant to the lives of youth and adults?
- Does the curriculum (and learning achievement assessments) allow for variation in working methods (to guarantee appropriate flexibility)?
- Does the curriculum promote education on health and nutrition, along with HIV-AIDS prevention?
- Is the curriculum sensitive to gender, cultural identity and language background?
- Does the curriculum discuss education for sustainable development, (along with climate change and disaster risk reduction elements)?
- Does the curriculum reflect visions and goals of wider development (and equity) in your country?
- Is feedback (from all stakeholders) gathered and integrated for regular revision of the curriculum to take new visions and circumstances into consideration?

Adapted from: UNESCO Policy Guidelines on Inclusion in Education

Creative use of assistive technology

Assistive technology (AT) can be understood as any device that makes it easier for a student with a disability to perform a function. Schools need to explore a broad range of resources and tools to facilitate the learning of every child.

a) Physical resources

Classrooms can be equipped with education kits and activity boxes containing basic sets of materials which will support the learning of all children, such as manipulatives, brightly coloured or learning materials with attached noise-makers, Braille or large-print books. Any particular lesson can deliver the same teaching aim, but different groups of children may approach it in entirely different ways using different materials at the same time. Resource rooms can be provided which are equipped with technology and tools, and run by specialists knowledgeable in collaborative teaching techniques, and that can support children and teachers in mainstream classrooms.

b) Computers and ICTs

ICTs can be of significant benefit for children with disabilities, and facilitate flexible learning. For many children, communication can often be difficult and ICTs enable greater interaction with people in immediate environment, and promote communication, interaction, cognition and learning. Using computers and related assistive technology in educational activities help children gain self confidence, social skills, communication skills, gross and fine motor skills, problem solving skills and a wide range of abilities and knowledge needed to function in society. For example, children who cannot hold a pencil can use the computers graphics programme for drawing and word processors for writing. Children who are unable to speak can use the computer as a communication tool. A keyboard or other electronic writing device to help with writing, listening devices, such as headphones or microphones worn by the teacher, in order to hear properly in the classroom, or devices that help students read books, interact with peers or even move around the classroom. Some assistive technology provides students with access to course materials and

information, such as software that reads books and worksheets out loud for students, books on tape or other audio format, or alternative keyboards that make it easier to use the computer. This type of technology helps a child read and process information in order to participate in the classroom. For all children, the computer provides topics and incentive for learning at all levels. Assistive technology needs to be incorporated into a student's Individualized Educational Plan (IEP).

In order to achieve effective introduction of ICTs in the classroom, three basic factors need to be in place: access to assistive technology, basic and in-service training of teachers, and relevant tasks for children.

Rights based and inclusive assessment

Assessment of both individual students and schools themselves are vital components of any education system. However, in the context of inclusive education, consideration must be given to moving beyond narrowly conceived measures of success or effectiveness. The mere presence of a child with a disability in a school is insufficient to demonstrate inclusion.

Student assessment

Assessment issues constitute one of the most significant challenges for the development of inclusive education for all children. A commitment to ensuring that children with disabilities are able to fulfil their educational potential implies the need for sensitive and constructive methods of appraising and monitoring their work, which take account of the barriers they face. In practice, schools tend to have common goals for all pupils, too often narrowly defined in terms of academic achievement. Traditional systems of assessment, which typically utilise standardized achievement test scores as the sole indicator of success for both students and schools, and which prioritise excellence at the expense of equity, can serve to disadvantage students with disabilities. Yet there continues to be heavy reliance on these systems of assessment as outcome measures of success at the school, despite recognition that curriculum-based assessments can provide the best teaching and learning tools¹⁵⁵. Indeed, recent pressure in many countries in the region for increased accountability have increased many states' reliance on standardized assessments and testing, thus potentially worsening the situation for many children with disabilities. Considerable investment is needed both to overcome political and professional resistance to change from these systems.

Research does demonstrate that equity and excellence are compatible goals, and that inclusion can and does benefit both children with disabilities and their peers. Standards do need not be modified, but the emphasis should be on individual progress towards broad goals, rather than comparative measures. With appropriate teaching methodologies, support and accommodations, all curricula can be adapted to meet the needs of all children, and children with disabilities can do as well or even better than their peers¹⁵⁶. Indeed, evidence from the OECD suggests that IE improves performance of non-disabled students, in part because the increased attention to pedagogy and curriculum adaptation generalizes teaching skills to all students.¹⁵⁷

In order to realise the goal of inclusive student assessment systems, the following approaches need to be considered:

- Inclusion does not mean that everyone should be treated equally in a one-size-fits-all model. It involves a system of individualized supports, which emphasize treatment according to need, and aim toward equitable success that is measured broadly.

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- Assessments take a holistic/ecological view that considers academic, behavioural, social and emotional aspects of learning including self-esteem and independent living skills needed for active participation in society as adults¹⁵⁸.
- Teaching approaches are based on targeted goals, provide alternative routes for learning, offer flexible instruction and ensure the use of clear feedback to learners
- Student assessments measure individual progress in the general education curriculum, with clear standards and benchmarks and multiple forms of student assessments (formative and summative) are used to inform and facilitate teaching and learning
- Inclusive education programmes include training components for teachers and education officials to learn to conduct school evaluations and student assessments.

Evidence of the benefits of inclusion¹⁵⁹

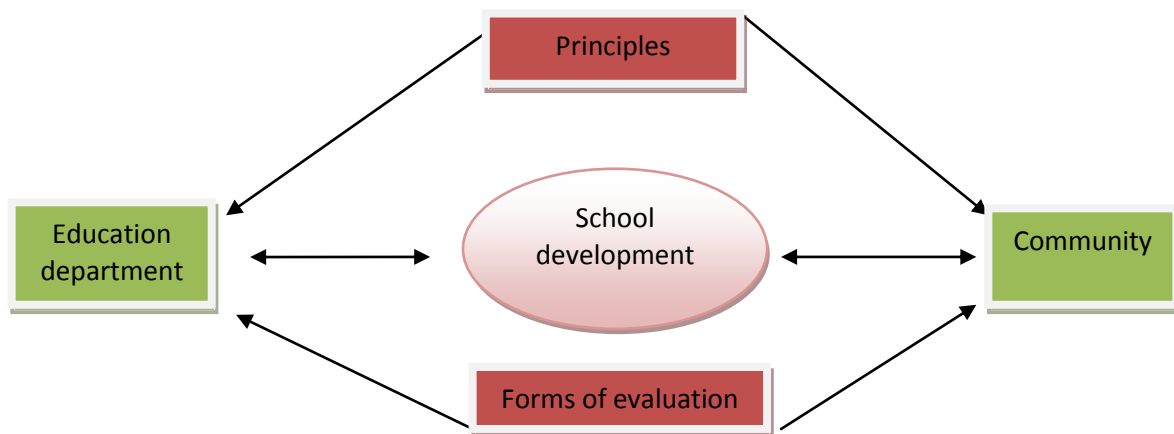
A comprehensive review of all research evidence on inclusive education with children with severe disabilities in the US found that compared with children in segregated classes, students with severe disabilities had more opportunities for instruction on age appropriate goals and goal related to basic skills. In addition, students with severe disabilities who were in inclusive classes had higher amounts of time engaged in classroom activities, participated in a broader range of activities with non-disabled students, interacted more with non-disabled students and participated more in activities throughout the school. The research also found that when students with severe disabilities were moved from segregated to inclusive classrooms, they were engaged with a curriculum content more consistent with that of their peers. Overall, it found that when teachers make accommodations and modifications to the classroom environment, students with severe disabilities are more able to become involved in age appropriate and general educational curricular activities. And despite better teacher ratios in segregated classes, there was a higher rate of time in instruction for students with severe in inclusive classrooms, partly because of mobilizing non-disabled students to provide instruction.

School self assessment

It is also necessary to be able to assess the effectiveness of schools in introducing inclusive environments, although there has been little systematic development of the necessary tools across the region to date. School Self-Assessments can help measure whether commitments to inclusive education are being fulfilled and serve as levers for change and improvements. Research evidence indicates that two factors, particularly when they are closely linked, seem to be more influential than all others in achieving effective inclusive school environments: firstly, the *principles* that inform actions in the field, particularly in relation to the idea of inclusion, and, secondly, the *forms of evaluation*, or assessment, that are used to measure educational performance.

The process for school assessments should be undertaken collaboratively involving not only staff and members of school boards, but also children themselves as well as parents and members of the wider community. This inclusive process is important not only because it is necessary to gather views from all key stakeholders in order to produce meaningful and comprehensive findings, but also because such engagement will help strengthen buy in and support. This broad range of stakeholders need to be engaged from the outset in agreeing the principles of inclusive education, the drawing up of school development plans, as well as the indicators against which to measure progress in their implementation. Monitoring might be undertaken on a termly or yearly basis, with the results shared through assemblies, staff meetings, newsletters, circle time activities or websites, and strategies for strengthening and improving inclusion developed by all stakeholders in the school.¹⁶⁰

Levers for change towards inclusive education¹⁶¹



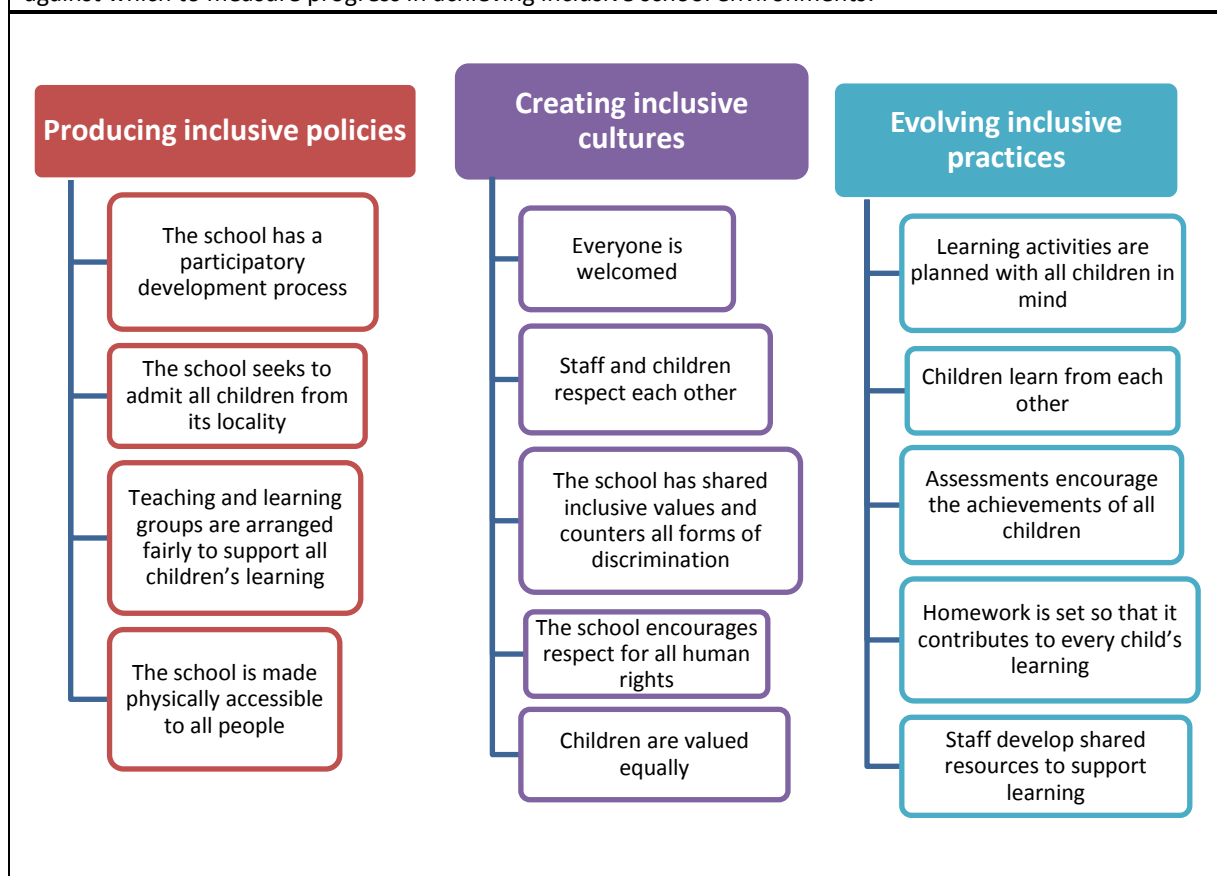
Assessments could also be undertaken through partnerships between local authorities, groups of local schools, and parents and children. The following processes might inform a School Self Assessment process:

- **Set objectives- what is to be achieved?** The school needs to produce a School Development Plan which establishes the values, policies and practices necessary to support the creation of an inclusive school. In so doing it will need to address how it will achieve the goal of ensuring **access** to education of an acceptable **quality** in which all children's human **rights are respected**. A time frame should be determined for the attainment of these given objectives.
- **Establish benchmarks and indicators - how can progress in achieving the objectives be measured?** Schools, in collaboration with children and families, will need to determine the indicators against which to measure progress. These can be established in accordance with the right to access, quality and respect with regard to inclusive education, and address the values, policies and practices to be measured.
- **Collect data** - what information is needed in order to measure progress? Information collected needs to be directly relevant to the objectives and indicators set by schools. It can be both quantitative and qualitative. It might include data on the actual experiences of children in school, the attitudes of teachers, or the degree of bullying or violence faced by children with disabilities. Similarly, schools can not only collect data on how many trained teachers they employ, numbers of children with disabilities admitted to school and completing their education, but also, for example, whether children with disabilities feel they are really included as equals, or how children without disabilities experience inclusive education.
- **Monitor the data: what does the information say about progress towards achieving objectives?** Data needs to be analysed on a regular basis to review whether the overall objectives are being reached and to help determine whether changes are needed to strengthen progress.

- **Evaluate the findings and analyse their implications: what are the lessons arising and how might they influence the programme and next steps?** At the end of the agreed timeframe, a detailed evaluation is needed to evaluate the findings. This process will not only assess whether the objectives have been achieved but also what contributed to their attainment, what impeded progress, what needs to change, and what lessons emerge. It should identify weaknesses as well as strengths, and help inform future decisions relating to, for example, needs for resourcing, capacity building, information systems, and guidance and policy frameworks. All key stakeholders need to be involved in the evaluation and analysis including teachers, school board members, children and their families.
- **Disseminate and communicate the findings: who should know about the findings?** It is important to disseminate findings openly in order that there is transparency in the process, and authorities can be held to account. They also need to be used to inform future policy making, as well as dialogue and advocacy for change.

Indicators for inclusion¹⁶²

The following chart provides some illustrative indicators or benchmarks which can be used as a checklist against which to measure progress in achieving inclusive school environments.



In order to support these processes, it is important that schools are provided with:

- Policy and guidance from governments on school self assessments, establishing the obligation to undertake these processes on a regular basis, as well as the form that they are expected to take.
- School timetables and staff workloads designed to accommodate the time necessary to undertake these processes, and the necessary resources allocated.
- Economic and technical resources allocated to schools for training in evaluation and assessment procedures that measure academic as well as social outcomes and community benefits attributed to inclusive education.

Investment in and support for teachers

Quality inclusive education cannot be introduced effectively unless teachers are both capable of and committed to the process. Negative attitudes from school directors, education supervisors, resource staff, teachers, parents and other family members, as well as students can act as major barriers to inclusion and implementation of child friendly and inclusive approaches¹⁶³. Teachers' skills, practices and positive attitudes towards all children, are critical.¹⁶⁴

Teacher training

The literature substantiates the importance of teacher training as a driver of good quality teaching. Significant changes will be needed to the prevailing teacher training provision across the region if the right to quality education is to be achieved for every child. Providing the required support for teachers and other school staff for the implementation of inclusive education will necessitate a move away from the tradition of a twin track approach with one curriculum for mainstream teachers and another focusing on 'defectology' for those working with children with disabilities.

However, re-visiting the original concept of 'defectology', as conceived by Vygotsky, rather than rejecting it outright, might help bridge the gap between the past and future understanding of learning, and encourage a more fluid and evolutionary approach to the changes needed. Vygotsky argued that teaching should be based on what children are able to do with the optimal assistance of others rather than what they can do independently: teaching reinforces a child's disability if it is only informed by what the child can (or cannot) do. He evolved a concept of the "*zone of proximal development*", as the social space in which collaboration and participation can facilitate and promote development and learning.¹⁶⁵ This approach is consistent with inclusive education. Capacity building of teachers is more likely to be successful if the new knowledge builds on and adapts former theories rather than demanding total rejection of past. Accordingly, defectology should be re-considered and its valuable and relevant ideas integrated into ideas guiding inclusive education.

All teachers will need to acquire the competencies to work in inclusive environments, including working in partnership with each other. If real change is to take place, investment will be needed in effective selection, training, and support for teachers. This should involve:

- A systematic re-organization of pre and in-service training strategies to introduce core methodologies of collaborative teaching, and support teachers in providing 'differentiated instruction', in which they teach the same content using varied teaching methods to respond to the learning styles and levels or 'multiple intelligences'. Internationally child-centered instructional methodologies have proven to be effective at meeting the diverse needs of ALL children and improving learning opportunities.

- Review of the content of teacher training curricula to ensure that it embodies:
 - child centred methodology
 - teaching in inclusive and multi-cultural environments
 - using individual educational plans to adapt and support children with specific educational needs.
 - human rights, and in particular, recognition of non-discrimination as a human right
 - understanding and recognising both direct and indirect discrimination
 - positive strategies for promoting tolerance and tackling discriminatory behaviour
- Increased levels of opportunity for practical work experience as part of teacher training
- Focus on modes of collaboration and whole school policies as well as addressing learning needs, and strategies for dealing with behavioural issues.
- Provision of opportunities for teachers to explore creative teaching methods, and the use of a broad range of different resources for application in differentiated teaching.
- On-going, high quality professional development opportunities for teachers that address inclusive methodologies
- Consideration of utilising the expertise of people with disabilities to train teachers

It will be necessary to review both initial and in-service training and to develop a rolling programme to provide all teachers and administrators with such training.

Developments in introducing teacher training for inclusion¹⁶⁶

Some countries have scaled up national teaching reforms to modernize the way teachers teach.

Kosovo has trained approximately 300 primary school teachers in interactive teaching and learning methodologies for children with disabilities and special learning needs. And the Faculty of Higher Education requires that education students take inclusive education courses at both the Bachelor's level and at the graduate level. A Master's degree in inclusive education is also offered. And as part of an innovative in-service project, a group of master inclusive education teachers have created a teaching team that travels to schools providing inclusive workshops. Although still at a pilot level, this initiative is popular among teachers because it is provided by local teachers who understand the context, and the master teachers continue to teach in classrooms, increasing their legitimacy to teachers receiving the training.

Azerbaijan has incorporated an active learning strand in its national curriculum and discusses innovative ways of engaging children.

In **Armenia**, Mission East, a non-governmental organization, supported the development and introduction of a course on inclusive education principles at the State Pedagogical University.

Serbia teamed up with UNICEF to provide high quality inclusive trainings that help raise awareness and attitudes of teachers by supporting children with disability, overcoming problems, collaborating with disability associations, and demanding children's rights in the system.

In **Russia**, online professional development about inclusive education exists for its teachers, so they can learn new techniques on a more flexible basis. However, this is a voluntary training and it has not yet been evaluated to determine how often teachers use this resource.

Support within schools for teachers

When advancing the inclusive education agenda, the difficult working conditions already endured by teachers, as well as the challenges, need to be taken into account. Consideration needs to be given to investment in a broad range of approaches to strengthen support for teachers. This might include the following:

- **Dedicated teachers with responsibility for inclusion:** While all staff must have responsibility for ensuring inclusive practice, there can be value in each school having a dedicated teacher, who has been provided with training and support, to co-ordinate measures to introduce and sustain inclusion. The post should have senior status, and the opportunity to play a substantive role in planning and policy development. This implies involvement in admissions, transitions, financial management, and curriculum development. Such a post holder might also contribute to training other teachers. Liaison with classroom teachers should be a key feature of their role.
- **Appropriate staffing levels:** There needs to be realistic support for teachers and appropriate staffing levels. Too often a critical mass of unmet need can overwhelm school staff and create a downward spiral of achievement. Reduced workload pressures would also help teachers create space addressing behavioural issues as well as teaching.
- **Strong support from school leadership:** Inclusion has to be owned by the governing body. All school policies must support the inclusive environment, and the governors should be aware of pressures on staff, and the need to promote staff morale.
- **Co-operative learning** to provide children with opportunities to learn together. Evidence indicates that co-operative learning where learners help each other in different ways – including peer tutoring – within flexible and well-thought out learner groupings, provides beneficial academic outcomes for both tutors and tutored.
- **Heterogeneous grouping** of learners and a differentiated approach to dealing with a diversity of learners' needs in the classroom. Such an approach involves structured goal setting, reviewing and recording, alternative routes for learning, flexible instruction and different ways of grouping for all learners¹⁶⁷.
- **Joint problem solving** by teachers so that individuals teachers can bring forward the challenges they may be facing with a student who has a disability and be supported by peers to find solutions.
- **Co-teaching** where teachers and resource workers can work together within the classroom
- **Community based rehabilitation programmes** can support schools by visiting classes and working with parents to build on learning. They might provide workshops or attend staff meeting to help teachers plan lessons and adapt the curriculum. They can contribute a positive approach to helping teachers devise ways of meeting children's needs
- **Involvement of family and community as resources:** Parents and community members as well as individuals with disability are valuable human resources and need to be mobilized to assist in change. Trained parents and other interested community members can provide assistance in classrooms that will aid in classroom management and allow teachers flexibility to present individual learning programmes and increased individual attention that children with disabilities often need. However, it is important that schools promote a culture of reciprocity and collaboration with parents.

Checklist on teachers and the learning environment¹⁶⁸

- Are there enough trained teachers deployed appropriately throughout the country?
- Is the teaching inclusive of all children, protective, gender responsive and encouraging of the participation of the learners themselves?
- Is the professional development and motivation of teachers enhanced by providing incentives and ongoing professional development?
- Is multilingualism embraced, particularly the recognition of the importance of mother-tongue instruction in the first years of school?
- Are the learning environments safe and healthy?
- Are teaching methods interactive?
- Are teaching methods adapted to different age groups (children, youth and adults)?
- Are teachers encouraged to work in teams?
- Is the work project-oriented?
- Is teaching predominantly theoretical?
- Do materials cater to the needs of all learners with learning difficulties (visually impaired, hearing impaired, etc.)?
- Are teachers encouraged to cooperate with parents and civil society?

Establishing resources to provide specialist support

In the CEECIS region, there is currently a serious shortage of specialists available to support inclusive schools. Those that do exist often have no education training, as they continue to be trained at Defectology Institutes, and are mainly specialised in disability from the medical approach. This shortage can seriously impact access to school for children with disabilities. In the recent regional survey on developments in education for children with disabilities, for example, one principal described her concerns about including students with epilepsy, asthma and allergies in the school, because the school did not have a doctor or a nurse¹⁶⁹. And while most schools either have a full or part-time psychologist, most education specialists found that they played an insignificant role in terms of supporting children with disabilities.

The following five approaches are mutually beneficial and are all necessary to provide support to inclusive education:

□ **Creating resource centres:** As part of the process of moving towards an inclusive system, special schools need to be transformed to become hubs of expertise to support the general school system. They can be developed as resource centres, with staff gradually supported to shift from working directly with children in segregated setting to using their expertise and experience to lend to teachers in inclusive schools. For example, such resource centres can be mobilised to provide¹⁷⁰:

- provision for training and courses for teachers and other professionals;
- guidance to teachers in relation to specific situations or challenges
- development and dissemination of materials and methods;
- support for mainstream schools and parents, including writing/monitoring IEPs
- short-time or part-time help for individual students or groups of students;
- support in entering the labour market

The sharing of services and resources among contiguous schools is a cost-effective way of training educators and promoting inclusive practices.

- **Creating partnerships between neighbouring schools:** Partnerships could promote sharing of knowledge and techniques among professionals for teaching children with disabilities and enables a student transfer system between institutions. In addition, some schools can be developed as models to provide support and guidance for others¹⁷¹. These schools can then be used to lay the foundation for a scaling up effort which uses the trained school staff as peer coaches and trainers for teachers in other schools. Model schools can be the sites for study visits, materials development and production, and experimentation of curricular modification and student assessment practices. Partnerships between schools in one neighbourhood or village can also contribute to facilitating transitions between primary and secondary schools.
- **Building multi-disciplinary support:** A range of different specialist services, organisations and resource centres, and professionals need to work collaboratively to provide a comprehensive and seamless service to support inclusive education. Support structures are needed which can respond flexibly to a range of organisational, as well as individual professional and family level needs. They need to be co-ordinated both within and between different sectors such as education, health, and social services, and coordinated to support successful transitions of all learners between different phases of their lifelong learning. This inter-disciplinary approach needs to:
 - integrate the knowledge and perspectives of different areas of professional expertise in order to consider learners' needs holistically;
 - adopt a participatory approach in which decision-making regarding support not only involves, but also becomes increasingly led by mainstream class teachers, learners and their families, working in partnership with inter-disciplinary professionals. This requires a major attitudinal shift on the part of specialist professionals, as well as changes to their practice¹⁷².
- **Development of collaborative practice and provision:** networks of learning communities, joined up child and family services, and cooperative multi-agency work can support teachers. Opportunities can be created for teachers to work in teams, to develop study groups, collaborate in student assessment, undertake site visits to model schools, and teacher reflection. School leaders can support professional learning communities where teachers learn from each other by working together to improve practice¹⁷³. Co-operative teaching can also involve a team approach involving learners themselves, parents, peers, other school teachers and support staff, as well as multi-disciplinary team members as appropriate
- **Utilising parental expertise:** parents of children with disabilities can provide a significant source of support both to other families and to schools. They need to be recognised as experts with relevant and valuable experience to offer and encouraged to contribute as advisers, in school policy development, on management boards, as peer counsellors as classroom assistants as well as in monitoring and evaluating the implementation of IE.
- **Teachers' conditions of service:** If teachers are expected to respect the rights of children, it is equally important that their rights are upheld. They need to be supported, adequately paid and respected. Lack of support, low status, poor pay and inadequate training and supervision diminish the motivation of teachers, and the quality of their work. Improved management, higher pay, effective appraisal systems, forums through which teachers can influence policy, acknowledgement of their concerns, and opportunities for them to identify their training and

other needs would all contribute to improving morale and motivation and, in consequence, raise teaching standards. In addition, stipends for teachers working in unpopular schools might be considered. Research evidence from the region indicates that such approaches have improved educational outcomes.

A child centred, safe and healthy environment

For learning environments to be optimized to enable children, including children with disabilities, to reach their full potential, schools need to take a holistic approach to their education, health and well being. This will necessitate attention being paid to the following concerns:

Promoting health

In order for children to be able to maximize their learning experience, they need to be in a physical condition to learn. A cross-agency UN initiative (FRESH) was established in 2000 to raise the education sector's awareness of the value of implementing an effective school health, hygiene and nutrition programmes as one of the major strategies to achieve Education for All¹⁷⁴. It has found that although many children are now accessing education for the first time, the ability of some of the most disadvantaged children, including children with disabilities, to attend school and to learn, is compromised by poor health. These are the children who will benefit most from health interventions, since they are likely to show the greatest improvements in attendance and learning achievement.

Close links between health and education services can provide a means of achieving these goals. For example, having the school near a clinic provides students with general health services and allows for the care of children in need of permanent monitoring of health conditions. It could also provide regular school nurse visits and health screenings. Such a health facility would normally serve the entire community, either after school or by providing separate access for school and community patients. This basic link provides a connection between school, community and the family, revolving around the child's well-being.

In order that such facilities are fully accessible to children with disabilities, the following provisions need to be considered:

- Clinic facilities require the same basic characteristics of universal design/accessibility for both children and adults with disabilities
- Increased contact between the clinic and the school setting can be beneficial for guaranteeing integrated support for all children and their families. In addition, joint efforts with health services can help to implement on-going health, hearing and visual screening actions.
- Where community-based rehabilitation services are available, a functional home-based follow-up plan can be arranged to improve the family/home environment.
- Effective community partnerships which promote a positive interaction between the school and the community is fundamental to the success and sustainability of any school improvement process
- Pupil awareness and participation is key: children must be important participants in all aspects of school health programmes and not simply the beneficiaries.

Basic health and safety standards

Health and safety standards for the building of schools need to be developed to reflect the needs of children in inclusive settings. For example, toilets and water supplies need to be accessible and safe, to children with impaired mobility. Consideration needs to be given to health and well-being, taking into account the differing needs of children when planning travel to and from school, factors which might cause illness or accidents in the school, and appropriate facilities for girls and boys. A healthy environment also needs to provide safe and stimulating opportunities for play and recreation for all children. Investment should be undertaken into the design of play facilities which enable children with and without disabilities to play safely. Children, as well as local disability organisations can be involved in helping create inclusive environments. In addition, children with disabilities should be able to travel safely to and from school. This means that both the sidewalks and all routes should be wheelchair accessible and safe. Ideally there would also be community watch to protect children from violence or bullying on the way to school. Finally, schools must also be safe and secure for all children, including those with disabilities. In the case of natural and man-made disasters, ALL children must be able to easily evacuate any buildings and routines must be in place that familiarize all children on how they should best respond in such situations.



5.3 Respect for rights within the learning environment

A human rights-based approach to education needs to ensure that the human rights of children are fully respected in school. In addition to the equal rights of every child to quality education, non-discrimination, and optimum health and safety within schools, already addressed in this paper, schools also need to introduce policies and practice that ensure that other relevant rights in the CRC are understood and respected.

Right to respect for identity, culture and language

Human rights law recognises the obligation on governments to respect people's identity, language and culture. This general right has been established in a number of human rights treaties. For example, Article 30 of the Convention on the Rights of the Child stresses the right of children to enjoy their own culture, practice their own religion and use their own language, and the Convention on the Protection and Promotion of Diversity in Cultural Expressions (2005) introduces obligations to respect cultural diversity. The application of this right has further been recognised specifically in relation to sign language. Article 30(4) of the CRPD states that persons with disabilities are entitled, on an equal basis with others, to recognition and support of their cultural and linguistic identity, including sign languages and deaf culture.

The right to respect for language, identity and culture must also be recognised within education systems. UNESCO's Convention against Discrimination in Education protects the educational rights of national minorities. Depending on the educational policy of each State, it establishes the right to use or be taught in their own language, provided this does not exclude minorities from understanding the language and culture of the community as a whole and that it is not provided at a standard lower than the general standard provided. Article 24 of the CRPD makes clear that this provision extends equally to sign language: it must be afforded the same status as other languages.

In summary then:

- Children have a right under international law to recognition of their cultural and linguistic identity
- Sign language is recognised as a language which must be recognised within the meaning of the right to language and culture
- Children are entitled to respect for their language and culture within their education and schooling

In furtherance of these rights, governments have obligations to ensure that children do not experience discrimination, that respect is afforded to their culture and language, and that every effort is made to prevent social exclusion and educational disadvantage as a consequence of speaking a minority language.

Without doubt, the creation of inclusive environments in which children are provided with equality of educational opportunity does present some challenges. It is certainly not enough to place children in mainstream education without significant investment in reforming the structures, organization, and curriculum of schools. The educational system as a whole has to find solutions adapted to the characteristics of students that will allow them to develop not only linguistically but also emotionally, socially, and academically¹⁷⁵.

Respect for children's participation rights

Article 12 of the CRC establishes that children are entitled to express their views on all matters of concern to them and to have them given due weight in accordance with their age and maturity. Article 7 of the CRPD strengthens this provision for children with disabilities, requiring governments to provide them with '*disability and age appropriate assistance*' to ensure its realisation. This principle of participation is also linked with rights to freedom of expression, religion, and association. These rights apply to all aspects of education - not simply to the pedagogical relationships within the classroom, but also across the school and in the development of educational legislation and policy¹⁷⁶. It is of particular importance that children with disabilities, who face widespread social exclusion and discrimination, are able to articulate their views and have them taken seriously in order that they can address those challenges.

In practice, there are significant barriers impeding the rights of all children to get their views heard and to be enabled to influence the decisions that affect their lives. However, the barriers are far greater for children with disabilities. Lack of recognition of the value of listening to children with disabilities, under-estimates of their capacities, assumptions that they would not have views to express, communication barriers, lack of confidence and skills on the part of teachers, as well as availability of time all play a part¹⁷⁷. Accordingly, in addition to the necessity for training for teachers, systemic measures need to be put in place to establish the mechanisms through which children with disabilities, alongside all other children in schools, can exercise their right to be heard.

At the governmental level

- Introduction of legislation guaranteeing school children the right to establish democratic bodies such as school councils, and requiring that such bodies comply with principles of non-discrimination and promote inclusion of children with disabilities, as well as both girls and boys. The Committee on the Rights of the Child has insisted that such rights '*need to be enshrined in legislation, rather than relying on the good will of authorities, schools and head teachers to implement them*'¹⁷⁸.
- Development of guidance for local municipalities and schools on developing opportunities for children to be heard, which emphasises the necessity for inclusive and non-discriminatory approaches.
- Consideration could be given to the creation of advisory groups of children with disabilities to provide guidance to governments on the development of policies in relation to, for example, accessibility, segregation, or promoting inclusive schools.

At the municipal level

- Creation of forums where children with disabilities can meet and share experiences, concerns and ideas on how to improve the quality of their school experience. Such forums would need administrative and financial support from the local municipality, who could also encourage and support local disabled people's organisations to act as facilitators for the children.
- Establishing dialogue between these children's forums and local policy making bodies in order that their decisions are informed and influenced by the direct experiences of children with disabilities.
- Introduction of mechanisms for ensuring that children are able to express a view on school placements, and have their views taken seriously in accordance with their age and maturity.

- Support for children with disabilities to undertake audits of schools and local education authorities, based on child rights indicators for inclusion and the right to education they have developed within the local community.

At the school level

- Establishment of school councils in which both girls and boys with disabilities play an active role
- Development of school policies in partnership with children on rights, inclusion, respect for diversity and non-discrimination (see page ? for more details)
- Introduction of circle time where children can share issues of importance and concern and learn to respect each others' right to be heard and to be treated equally
- Peer counselling programmes in which children with disabilities play an active part and through which they can access support if they are experiencing problems in school
- Introduction of safe, accessible and confidential complaints mechanisms through which children with disabilities can raise concerns

Right to respect for personal and physical integrity

The CRC demands, not only that children are protected from all forms of violence, but also that school discipline is administered in a manner consistent with the child's dignity.¹⁷⁹ Physical and other forms of humiliating and abusive treatment, whether perpetrated by teachers or other children, are not only a violation of the child's right to protection from violence, but also can result in long term physical harm, emotional distress and mental illness, as well as being highly counter-productive to learning¹⁸⁰. Bullying and sexual violence can serve to limit the participation of children with disabilities in education, and diminish their capacity to live healthy, safe and enjoyable lives.

However, there are serious reports of violence and bullying directed at ALL children but particularly children with disabilities in CEECIS. These often occur in and around the school setting and can significantly impact the lives of the most vulnerable and excluded and discourage parents from sending their children to school. In the Regional Consultations for the UN Study on Violence against Children Study, physical and psychological punishment, verbal abuse, bullying and sexual violence in schools were repeatedly reported as reasons for absenteeism, dropping-out and lack of motivation for academic achievement¹⁸¹. The Global Survey on HIV/AIDS and Disability notes that people with disabilities have a significantly elevated risk of physical violence, sexual abuse and rape, yet enjoy little or no access to the police or legal system for protection, and have less access to medical interventions and counselling than their nondisabled peers¹⁸². The UN Study on Violence Against Children confirms this evidence, further noting that disabled children are often targets of violence both on the way to school as well as once they arrive. It points out that children with disabilities are particularly vulnerable owing to the combination of the stigma they endure and their physical and intellectual impairments, which limit their capacity to fend off attacks or be believed in their reports of violence. Furthermore, it also observes that many disabled children, already marginalized and stigmatized, are desperate to make friends and be included, leading to a greater willingness to put up with physical violence, sexual abuse or bullying, as long as they are allowed to hang around and feel included¹⁸³.

School violence based on disabilities¹⁸⁴

Teachers: Disabled children are often beaten, abused or bullied by teachers. Sexual abuse by teachers is also widely reported for both male and female students.

Fellow students: Teachers that humiliate, bully or beat children not only directly cause harm to the child, but also model such behaviour for other children in their classroom, who may follow the teacher's lead in physically harming, bullying and socially isolating the targeted disabled child. Sexual abuse by fellow students is also a concern and is often linked to physical violence and bullying behaviours by such classmates.

Travelling to and from school: Disabled children are often bullied, teased or subjected to physical violence, such as being beaten, stoned, or spat upon, by members of the community on their way to and from school. Students with sensory or intellectual impairments seem to be at particular risk.

Residential schools: In many countries, children with perceived disabilities, are educated in residential schools, where they may live away from their families for months or years. These children are particularly vulnerable. Children who live in dormitories or are boarded out with local families are often subject to both physical violence and sexual abuse.

Lack of reporting mechanisms: Few schools have mechanisms in place that allow any students, parents or caregivers to complain about violence or victimisation. Parents/caregivers or children may hesitate to complain about violent or abusive behaviour in the school, fearing that they will be dismissed from a programme when no alternative exists. Of equal concern, few schools have systems in place to allow school staff to report abuse they have observed on the job. Children in residential schools are at particular risk, often with no-one available to whom they can report violence or abuse.

Nearly all countries in the region have, according to legislation, banned corporal punishment in schools. However, building a culture of non-violence requires more than a legal framework of protection. Schools themselves also have an important part to play, both in ensuring that children with disabilities are protected from violence, and also in promoting a culture of peace, tolerance and non-violent conflict resolution. They need to be encouraged to contribute towards breaking patterns of violence by giving children, their parents and communities the knowledge and skills to communicate, negotiate and resolve conflicts in more constructive ways. This involves explicit recognition that all children, including children with disabilities, have equal rights to education in settings that are free of violence, and that one of the functions of education is to produce adults imbued with the non-violent values and practices.

In order to achieve these goals, the following actions are needed:

Legislation and policy

- Corporal and other humiliating punishments should be explicitly prohibited by law, and reinforced by other necessary measures. The Committee on the Rights of the Child has stressed that this *'is an immediate and unqualified obligation of States parties'*¹⁸⁵.
- Promoting non-violence should be accompanied by policies with clear enforcement mechanisms. They must also give attention to the particular vulnerability of some groups of children, including children with disabilities, as well as the gender based dimensions of violence, and take specific measures to ensure their protection. They need to be implemented through violence prevention programmes throughout the education system.

- Governments need to promote a strong message that all forms of violence against children is unacceptable, that schools should be rights based and promote and practice human rights principles. This should be accompanied by local campaigns to promote zero tolerance of violence against children with disabilities.
- Clear codes of conduct reflecting child rights principles, should be established and promoted widely for all staff, students and their families and communities. Governments should ensure that schools have trained and trusted adults to whom students can safely and confidentially report incidents of violence and receive advice. Complaints should always be taken seriously and be seen to do so, as lack of transparent disciplinary actions in case of bullying can serve to encourage its continuation.
- Children, including children with disabilities, should be actively involved in the design, development, implementation, and monitoring of policies and programmes, including through access to confidential complaints or reporting mechanisms.

Planning and design

- When planning and designing schools, governments should ensure that safe physical spaces are provided to ensure that all children have equal access to facilities and can participate fully in school life without fear of violence.
- For children with a disability who are more at-risk of abuse or targeted violence, action is required to reduce vulnerability – including eliminating “blind spots” in and around the school grounds such as unsupervised toilet areas, and isolated areas around the school
- Specific efforts should be made to address the need for protection for students travelling to and from school – in busy urban areas, zones of significant violence, and rural areas requiring travelling long distances.

Training and curriculum

- All school staff should be trained and supported in the use of effective non-violent and respectful classroom management strategies, as well as specific skills to prevent patterns of bullying and other gender-based violence and to respond to it effectively. They also need to be sensitised to the vulnerability of children, including children with disabilities, to cyberbullying¹⁸⁶.
- Curriculum, textbooks and teaching methods should promote child rights, and emphasise tolerance, respect, equity, non-discrimination, and non-violent conflict resolution.
- Rights-based life skills programmes for non-violence should be promoted in the curriculum through subjects such as peace education, citizenship education, anti-bullying, human rights education, and conflict resolution and mediation.
- Recognition should be given to the involvement of children themselves, including children with disabilities, as active agents in building safe environments, challenging bullying, prejudice and discrimination and providing peer-to-peer support.

Public awareness and knowledge

- Schools should be supported as a resource to build closer relationships with the community to address violence in and around schools. Students, staff, parents and other partners such as police, health services, social services, faith-based groups, community recreation groups, and cultural groups should all be encouraged to be involved.
- Data collected should ensure that the views of students and potential students are considered along with those of teachers, parents, and the wider community, with a special focus on the experiences of vulnerable children. Information should be incorporated into existing education management information systems established at local, district and national levels



Chapter VI

Role of non-state actors

Fulfilling the right to inclusive education for children with disabilities requires not only actions on the part of governments but also many other actors, including parents, extended family members, unions, teachers, religious communities, NGOs, or local politicians. While human rights are legal entitlements deriving from international and national legislation, they also represent standards and principles which directly affect the day to day relationships between individuals in their communities. Building an environment in which the barriers impeding the right to inclusive education for children with disabilities are removed will therefore need the active engagement and commitment of stakeholders at all levels of society. Education is not an isolated activity. The actions, attitudes and behaviours of all members of communities impact on its realisation.

The obligations of parents and other members of communities will necessarily differ from those of the State, and it is essential that clear and appropriate lines of accountability are understood. For example, while a government has a responsibility implement laws, policies and resources to ensure that the right to inclusive education is available for every child, a parent, for example, has a responsibility to support and enable their child to attend school on a regular basis. It must also be acknowledged that individual members of a society have rights as well as responsibilities. Teachers are entitled to respect, remuneration and appropriate training and support, and cannot fulfil their obligations to children unless these rights are realised. There is, then, a close inter-relationship between rights and responsibilities. Respect for human rights is not contingent on the exercise of responsibilities, but their realisation is necessarily dependent on those responsibilities being taken seriously.

As this paper has documented, many of the barriers which children with disabilities face in realising their right to education stem from the people within the communities in which they live. Investments are therefore needed to work with them to overcome those barriers. The opportunity to attend school will be impacted by whether parents recognise their right to an education, and acknowledge their potential capacity to learn, as well as the extent to which the school promotes an inclusive environment. Children's commitment to education will be influenced by the extent to which their parents encourage and support them, by the accessibility and relevance of the education they receive and by the attitudes of their peers. Children's achievements in education will be influenced by the quality of teachers, the teaching methods employed, the extent to which they are engaged as actors in their own education, the availability of the necessary teaching aids and resources, and a willingness to remove the barriers which impede their attendance. All these factors can be supported through government action. But they rely, for their implementation, on the environment at home, and the mobilisation of all members of the community.

6.1 Parents and other care givers

Parents are key stakeholders in their children's education. They need to be supported, informed, involved and respected at every level in the building of educational opportunity for their children.

Parents as partners and advocates

Parents of children with disabilities are often the most powerful advocates for their child and his or her right to education. They can play a critical role in holding schools and education authorities to account in fulfilling their obligations to children, pressing for stronger legislation where needed, monitoring progress, identifying weaknesses in implementation of education policies, ensuring compliance with the right to education and challenging rights violations.

Consultation and engagement with parents

Parents of children with disabilities need to be consulted with and involved at every stage of programmes to improve access, quality and respect for rights within education. They are a source of considerable expertise and experience who can contribute to ensuring that the barriers to education are more effectively understood and challenged. Their active engagement and participation in their children's education should also be encouraged. The need for engagement with parents applies in relation to, for example:

- policy development at the national, local and school level.
- local analyses of the barriers to education for children with disabilities
- development of Individual Educational Plans
- development of School Self Assessments
- placement of individual children in school
- progress reports of individual children
- development and design of accessible complaints mechanisms to address problems as they arise
- participation on parent/teacher associations or governing bodies of schools

Provision of education and advocacy skills for parents

Many parents of children with disabilities are knowledgeable about their children's needs but are not taken seriously or valued as experts by professionals. However, many others lack understanding of and information about the nature of their child's impairment and their potential to learn. This, combined with fear of exposure to public hostility and rejection, can lead to an assumption that education is neither possible or of value for their child. Local authorities, together with national governments, can provide parents with information and support to gain a better understanding as to the opportunities that school can offer. They can also support parents to gain the necessary communication skills to enable them to support their child's learning more effectively. If parents acquire these skills, they can not only improve communication with their child, but also better understand what their children are doing at school. Parenting education programmes are also needed which acknowledge the different support and information required by parents at different stages of their children's lives. Parents can benefit from advice and information on the evolving capacities of children throughout childhood. With education, parents will acquire greater capacity to support their children's education from birth, greater understanding of their children's needs, and more confidence in collaborating with schools to help improve the quality of education provided.

Provision of information

Parents need access to accurate and comprehensive information on legislation, policies and services available to them and their children. This will enable them to ensure that they are receiving the services to which they, and their children, are entitled. Accessible resources should be provided with information on where to go when they face difficulties, who is responsible for what services, and how to approach them. They also need information about the school their child is attending, the school curriculum, the expectations of parents, and the role that they can play in the school. Finally, they need information on where to go and how to make a complaint if their child is discriminated against, or treated inappropriately in school.

Parental responsibilities

If appropriate support and provision for the education of children with disabilities is provided by governments, their parents can contribute to fulfilling their children's right to education through:

- Provision of an environment in the early years which ensures the child's preparedness to start school
- Support and recognition of the right to education and its value of education for all their children.
- Contributing to children's developmental readiness for school
- Ensuring that children are able to arrive, ready and on time when school is in session.
- Getting involved in the school and supporting its work – through participation in fundraising, meetings with teachers, committees, consultations, governing bodies etc.
- Showing encouragement and support for their child's work
- Ensuring, to the greatest extent possible, that their children are healthy and well nourished and hence able to learn.



6.2 Civil society organisations

Within the CEECIS region, there are a growing number of international, regional and national civil society organisations playing a key role in promoting the rights of children with disabilities to education. In the absence of state provision, they have often played an important role in recent years in supporting and developing models of inclusive education. Clearly, they cannot be a substitute for properly funded government provision of education for all children with disabilities. They should not be seen as a stop-gap solution to problems within municipal education. However, they can and do also play a key role in strengthening education provision, and the models of inclusion they are piloting can be used to help design wider government policy. Those organisations run by people with disabilities can also serve as a considerable source of expertise for governments. Building partnerships with these organisations is therefore of considerable importance.

Many other bodies can also play an important role. Professional bodies can adopt policies consistent with the goal of inclusive education and support practices to promote its realisation. For example, paediatricians and other doctors can make a major contribution towards ending practices of separation of children with disabilities from mothers at birth, enhancing understanding of the social model of disability, and improving collaboration with education and social services in the development of provision for families and children. The support of teachers organisations for inclusive education would also improve progress in achieving cultural change in schools. The media, as well as religious bodies, can play an important part in promoting positive attitudes, and challenging rights violations.

Collaborating in the provision of education

NGOs in all countries in the region have been a primary source of expertise in the field of inclusive education, not only in modelling innovative approaches, but also in advocating for change and providing training and capacity building. It is important that national and local government collaborate with them, as well as other key actors, to ensure that their experiences are reflected in the design and development of programmes to achieve the right to education for children with disabilities. They can be engaged to help scale up individual programmes to national level. They can provide an invaluable resource for governments, serving to complement and strengthen their role in ensuring the right to education for children with disabilities. Open and respectful dialogue between government and civil society organisations is vital if the optimum benefit is to be achieved in moving the education agenda forward. Funding for NGO programmes to encourage the exploration of innovative practices, including those initiated and managed by the disability community themselves is also needed.

Mobilising and capacity building

The work undertaken by NGOs can play both a demand and supply side role. On the demand side, it strengthens advocacy, lobbying and ensuring accountability and transparency of duty-bearers, for example, monitoring whether governmental policies and programmes have been effectively implemented. NGOs can also play a role in helping guarantee the continuation of successful programmes when there are changes of government or administration. On the supply side, they have contributed both by capacity-building of:

- People with disabilities - through training, awareness, sensitization and via which they can participate in, for instance, social auditing and monitoring exercises of government services;
- Governments - by training and sensitization of public officials.

6.3 The international community

The international community has a key role to play in providing support to build the capacity of both governments and individuals in the realisation of the right to education for children with disabilities. And across many international and regional bodies, a commitment to inclusive education is now explicit. The UNESCO Flagship on Education for All and the Right to Education for Persons with Disabilities: Towards Inclusion, was established to act as a catalyst to ensure that the right to education, and the goals of the Dakar Framework, are realized for individuals with disabilities. The EU has developed a principled framework for promoting inclusive education.¹⁸⁷ The Council of Europe has affirmed that children with disabilities and their families have the same right to high quality and appropriate education as everyone else, in order to maximize their potential and to make their contribution to an inclusive society, and in pursuing that goal have the right to choose and receive education in an inclusive environment and to specific resources and expertise to meet their educational, therapeutic and citizenship needs.¹⁸⁸ In addition, in accordance with the principles of the CRPD, its disability activities, currently under Social Cohesion, will be moved under Human Rights. It has developed an action plan which commits to equal and early access to education within the mainstream for children with disabilities¹⁸⁹.

In its 2011 session, the UN General Assembly focused its annual status report on the CRC on children with disabilities and adopted an Omnibus Resolution on the right of the children focused on children with disabilities which makes a strong call for governments to adopt legislative and other appropriate measures, to ensure the full realization of the right to education of children with disabilities, including by providing accessible, free and compulsory primary education on the basis of equal opportunity, accessibility and inclusiveness, directed to the development of their personality, talents and mental and physical abilities¹⁹⁰. It further calls on the international community to support national initiatives addressing the rights of children with disabilities, financially and technically, as well as to enhance effective international cooperation and partnership to strengthen knowledge-sharing and capacity-building on the rights of children with disabilities in terms of policy development, programme development, research and professional training



VI – NON-STATE ACTORS

The Paris Declaration on Aid Effectiveness encourages development partners to progress towards human rights-based approaches in terms of, for example, capacity building, accountability and outcome measurement¹⁹¹. This role has been further affirmed in the OECD/DAC Report “Integrating Human Rights in Development” which call upon development partners to:

- Deepen their institutionalization of human rights considerations, looking at their systems, procedures and staff incentives and allocating adequate resource to better translate their policies into practice
- Support the strengthening of national ownership of human rights in the context of development partnerships, in particular around poverty reduction strategies
- Push for the integration of human rights into thinking and practice around new aid effectiveness processes, instruments and modalities of aid delivery.

Development partners can utilise a range of strategies in their programming for human rights-based education, including:

- **Providing technical expertise and building capacity** to help states meet their international human rights commitments.
- **Facilitating stakeholders’ capacity to claim their rights** – this will involve training and support on human rights to enhance the capacity of the disability community to advocate for and claim their rights, and the creation of opportunities for them to do so.
- **Holding states to account** – partners with a commitment to the human rights of children have obligations to hold states to account on the commitments they have made both in ratifying international human rights treaties, but also the global and regional strategies for the realisation of those rights.
- **Building strategic partnerships to strengthen efficiency** – agencies need to collaborate effectively in order to ensure the greatest possible efficiency and effectiveness in programming and development co-operation both at the global, regional and national levels.
- **Building systemic change** – investment needs to be made in programmes which have the potential to achieve large scale systemic change, although experience indicates that many equity policies imply a continued need for some targeted interventions such as compensatory and positive discrimination programmes. A human rights-based approach necessitates giving priority to the most disadvantaged. Clearly in the long run they are best served by a non-discriminating and fully inclusive education system. But until such reforms have been introduced, it will be essential to continue to target support on the most vulnerable groups. Targeted interventions will only cease to be necessary when national standards are set, adhered to and monitored by communities¹⁹².
- **Support collection and analysis of data** from a national, regional and international perspective to facilitate informed policy making. This will also allow for cross country comparisons of progress, will help identify promising programmes or practices, as well as analyse the conditions under which those best practices can be adopted by countries facing similar challenges.



Summary

**Key strategies required to realize the right of children
with disabilities to inclusive education**

1 - Government-wide measures

1.1 Political will and good governance

- Measures to promote accountability, transparency, access to justice and the rule of law
- Recognition of and commitment to comprehensive and sustained measures to tackle the social exclusion of and discrimination against children with disabilities in the education system
- Scaling up of programmes, policies and strategies that have been successful – evidence based advocacy should be used to increase the scale of impact

1.2 Government structures

- Responsibility for education of children with disabilities to rest within education ministries to bring an end to the segregation of provision
- Co-ordination across and between ministries to ensure a coherent and comprehensive approach to fulfilling the right to inclusive education for children with disabilities - for example, ministries of finance, health, social work, social protection, employment and vocational training, transport as well as education
- Devolved government structures – devolving responsibilities to the local level to strengthen local accountability, but to be accompanied by capacity building, guidance, dedicated budgets and transparent reporting

1.3 Ending institutionalisation

- Commitment to ending the placement of children in long term residential institutions through planned process of transition to community based care
- Introduction of the necessary legislative and policy framework to achieve the transition to community based alternatives to institutional care
- Strengthening cross-sectoral community-based services based on a commitment to case management as the key intervention to co-ordinate services from birth
- Strengthening support for families to build their capacities to care for children with disabilities at home

1.4 Financing

- Commitment to initial investment of expenditure to achieve system reform, while recognising that in the long term, inclusive education is a cost effective approach to achieving education for all
- Provision of an adequate flexible funding and fair allocation formula, based on a per capita model, to promote incentives for inclusive education
- Removal of requirements that children are labelled and categorised in order to receive appropriate services - rather they should be geared towards providing flexible, effective and efficient responses to learners' needs
- Introduction of effective tracking of expenditure to strengthen accountability, transparency and ensure more effective use of funds

1.5 Guarantee the right to non-discrimination

- Ratification of the CRPD and Optional Protocol
- Introduction of legislation prohibiting discrimination on grounds of disability
- Introduction of accessible and affordable mechanisms for challenging discrimination
- Provision of information to children with disabilities and their families on their right to non-discrimination, its implication and how to challenge violations

1.6 Strengthening information systems

- Introduction of a common definition of disability based on the ICF and rooted in the social model of disability
- Development of comprehensive education information management systems leading to improved collection of data on prevalence, developments in progressing inclusive education, as well as disaggregated data on educational access and outcomes
- Investment in capacity building in data collection

1.7 Learning from what works

- Systematic monitoring and evaluation of innovative programmes to promote inclusive education
- Analysis and dissemination of the lessons learned
- Government investment in mainstreaming the emerging lessons into models of inclusive education across the sector
- Further investment in the NGO sector to explore new approaches to achieving improved educational outcomes for children with disabilities

1.8 Partnerships and participation

- Commitment to investment in partnerships with families, children, NGOs and DPOs and all other all key stakeholders in all stages of the development of inclusive education
- Investment in removing the barriers that impede parental involvement in the education of children with disabilities including lack of awareness of educational alternatives, fear of hostility within communities, poverty and lack of information on their children's rights
- Respect for the contribution families are able to make as active partners throughout the life cycle of their children's education

1.9 Capacity building and awareness raising

- Investment in capacity building at all levels to promote awareness of the rights of children with disabilities to inclusive education and to the development of the necessary systems and practices for its attainment– including national and local government officials, professionals working with children with disabilities within education, social work, and health.



2 - Education policies and strategies to promote the right to access education

2.1 Removing the barriers to inclusive education

- Removing the physical, communication, mobility and sensory barriers to education including investment in development of public spaces that are both safe and inclusive, providing that all education environments have physically accessible features and all the necessary conditions for learning, and introducing accessible transport
- Addressing attitudinal barriers by public awareness campaigns, use of appropriate language to challenge negative stereotypes of disability and encouraging the media play a positive role in challenging the barriers to inclusion
- Addressing socio-economic barriers through provision of appropriate, accessible and non-stigmatizing social protection measures

2.2 Working with and supporting parents

- Provision of parental education programmes to help parents support their child's learning, for example through parent-to-parent counselling, mother-child clubs, or civil society outreach through house to house visits
- Building partnerships between them and local schools, encouraging them to join school boards and developing programmes which explicitly address their concerns.

2.3 Early childhood education and care services

- Investment in early assessment and intervention to both prevent institutionalisation and promote the possibility for effective and appropriate support
- Provision of comprehensive ECCE providing care, stimulation, parental support and access to relevant services
- Developing universal access to inclusive pre-school provision

2.4 Ensuring access to and availability of inclusive education

- Introduction of legislation and policies establishing the right to inclusive education which includes a clear definition of inclusion and the specific objectives it is seeking to achieve, as well as guaranteeing children with and without disabilities the same right to access mainstream learning opportunities, with the necessary support services
- Provision of a consistent framework for the identification, assessment, and support required to enable children with disabilities to flourish in mainstream learning environments
- Introduction of an obligation on local authorities to plan and provide for all learners with disabilities within mainstream settings and classes, including in the most appropriate languages and modes and means of communication.

2.5 Creating inclusive learning environments

- Building inclusive cultures within schools through:
 - Translation of national policies of inclusion into school based policies setting out both the commitment to non-discrimination and inclusion, including for example, the development of a child friendly school framework, school self-assessments as well as school development plans.
 - Engagement of teacher associations, school boards, parent-teacher associations, and other functioning school support groups with programmes to increased their understanding and knowledge of disability

- Ensuring that such policies are reflected in all aspects of the life of the school: classroom teaching and relationships, school and board meetings, teacher supervision, school trips, playground behaviour, budgetary allocations, and any interface with the local community or wider public.
- Ending segregation within schools by:
 - Ensuing a commitment to inclusive classroom teaching.
 - Developing municipal policies for inclusive classroom environments, involving schools, teachers, municipal officials, school administrators, parents and children, as well as other stakeholders
 - Provision of support within mainstream classes to children with disabilities.
 - Monitoring schools on a regular basis to ensure that segregation is not taking place either formally or informally. Monitoring should involve parents of children with disabilities in order that systems are transparent and accountable to them and their children.



3 - The right to quality education

3.1 Securing the appropriate individualised support for children with disabilities

- Introduction of IEPs as a key strategy for supporting children with disabilities in inclusive settings
- Involving students, parents and all relevant staff in the design and setting of targets
- Provision, where needed, of holistic packages of care involving support, not only in children's education, but also in the provision of health or social care services, technical assistance, and psychological support
- Establishing partnerships between service providers, NGOs, research and teaching institutes to support regular providers of education, health care and social care to provide the best possible all round care to enable children to benefit to the fullest possible extent from their education.

3.2 Developing inclusive curricula, teaching and learning methods

- Promotion of active, participatory and child centred learning and teaching methods to allow children to work at an appropriate pace, in groups or individually, and partnering children with and without disabilities as peer educators to enable mutual learning
- Adopting a curriculum to enable all children to acquire the core academic curriculum and basic cognitive skills, together with essential life skills, including respect for human rights.
- Creative use of assistive technology to make it easier for students with disabilities to learn, including physical resources, computers and use of ICTs

3.3 Introduction of rights based and inclusive student assessment

- Adoption of a holistic view of student assessment that considers academic, behavioural, social and emotional aspects of learning
- Ensuring that children with disabilities are able to fulfil their educational potential through a system of individualized supports, which emphasize treatment according to need, and aim toward equitable success that is measured broadly.
- Measuring student progress in the general education curriculum, with clear standards and benchmarks and use multiple forms of student assessments to inform and facilitate teaching and learning
- Introduction of school self assessment systems that measure whether commitments to inclusive education are being fulfilled and to help identify changes and improvements necessary for moving forward

3.4 Investment in teacher training

- Reviewing the content of teacher training curricula to ensure that it embodies child centred methodology, teaching in inclusive and multi-cultural environments, using individual educational plans to adapt and support children with specific educational needs, human rights, and in particular, recognition of non-discrimination as a human right and positive strategies for promoting tolerance and tackling discriminatory behaviour
- Providing increased levels of opportunity for practical work experience as part of teacher training
- On-going, high quality professional development opportunities for teachers that address inclusive methodologies

3.5 Support within schools for teachers

- Ensuring adequate staffing levels to provide teachers with the time and resources needed to achieve effective inclusive education
- Provision of strong support from school leadership, with ownership by the governing body, and all school policies consistent with the goal of inclusive education
- Involvement of family and community as resources in classrooms to support individual learning programmes and increased individual attention that children with disabilities often need.

3.6 Establishing resources to provide specialist support

- Building multi-disciplinary support through a range of different specialist services, organisations and resource centres, and professionals working collaboratively to provide a comprehensive and seamless service to support inclusive education.
- Development of collaborative practice and provision through networks of learning communities
- Utilising parental expertise as a significant source of support both to other families and to schools.
- Improving teachers' conditions of service to ensure that they are adequately supported, paid and respected.

3.7 A child centred, safe and healthy environment

- Establishing close links between health and education services to provide a connection between school, community and the family, revolving around the child's well-being.
- Promoting effective community partnerships to ensure positive interaction between the school and the community
- Developing health and safety standards for the building of schools to reflect the needs of children in inclusive settings
- Providing safe and stimulating opportunities for play and recreation for all children
- Ensuring that, in the case of natural and man-made disasters, all children are easily able to evacuate any buildings and routines are in place on how to respond in such situations.



4 - Respect for rights within the learning environment

4.1 Right to respect for identity, culture and language

- Recognition of the right of children under international law to recognition of their cultural and linguistic identity
- Recognition of sign language as a language which must be recognised within the meaning of the right to language and culture
- Recognition of children's right to respect for their language and culture within their education and schooling

4.2 Respect for children's participation rights

- Introduction of legislation guaranteeing school children the right to establish democratic bodies such as school councils, and requiring that such bodies comply with principles of non-discrimination and promote inclusion of children with disabilities, as well as both girls and boys.
- Development of guidance for local municipalities and schools on developing opportunities for children to be heard, which emphasises the necessity for inclusive and non-discriminatory approaches.
- Introduction of mechanisms for ensuring that children are able to express a view on school placements, and have their views taken seriously in accordance with their age and maturity.
- Development of school policies in partnership with children on rights, inclusion, respect for diversity and non-discrimination
- Introduction of safe, accessible and confidential complaints mechanisms through which children with disabilities can raise concerns

4.3 Right to respect for personal and physical integrity

- Explicit prohibition of corporal and other humiliating punishments by law, and reinforced by other necessary measures, reinforced by clear enforcement mechanisms, and strong messages that all forms of violence against children is unacceptable
- Establishment of clear codes of conduct reflecting child rights principles for all staff, students and their families and communities, which include accessible complaints or reporting mechanisms which can be used safely and confidentially
- Training and support for all school staff in the use of effective non-violent and respectful classroom management strategies, as well as specific skills to prevent patterns of bullying and other gender-based violence and to respond to it effectively.
- Emphasis on tolerance, respect, equity, non-discrimination, and non-violent conflict resolution within the curriculum, textbooks and teaching methods
- Involvement of children themselves, including children with disabilities, as active agents in building safe environments, challenging bullying, prejudice and discrimination and providing peer-to-peer support.

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Abbreviations

AT	Assistive Technology
CBR	Community Based Rehabilitation
CEECIS	Central Eastern Europe and Commonwealth of Independent States
CFS	Child Friendly Schools
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
DAC	Development Assistance Committee
DPO	Disabled Persons Organization
ECCE	Early Childhood Care and Education
EFA	Education for All
EU	European Union
GDP	Gross Domestic Product
ICF	International Classification of Functioning
ICTs	Information and Communication Technologies
IDA	International Disability Alliance
IE	Inclusive Education
IEP	Individualized Education Plan
NGO	Non-governmental Organization
OECD	Organization of Economic Cooperation and Development
UNDP	United Nations Development Programme
UNESCO	United Nations Scientific and Cultural Organization
WHO	World Health Organization