

Closing the gap

Inclusive education for girls with disabilities in Kenya



Education is one of the most powerful and proven vehicles for sustainable development.



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Between 2000 and 2014, the global number of out-of-school children at primary education level dropped from 100 million to 61 million. While this represents significant progress, approximately one third of children that remain out of school are children with a disability.¹

The barriers experienced as a result of disability are amplified by other factors including race, gender and poverty. Disability and gender are considered among the most influential causes of marginalisation in education. Their intersection places girls with disabilities most at risk of never entering or completing their education. They are also more likely to experience isolation, stigmatisation, exclusion from community life and abuse.²

It is clear that there is still significant work to be done in order to achieve the aim of Sustainable Development Goal Four: 'Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all'. Progress on girls' education, especially for disabled girls, is critical to eliminating gender and wealth disparities and establishing equal access to quality, inclusive education.

This report outlines the impact of Leonard Cheshire's inclusive education project in Kenya, funded by the UK Department for International Development's 'Girls' Education Challenge'. Delivered over four years, the project supported over 2,000 girls with disabilities across the Nyanza Lake Region of Kenya to enrol in primary school. Through highlighting what was achieved, along with lessons learned, we hope to support the design and delivery of future inclusive education projects and help create the systemic change required to meet the ambition of education for all.

¹ UNESCO (2006) Strong Foundations: Early Childhood Care and Education, EFA Global Monitoring Report 2007, Paris: UNESCO (www.unesco.org).

² UNESCO (2015) Education for All 2000–2015: Achievements and Challenges, EFA Global Monitoring Report 2015, Paris: UNESCO (www.unesco.org).

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1. A bit about us and our inclusive education programme

Who we are

Leonard Cheshire supports individuals to live, learn and work as independently as they choose, whatever their ability. Led by people with experience of disability, we are at the heart of local life – opening doors to opportunity, choice and support across the globe.

Like our founder, we believe that diversity creates a world of possibility. Through pioneering research and innovation we're building a fairer, more inclusive society. One that recognises the positive contributions we all make, and where we are all proud to play our part.

We support more than 30,000 people with disabilities in the UK and around the world each year. With our partners in Africa and Asia, we provide inclusive education and livelihoods programmes that support people with disabilities in 15 countries. We also research disability and poverty, and work with the United Nations, national governments, disability organisations and development actors to influence policy and make sure everyone has the opportunity to live as they choose.

Our inclusive education programme

Inclusive education is a core programme within Leonard Cheshire's global work. Children with disabilities face a range of barriers to accessing and remaining in education including:

- Attitudinal and behavioural barriers related to social norms
- Infrastructural and environmental barriers
- Policy barriers
- Resource barriers

Our model delivers a range of interventions to address these barriers. We take a systems approach, working to create sustainable change at an individual, community, school and policy level, both locally and nationally.

Definitions

Inclusive education is based on the concept that education should address and respond to the diverse needs of all learners. This is done through increasing participation in learning, cultures and communities, and reducing exclusion within and from education.

This approach is distinct from **special education**, which places children with disabilities in specialist schools, excluding them from the community and mainstream education; and **integrated education**, which recognises the benefits of children with disabilities attending mainstream schools, but separates learners into specialist classes or units.



Figure 1: Leonard Cheshire's inclusive education model

Pioneering inclusive education strategies for disabled girls in Kenya

In Kenya, people with disabilities are among the most marginalised, socially excluded and poorest groups. Children with disabilities are routinely denied access to a meaningful, quality education and this affects girls disproportionately more than their male counterparts. In 2003, Kenya introduced a policy of universal free primary education. While overall enrolment in primary education has increased since then, the number of girls with disabilities accessing primary schools has remained low and the number dropping out is increasing.

In Kenya, girls with disabilities are inhibited from attending and remaining in school due to multiple and often intersecting barriers, including:

- Limited access to rehabilitation services and support
- Poverty, financial constraints and resource allocation
- Lack of consideration in planning of education services and curriculum development
- Inaccessibility of school infrastructure, buildings, materials and teaching methods
- Stigma, isolation, abuse and discrimination from families, community members, peers and teachers

In order to help address these issues, Leonard Cheshire secured funding from the UK Department for International Development's 'Girls' Education Challenge'. Funds were allocated to implement our inclusive education model across 50 schools in the Nyanza Lake Region of Kenya, one of the poorest regions of the country.³ Delivered over four years from 2013–2017, the project aimed to support 2,050 girls with disabilities to enrol in primary school as well as achieving:

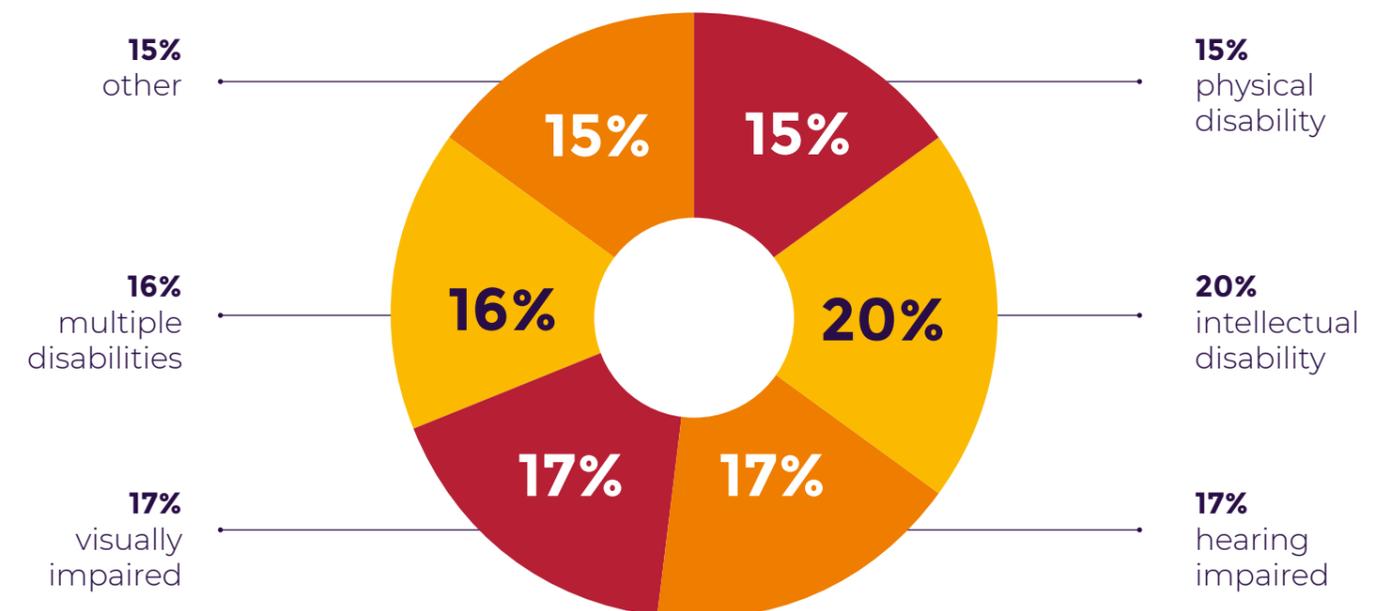
- Increased awareness and capacity of duty-bearers and service providers to respond to the needs of disabled girls
- A sustained improvement in the enrolment, attendance and retention of disabled girls in mainstream primary schools
- Improved quality and accessibility of mainstream education for disabled girls, resulting in improved learning outcomes
- Improved knowledge and evidence to demonstrate the effectiveness of inclusive education

Ultimately the goal of this project was to improve the life chances of girls with disabilities. Achieving primary education increases girls' opportunities to transition to further education and improve their life skills. It increases their opportunities to access health information and services, achieve greater financial stability and security through sustainable livelihoods and increases social inclusion and participation.



Who took part?

The majority of the girls were aged from 7–19, with an average age of 12 years old. They had a wide range of disabilities and impairments. The education level of the girls was evenly split with approximately 10% of the group in each school grade from pre-school through to Class 8.



³ 2015 Economic Survey, Kenya National Bureau of Statistics

2. How our programme works – a sustainable model

Girls with disabilities face barriers to education at multiple levels. Our programme model outlines the range of interdependent interventions we deliver in order to address these barriers and create sustainable change on for individuals and communities.



Individual

- **Identification and enrolment** – individual girls were identified and supported to enrol in school by volunteers trained as Community Resource Workers.
- **Assessment** – the needs of the girls were assessed. Where required, medical referrals are made or assistive devices were provided.
- **Additional vulnerabilities** – girls who face additional barriers were provided with resources such as bedding, uniforms, sanitary towels or shoes.
- **Child protection** – training, resources and strategies were put in place to support girls who have experienced or are at risk of abuse, including gender-based violence.

- **Psycho-social support** – girls and their families were provided with one-to-one psycho-social support in order to understand and address barriers and concerns.

Family and community

- **Parent Support Groups** – Parents were invited to participate in support groups trained to support and advocate for the rights of girls with disabilities as well as providing peer support.
- **Male mentors** – In order to address gender based patriarchal norms fathers were trained as peer mentors, sensitising other men to the needs and rights of girls with disabilities.
- **Community mobilisation and sensitisation** – Forums and social/cultural events were held to sensitise communities to the needs and rights of girls with disabilities.
- **Media training** – 24 media personnel were trained on issues of disability and reporting.
- **Livelihoods** – The cost of schooling can often be a significant barrier for families. In order to address this livelihoods and resource mobilisation training was offered through the Parent Support Groups.



Schools

- **Training** – teachers, and those who train them, were trained on inclusive education approaches.
- **School infrastructure** – modifications, such as ramps and support rails, were put in place to make school buildings more accessible.
- **Child-to-Child clubs** – clubs were established for disabled and non-disabled children to participate in extra-curricular activities, interact, play together and build relationships.
- **Resource mobilisation** – the Boards of Management at each school received support to enhance financial leverage and generate additional resources.
- **Quality assurance** – Quality Assurance Officers who inspect schools were offered training so they could accurately assess the delivery of inclusive education.



Local and national policy and systems

- **County Working Groups** – key agencies came together regularly to advocate for improved legislation and policies to meet the needs of children with disabilities.
- **Local leadership** – key local leaders and officials were targeted to engage with and drive forward local policy initiatives.
- **Curriculum development** – Working with the Kenya Institute of Curriculum, we advocated for the revision of the teacher training curriculum to include inclusive education approaches.
- **Data capture** – we worked with the Ministry of Education and UNICEF to improve monitoring systems to track children with disabilities.
- **Policy review and development** – we developed policy recommendations in collaboration with partners to influence the development of new education policy.

3. Overcoming barriers – what we have achieved

Overall, our inclusive education model in Kenya has achieved significant impact for girls with disabilities, their families and the wider community. The success of the project highlights the power of taking a broad, systems-based approach to tackling the many layered, interconnected and often deeply entrenched barriers that girls with disabilities face.

We have supported thousands of girls to go to school

Ultimately, the success of this project can be measured by how effective it was in enabling girls with disabilities to enrol, regularly attend and increase learning outcomes at school. Over the course of the project, 2,180 previously out of school girls with disabilities were identified and enrolled in school, exceeding initial targets. Alongside 305 girls who were already enrolled, their needs and personal barriers to education were assessed and addressed. This included providing medical intervention and assistive devices, alongside practical items such as sanitary towels, uniforms and bedding.

66% of girls in the intervention group achieved the highest level of numeracy, compared to 42% in the control group

From our final external project evaluation, it was found that the girls with disabilities who participated in the project were more likely to have consistently attended school. 88% reported attending school on most days it was open. In addition, 92% of girls with disabilities in the project schools (intervention group) had been enrolled in school for at least a year. This shows that the project was also successful in improving school retention compared to 42% in the control.

By the end of the project, the girls who participated were more likely to be at the highest level of literacy and numeracy compared to a control group, who did not receive the intervention.

Critically, girls with disabilities demonstrated improved learning outcomes as a result of the project. Using a standard assessment tool, 40% of the girls in the intervention group achieved the highest level of English literacy compared to 20% of girls with disabilities in non-project schools (control group). 44% achieved the highest level of Kiswahili literacy compared to 19% in the control. Improvements were also recorded in numeracy, with 66% of the intervention group reaching the highest level, compared to 42% in the control.

Our evaluation highlights that, beyond increased educational attainment, participants also reported a range of social and emotional benefits. Girls felt more positive about their futures, with 99% reporting that they felt they had the same opportunities as others. Families also experienced raised aspirations, with 92% of caregivers surveyed stating that they now want their girls to go on to secondary school.

Through the project, girls with disabilities were able to participate more fully in family and community life, building friendships and feeling valued as members of society. For example, at the end of the project over half (54%) of the girls were members of child-to-child clubs (see page 23). 86% of caregivers said that their child had good friends in the village. Overall, 68% of girls with disabilities who participated in the project reported having higher self-esteem and confidence as a result. An interesting outcome of this project was that

participating girls were found to be carrying out more day-to-day activities in the home as a result. While many development programmes focus on reducing the amount of time girls spend on care and domestic work, increased participation in household activities can be seen as an indicator of a change in attitudes within the family about the capabilities and the inclusion of a disabled child. Careful monitoring is required to ensure that they do not become overburdened by household chores. However, sharing responsibility for tasks can mean becoming an active member of the family and having an increased sense of belonging.

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44% of girls in the intervention group achieved the highest level of Kiswahili literacy, compared to 19% of the control group

Meeting disability and health needs

A key priority of this project was assessing the needs of each individual girl and mobilising the right resources to ensure that they are provided with health care and assistive devices. For example, Millicent had to drop out of school due to uncontrolled epileptic seizures. Through our project she was assessed at one of the Educational Assessment and Resource Centres (EARC) and referred to Kisumu General Hospital. Here her diagnosis of epilepsy was confirmed and she was prescribed medication. Health care check-ups were also made available to monitor the efficacy of her medicine. As a result Millicent is now able to regularly attend school.

In order to ensure the sustainability of this element of the project we focused on leveraging existing structures and resources, such as the government-run EARCs. We worked with these local centres to improve efficiency and local collaboration. For example, where distance to an EARC was a barrier we facilitated mobile centres. This enabled more community members to access the resource and brought to light more cases of disabled girls who were previously kept away from the public. In addition, many of the EARCs lacked specific assessment equipment or had outdated, inaccurate tools. Through fostering relationships with local special schools the EARCs were able to borrow specialist equipment when needed and share resources.



A bright future

Lucy Awour is 16 and lives in a village near Kisumu in Kenya. Lucy has a hearing impairment, which caused her huge difficulties with learning and socialising at school.

'I was given a hearing aid by Leonard Cheshire. Before, I was not able to come to school, I was so sad. People were not kind. They would laugh at me and would abandon me. Now everyone around is kind, they understand my problem.'

'I joined a Child-to-Child Club. It helped me learn that children with disabilities can be accepted and can even do better than children without disabilities. Now my friends treat me the same. In the future I want to be a doctor. I will study hard.'

Lucy's mother Celestine says: 'People used to laugh at her because of her disability. This has changed her life. She now has confidence and she is performing very well at school. The change that I've seen has been very big. Her future is bright, I'm so happy with her ambition.'

**'Her future is bright,
I'm so happy with
her ambition.'**

Celestine, Lucy's mother

We have increased understanding of disability among families and communities

While the attainment of individual girls with disabilities was the ultimate aim of this inclusive education project, multiple factors were critical to facilitating this outcome. Primary among these were the attitudes and behaviours of family members, guardians and the wider community. These stakeholders are critical gatekeepers, influencing the level of inclusion of girls with disabilities

Parent Support Groups formed by each of the participating schools were an essential element of creating change at a family and community

'Being inside the Parent Support Group you gain more experience of dealing with children with disabilities because of the stories we share. But when you are out there you don't get that experience... We shared telephone numbers and if you have a challenge you can speak to the group members and we will assist accordingly.'

Parent in Kisumu East

level. These groups provided a mechanism for peer support, enabling parents to connect, share experiences and become advocates in their communities. They were a highly effective avenue for the sensitisation of the community on the rights of disabled children, particularly girls.



83% of caregivers stated that they felt it was now usual to send girls with disabilities to school



Feedback from caregivers highlighted the direct link between these activities and the attendance and retention of girls with disabilities at school. 83% of caregivers stated that they felt it was now usual to send girls with disabilities to school. Financial constraints were reported as the most common reason why their daughters were previously not in school. The groups were therefore provided with training on resource mobilisation. Through initiating income-generating activities, parents were enabled to cover some of the costs of schooling.

The role of **Community Resource Workers** was also a critical part of changing attitudes and behaviours towards girls with disabilities. In addition to providing one-to-one psycho-social support to girls and their families, these workers carried out community-based sensitisation activities. Their position as a trusted member of the community supported their ability to influence others. Along with the Parent Support Groups, this helped to create a more positive perception of girls with disabilities. A clear example of this was the fact that bullying, discrimination and harassment at and on the way to school were initially highlighted as significant barriers for girls with disabilities. As a result of the project, reports demonstrated a reduction in experiences of stigmatisation, discrimination and abuse perpetrated by members of the community.

86% of caregivers said that their girls have good friends in the village

This impact was also reflected through the strengthening of child protection mechanisms in the community and schools. Volunteer Children Officers were trained and deployed to identify cases of child abuse. Over the course of the project, 10 cases were reported and investigated. Awareness of child protection and children's rights was increased, becoming regularly discussed at community meetings. As a result, 85% of duty bearers said there had been a change in how child abuse cases were managed, and they were now being handled in a more effective and positive manner.

73% of parents were satisfied with the school environment



Male mentors

From the outset of this project we recognised the significant role men play, as well as the influence of deeply entrenched socio-cultural norms around girls, and girls with disabilities in particular.

In Kenya, fathers and other male caregivers tend to act as primary decision makers when it comes to critical aspects of family life, including girls' education. Men often hold damaging attitudes, such as misperceptions over the causes of disability and placing blame on the mother. This can have a disproportionate effect on the lives of girls with disabilities and their families, such as the father leaving the family and/or disowning the child.

We therefore implemented an innovative approach with the aim of engaging men with their daughters' education, and addressing negative attitudes and behaviours.

We trained 250 male mentors, 50 in each district, on a range of topics to encourage them to support the education of girls with disabilities socially, psychologically and financially. We encouraged them to become more involved in their children's lives and to become role models for other men. Overall, the training positively impacted the men's awareness and understanding of disability issues and the specific challenges faced by girls. Involving the girls with disabilities themselves with the training was very effective in enhancing the men's awareness of equity and inclusion.

The initiative has slowly but persistently gained a foothold as the majority of fathers and male caregivers were reached and more men started to attend the Parent Support Groups. Men have become more involved in the lives and education of their girls with disabilities, taking them to assessments and paying school fees. The slow uptake of new ways does however highlight the deeply entrenched nature of the patriarchal attitudes of the community. It will take time and consistency to achieve transformative change, but the male mentorship approach shows promise as an effective strategy for driving it forward.



Support starts at home

Perez is the mother of Milcah, who was enrolled in school following support from Leonard Cheshire. Perez has been proactively involved in the Parent Support Group at Milcah's school. The resource generating activities carried out by the group have been essential in supporting Milcah's ongoing medical, rehabilitation costs. The training and support offered through the group has also given Perez the skills and confidence to support Milcah more effectively at home.

She says, 'Out of the group, I have learnt how to manage and provide for her needs. But I also see that the group has equipped me with the necessary skills to help Milcah in her daily life. It has helped me build my confidence in being able to understand Milcah and treat her as any other child. In areas where I had fears that I may never be able to respond to her needs, I now feel very confident that I can support her. When I look at Milcah back then and who she is right now and what she is able to do, I am confident that she is going to have a very bright future'.

'It has helped me build my confidence in being able to understand Milcah and treat her as any other child.'

Perez, Milcah's mother



'The attitude of teachers as well as parents has greatly changed. Initially they regarded those children [with disabilities] as people who cannot learn with others, but now they accept them. In fact with that change of attitude it has brought a change in performance in this school and performance has even gone up.'

Quote from Head teacher in Siaya

We have supported schools to become more accessible and inclusive

To meet the ambition of achieving and sustaining an inclusive education system it is essential that the accessibility and inclusivity of the school environment and teaching practices are addressed. Prior to the start of our project, parents reported that their fears around the ability of the school to support their child and their safety at school were among the key reasons for girls with disabilities to have never enrolled, or dropped out of school. These decisions were also often influenced by teachers with negative attitudes towards children with disabilities.

672

teachers at 50 schools were involved over the course of the project

550

assistive devices were provided to girls with disabilities

672 teachers at 50 schools were involved over the course of the project, receiving inclusive education training and using the training within their classrooms. The environment and buildings of each school were assessed and appropriate physical adaptations were made to improve accessibility. This included installing ramps and handrails, improving lighting and adjusting class layouts and furniture to meet the needs of the pupils. This resulted in a significant improvement in caregiver satisfaction, with 73% stating that they were satisfied with their girl's school environment. At the beginning of the project, it was established that a number of teachers did not have inclusive

education skills. As a result they did not feel competent to teach children with disabilities. The project worked with the Special Education Department to deliver training to teachers at each of the participating schools. The training included the theory behind inclusive education and child-centred learning as well as implementing inclusive lesson plans, classroom management and creating accessible materials.

To assess the effectiveness of the training, teachers' pre- and post-intervention knowledge, attitudes and practice on inclusive education were compared. The research found that the training positively shifted teachers' knowledge and attitudes about disability and inclusive education. To support

this it was also found that the training was effective in reducing teacher concerns about teaching children with disabilities. Feedback from teachers did suggest that more training was needed in order to upskill teachers in supporting children with specific disabilities, above and beyond the general principles of inclusive education. Overall however, acquired skills not only helped improve the performance of the participating girls, but also the overall school performance, as shared by a number of head teachers.

85%

of girls reported they had positive experiences in school

Child-to-Child clubs

The risk of bullying and peer discrimination is a legitimate fear which can make parents reluctant to send their children with disabilities to mainstream schools. In order to address this, Child-to-Child clubs were established in each of the participating schools. These clubs focused on bringing children with and without disabilities together to provide opportunities for social interaction and friendships, supporting positive inclusion in the school culture. Activities were designed to help build confidence and help non-disabled children better understand disability as well as tackling issues of gender bias.

The clubs and the interaction they fostered helped to create a positive and friendly culture within schools. This significantly reduced peer to peer discrimination and increased positive experiences and feelings of belonging. Pupils understood each other's needs, and learned to appreciate and support one another. The clubs will also support the sustainability of our impact. As these individual children grow up they will take a more positive and inclusive mind-set towards disability and gender with them to their future social, professional and cultural lives.



Teaching all children together

Education policy in Kenya for children with disabilities is based around special education, which can result in children being sent hundreds of kilometres away from their family to attend a special school. Most teachers do not get a great deal of information about special needs, which in combination with social-cultural norms results in negative attitudes towards having children with disabilities in their class.

Nelson Abonyo, a teacher trained in delivering inclusive education as part of the Leonard Cheshire project, told us, 'Teachers did not understand how to teach these children in the classroom. In a situation where we segregate and take children to special schools, it is like saying we have an average person and a below average person. That is why I am saying inclusive education puts people on a par so they start together.'

As a result of the project, the teachers that Nelson works with have shown more positive and accepting attitudes towards inclusive education and children with disabilities, feeling more confident to support them. Following training on delivering inclusive education Nelson said, 'As a teacher, I feel accomplished to handle all the children together without segregation. If I am able to support a child with a hearing impairment and make some impact with their social, mental or spiritual development, then that is a bigger contribution.'

**'Inclusive education
puts people on a par
so they start together'**



'I thank Leonard Cheshire for training us on inclusive education and disability. Our work is based in the field and we go to all the schools within the county. I ensure that all the schools are disabled friendly and make recommendations to the ministry. Previously I did not understand that disabled children in regular schools face [a] myriad of challenges such as inaccessible environment[s]. We believed that all of them should be in special schools.'

Quality Assurance Officer from Ministry of Education, Science and Technology, Kenya

The impact of the successful development of policy at a national and local level will have a wide-ranging effect on children with disabilities in Kenya. At the beginning of the project, inclusive education was not seen as a strategy within the national education programme. It therefore had no strategic ownership and head teachers were not committed, or sufficiently resourced. However, following the policy and advocacy work, significant progress has been made. Education officials and teachers are making inclusive education a greater priority due to the strong support from national government.

We have influenced policy at a national and local level

In order to create long-term, sustainable change it is critical that inclusive education projects move beyond the individual level. Working with local and national policy makers supports the process of driving forward systematic change at a broad level. To that end, County Working Groups were established in each of the four project Counties. These groups brought together a wide range of stakeholders from government ministries, including education and health, Disabled People's Organisations and County Assembly Members. The groups met regularly with the aim of advancing policy agendas supportive of inclusive education and advocating for the rights of people with disabilities.

At a local level, by the end of the project these groups had successfully passed a Disability Act in Homa Bay and Kisumu Sub-County and an Early Child Development Act, also in Homa Bay. Draft Disability, Early Child Development and Bursary Bills were also in the final stages towards enactment in

the other Sub-Counties. These successes highlight the strength of the County Working Groups in bringing together a diverse range of stakeholders to work more strategically with the government. In addition, inclusive education training was provided for education officials such as County Directors of Education, Directors of Special Education and Quality Assurance Officers.

Collaboration has also been demonstrated to be an effective tool at a national level. As part of this project we worked with the national coalition Action for Children with Disabilities to inform the Ministry of Education's review of their Special Education Policy. Once passed, this policy will impact on the lives of all children with disabilities in Kenya. We also contributed to the review of the national curriculum and achieved support to include inclusive education as part of the teacher training curriculum. As a result of partnership working with UNICEF we successfully developed five new disability indicators for the national Educational Information Management System. This will ensure the continued collection and collation of disability data, which will help inform policy formulation and resource allocation.



4. The lessons we've learned

We have identified several key lessons around approaches which worked particularly well, as well as areas where we need to adapt future programme delivery to address persistent issues.

Working in partnership is key

Taking a proactive partnership working approach has been essential to the success of this project. It has added value to delivery, ensured cost effective and efficient use of resources and added weight to advocacy and policy work. Inclusive education in Kenya was previously seen as a project rather than a strategy within the national education programme. Therefore there was no ownership for the interventions and stakeholders were not totally committed nor had they allocated resources.

A multi-sector approach which invites the participation of government institutions, NGOs, private companies, schools and Disabled People's Organisations creates sustainability through shared ownership of objectives. Supporting existing institutions to become more inclusive can achieve long-term, broad-based impact, beyond the reach of a single project. Working with the children's department to increase awareness among child protection officers of the additional vulnerabilities of children with disabilities, and strengthen community child protection systems, is an excellent example of this.

Involving men and boys is essential to success

The involvement of men as key decision makers is essential to the success of inclusive education projects focusing on the education of girls. The engagement and participation of chiefs, faith leaders and local officials was found to be highly influential. For example, the attendance of these high profile men at community events such as Inclusive Education Days enabled the community to respond better to the messaging and make inclusive education their responsibility.

Our mentorship approach demonstrated positive, albeit slower, progress towards improved attitudes and behaviours. As with any intervention challenging deeply rooted social norms, particularly relating to power relations, these interventions need time and consistency to achieve real, sustained change. This suggests that continued activities to engage fathers with their daughters' education would be highly beneficial.

While the project specifically focused on the education of girls with disabilities, approximately 833 boys with disabilities benefited from the school level interventions. While girls with disabilities are considered amongst the most excluded due to the double disadvantage of their gender, boys with disabilities are also affected by discrimination and exclusion. Feedback from stakeholders highlighted that the project's focus on girls alone left behind vulnerable boys who could have also deeply benefited from the support available. In future, projects should consider how to balance the different but similar needs of both groups.





We need to think beyond primary school

By the end of the project, 92% of families wanted their child to continue their education into secondary school. However, 192 girls who had enrolled in secondary school said that the lack of an inclusive education approach at secondary school has made this transition difficult. Barriers of physical access and teachers' limited knowledge, attitudes and skills in inclusive practice remain. There is a clear need for continuing work across the education system which enables girls with disabilities to successfully transition into further education, and provides them with opportunities to raise their employment opportunities and life chances, such as vocational training.

Improving financial stability makes education more sustainable

Poverty remains a significant barrier to education for many girls with disabilities. Many parents from participating families had limited education themselves and tended to have less household income available to meet the needs of their children. The income generating activities carried out by the Parent Support Groups were an essential part of supporting families to sustain their daughters' education. The funds were used by families to cover ongoing costs such as transport, medicine and fees.

The cost of resources was a priority for families. Where the project provided direct resources such as assistive devices, it became clear that work was needed to manage expectations around covering the costs of longer-term maintenance, repair and replacement. As part of addressing this, in future our inclusive education projects will further increase the focus of Parent

Support Groups on training families around resource generation, vocational training and financial management such as table banking. Through improving their financial stability, families will be in a stronger position to support their child's education in the long-term.

Similarly, the ability of schools to better mobilise resources is essential for the sustainability of inclusive education. Working to build the capacity of the Boards of Management of the schools to collaborate with their alumni and other stakeholders such as the Ministry of Education was critical. This supported the ongoing development of the accessible school environment and maintained the progress made.

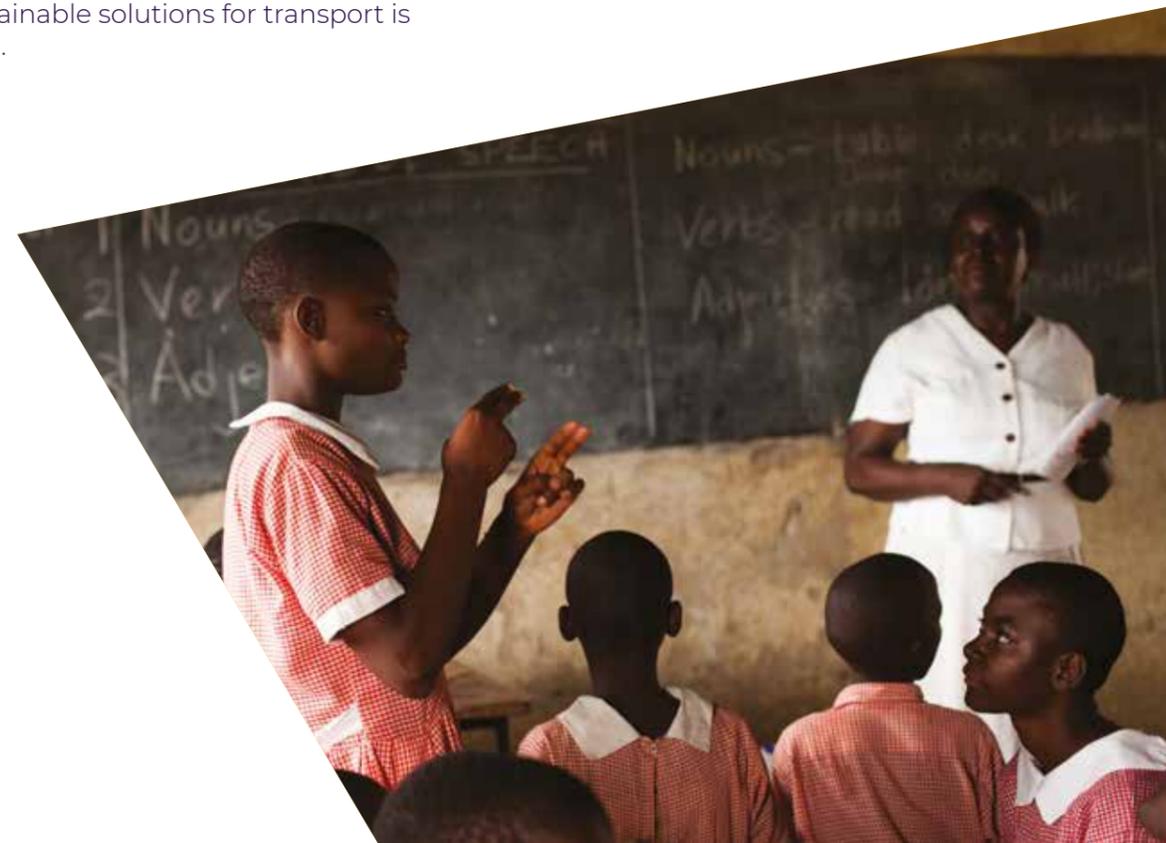
Some barriers are more persistent than others

While this project was successful in addressing a wide range of barriers experienced by disabled girls, some persisted and require further consideration for future projects.

Transport remained a significant issue for many girls, particularly those with physical disabilities. Many were satisfied that they could attend their closest school. However, for some distance remained a barrier. Infrastructure challenges can make travelling to school independently impossible. Where the cost of purchasing accessible transport is a barrier the increased focus on resource generation may be an effective strategy. Collaboration with other organisations and communities to come up with creative, sustainable solutions for transport is also essential.

In addition, for some girls, particularly those with intellectual, complex or multiple disabilities, the support available through this project was not sufficient to meet their learning needs. For example the time available for teacher training did not allow for in-depth exploration of specific types of disability. More time could be focused on the development and delivery of individual education plans. This would allow for children to be offered more personalised care and/or home schooling with scheduled teacher visits to enable their participation in education. Standardised assessment and monitoring tools, that focus on progress in numeracy and literacy, are ill-suited to the needs of children with intellectual and complex disabilities and fail to capture their progress.

For future inclusive education projects we aim to develop a specific adaptive pathway for transition, focusing on those children with more severe learning disabilities. It will provide more intensive adaptive teaching methods and learning materials targeted at this group. While we want to maximise the learning opportunities for literacy and numeracy as far as possible for this group using adaptive methods, we also plan to implement more functional learning assessments. This will enable us to capture a wider range of learning outcomes including life skills, functional activities and relationships.



5. Looking to the future

This project has demonstrated the success that can be achieved through taking a multi-level systems change approach to tackling education inequality for girls with disabilities. At the individual level the project mobilised resources and provided direct support to children and their families to overcome the personal barriers they face. Communities and schools were provided with the training and tools to move towards inclusion and reduce inequality and discrimination. In the long-term the collaborative work with local and national government has driven forward the process of implementing inclusive policy, affecting children with disabilities across Kenya.

We plan to build on this project over the next five years, expanding it to reach more girls with disabilities. We plan to extend our teacher training and school-based interventions to secondary schools and vocational training settings to ensure that the participating girls' education leads to sustainable livelihoods and improved life chances. We will integrate an adaptive pathway for those with more complex intellectual disabilities and create more sensitive assessment and monitoring tools. We will also maintain pressure on local and national governments to implement new inclusive policies and work with Disabled People's Organisations to monitor their impact.

While our focus remains on girls, we have taken on board feedback around vulnerable and excluded boys. We have secured additional resources to extend support to boys as well. We will also continue to work with men as mentors to address gender-based discrimination and foster positive attitudes and behaviours.

Social norms are difficult to change and take time to change. But this project has demonstrated effective strategies which drive and enhance the process of transformation.





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