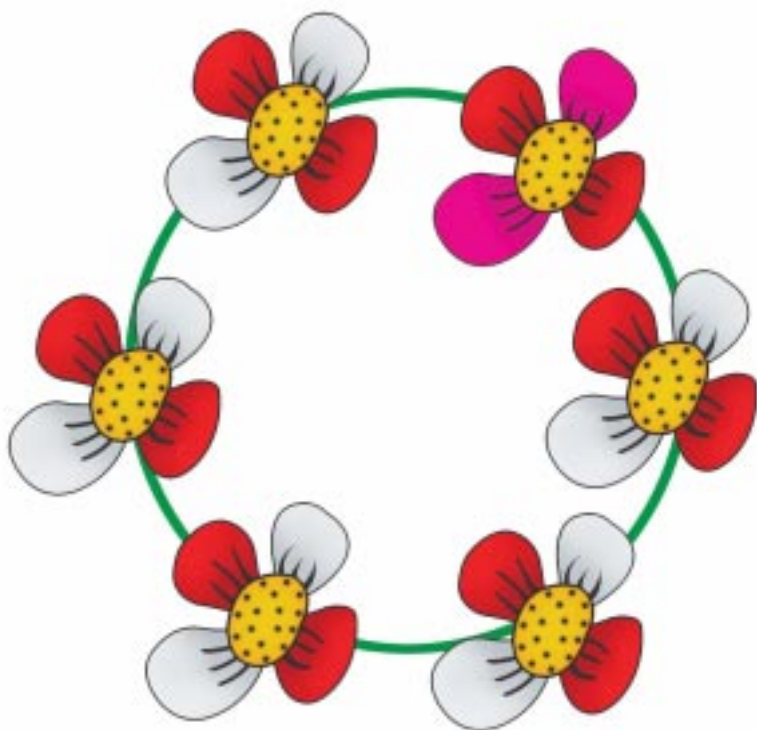


EXAMPLES OF INCLUSIVE EDUCATION

BANGLADESH



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Regional Office for South Asia, 2003

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FOREWORD

The obstacles to a good education faced by millions of children in South Asia are daunting enough. For the 10% of the region's young people who are estimated to have some kind of disability, the barriers are compounded. The UNICEF Regional Office for South Asia has looked at examples in India, Nepal, Pakistan, Bangladesh and Sri Lanka of how such children are given schooling, and whether this is the type of education they have the right to expect. The result is a very mixed bag indeed.

Overall it is clear that large numbers of children who struggle daily with additional hardships are not getting the chance to improve their lives through education. This means, of course, they are caught in a spiral of low expectation, low esteem and low income.

The minority of children with disability that do get places are often not sitting in the same classroom as other boys and girls because of a sense that they need to be separated and treated differently. Globally it is estimated that 70% of children with disabilities, including those with mild mental retardation, can attend regular schools provided the environment is designed to be accessible and the institution is willing to accommodate them.

UNICEF believes that the goal should be to enable all children to have full participation in the development of their community. Meeting this goal of inclusion requires all structures and community-based services to be accessible to all members of the community without discrimination.

By producing a snapshot on the activities happening in five South Asian countries UNICEF Regional Office hopes to fill in an information gap on children with disabilities while examining misconceptions, prejudices and discriminatory practices. The documents on each of the five countries examine initiatives being undertaken by governments, NGOs, INGOs, and UN agencies. Crucially they highlight good practices that have proved effective in addressing concerns and constraints.

It is hoped these documents will be a starting point for policies and practices that get many more children with disabilities into school. As we all work to fulfill the Millennium Development Goal of 'Education for All' I would urge that the exclusion of the challenged child be specifically addressed with initiatives aimed at ending prejudice and isolation. UNICEF ROSA will work with experts to pull together the ideas captured in the five documents with the hope that this process will facilitate momentum toward the full inclusion of every child in all that their community has to offer.



Dr Sadig Rasheed
UNICEF Regional Director for South Asia

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ACRONYMS

AID	Action In Development
CDD	Centre for Disability in Development
CLCP	Chittagong Leprosy Control Project
CSID	Centre for Services and Information on Disability
DANIDA	Danish International Development Agency
DSS	Directorate of Social Services
ESCAP	Economic and Social Commission for the Asia Pacific
HICARE	Society for Education and Care of Hearing Impaired
MCH	Memorial Christian Society
MRC	Municipality Rehabilitation Committee
NGO	non-governmental organization
NRAS	Noakhali Rural Action Society
RCDB	Rehabilitation Centre for Disabled, Bangladesh
SAHIC	Society for Assistance to Hearing Impaired Children
UCEP	Underprivileged Children's Education Programme
UNESCO	United Nations Educational Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
VHSS	Voluntary Health Services Society

EXECUTIVE SUMMARY

The World Health Organization estimates that approximately 10 per cent of the world's population suffer from some form of disability. This means that there may be approximately 13 million people with disabilities in Bangladesh. At present, there is little reliable data for this sector. A comprehensive survey on the prevalence and status of disabled persons in Bangladesh has not yet been undertaken.

Children with disabilities and many others who have difficulties in learning are often marginalized within the education system and within society in general. They are placed in separate special schools to pursue their education. However, the number of segregated special schools is far smaller than the number required for accommodating all children with disabilities.

Several initiatives by governments, NGOs, international organizations and charity organizations address the special education needs of children with disabilities. In Bangladesh, some have demonstrated successful models of special and inclusive education. However, a review of these initiatives has not been made. This study attempts to review and analyse some successful initiatives that address the education of children with disabilities in an inclusive setting.

This study is expected to build the capacity of educators, practitioners, government and other stakeholders to develop or reform policies. It will help to strengthen programmes that ensure inclusive education for children with disabilities.

Four examples of good practices have been selected. They are an inclusive school, an early intervention programme, a community-based rehabilitation programme, and a teacher development initiative.

The Underprivileged Children's Education Program (UCEP) had been operating small-scale education programmes across the country for underprivileged children for many years. Recently, it initiated an inclusive education programme in its existing educational institutions. Although the inclusive school visited was only initiated in early 2002, the level of achievement was noteworthy. The school brought in changes to the infrastructure, classrooms and recreation areas, and created a welcoming environment for all children. The curriculum, assessment process and learning methods have been modified to facilitate the education of children with disabilities. Both children with and without disabilities are taught in the same classroom, and children belonging to both groups take part in cultural and sports activities.

The early intervention initiative, Action In Development (AID), is part of a comprehensive integrated community development programme. The early intervention programme includes detection, early intervention, community counselling, therapeutic intervention, referral services, and inclusion in education. AID has successfully motivated a few neighbourhood mainstream primary schools to include children with disabilities after these children have completed pre-primary education in one of their centres.

Noakhali Rural Action Society (NRAS) is a community-based rehabilitation programme that addresses disability as a multi-sectoral issue cutting across all development. The programme includes community awareness and sensitization, provision of therapeutic services and assistive devices, medical support, income-generation support for children with disabilities, sponsorship for children with disabilities to attend school, distribution of learning materials, infrastructure modifications, incorporation of inclusive education in teacher training, and community groups.

The Centre for Disability in Development (CDD) is a training agency providing technical assistance to organizations working towards integrating disability issues in development programmes. CDD is involved in training, advocacy, network development, monitoring and evaluation.

It is too early to describe these initiatives as examples of good practice models, but it must be recognized that these organizations are among the first to initiate the process of developing an environment for inclusive education in Bangladesh. These organizations have successfully overcome the misconceptions and opposition of communities, parents, teachers and administrators related to inclusive education of children with disabilities. However, the good practice models presented in the study need to be strengthened and made more child- and disabled-friendly.

The following key observations were made:

- There is an absence of reliable and consistent data on the magnitude and educational status of children with disabilities. This makes it difficult for educators, policy-makers and programmers to understand the nature of the problem, and identify possible solutions.
- In Bangladesh, poverty is perceived as one cause of disability. Children from poor families have limited access to education because of its latent cost.
- There are many misconceptions concerning disability that do not help the mainstreaming of education for children with disabilities. Even when people with disabilities have the required qualifications, they are discriminated against in the job market.
- Although school enrolment is increasing at a fast rate, the enrolment of children with disabilities is extremely low. Children with disabilities are often marginalized in mainstream schools as a result of negative attitudes towards them. A lack of child-centred approaches in education and the physical inaccessibility of schools are other reasons for low enrolment.
- The curriculum lacks the required flexibility to cater to the needs of children with disabilities. There are limited developmentally appropriate teaching-learning materials for both children with and without disabilities. Special schools lack assistive devices for children with disabilities. The teaching-learning process does not address the individual learning needs of children. There is little scope for children's participation in creative activity or critical thinking. Teachers lack training and experience in teaching and handling children with disabilities. Many schools in Bangladesh still practice corporal punishment. The classroom environment is such that students are afraid of teachers, and there is a one-way teaching--learning process where teachers lecture and children listen.

- There are separate policies on special needs education for children with disabilities and on general education. This is an obstacle to the development of inclusive approaches to teaching and learning for all children.
- There are ongoing debates in Bangladesh concerning the promotion of inclusive education. Reservations about inclusive education felt by teachers, principals, parents and administrators are related to the pace of change, the limited resources to fund inclusive education, and the lack of knowledge and practical skills on how to implement it. However, there is a growing interest among educators and policy-makers in providing education for all children in an inclusive setting.
- The concept of inclusive education in Bangladesh has not gained adequate attention. Its practice has so far been limited to a few non-governmental agencies. A conceptual framework for inclusive education is yet to be developed.
- From the study of good practices, it is clear that initiation of inclusive practices has been a result of concerted community awareness and financial support from external agencies.
- Early identification and intervention initiatives sensitize parents and community members about the education of their children with disabilities.
- Lack of skilled and trained personnel for supporting inclusive practices is a major barrier to the inclusive education of children with disabilities. This is compounded by a high turnover of skilled and trained personnel.
- Adequate support systems both within schools (support teams of peer groups, teachers and para-staff) and outside school (parent-teacher committees, volunteer groups, community leaders) facilitate inclusive practice.

The following recommendations are made to promote inclusive educational practice with a focus on children with disabilities.

- There is a need to carry out a comprehensive survey to identify the magnitude of the children with disabilities so that it is possible to understand the nature of disability and identify the needs of children with disabilities.
- Initiating change in favour of inclusive education should involve mobilizing opinion, and building consensus among the general public, policy-makers and the international community. Awareness programmes on inclusive education should be organized through seminars, workshops and media projections.
- Currently, the education of children with disabilities is the concern of the Ministry of Social Affairs. For this reason, it is difficult to mainstream the programme. Education for children with disabilities needs to be addressed by the Ministry of Education.
- Instead of separate education policies for children with disabilities and for non-disabled children, there should be one education policy for all children.

- Since education of children with disabilities requires comprehensive and strategic involvement and coordination among ministries, departments, NGOs and others catering to disability, an inter-agency coordination structure should be developed to facilitate responses to the special needs of children with disabilities.
- People with disabilities and organizations for disabled people need to be involved in policy, planning and implementation processes at every level.
- There should be greater coordination among donors, the government and NGOs so that resources can be pooled at all levels and allocated to different components of education. This will lead to increases in access and quality of learning, particularly for children with disabilities.
- Increased and realistic budgets should be allocated to facilitate systematic inclusion of children with disabilities in mainstream education.
- Initiatives should be taken to develop functional screening skills at the school level, and provide assessment facilities for easy identification. National and regional resource centres should be established to provide support and services to schools.
- Accessibility to school should be improved by making minor modifications to the physical structure of schools (buildings ramps, accessible toilets, wide doorways, more space in classrooms, etc).
- Children with mental retardation and children with multiple disabilities can be given home-school programmes as a good starting point.
- The concerned human resource development authority should take initiatives for developing a workforce related to the assessment and management of disability issues, and to the teaching of children with disabilities in regular schools.
- Issues related to disability should be included in the school curriculum so that negative attitudes towards people with disabilities can be mitigated. There is also a need to customize curriculum (textbooks) in inclusive schools so that they are able to address the diverse learning needs of a heterogeneous group in the classroom.
- Evaluation and feedback processes are needed for assessing academic performance of all learners, including children with special needs. The focus of evaluation needs to go beyond academic achievement, especially for children with disabilities. Suitable provisions to existing approaches and practices of examination and evaluation should be introduced (e.g., extra time, writer facility for children with visual disability, etc.).

INTRODUCTION

UNICEF's Medium-Term Strategic Plan for 2002-05, in line with the Convention on the Rights of the Child, spells out that a long-term goal of UNICEF is that 'all children have access to and complete an education of good quality'. While the human rights principle of universality means that the well-being of all children is important, applying a rights-based approach to programming must also prioritize the needs of the most disadvantaged children, particularly in countries where there is greatest need. These may include the girl child, those belonging to low castes, children in remote areas, those with disabilities, those who are refugees/internally displaced persons or returnees, children affected by armed conflict, and those who are subjected to abuse and exploitation.

This study focuses on policies and practices in education for children with disabilities in Bangladesh. The work documents initiatives that are practicing inclusive education.

In recent times, there has been a growing realization in Bangladesh that the greatest problems faced by children with disabilities are prejudice, social isolation and discrimination in society. The study *Educating Children in Difficult Circumstances* estimates that only eight per cent of children with disabilities in Bangladesh are currently enrolled in various educational institutions (Directorate of Primary Education, 2002). Of these, 48 per cent were seeking formal education, 23 per cent were in integrated schools, 15 per cent were in special education, and five per cent were in inclusive education. Among the enrolled children with mild and moderate disabilities, 79 per cent were enrolled in formal educational settings. Of those with severe and profound disabilities, 83 per cent were enrolled in special education.

A review of the history of special education in Bangladesh reveals that in the past education for disabled children was provided by religious and philanthropic organizations. Some philanthropic organizations set up segregated special schools. This practice was eventually adopted and extended as part of the national education arrangements, leading to a separate parallel school system for students with special needs. This is the current situation in Bangladesh. The special school system is generally perceived to be the only means of educating children with disabilities.

Inclusive education is still at a conceptual stage. Little intervention has been made for its promotion in Bangladesh. A few NGOs are working in this area. Most interventions are isolated, fragmented and not coordinated. A comprehensive analysis of these initiatives has not yet been undertaken. This study will assemble a series of good practice models of special needs and inclusive education to increase the knowledge base and strengthen the capacity to develop or improve existing programmes in this area. It is also expected to serve as an advocacy tool for promoting inclusive education.

OBJECTIVES OF THE STUDY

The specific objectives of the study are as follows:

- To assess the state of special needs and inclusive education in Bangladesh in terms of policies, resources and practices, and emphasize the main implications of the lessons learnt with respect to policy reform.
- To identify and document model practices in the area of inclusive education, and to highlight the mechanisms and strategies that have proved effective, the areas of concern and the constraints in successfully mainstreaming children with disabilities.
- To provide recommendations based on the lessons learnt in order to strengthen the capacity of the government and other partners in the country to bring about policy reforms, ensure adequate resource allocation, and promote programming that supports inclusive education.

METHODOLOGY

An analysis of the national legislation and policies in Bangladesh and international conventions and commitments was made. It was based on secondary sources such as government documents, records and other related literature. Interactions were made with government officials and representatives of NGOs and INGOs to collect additional information on disability-related issues.

Individual case studies of practices were identified. A questionnaire was developed for the purpose of screening organizations working with children with disabilities. It was sent to 55 organizations, of which 13 responded. Twelve cases were short-listed (Table 1). An in-depth review of the 12 cases was made through field observation, and four good practices (marked with *) were selected for documentation.

The practices that were documented included analysis of parameters such as accessibility, learner characteristics, teacher background, teaching-learning strategies, curriculum, parent and community support, monitoring, supervision, etc. Checklists and semi-structured interviews were used to collect primary information about inclusive practices. The views of school authorities, teachers, parents, and children with and without disabilities were also taken into account. Focus group discussion was carried out with concerned stakeholders.

Table 1: Selected organization after primary screening

Serial	Name of Organization	District	Division
1.*	Action In Development (AID)	Jhenaidah	Khulna
2.	Association for Integrated Socio-Economic Development for Under-Privileged people (AISEDUP)	Jhenaidah	Khulna
3.*	Centre for Disability in Development (CDD)	Dhaka	Dhaka
4.	Centre for Services and Information on Disability (CSID)	Barisal	Barisal
5.	Gram Bikash Sangstha (GBS)	Bogra	Rajshahi
6.	Society for Education and Care of Hearing Impaired (HICARE)	Dhaka	Dhaka
7.*	Noakhali Rural Action Society (NRAS)	Noakhali	Chittagong
8.	Poverty Alleviation And Social Development Organization (PAASDO)	Bandarban	Chittagong
9.	Social Assistance and Rehabilitation for the Physically Vulnerable (SARPV)	Cox's Bazar	Chittagong
10.*	Underprivileged Children's Education Program (UCEP)	Chittagong	Chittagong
11.	Young Power in Social Action (YPSA)	Chittagong	Chittagong
12.	Natun Zibon Rochi (NAZIR)	Lalmonirhat	Rajshahi

* Documented practices

LIMITATIONS

The time allocated for the study was limited. The situation was further compounded, as time was lost during the early stages due to conditions not within the control of the team. Although questionnaires were sent to 55 organizations across the country, only 13 organizations fulfilling specific criteria submitted good practice information. The documented practices as such are selected from a limited number of organizations.

SOCIO-ECONOMIC SITUATION OF CHILDREN WITH DISABILITIES

The World Health Organization estimates that approximately 10 per cent of the world's population suffer from some form of disability. This means that there may be approximately 13 million people with disabilities in Bangladesh. At present, there is little reliable data for this sector. A comprehensive survey on the prevalence and status of disabled people in Bangladesh has yet to be conducted.

Disability has often been seen as a medical concern or a charity issue in Bangladesh. There is, however, a growing realization that the greatest problems faced by children with disabilities are prejudice, social isolation and discrimination. Most poor women and girls with disabilities, whether urban or rural, experience triple discrimination for being female, disabled and poor. As girls' needs generally receive lower priority than boys' needs, so girls with disabilities receive even lower priority when trying to obtain health care, treatment and education. Among children with disabilities, the ratio of boys to girls enrolled in school was 56 to 44 (Directorate of Primary Education, 2002). Parents are afraid to send their disabled daughters to school fearing stigmatization and sexual abuse. Most parents prefer to spend their limited resources on educating their boys rather than their girls.

Girl children with disabilities are sometimes victims of physical, emotional and sexual abuse. *The Feminine Dimension of Disability*, a study conducted by CSID, reflects on the physical and mental abuse of girls and women with disabilities (CSID, 2001). It suggests that 92 per cent of disabled young girls and adult women were subjected to some type of abuse.

EDUCATION OF CHILDREN WITH DISABILITIES

All children, with or without disabilities, have a right to education. Children with disabilities, no matter how serious their disability, have a right to education that promotes their fullest potential and inclusion in the society. There is a growing consensus among professionals and disability rights organizations that inclusion in mainstream schooling is the only way to provide a means for education and learning for all children.

The Convention on the Rights of the Child specifically declares the rights of disabled children to enjoy a full and decent life in conditions that promote self-reliance, and facilitate the child's active participation in the community.

The study *Educating Children in Difficult Circumstances* states that eight per cent of children with disabilities in Bangladesh are currently enrolled in various educational institutions (Directorate of Primary Education, 2002). Of these, 55 per cent had physical disabilities, 13 per cent were visually impaired, 12 per cent were hearing and speech impaired, and 10 per cent had intellectual disabilities. About 68 per cent of enrolled children with disabilities were in government and private primary schools, and 15 per cent were in pre-primary educational settings. About 48 per cent were seeking formal education, 23 per cent were in integrated schools, 15 per cent in special education, and five per cent in inclusive education. Among enrolled children with mild and moderate disabilities, 79 per cent are enrolled in formal educational settings. Of those with severe and profound disabilities, 83 per cent were enrolled in special education. Nearly 74 per cent of those who are currently not enrolled in any form of education expressed a keen interest in receiving education.

Another study on the situation of street children with disabilities indicates that 20 per cent go to government primary schools, 57 per cent attend non-formal primary education and 63 per cent do not have access to any kind of education (Directorate of Primary Education, 2002).

Recent studies in Bangladesh suggest that the vast majority of children with disabilities never attend school as a result of the following:

- Poverty, the high opportunity costs of sending children to school, and the low priority given to education for children with disability are major causes. Some parents feel that the time and costs involved in educating a disabled child might not produce future returns as disabled people are generally excluded in the job market.
- A large percentage of those who do attend mainstream schools soon drop out because of unfriendly attitudes and environments prevailing at home as well as in educational settings. They often encounter negative treatment from their peers who are not sensitized on disability issues. Most teachers and school administrators are not familiar with the idea of including

children with disabilities in mainstream classrooms. Failure to achieve expected results also causes many to lose confidence and drop out.

- The school infrastructure, in most cases, is not mobility-friendly for children with physical and visual impairments. There are barriers for wheelchair movement. In schools that are at least two stories high, there is no scope for independent movement by children in wheelchairs. Severely physically disabled children have to be carried up stairs. Doors are also not large enough for wheelchairs to pass through. Lack of classroom adaptations hinder the movement of disabled children, including the way that furniture is arranged in the classrooms. Access to toilets is also difficult.
- The traditional methods of teaching and learning, little scope for addressing diverse learning needs of students, lack of continuous assessment of individual learners, and a serious shortage of assistive devices and learning materials all act as major barriers to children with disabilities.

A review of the history of special education provisions in Bangladesh reveals that in the past education for disabled children was provided by religious and philanthropic organizations. Some philanthropic organizations set up segregated special schools. This practice was eventually adopted and extended as part of the national education arrangements, leading to a separate parallel school system for students with special needs.

Education programmes for children with disabilities currently include the following:

- Segregated education in specialized classes in specialized school/institutions.
- Home-based Education Programme. This is a mobile education system for children with disabilities through specially trained teachers.
- Integrated Education Programme. This entails education of students with disabilities within the mainstream system, but with some special arrangements.
- Distance Education Programme. This is a distance-learning system using multimedia including conventional print materials.
- Inclusive Education Programme. A few NGOs have started inclusive education in their non-formal education programmes.

The special school system is generally perceived to be the only means of educating children with disabilities. At present, there are 33 special schools for people with hearing impairment. Seven are under government management, with a total capacity of 1500 students. Both government and NGOs run integrated education programmes for children with visual impairments. The government runs the Integrated Education System in 64 districts, while NGOs operate five other schools. However, there is a dearth of education inputs/materials such as Braille books, Braille writing frames and syllabuses, qualitative/standard papers for writing in Braille, boards for arithmetical/mathematical teaching/learning and white canes. For these reasons and because of the lack of skilled teachers, the system's benefits have not been realized (Directorate of Primary Education, 2002).

Inclusive education is still at a conceptual stage. Little intervention has been made for its promotion in Bangladesh. A few NGOs are working in this area. Most interventions are isolated, fragmented and not coordinated.

RESOURCE ALLOCATION FOR EDUCATION OF DISABLED CHILDREN

About 15 per cent of the country's total budget has been allocated to the education sector in the current fiscal year. However, none of this is targeted at promoting education for children as all is given to the Ministry of Education. The education of children (and adults) with disabilities is under the purview of the Ministry of Social Welfare, and is executed by the Department of Social Services (DSS). The DSS operates a number of activities and interventions targeted at a variety of excluded groups; children with disabilities are only one such area of concern. The development budget of the DSS for the fiscal year 2001-02 was Taka 157.9 million, of which Taka 42.8 million was allocated for the education of people with disabilities. The major areas of allocation were for integrated education of children with visual disabilities, and schools for children with hearing disabilities. Rural rehabilitation centres, the National Centre for Special Education, and physical handicapped training centres also used part of this allocation.

DEBATE OVER EDUCATION FOR CHILDREN WITH DISABILITIES

Controversy among professionals over the issue of special, integrated and inclusive education still prevails. Advocates of special education argue that placing disabled children among normal children will lower their self-esteem and confidence. They may be stigmatized, teased and looked down by their non-disabled peers and teachers. They will need additional and specialized support to help them adapt to and learn in schools. Opponents feel inclusive education is unrealistic in present circumstances because of the lack of adequate support for teachers through quality pre-service and in-service education and training. Some interest groups among special education specialists are anxious about losing their pre-eminent role in this field.

Advocates of inclusive education believe that children have the right to be educated in mainstream/regular schools with their non-disabled peers. Inclusive education recognizes that all children are different and they all learn at different paces. Schools and teachers need to adapt and change to accommodate all children with different learning needs. Inclusive education can overcome discriminatory attitudes and increase acceptance of diversity in a society. Furthermore, the development of inclusive education is the best option for achieving education for all in Bangladesh where there are serious resource constraints. It is not financially viable to build segregated special schools in locations that may serve a just few children with disabilities. Segregated special schools are often far from the homes of disabled children, requiring them to leave their families and communities to pursue their education. At residential schools, disabled children are vulnerable to neglect, and physical and sexual abuse. When this takes place in such isolated institutions, children have no one to turn to for help.

However, even the promoters of inclusive education recommend that it is necessary to address the quality of education by bringing about changes in the curriculum, teacher training, teaching-learning practices, and attitudes of teachers and administrators. This will help disabled children, slow learners and non-disabled learners. The demand for integration and inclusive education seems to be growing along with increasing worldwide consensus for inclusive education.

LEGISLATION AND POLICIES

The literacy rate of those aged seven years and above was 32.4 per cent in 1991 and 48.7 per cent in 1998. The adult literacy rate (aged 15+ years) was 35.3 per cent in 1991 and 51.3 per cent in 1998 (BBS, 1991). The national literacy goal is to ensure a 100 per cent literacy rate by 2015. If this target is to be achieved, the education needs of children with disabilities cannot be ignored.

Bangladesh is a signatory of all international commitments on the rights of children to education.

Bangladesh National Policy on Disability (1995)

The Bangladesh National Policy on Disability (1995) specified the creation of options for education of children and people with disabilities. The policy covers the rights of people with disabilities, equal opportunities in education, training and rehabilitation, employment, income, maintenance, social security, accessibility to the physical environment, accessibility to public information (Braille, sign language, audio and visual aids), incentives for employment, and provisions for prevention, detection and treatment of disabilities.

National Education Policy (1997)

The most recent National Education Policy (1997) suggested a provision for integrated education along with special education provisions, depending on the needs of children with disabilities. Moreover, the necessity of including disability issues in teacher training was mentioned so that regular teachers could manage children with disabilities in regular classrooms. The policy does not include any specific guidelines to address or facilitate inclusive education.

Children unable to fulfil their daily needs due to physical and mental problems need special education, competent remedial measures, and special care nursing. The deaf, blind, physically handicapped, mentally handicapped and epileptic fall within the purview of special children. In accordance with the degree of disability, they are identified as mildly, moderately and seriously handicapped. The principal aim of special education is to help disabled children establish themselves in society through special programmes depending on the degree of their disability.

The following strategy to accomplish education of disabled children is envisaged.

- A survey to be conducted to ascertain the exact number of disabled children, and to identify the type and degree of disability.
- Integrated education to be introduced for the disabled in selected schools. Disabled children develop fast if they are allowed to receive education with normal children.

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- Sixty-four schools the under the Social Welfare Directorate where integrated education programme for the blind is in operation to be improved. This system can be introduced for the deaf and dumb, and also for mentally and physically handicapped children.
- The integrated education programme to be introduced in primary schools at district and *thana* levels.
- Existing government and non-government primary schools to be developed for the disabled.
- Schools for special education to be set up according to degree of disability.
- A training college/institute to be set up for teachers of the disabled.
- In order to create knowledge and awareness about disability, subjects relating to disability to be included in the curriculum from the primary stage of education.
- An alternative curriculum for disabled students who are unable to study one or more subject to be developed.
- Equal opportunity for services to be ensured for disabled people.
- Arrangements to be made to supply education materials for disabled learners free of cost or at a low price.
- In order to introduce integrated education in general schools, special education and subjects relating to disability to be included in the curriculum of the Teacher Training College. This will make it easier for teachers to teach disabled learners in general classes.
- At least one teacher of special education to be appointed to schools undertaking an integrated education programme.

Bangladesh Disability Welfare Act 2001

The Bangladesh Disability Welfare Act was passed in 2001 as a direct consequence of advocacy, campaigning, rallies and demonstrations by the disability movement that followed the wheelchair march of 2000. The act provides legislative support to ensure education of children with disabilities. A special foundation for the welfare of the disabled was also established.

The government has included the issue of disabled persons in the national health policy, the education policy and the Fifth Five-Year Plan. It has formed a committee for inclusive education under the Ministry of Education with representatives from the Ministry of Social Welfare and UNESCO to promote education for children with disabilities in regular schools. This is an important initiative as it recognizes the right to education for children with disabilities. However, the responsibility for education of children with disability is still with the Ministry of Social Welfare. There is still no distinct policy on inclusive education that guarantees the education of disabled children in mainstream schools.

Reflection of commitments and reality

Bangladesh has made a commitment to provide educational opportunities equally for all children by ratifying the Convention on the Rights of the Child in 1990. The government passed the Compulsory Education Act in 1992; this made a significant impact on the enrolment of children and in achieving gender parity in primary education.

However, only 8 per cent of children with disabilities have access to some form of education. Appropriate policies are required to overcome physical and attitudinal barriers. People involved in education are not adequately informed. In most cases, there are misconceptions regarding disability. District primary education officers are not aware of ongoing education programmes for learners with disabilities. School management policy does not encourage inclusion of learners with disabilities; a sceptical attitude exists regarding inclusion. This is mainly because of a lack of conceptual clarity concerning inclusive education and the requirements that are needed for its practice.

There are separate education policies for children with and without disabilities. This represents a major challenge to development of inclusive approaches to teaching and learning for all children. Instead of two separate policies, there should be one education policy for all children within the Education for All framework so that high quality education is provided to all learners.

EXAMPLES OF WORKING MODELS

11.1 Underprivileged Children's Education Program (UCEP) School

The Underprivileged Children's Education Program (UCEP) has been running education programmes for underprivileged children in urban areas since 1972. Inclusive education was initiated in this school in January 2002, and the level of achievement so far has been noteworthy.

UCEP runs a number of inclusive schools, but the following information is based on the field visits, observation, and interviews of stakeholders in only one school run by UCEP. This school is located within the metropolitan city of Chittagong, the second largest city in Bangladesh. It receives funding from UNESCO.

The philosophy of the programme is that 'every child, regardless of his/her individual needs or social circumstances, has an equal opportunity to access mainstream education together with other children of the community.'

The objectives of the inclusive education programme are as follows:

- Give priority to meeting the needs of children with disabilities.
- Prepare guidelines for the development of children with disabilities.
- Promote awareness in communities for inclusive education of children with disabilities.
- Encourage children with disabilities and their families to acquire education.
- Extend the provision of services and facilities for gaining access to education by children with disabilities.
- Ensure that government and non-government initiatives recognize children with disabilities and their roles in development.

The main activities for imparting education to children with disabilities are as follows:

- Socializing with children with disabilities.
- Providing medical support through other agencies.
- Providing aids as necessary to children with disabilities.
- Counselling parents and guardians for awareness building.

Currently the school is working in partnership with the government and NGOs such as SAHIC, HICARE, RCDB, CLCP and MCH. UNESCO's role has been to support and manage inclusive education in the programme.

The target group of the programme is the underprivileged section of society. It includes very poor, working and disabled children. Most are living below the poverty line. About 99 per cent of students are Muslim.

Accessibility

All the children, including children with disabilities, live within half a kilometre of the school; most come to school on foot. Family members or classmates usually accompany disabled children. Children in wheelchairs, however, face problems as the road to the school is poorly maintained and its condition deteriorates during the rainy season.

The school was adapted to ensure accessibility of children with disabilities within the compound and in the school building. Ramps and slopes have been built wherever necessary to ensure accessibility, especially for wheelchair users. The toilets were made user-friendly. Most disabled children in the school can move independently in the school compound and in the classrooms. Teachers, staff and students also help them move around.

The classroom furniture needs to be reorganized to enable disabled children to move freely with minimum obstruction. Wheelchair users are not able to move everywhere in the classroom as the gap in between desks is too small. They normally use the space at the front of the class.

Classroom environment

Teachers, staff and students have been oriented on disability issues to increase their awareness and to develop a positive attitude towards children with disabilities. Issues related to disability are widely discussed in class to create sensitivity towards disabled people. This has created a welcoming environment for children with disabilities.

Classroom arrangements have been modified to allow sufficient light into the rooms. Where classes do not have sufficient natural light, florescent lights have been installed to assist children with low vision. Mats have been placed on floors to prevent echoing of sound; this helps those using hearing aids. This also helps children with visual impairments to concentrate.

The school has made efforts to make classrooms non-threatening so that children are not afraid to participate and make mistakes. Teachers do not use corporal punishment or abusive language in the classroom.

There are no arrangements in classrooms for children to sit in groups according to ability. However, children with speech and hearing disabilities sit in the front rows where they can best see the blackboard and teacher. This allows them to lip-read the teachers, and enables the teacher to pay close attention to them. Children in wheelchairs normally sit near the teacher's desk. They have desks that can be used with wheelchairs.

EXAMPLES OF INCLUSIVE EDUCATION

Interviews with disabled and non-disabled children yielded a common finding: they all expressed a liking for the opportunity to acquire education in an inclusive classroom setting. They expressed this feeling with a big smile and an expression of satisfaction on their faces.

Learners

The school has 710 learners, of which 14 per cent (99) are children with disabilities. About 60 per cent of children with disabilities are male. Children with physical disabilities constitute 62 per cent, children with visual disabilities constitute 20 per cent, and children with mental or speech-hearing disabilities constitute nine per cent each. Children with disabilities study in all classes up to Class 8. The largest number of children with disabilities is in Preparatory 1 and Class 1 (a joint class). They constitute 68 per cent of disabled learners. All other classes have more or less the same number of disabled children. As the programme is relatively new, most disabled children have been enrolled in pre-primary and Class 1.

Teachers

The school has eight classes, and 16 teachers. When the issue of inclusive education was discussed, teachers accepted it with an open mind. They realized the importance making the school open for children with disabilities. Once the policy to start inclusive education was adopted, UCEP authorities shared it with programme staff. UCEP arranged training of staff at management level, teachers, and supervising and administrative authorities associated with the school. Teachers also visited the homes of children with disabilities, and interacted with them and their family members. This sensitized the general community and parents of children with disabilities.

Teacher-to-pupil ratio

The teacher-to-pupil ratio ranges from 15 to one to 30 to one (this includes both children with and without disabilities). Subject teachers assist the class teacher in their off period. The school is taking steps to train and facilitate parents to provide teaching assistance on a voluntary basis. The student-to-teacher ratio is higher in the lower classes, and decreases in higher grades. This is partly as result of an increase in dropout rates at higher grades. Many pupils, as they become older, start to work either at home, on the land or in the informal sector.

Teacher training

Teachers received basic training on inclusive education from the Centre for Disability in Development (CDD), a national training institute dealing with disability issues. The Bangla-translated version of the resource pack prepared by UNESCO for teacher training is used by CDD as the basis for training. Teachers have also received orientation on multiple disabilities. Teachers have not received specific training on Braille or sign language. However, the basic training includes fundamental issues on these forms of communication.

The school and teachers have received follow-up from the training institute. The school does not have specialists, such as speech therapists, occupational therapists, etc., to provide assistance during class hours. However, it often seeks assistance and advice from such specialists working with other NGOs on disability issues.

Trained teachers have devised their own orientation session and teaching-learning materials to develop the capacity of new teachers.

Curriculum and learning materials

UCEP general schools follow the curriculum and textbooks prescribed by the National Curriculum and Textbook Board. Since the school recognizes the diversity of learning needs of its students with disabilities, UCEP develops/modifies the curriculum, and produces teaching materials and teaching aids to suit the learning needs of slow learners and children with disabilities. All children are required to cover the same curriculum. Although teachers want to allow the children to learn at their own pace and apply different techniques, they are always under pressure to complete the syllabus within the school calendar.

The school uses special materials for addressing the learning needs of children with disabilities such as picture boards, posters, object models, and audiotapes. Learning materials are available free of charge to all students. Children with disabilities are provided with assistive devices such as wheelchairs, crutches, white canes, hearing aids, and spectacles. Such devices have greatly increased the mobility and other capacities of these children.

Teaching-learning process

Teachers recognize that learning capabilities vary from child to child. They try to facilitate learning of all children by applying different techniques. All children in a classroom follow the same lesson but the techniques used to teach often vary from student to student. If a student is found to be slow, the teacher provides greater support and applies different techniques to allow the student to complete the class syllabus along with other children. This approach applies to all slow learners. Sometimes, the teacher puts students in pairs so that one can assist another in learning.

Learning methods, such as group learning, peer tutoring, project works, role-play, are applied to facilitate the learning of all children. Rote learning is avoided as much as possible. However, dependence on textbooks is still prevalent in the school. Besides reading, writing and numeracy, children are involved in a wide range of co-curricular activities including singing, dancing, recitations, dramas, etc. Children with disabilities participate alongside other children. Children are encouraged to paint and draw. These paintings are exhibited in all classes.

To assess the performance of students with disabilities, the school uses written, oral and direct observational tests. Initially, written and oral processes were the only mechanism of evaluation. However, it was found that observation was a useful mechanism for assessing the development of children with disabilities.

School-based support

The school has formed three types of support teams. The first consists of attendants of children with disabilities. The school gave this team special orientation on motivating parents of children with disabilities, and handling assistive devices. This support team primarily provides moral support to the families of children with disabilities, organizes interactions between these families, and ensures that children attend school regularly.

The second team comprises the teachers of the school. They are responsible for providing regular orientation to new teachers and students on disability issues, conducting home-based follow-up services for children with disabilities, and ensuring special care for children with disabilities. All teachers received prior training on inclusive education. All trained teachers are members of this second team.

Selected students of the school constitute the third team. Teachers select them primarily on the basis of their interests and willingness. The involvement of students is spontaneous and whole-hearted. These children mainly assist children with disabilities in classrooms and the playground. In classrooms, they help children with disabilities to participate in various activities, sometimes in two-member teams, and they directly support them in the process of learning. They visit the homes of disabled children, when necessary. For instance, if a child with disabilities is absent for a few days, a classmate will visit his/her friend to inquire after him/her.

Involvement of parents and community

One parent observed, 'All students, including children with disabilities, are motivated and inspired to believe that physical limitations do not necessarily act as barriers for learning and acquiring knowledge and skills.'

The school organizes regular bi-monthly meetings with all parents including the parents of children with disabilities. In such meetings, general issues of the school and the progress of children's learning are widely shared. The opinions of parents are regarded with importance, and taken into consideration for the planning of activities at the school. Such meetings enable the school to identify the various types of support that might be required by parents. The school also tries to initiate activities to meet the needs of parents. Apart from these meetings, teachers also make frequent visits to the communities where parents of children at the school reside, and hold informal meetings with parents and other members of their community. Monthly meetings are held for parents of children with disabilities.

Supervision and monitoring

The supervision of the inclusive education programme is conducted from various tiers, within and outside the school. The headmistress directly supervises activities from within. The educational divisional coordinator of UCEP also supervises programme activities. There is also supervision conducted by the UCEP central office in Dhaka.

The attitude of supervisors is positive and cooperative. Supervisors carefully monitor the educational attainments of children with disabilities, the scopes and limitations of the school in creating an inclusive education environment, the teacher training needs, and the psychological needs of children with disabilities. Supervisors received orientation training on disability issues and inclusive education.

Outcome

Interactions among children with and without disabilities mitigate negative attitudes, misconceptions and wrong beliefs that persist among non-disabled children. Although the inclusive education programme is recent, an environment of mutual respect, understanding and friendship has developed among teachers and students.

Teachers are now well informed and conscious of the rights of children with disabilities to acquire education. They display a positive attitude towards such children by believing that they can learn if given proper care and guidance.

Examination results shows that 30 per cent of children with disabilities achieved or exceeded the minimum expected level of competence. Another 56 per cent were close to the expected level of competence but developed at a slower pace.

All children with disabilities attended school regularly. Some children with disabilities have missed a few school days for personal or health reasons. Up till now, not a single student with disability has dropped out. One female student with disability was admitted to the UCEP Technical School for vocational skills training.

The parents of disabled children interviewed by the study team are highly appreciative and happy about the education that their children are receiving.

Constraints

- The size of the school is small. Larger classrooms and a bigger playground would allow better movement for children with disabilities.
- Classes are held one after another. In each shift, four classes take place. This has proved to be strenuous for teachers.
- Teachers are not adequately trained to handle children with severe disabilities. They require further training to upgrade what they have already achieved.
- Some children require regular therapeutic services, such as occupational therapy, physical therapy, counselling, hearing services, speech therapy, crisis management, mobility services, and vision services. Such services are available neither within the school nor in the neighbourhood.

- Currently, teachers have no additional staff support in the form of teaching assistants. Some teachers assist other teachers in their off period on a voluntary basis. The school is planning to train parents so that they can become support staff in the classroom.
- The school follows the curriculum of the National Curriculum and Textbook Board. Although the curriculum has been simplified to some extent, nevertheless, it could be further simplified and made more flexible to address the learning needs of all children.

11.2 Action in Development (AID)

As noted by Dr. Sadig Rasheed¹, 'Early detection and early intervention measures can prevent approximately 70 per cent of the childhood disability caused by vaccine preventable diseases such as polio, malnutrition and micronutrient deficiencies.'

Early detection of disability and intervention has significant effects on children's development. Poor children are less likely to receive early intervention and support, and more likely to suffer lasting impairments. Access to basic preventive services and information about early detection of impairments, early stimulation, and psychosocial development of young children will enable caregivers to prevent disabilities and take care of children, even if they are disabled. Many disabilities are related to speech, hearing and vision; these senses are focused on in early detection.

Action in Development (AID) has been working for the upliftment of underprivileged people since 1992. This organization initiated its early intervention programme in 1998. Disability intervention is not an isolated issue; it is built into the comprehensive development effort. This programme is an integral part of an integrated community development programme located in Jhenaidah District in southwest Bangladesh.

The objectives of the programme are as follows:

- Raise awareness on disability at the community level.
- Facilitate inclusion of all types of children in formal and non-formal education programmes.
- Ensure early detection, intervention, therapeutic services, and provision of assistive devices for children with disabilities.
- Strengthen the capacity of teachers/supervisors of non-formal centres to facilitate the systematic inclusion of children in existing formal and non-formal schools.

The programme is under the AID management structure. The executive director is the chief executive, and trained field workers and teachers work under the supervision of programme coordinators of the respective programmes. The disability programme staff members, including the chief executive, were trained on development and disability issues within and outside the

¹ *Education Update: UNICEF, Volume 2, Issue 4*

country. The coordinator and teachers have been given orientation on disability issues, are experienced in primary education, and have received special training on inclusive education.

AID operates inclusive non-formal education along with integrated community development programmes in collaboration with several organizations. The community development programme includes integration of disability issues in all its components in collaboration with the Centre for Disability in Development (CDD), Save the Children Sweden, and Handicap International for technical and financial assistance. AID also collaborates with local development agencies, referral resource organizations, and relevant government departments and agencies. The community is directly involved in implementation.

The target group is mostly the underprivileged. About 85 per cent live below the poverty line, while the rest are lower middle class families; 85 per cent are Muslims. By occupation, the majority are day labourers, small farmers and small traders, while a few are employees in the private sector.

Main activities of the programme

AID runs integrated interventions on disability issues along with community development programmes. The early intervention programme includes early detection, community awareness, inclusion in mainstream development components, therapeutic and assistive device support to people with disabilities, and facilitation for inclusion of children with disabilities in mainstream education and its own inclusive education centres. Trained staff members provide home-based education to learners with special needs.

AID staff members assist the community to select a site for the child education centre, and help families to identify and detect disability in the early years of a child's life. A slow or disabled learner is referred by AID to therapeutic services; AID provides assistive devices. AID also conducts workshops and meetings at national and regional levels to increase awareness of the importance of early care and stimulation for young children.

Early detection and intervention on disability includes identification of disability, assessment of disability, home-based therapeutic services, referral for correctional services, and inclusion into mainstream development initiatives, including education. Children with disabilities are identified and assessed with a home-based approach through screening of developmental milestones, specific disability diagnosis, observation, etc.

The package for prevention, early detection and intervention includes immunization, stimulation and child-care practices, health check-ups, and nutrition. This package also contains information for pre-primary teachers for identifying children with impairment.

- Awareness-raising interventions are made by providing community education at group meetings for families with children with disabilities and other people. Discussion covers sensitization on the situation of people with disabilities, their potentialities, scopes and limitations, barriers, violence and abuse, deprivation and exploitation, etc.

EXAMPLES OF INCLUSIVE EDUCATION

- Training on disability and operationalization of child education centres is provided.
- Advocacy for free access to education for disabled children in the neighbourhood school is undertaken with orientation of teachers and students of neighbourhood schools.
- Caregivers of disabled children are shown skills for therapeutic assistance. Caregivers are trained in early detection, stimulation and care practices of young children.

The early detection and intervention programme is linked with other disability programme components along with development interventions as crosscutting programme issues. This ultimately creates direct linkage with all development components such as poverty alleviation, health, education, human development, etc.

Trained workers provide therapeutic services to children with disabilities at home. Disability workers identify children with disabilities, assess the extent of their disabilities, and provide exercises, simple devices and assistive devices on a regular basis. If required, children with disabilities are referred to advance services.

The children with physical impairments are provided with basic physiotherapy and occupational therapy services by trained rehabilitation workers. The AID workers are also involved in the initial screening of hearing impairment. Children with hearing impairments are provided with speech therapy. Children with visual impairments are also screened and provided with training on daily living skills. Intellectually disabled children are mainly assisted with counselling and motivation for families and community members.

Training of disability workers

Disability workers are given a comprehensive 90-day training on early detection, therapeutic intervention, and inclusion in mainstream programmes. Teachers and supervisors are trained on basic disability intervention, and receive a five-day training on inclusion of children with disabilities in education. These trainings are undertaken at CDD. Supervisors and field workers receive training from AID staff development initiatives and other external resource organizations.

Conclusion

The inclusion strategy adopted by the programme has made the initiative more accessible to the community, and has increased sustainability and community ownership. It provides an integrated approach to addressing disability issues-detection, early intervention, community counselling, therapeutic intervention, referral services, inclusion in education and other mainstream development programmes.

Community attitudes were not that positive at the beginning. However, within one year of extensive counselling and sensitization by AID, the situation had changed considerably. This has boosted the confidence and motivation of AID. One major challenge that AID encounters is meeting the growing demand from the community on these areas.

The disability intervention, particularly the inclusive education initiative, is still being implemented as a pilot project. AID is a small NGO that often suffers from insufficient funding. It is highly dependent on external financial support. The high turnover rate of skilled and trained disability workers is one barrier to the smooth functioning of the programme.

11.3 Noakhali Rural Action Society (NRAS)

The operational area of the Noakhali Rural Action Society (NRAS) is the district of Noakhali in the coastal belt of south Bangladesh. This is a disaster-prone area with regular incidents of cyclone, tidal surge, river erosion, etc. It is also acutely poor and lags other areas in terms of development. The prevalence of disability is also comparatively high. Its residents are mainly migrants from inland. Severe erosion occurs frequently, and houses need to be moved often. Intense awareness programmes were undertaken to motivate and facilitate local people to initiate economic and social development.

NRAS is involved in activities related to human resources development, STD and HIV/AIDS prevention and control, health and family planning, income generation and management, homestead and social forestry, women development, earth works (roads and canals), housing, environmental awareness and non-formal education.

Since 1997, NRAS has also undertaken intensive awareness and intervention programmes, therapeutic services for people with disabilities, promotion of their inclusion into mainstream development, and networking with other development actors in the area. The programme on inclusion of children with disabilities into regular schools started in 2000.

EXAMPLES OF INCLUSIVE EDUCATION

The organization has partnerships with several organizations in various programme areas. It has a training and technical partnership on disability issues with CDD. It has a partnership on rehabilitation with VHSS and DANIDA, a programme on model health village with Action Aid Bangladesh.

Target groups are the underprivileged. Most are landless, inhabitants of char lands, destitute and deprived men and women, and people with disabilities. Most are Muslim. The numbers of direct beneficiaries of the NRAS programme overall are 8052 males and 7951 females.

Main activities of the programme

Initially, people in the region were conservative and unenthusiastic about new ideas. The community did not accept approaches by NGOs nor acknowledge the role of NGOs in the development of people in the region. The local community held strong misconceptions on disability. Negative attitudes reinforced with wrong beliefs created a negative environment for people with disabilities. They were seen as a burden, and the disability was the result of sins and crimes committed by the family in the past. People with disabilities were excluded from family and social interactions and development activities. Community-based services were virtually non-existent for people with disabilities. Local schools did not include children with disabilities.

In an attempt to change this situation, NRAS undertook the following activities related to disability.

- Social communication to raise local awareness of disability issues.
- Rehabilitation services for people with disabilities.
- Inclusion of people with disabilities into development activities.
- Income-generation activities.
- Referral services for disabled people.
- Medical support.
- Educational support (scholarship and infrastructure support to regular schools).

Activities related to inclusive education

Initial advocacy was carried out in communities to promote education for disabled children in mainstream schools. The programme itself does not run inclusive education schools, as it has no school programme in this area. However, it works with local schools to facilitate inclusive education of children with disabilities. The programme provides all technical and other supports essential for these schools to include children with disabilities.

The programme starts by screening and identifying children with disabilities who have the potential to be included in schools of the area. These children are provided with services including therapeutic services, motivational and counselling services, assistive devices, medical support, etc. Awareness and sensitization activities are conducted in the programme area to raise support for the education of these children.

The programme has forged strong links with schools in the area. Sensitization activities are carried out so that schools are open to the idea of inclusive education. It is a policy of the programme to provide special support for any school that includes children with disabilities. Such support includes infrastructure changes, such as construction of ramps, steps and slopes, etc., support for in-depth teacher training on inclusive education, sponsorships for selected children with disabilities studying in these schools, and the provision of learning materials to these students.

Visually impaired students are provided with abacus and Braille materials. Materials such as posters, flipcharts, toys, paper materials, clay, etc. are used for students with disabilities. In addition, students with disabilities are provided with other regular learning materials such as exercise books, writing materials, textbooks, etc.

Training programme

The programme does not directly provide training to teachers of schools where children with disabilities are included, but it facilitates and refers teachers to organizations that provide such training. The programme, however, organizes basic orientation on issues related to disability to school staff and teachers. Supervisors of the programme receive training from organizations within the country.

Community involvement

The organization puts a lot of emphasis on activities to ensure the involvement of the community with the programme. NRAS conducts regular community awareness and sensitization meetings for various target groups within the community including general community members, and parents of children with disabilities. Fifteen focus group discussions are held per month in municipal areas. The International Day for Disabled Persons and the National Day for Disabled Persons are observed to create public awareness. Specific initiatives are taken to sensitize the schools of the locality. Such initiatives play an important role in creating community awareness of educational opportunities for children with disabilities.

NRAS has formed two committees that specifically serve the interests of children with disabilities and their parents: the Municipality Rehabilitation Committee (MRC), and the School Management Committee. The community has direct involvement in planning, implementation and evaluation of the programme. The MRC is directly involved in planning the programme related to education of children with disabilities. It is also responsible for prioritizing and finalizing plans and activities, and participates in monitoring and evaluation.

Planning process

The organization adopts various methods to ensure participatory planning in all its activities including the education of children with disabilities. Input is taken from the community, and from field and management staff of the organization. Within the community, the inputs of people with disabilities are included. All inputs are shared with the MRC. A plan is developed by the MRC; this is shared with the executive body of NRAS; and an action plan is developed, based on needs and resources. NRAS also involves the community in implementation and monitoring of activities. Achievements and obstacles are shared in regular MRC meetings to enhance programmes, including the programme for education of children with disabilities.

Mobilization of resources

NRAS has financial support from various national and international organizations and local government. It has mobilized resources to facilitate the inclusive education of children with disabilities. It has identified local people for training to work with disabled children. These include special education needs teachers, social communicators, primary rehabilitation workers and physiotherapists.

The programme has two satellite therapy centres, a central physiotherapy centre and a training centre. Assistive devices are distributed. Sometimes, food support is also provided to children with disabilities.

Supervision and monitoring

There are regular staff meetings to share the progress and constraints of the programme. In the programme, the service provider acts as the in-charge and is responsible for overall monitoring and management. Under the service provider, there are a few supervisors who look after day-to-day monitoring through regular visits to the programme at the field level. There are also caregivers who are directly in charge of looking after children with disabilities. The MRC is actively involved with overall supervision and monitoring of the programme.

Conclusion

NRAS views disability as a crosscutting development issue. The programme has developed multi-sectoral activities to facilitate the education of children with disabilities within the programme area.

- Over 280 children with disabilities have been enrolled in 16 mainstream schools. Of these, 220 are currently in school.
- The programme recognizes the importance of community involvement in planning, implementation, monitoring and modification. Such intense involvement of the community and other stakeholders has created a strong sense of ownership.

- NRAS has been effective and innovative in reaching this remote area. However, it is highly dependent on international donor support. Being a small NGO, it is always constrained by lack of resources, and lack of access to best management practices and training.

11.4 Centre for Disability in Development (CDD)

In Bangladesh, people with disabilities are usually left out of the development process. This is often because those who design and manage development programme lack of awareness of the difficulties faced by people with disabilities in their communities. This has created a need to orient government agencies and NGOs on the fundamental concepts needed to understand the processes and mechanisms available for including people with disabilities in mainstream development. It was in this context that the Centre for Disability in Development (CDD) was established in 1996. Since then, CDD has been involved in training, advocacy, network development, monitoring and evaluation of activities related to the empowerment of disabled people.

A basic requirement for addressing the needs of people with disabilities is the availability of adequate skilled human resources. Thus, CDD set out to train the staff of government agencies and NGOs, community-based rehabilitation workers, teachers, and disabled people to design programmes that included people with disabilities. The intervention documented in this study is the training package for teacher development to facilitate inclusion of children in mainstream education. This package was initiated in 1998.

The objectives of the teacher training are as follows:

- To help teachers understand the prevailing situation in education for children with disabilities.
- To explore possibilities and scope for including children with disabilities in mainstream formal and non-formal education.
- To gain understanding and technical knowledge essential for managing and facilitating learning by children with disabilities in a classroom situation, including creating a positive environment.
- To prepare the families of children with disabilities, in particular, and society, in general, for inclusive education.

The main activities of the teacher training initiative are as follows.

- Training of teachers involved in teaching children with disability.
- Follow-up activities for trained teachers at their working environment.
- Development and dissemination of information and communication materials.

The teacher training on inclusion of children with disabilities operated by CDD is an integral part of its integrated human resource development initiative on disability issues. CDD works in partnership and collaboration with stakeholders such as support agencies (Handicap International, Christoffel

Blinden Mission, Action Aid Bangladesh, Plan International, Save the Children Sweden), development organizations implementing disability programmes, the National Disability Forum, concerned government departments, etc.

Teacher training programme

CDD has a team of 20 skilled and experienced trainers, of which four are involved in training teachers of children with special needs such as physical, visual, speech and hearing, and intellectual disabilities. The capacity development process for trainers includes refresher courses, advanced and other complementary training. It also involves information exchange with other organizations, practical orientation from partner organizations, and interactions with children with disabilities and their parents.

The centre provides training on Braille and sign language. CDD has recently developed a comprehensive package of Sign Supported Bangla to facilitate a common sign language across the country for hearing-impaired people. Eventually, CDD will offer training courses on this sign-supported language.

The main content of the teacher training is as follows:

- Inclusive education and its objectives.
- Experiences of other countries on inclusion.
- Orientation for various types of disabilities.
- Present situation in education and various education approaches.
- How to include children with different impairments in education.
- Practical visits to schools involving learners with disabilities.
- Special interventions in education for low-vision children.
- Importance of orientation, mobility and daily activities of disabled children.
- Needs identification and assessment.
- Classroom adaptation and seating arrangements in the classroom.
- Alternative communication.
- Sharing about co-curricular activities of the school.
- Behaviour management.
- Planning and evaluation.

Training methodologies are lecture, discussion, group work, demonstration, questionnaire, guided study, case study, field visits, etc. with a focus on participatory approaches. Overhead transparencies, multimedia projector, video of welcoming school and other popular media emphasizing techniques to include children with disabilities in education are usually used in the sessions. References and handouts are provided to participants.

Facilitators usually encourage participants to be creative in developing and using teaching-learning materials. They also provide some references, and demonstrate other materials.

CDD's team involved in inclusive education assesses the training needs and capacity of trainees before initiating the training course. Needs assessment visits and consultations are made to recipient organization if group training is required.

Post-training impact

It is estimated that about 75 teachers from 60 development organizations are currently involved in teaching in an inclusive educational environment. These organizations have ensured accessibility for children with disabilities in their schools. Training recipients have gained confidence in including children with disabilities in education.

Low-cost teaching-learning materials are used in classrooms to address the needs of children with disabilities. Locally made abacus, standing frames, play materials made of locally available materials, and hand-written large font texts are used as teaching materials. Indigenous materials are used for accessibility and environmental support such as special seats, educational toys, etc. Waste-paper technology is also used in some cases to produce materials locally.

Many organizations amended their policies and programmes to reflect the issue of inclusion of children with disabilities in education. This has resulted in a higher rate of enrolment of children with disabilities in existing institutes, and has influenced enrolment in mainstream government primary education in areas where interventions have been made.

In some cases, teachers find it difficult to apply their new skills. Overcrowded classrooms, lack of classroom space, lack of assistive devices, and shortage of learning materials for disabled children make it difficult for trained teachers to accommodate the learning of both disabled and non-disabled children.

After completing education in non-formal education programmes of various NGOs, children with disabilities have faced problems to being admitted to government schools. In most cases, staff members of these NGOs have successfully advocated for inclusion in mainstream schools.

KEY OBSERVATIONS

- There is an absence of reliable and consistent data on the magnitude and educational status of children with disabilities. This makes it difficult for educators, policy-makers and programmers to understand the nature of the problem, and identify possible solutions.
- In Bangladesh, poverty is perceived as one cause of disability. Children from poor families have limited access to education because of its latent cost.
- There are many misconceptions concerning disability that do not help the mainstreaming of education for children with disabilities. Even when people with disabilities have the required qualifications, they are discriminated against in the job market.
- Although school enrolment is increasing at a fast rate, the enrolment of children with disabilities is extremely low. Children with disabilities are often marginalized in mainstream schools as a result of negative attitudes towards them. A lack of child-centred approaches in education and the physical inaccessibility of schools are other reasons for low enrolment.
- The curriculum lacks the required flexibility to cater to the needs of children with disabilities. There are limited developmentally appropriate teaching-learning materials for both children with and without disabilities. Special schools lack assistive devices for children with disabilities. The teaching-learning process does not address the individual learning needs of children. There is little scope for children's participation in creative activity or critical thinking. Teachers lack training and experience in teaching and handling children with disabilities. Many schools in Bangladesh still practice corporal punishment. The classroom environment is such that students are afraid of teachers, and there is a one-way teaching--learning process where teachers lecture and children listen.
- There are separate policies on special needs education for children with disabilities and on general education. This is an obstacle to the development of inclusive approaches to teaching and learning for all children.
- There are ongoing debates in Bangladesh concerning the promotion of inclusive education. Reservations about inclusive education felt by teachers, principals, parents and administrators are related to the pace of change, the limited resources to fund inclusive education, and the lack of knowledge and practical skills on how to implement it. However, there is a growing interest among educators and policy-makers in providing education for all children in an inclusive setting.
- The concept of inclusive education in Bangladesh has not gained adequate attention. Its practice has so far been limited to a few non-governmental agencies. A conceptual framework for inclusive education is yet to be developed.

- From the study of good practices, it is clear that initiation of inclusive practices has been a result of concerted community awareness and financial support from external agencies.
- Early identification and intervention initiatives sensitize parents and community members about the education of their children with disabilities.
- Lack of skilled and trained personnel for supporting inclusive practices is a major barrier to the inclusive education of children with disabilities. This is compounded by a high turnover of skilled and trained personnel.
- Adequate support systems both within schools (support teams of peer groups, teachers and para-staff) and outside school (parent-teacher committees, volunteer groups, community leaders) facilitate inclusive practice.

RECOMMENDATIONS

The following recommendations are made to promote inclusive educational practice with a focus on children with disabilities.

- There is a need to carry out a comprehensive survey to identify the magnitude of the children with disabilities so that it is possible to understand the nature of disability and identify the needs of children with disabilities.
- Initiating change in favour of inclusive education should involve mobilizing opinion, and building consensus among the general public, policy-makers and the international community. Awareness programmes on inclusive education should be organized through seminars, workshops and media projections.
- Currently, the education of children with disabilities is the concern of the Ministry of Social Affairs. For this reason, it is difficult to mainstream the programme. Education for children with disabilities needs to be addressed by the Ministry of Education.
- Instead of separate education policies for children with disabilities and for non-disabled children, there should be one education policy for all children.
- Since education of children with disabilities requires comprehensive and strategic involvement and coordination among ministries, departments, NGOs and others catering to disability, an inter-agency coordination structure should be developed to facilitate responses to the special needs of children with disabilities.
- People with disabilities and organizations for disabled people need to be involved in policy, planning and implementation processes at every level.
- There should be greater coordination among donors, the government and NGOs so that resources can be pooled at all levels and allocated to different components of education. This will lead to increases in access and quality of learning, particularly for children with disabilities.
- Increased and realistic budgets should be allocated to facilitate systematic inclusion of children with disabilities in mainstream education.
- Initiatives should be taken to develop functional screening skills at the school level, and provide assessment facilities for easy identification. National and regional resource centres should be established to provide support and services to schools.
- Accessibility to school should be improved by making minor modifications to the physical structure of schools (buildings ramps, accessible toilets, wide doorways, more space in classrooms, etc).

- Children with mental retardation and children with multiple disabilities can be given home-school programmes as a good starting point.
- The concerned human resource development authority should take initiatives for developing a workforce related to the assessment and management of disability issues, and to the teaching of children with disabilities in regular schools.
- Issues related to disability should be included in the school curriculum so that negative attitudes towards people with disabilities can be mitigated. There is also a need to customize curriculum (textbooks) in inclusive schools so that they are able to address the diverse learning needs of a heterogeneous group in the classroom.
- Evaluation and feedback processes are needed for assessing academic performance of all learners, including children with special needs. The focus of evaluation needs to go beyond academic achievement, especially for children with disabilities. Suitable provisions to existing approaches and practices of examination and evaluation should be introduced (e.g., extra time, writer facility for children with visual disability, etc.).

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