Study on Educational Provision for Children with Disabilities in Azerbaijan

Centre for Innovations in Education

CEE\CIS, Azerbaijan
Acknowledgement

This study initiated by UNICEF and implemented by the Centre for Innovations in Education (CIE). The final report was edited by Almaz Ismayilova, external consultant for the project, and report was written collaboratively by seven authors. Research concept was developed by Ulviyya Mikayilova and she edited the initial draft of the report. Research tools were developed by an external consultant with a support from Ulviyya Mikayilova and Yulia Kerimova. Chapter 3, Findings, was written by Ramiz Behbudov and Yulia Kerimova on the base of field works and comments by Ulker Isazadeh. Nigar Aliyeva and Yusif Agayev conducted analysis of legislation documents with a contribution from Almaz Ismayilova. Final chapter, Conclusion and Recommendations, was written and finalised by Ulviyya Mikayilova, Ramiz Behbudov and Almaz Ismayilova. Data collected by a team of interviewers from Stigma Research Centre for Development and International Collaboration.

Finally, we are thankful to parties who made comments and recommendations on and contributed towards the final report.
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List of Abbreviations

CIE Centre for Innovations in Education
CIS Commonwealth of Independent States
COM Cabinet of Ministers
CRC The Convention on the Rights of the Child
CRPD Convention on the Rights of Persons with Disabilities
CWD Children with disabilities
EFA Education for All
FGD Focus group discussions
GoAz Government of Azerbaijan
IMC International Medical Corps
MDG Millennium Development Goals
MoE Ministry of Education
MoH Ministry of Health
MoLSPP Ministry of Labour and Social Protection Policy
MM Milli Mejlis
MPPC Medical-Pedagogical-Psychological Commission
MSEC Medico-Social Expert Commissions
NAR Nakhchivan Autonomous Republic
NIEPP National Inclusive Education Pilot Program
NGO Non-government organization
TF Task Force
UAFA United Aid for Azerbaijan
UNICEF United Nations International Children's Emergency Fund
WHO World Health Organization
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Executive Summary

Background
In Azerbaijan, under the De-Institutionalisation process international organisations, NGOs and donors have directed efforts towards the development of national capacities for policy-making and system-management, bringing forward the concerns of marginalized and currently excluded groups, dissemination of information and ideas as well as network-building and support to the development of inclusive education, improvement of access, etc. Inclusive education is a developmental approach seeking to address the learning needs of all children, youth and adults with a specific focus on those who are vulnerable to marginalisation and exclusion. In its Concluding Observations the Committee on the Rights of the child recommended to Azerbaijan to: 1) ensure implementation of the Standard Rules for Equalisation the Possibilities for Person with disabilities, adopted by the United Nations General assembly on 23 December 1993; 2) ensure that children with disabilities may exercise their right to education and facilitate inclusion in the mainstream education system. UNICEF Azerbaijan is supporting this study on educational provision for students with disabilities, learning difficulties and disadvantages to look in detail at the students concerned, where they are educated (special schools, special classes or regular classes) and what their level of education is. The study was conducted by the Centre for Innovations in Education (CIE) in close coordination with the Ministry of Education of Azerbaijan Republic and UNICEF.

Purpose/Objective
The study aims to explore the educational provision for CWD in Azerbaijan from the perspective of The Convention on the Rights of the Child (CRC). The goals of the study are:
1) To assess the state of educational provision for CWD in Azerbaijan from CRC perspective in terms of legislation, policies, resources and practices, and emphasize the main implications of the lessons learnt with respect to policy reform;
2) To analyze economic and financial issues affecting the inclusion of all children in basic education;
3) 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 CWD
4) To provide recommendations to strengthen the capacity of the government and other partners in Azerbaijan to bring about policy reforms, ensure adequate resource allocation, and promote programming that supports inclusive education

Methodology
The study’s main target group was CWD aged between 6-10 years, and data was gathered from parents, teachers, school principals, policy-makers, ministry officials and other key stakeholders, such as non-government organizations (NGOs). The research conducted using the mixture of both qualitative and quantitative methods. Following methods have been used to collect data:
1) Survey with parents of CWD and teachers
2) In-depth interviews with school directors, head of regional educational departments and government officials
3) FGD with parents of non-disabled, teachers and NGO representatives
4) Focus group discussion with observations in: special education, home education, integrated education (special classes at regular schools), inclusive practices in mainstream schools etc.
5) Analysis of local and international legislation

Limitations of the study included delays in obtaining real statistics from different government ministries and lack of data on CWD and their location. It was especially hard to make sure that interviewees (particularly parents and teacher) are comfortable and not “scared” of authorities to answer questions. The most important limitation during the observation was teachers’ attitude towards the fact that their work was going to be observed and possibly criticized.

Key Findings and Conclusions
The study revealed that as other former Soviet Union Republics, Azerbaijan’s education system is not fully adequate to accommodate educational needs of CWD. There are serious challenges in accessibility, affordability, availability and quality of educational provisions in Azerbaijan. Majority of these barriers can be alleviated with better government regulations and policies that address real needs of CWD and their
families. The government has not yet clearly identified the visionary path that it wants to pursue with regards to the educational arrangements for vulnerable children.

It is also much is needed to be done by the civil society organizations with regard to public education (raising awareness among people, parents, etc.) and government advocacy. The study revealed that there is still stigma, wrong perceptions about and limited understanding of issues related to CWD and their families. Moreover, the stigma and misperceptions exist among the families of children with disabilities, who are not empowered enough to take leadership in seeking and creating opportunities for education of their children.

The study findings allow inferring that there is a serious lack of special services to meet the needs of children with special needs. This gap is strongly associated with the out-dated approaches of Soviet era, which has narrow medical approach. On the other hand, due to segregative policies of the past, many general schools do not have special service specialists as it was (and still is) not required by the system. Additionally, the higher education institutions of Azerbaijan have limited programs to prepare cadres to fulfil the gaps.

Analysis of the regulations shows that the mechanisms lack concrete description of tasks and mechanisms for the implementation, supervision and monitoring of those tasks.

**Recommendations**

Having reviewed the situation in the field, analysed data, and reviewed available legislative base, the following steps may be considered as important in achieving further progress towards inclusive education in Azerbaijan:

1. Special and inclusive education reforms must become a part of the General Education reforms in the country.
   1.1. The government should design and implement a comprehensive pre-service and in-service teacher and specialist preparation program.
   1.2. Accessibility should become one of the key priorities of the government in future policies and regulations.

2. The national concept of special and inclusive education should be developed by the government. The government’s strategy on education should be developed by outlining one general model of inclusion for Azerbaijan and the necessary steps to achieve it.
   2.1. Establish a Task Force (TF) to design a new government policy on definition/classification of disability including local and international experts (both Soviet-educated and Western-educated), NGOs, governmental agencies, with clearly defined goals, objectives, and time-framed action plan.
   2.2. Research in the field should be encouraged by the government to identify gaps in the policy.
   2.3. On-going public awareness campaigns could be developed to keep the society informed about the problems and issues in the field.

3. The system of special service provision should be considered by the government as a key issue in achieving quality in the education of children with disabilities.
   3.1. Existing community based rehabilitation centres should be promoted and their experience used to develop and improve the provision of special services.
   3.2. Roles, functions, mandate and responsibilities of the Medical-Pedagogical-Psychological Commissions could be reviewed and necessary changes made to meet the needs of children with disabilities.
1. Introduction

Throughout the world children who have special educational needs have traditionally been marginalized within or excluded from schools. As a result of the 1990 World Conference on Education for All: Meeting Basic Learning Needs, the challenge of exclusion from education has been put on the political agenda in many countries. This initiative has helped to focus attention on children who may be excluded from or marginalized within education systems because of their apparent difficulties. These may include those who are already enrolled in education but for a variety of reasons do not achieve adequately, those who are not enrolled in schools but who could participate if schools were more flexible in their responses, and the relatively small group of children with more severe impairments who may have a need for some form of additional support.

The public education systems of the countries of the Commonwealth of Independent States (CIS), including the Republic of Azerbaijan, have undergone reforms in education. Recent studies indicate that there have been some improvements in access, equality, finance and governance of the education. Still many of these countries do not fully achieve Millennium Development Goals (MDG) and commitments in Education for All (EFA). A regional study by United Nations Children’s Fund (UNICEF) in 2007 found that “separate education of children with special needs still prevails and wider reforms can encourage exclusion of such children.” Regarding the equality in education, the same study reports that “…opportunities for children with special needs outside of institutions are limited and many children with disabilities (CWD) are not enrolled in schools.” This report concludes that there is much needed to be done in CIS countries to improve access, equality, governance and financing of education, including educational arrangements for children with disabled and otherwise disadvantaged children.

The public education system of the Republic of Azerbaijan is based on the former Soviet education systems and offers variety of educational provisions for the children with special educational needs. A large part of the system is built on the Soviet science of “defectology”, which is usually associated with the education of CWD in special schools and home schools, separated from other children. Thus, the majority of available government-provided educational provisions facilitate isolation and segregation of CWD from their peers and the society at large. Additionally, educational arrangements in Azerbaijan are not widely available across the country, they are not fully accessible and the system is not proactive in locating and involving CWD into education. Nonetheless, the Government of Azerbaijan (GoAz) has recently launched initiatives such as the National Program on Development of Inclusive Education (2005-09), which are intended to enable children with disabilities to receive education together with their non-disabled peers have greater access to education across the country.

This study was initiated by UNICEF and implemented by the Centre for Innovations in Education (CIE). The study aimed to: 1) assess the state of educational provision for CWD in Azerbaijan from CRC perspective in terms of legislation, policies, resources and practices, and emphasize the main implications of the lessons learnt with respect to policy reform; 2) analyze economic and financial issues affecting the inclusion of all children in basic education; 3) 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 CWD; and 4) provide recommendations to strengthen the capacity of the government and other partners in Azerbaijan to bring about policy reforms, ensure adequate resource allocation, and promote programming that supports inclusive education.

1 UNICEF, 2007, Education for Some more than Others?, Geneva: UNICEF Regional Office for Central and Eastern Europe and Commonwealth of Independent States
The study’s main target group was CWD aged between 6-10 years, and data was gathered from parents, teachers, school principals, policy-makers, ministry officials and other key stakeholders, such as non-government organizations (NGOs). Research methods such as surveys, interviews, focus group discussions (FGD), observations and document review were used to collect data.

The study revealed that as other former Soviet Union republics, Azerbaijan’s education system is not fully adequate to accommodate educational needs of CWD. There are serious challenges in accessibility, affordability, availability and quality of educational provisions in Azerbaijan. Majority of these barriers can be alleviated with better government regulations and policies that address real needs of CWD and their families. The government has not yet clearly identified the visionary path that it wants to pursue with regards to the educational arrangements for vulnerable children.

The study revealed that there is still stigma, wrong perceptions about and limited understanding of issues related to CWD and their families. Moreover, the stigma and misperceptions exist among the families of children with disabilities, who are not empowered enough to take leadership in seeking and creating opportunities for education of their children. Civil society organization should be active with regard to public education (raising awareness among people, parents, etc.) and government advocacy.

The study findings allow inferring that there is a serious lack of special services to meet the needs of children with special needs. This gap is strongly associated with the out-dated approaches of Soviet era, which has narrow medical approach. On the other hand, due to segregative policies of the past, many general schools do not have special service specialists as it was (and still is) not required by the system. Additionally, the higher education institutions of Azerbaijan have limited programs to prepare cadres to fulfil the gaps.

Analysis of the regulations shows that the mechanisms lack concrete description of tasks and mechanisms for the implementation, supervision and monitoring of those tasks.

The rest of the study is structured as follows. The next chapter describes the methodology and methods used to collected and analyze data. It also discusses sampling procedures and challenges research team faced during sampling. Chapter 3 summarizes the finding of the research. It includes sections looking at educational opportunities and barriers, family, government and other support systems at place; knowledge and attitude towards the CWD and educational provisions for them, as well as services available for CWD. In addition it presents detailed analysis of local legislation in comparison to major international documents on child rights, education and service provisions. The final chapter presents conclusion and recommendations for the government and other stakeholders for further action.
2. Methodology

This study was conducted using a mixture of qualitative and quantitative methods. These methods were used to avoid research participants influencing the results and findings of the research. The main goal was to show that data collected using qualitative and quantitative methods complement, support and prove the findings of each other.

Two-days training course organized to train interviewers on interview techniques, especially how to interview children with special needs and their parents and conduct FGD. During the training participants were informed about the projects, its goals, and special and inclusive education in Azerbaijan. Field work started in April 2008 and finished in June 2008. After the data collected team of researchers analysed and put together the report. Report refers to the following terms:

- Children with disabilities: children with limited health conditions, who has physical, psychological and mental problems, and is experiencing difficulties in educational process if appropriate provisions are not in place
- Education at home: There are two types of home education provision available in Azerbaijan: 1) special home education schools providing education only at home. Under this provision teachers are paid additional salary to teach children at home; 2) mainstream schools that offer home education as an additional service. Teachers are obligated by their supervisors to teach at home without any additional salary.
- Special School: schools that accept only children with disabilities and usually boarding or residential schools.
- Inclusive education: mainstream school providing education to all children, despite their special needs. Children with disabilities are supported and the school and curriculum are adopted to meet the needs of each child individually. Special services, such as psychologist, occupational therapists, language therapist ant etc. are provided at school.

2.1. Data collection methods

Following methods have been used to collect data:

1. Survey with parents of children with disabilities (821 parents)
   Originally, it was planned to conduct a survey among both parents (400 parents in each group) of CWD and non-disabled. But later the study team agreed that it will be more meaningful to conduct survey among only parents of CWD, while the FGD were designed for the parents of non-disabled children. Latter are not well informed about inclusive and integrative education. Conducting one-to-one interviews with them would not have been as informative as it was expected. For this reason it was decided to conduct FGD with them to understand their thoughts in general.

2. Survey with teachers (300 teachers)
   The study has conducted survey on the basis of 64-question questionnaire among 300 teachers involved in education of CWD. The majority of teachers were from urban schools (88.6%) and mostly teachers with home schooling (33%) and inclusive education (30%). 10% of surveyed were from residential schools, 10% from special schools, 12% from general schools and 2.4% from integrated classes. About half of surveyed teachers had more

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than 20 years of experience in teaching. More than 60% of the teachers were age 40 and more.

3. **In-depth interviews with school directors (51 directors)**
   A questionnaire with 61 questions has been employed to collect data from 51 directors of schools located in the survey areas (regions). 30 of directors were male and the remaining were females. More than 45% of the surveyed directors aged 50 and above and the majority of them have had more than 20 years of teaching experience. Over 62% of them have about 15 years of experience in school management.

4. **In-depth interviews with head of regional educational departments (13 interviews)**

5. **In-depth interviews with government officials (11 interviews)**
   The interviewed officials were from Ministry of Education (MoE), Ministry of Health (MoH), Ministry of Labour and Social Policy and Protection (MoLSPP), Milli Mejlis (MM) and State Committee on Family, Woman and Child Affairs. Two officials, the deputy minister of education and the chairman of human rights commission of the parliament could not be interviewed due to time constraints of both officials. Thus the study team could conduct only 11 out of 13 planned interviews.

6. **FGD with parents of non-disabled children and teachers (group of 30)**
   Total of 271 teachers and parents of non-disabled children have attended focus groups discussions. Out of these only 33 participants were male, while 237 were females.

7. **FGD with NGO representatives (1 group)**
   10 representatives of NGOs have attended the FGD. Three of these represented international NGOs operating in Azerbaijan in the field of CDW education and rehabilitation. Five represented organizations directly involved in CWD education/rehabilitation and parent involvement. The remaining two organizations are involved in advocacy and other support services.

8. **Observations in: special education, home education, integrated education (special classes at regular schools), inclusive practices in mainstream schools etc.**
   Observation tool was developed by CIE specialist on the base of the ISSA standards. A research team consisted of two observers spent two days in each region and visited 35 classrooms. Observers visited mainstream schools, special schools and boarding schools and observed home school classes provided by special schools for particular types of disabilities. The observation tool was intended to assist in examination of the classroom environment and the readiness of teachers to adapt child-centred pedagogical approaches. The tool addressed four important areas of a classroom environment:
   a) physical environment - focusing on the examination of working space of children, classroom organization, and access to educational facilities and visual aids;
   b) learning environment - focusing on the examination of an environment which teacher creates to provide opportunities for all children to learn, to participate in the learning process and be involved in meaningful interactions with peers and staff; the issues of acceptance and tolerance were addressed as well;
   c) teaching methods and learning activities - the third area of assessment looking at teaching methods and learning activities which teachers plan and implement during the lesson to enhance children’s learning;
   d) social environment - focusing on social environment in the classroom and teachers’ abilities to model behaviours which develop children’s skills to learn and live together, promote and reinforce positive social values and evaluate the behaviour of children.
All four areas were recommended to be rated according to three indicators: not observed, rarely observed and consistently observed. Each indicator was recommended to be provided with the comments supporting the statement of the observers. In addition extensive field notes were taken during the visits to the schools and home school classes.

9. Analysis of local and international legislations

National laws, decrees and regulations, mainly taken from governmental websites have been analysed by the researches. Data includes all existing legislative documents in the field of education required for the report. International documents such as CRC, Convention on the Rights of Persons with Disabilities (CRPD), Salamanca Statement and etc. have also been analysed.

2.2. Sampling procedures

Multistage sampling method was used to collect data. This method involves purposefully selecting a subset sample from a randomly chosen initial sample. For this study CWD were chosen randomly from the lists provided by MoH. The rest of the research participants involved in the study were selected through CWD, i.e. their parents, schools they are attending, schools directors, non-disabled children and their parents and regional educational departments.

Multistage sampling was chosen because there is no common dataset of CWD held by the government. Both MoE and MoH have the list of CWD across the country. However, most of the CWD are not involved in the education, but all of them are registered with the MoE to receive incapacity benefits. Hence, the list provided by MoH was used for sampling. After the list was obtained regions with highest number of CWD were selected and a team of researchers were sent to conduct interviews.

According to the list provided by the MoH the number of registered CWD in Azerbaijan in 2006 was 23,533. The list of CWD provided by the MoH shows that 83.8% of them were 5-17 years old, i.e. the age group eligible for education. To optimize the results the study team decided to select 13 regions of the country with the highest number of registered CWD. Taking into consideration the fact that more CWD live in Baku (the capital) and Sumgayit cities, in the sampling more respondents were chosen from these cities. Table 1 (pp.6) demonstrates the final sample.

About 22% of surveyed parents were from rural areas (from villages) and 78% were from urban areas (cities and regional towns). An overwhelming majority of parents reported having only one child with disability. Observation sites were selected accordingly with information provided by the MoE. Observations sites were selected on the base of two criteria. The first was the number of CWD enrolled in education. The second criterion was the type of educational provision provided for CWD.

Baku was selected as the city with the highest number of CWD (33.5%) and all types of educational institutions – home schooling, special schools, boarding schools, integrated classrooms in mainstream schools and pilot inclusive education classes in mainstream schools. Bilesuvar (9.8% share) is the rural region sharing biggest number of CWD which are provided only with home school provision. Sumgayit city was selected as another big city sharing 8.0% of the total number of

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5 One needs to admit that usually official figures are not reliable across the FSU countries, including Azerbaijan. For instance, the study team has faced facts that the registered children were not found in the registered addresses. Officials, on the condition of anonymity, stated that more children do change their location but are not necessarily registered as such. This situation posed some challenges for the study team in designing a sample framework that will be representative of the country, not only in terms of number of CWD population, but also in issues like rural/urban distribution. In this regard the research methodology may have some weaknesses.
CWD and providing all types of education provisions. Sheki and Yevlakh are rural regions which provide all traditional types of education and share 4.4% of CWD. Yevlakh was selected also as a rural region where pilot inclusive education classes were opened. Two residential schools for children with severe disabilities in Shagan and Saray which work under the jurisdiction of the Ministry of Labour and Social Protection were also visited, and classes and environment observed.

### Table 1. Sampling

<table>
<thead>
<tr>
<th>Name of region</th>
<th>Total number of CWD (5-17 years old)</th>
<th>Sampling (planned)</th>
<th>Sampling (actual implementation)</th>
<th>Sampling (actual implementation %)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Baku</td>
<td>3567</td>
<td>220</td>
<td>240</td>
<td>6.7%</td>
</tr>
<tr>
<td>2. Belesuvar</td>
<td>1043</td>
<td>60</td>
<td>59</td>
<td>5.6%</td>
</tr>
<tr>
<td>3. Masally</td>
<td>915</td>
<td>80</td>
<td>80</td>
<td>8.7%</td>
</tr>
<tr>
<td>4. Sumqait</td>
<td>852</td>
<td>100</td>
<td>100</td>
<td>11.7%</td>
</tr>
<tr>
<td>5. Gandga</td>
<td>775</td>
<td>100</td>
<td>99</td>
<td>12.7%</td>
</tr>
<tr>
<td>6. Agecededi</td>
<td>665</td>
<td>40</td>
<td>40</td>
<td>6%</td>
</tr>
<tr>
<td>7. Gakh</td>
<td>562</td>
<td>20</td>
<td>20</td>
<td>3.5%</td>
</tr>
<tr>
<td>8. Nakhchivan</td>
<td>484</td>
<td>40</td>
<td>40</td>
<td>8.2%</td>
</tr>
<tr>
<td>9. Sheki</td>
<td>470</td>
<td>20</td>
<td>22</td>
<td>4.6%</td>
</tr>
<tr>
<td>10. Geranboy</td>
<td>463</td>
<td>20</td>
<td>20</td>
<td>4.3%</td>
</tr>
<tr>
<td>11. Tovuz</td>
<td>437</td>
<td>20</td>
<td>21</td>
<td>4.8%</td>
</tr>
<tr>
<td>12. Barda</td>
<td>428</td>
<td>20</td>
<td>21</td>
<td>4.9%</td>
</tr>
<tr>
<td>13. Yevlakh</td>
<td>60^</td>
<td>60</td>
<td>59</td>
<td>8%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>10661</strong></td>
<td><strong>800</strong></td>
<td><strong>821</strong></td>
<td><strong>7.7%</strong></td>
</tr>
</tbody>
</table>

CWD and providing all types of education provisions. Sheki and Yevlakh are rural regions which provide all traditional types of education and share 4.4% of CWD. Yevlakh was selected also as a rural region where pilot inclusive education classes were opened. Two residential schools for children with severe disabilities in Shagan and Saray which work under the jurisdiction of the Ministry of Labour and Social Protection were also visited, and classes and environment observed.

### 2.3. Limitations of the research process

Generally the research has faced several challenges and setbacks due to various issues. The implementation of the research has delayed for a few months, and the involved agencies have worked towards revising the research methodology several times. Team of researchers has had delays in obtaining real statistics from different government ministries, in particular MoH and MoE.

One of the most faced limitations was that the surveyors could not locate CWD at the given addresses provided by the ministry sources. They were told that either CWD has moved out or, in some cases, there was no CWD in this address (possible indicator of fake CWD certification or unwillingness of the parent to report her/his disabled child). The most similar cases have been faced in Sumgayit and Baku, where survey team has to double its efforts to collect the research data.

In most cases, respondents and participants were too “careful” in answering some questions about the real problems and issues that they and their children with disabilities face. Interviewers had to spend some time during interviews explaining participants that their anonymity will be guaranteed.

The most important limitation during the observation was teachers’ attitude towards the fact that their work was going to be observed and possibly criticized. All teachers who participated in the observations, including home schooling, were informed about the researchers’ visit in advance. The study showed that in this situation many teachers did not follow the lesson plan and re-directed the

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6 Yevlakh was not originally included in the sampling. Because of the rayon being one of the pilot areas for State Program on Inclusive Education, the study decided to include it in the sampling.

7 The survey team have made a minor mistake when calculating the responses and wrongfully conducted 21 more surveys among parents

8 This pilot project in Yevlakh was implemented in partnership with MoE, International Medical Corps and Centre for Innovations in Education
efforts toward explaining the peculiarities of their jobs and working style to the research team members rather than do daily routine work with the classes. In many classes observed teachers were concerned with demonstration of the result of their work and asked children to demonstrate previously gained knowledge to researchers, because their assumption was that the researchers were there to observe children, not teachers. In many classes researchers had to take initiative and repeatedly explain the purpose of the visit and emphasize the importance for our study to observe the process of teaching and learning and the environment where it took place.

Presence of the directors and/or head teachers and methodologists which were accompanying the research team to the classes and houses of the CWD became another important feature, which affected the reality of the observed lessons. Observations demonstrated that teachers did not make independent decisions and always expected “instructions” on what to do next.
3. Findings

This section outlines major findings of the study. It highlights the results of the research and data analysis. In this chapter educational opportunities and barriers, family, government and other support systems, expectations of stockholders, knowledge and attitude towards the CWD and educational provisions for them, as well as services available for CWD are discussed in details. Further, chapter includes detailed analysis of local legislation in comparison with major international documents on child rights, education and service provisions.

3.1. Educational opportunities

The study revealed that the country’s national legislation offers variety of educational opportunities for children with special educational needs. One of the important finding of the study was the acknowledgment by the government officials that the educational provisions for CWD is the prime responsibility of the government, which has to adopt and administer necessary policies that will foster the educational rights of marginalized children. Officials stated that in recent years government has enacted several relevant laws in this regard, but have also admitted that there is more to be accomplished. Interviewed government officials have thorough understanding of international laws and conventions on child protection and have continuously expressed acceptance of such provisions. The study revealed many promising factors that can be interpreted as opportunities for education of CWD. According to the research data about 84% of surveyed parents reported that their children with disabilities receive some kind of education. Moreover, there is supportive atmosphere among parents and education community: more than 96% of surveyed parents and about 95% of surveyed teachers indicated that they support education of children with disabilities as it will facilitate better future for such children. Parents of non-disabled children have also expressed support for educational arrangements for children with special needs. Findings show that there are different educational provisions such as home education, inclusive and integrative classrooms and special schools to accommodate the needs of CWD. However none of these provisions have capacity in terms of the infrastructure, teachers’ preparation, methods used and etc. to accommodate the needs of CWD. The following sections of the report will discuss mentioned forms of all provisions in details.

3.1.1. Education at home

The study has revealed that the most available educational provision for CWD is home schooling (Graph 1). In general, about a half of surveyed parents (48.5%) reported that their children receive education at home. This tendency is prevalent in urban vs. rural setting, too: about 64% of CWD living in rural settings receive education at home, whereas 44.4% of urban children receive their education at home. For the complete list of the laws and regulations, please see the Policies, Regulations, Laws section of this study.

Graph 1. Educational provision for disabled children (%)

<table>
<thead>
<tr>
<th>Provision</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>General school</td>
<td>24.1</td>
</tr>
<tr>
<td>Boarding School</td>
<td>7.7</td>
</tr>
<tr>
<td>Special School</td>
<td>3.5</td>
</tr>
<tr>
<td>Inclusive class in mainstream school</td>
<td>15.8</td>
</tr>
<tr>
<td>Home School</td>
<td>48.5</td>
</tr>
</tbody>
</table>

education at home setting. Out of 51 schools surveyed, 11 schools reported either as home school or general school with home education service. This education provision foresees the school teacher to visit CWD at home and provide education on specifically designed curriculum.

The study team has observed two types of home education provision: special home education schools that provides exclusively education at homes, and is mostly available in urban areas\(^\text{10}\), and mainstream schools that offer home education as an additional service, and is available in regional and rural schools. Under the former arrangement, school teachers receive additional salary for home education, whereas under the latter teachers are obligated by their supervisors to teach at home without additional compensation.

Observations show that the quality exclusive home schooling is very poor. Classes conducted in the common room around the dining table in the living room and these are some examples of what researchers observed:

“To (researcher) was told by the mother that the apartment was newly renovated; there was a big carpet on the floor, good furniture, big TV. We were invited to sit around a table where usually the lessons take place. The TV was on and nobody was watching it. Teacher asked the student to bring textbooks and papers. While teaching teacher was talking to the mother and trying to explain me what kind of problem the girl had.”

“On our way to the house the teacher was talking about the family problems and mentioned that they did not have chairs to sit. “I asked them to borrow a chair for you from the neighbours,” she said to me. We entered the room, it was almost empty but clean. There was an old and very short carpet, which did not cover stony floor, TV, table, sofa, armchair and a big bed in the room. I noticed two small chairs in front of the table. Teacher asked me to take one and she took another one; three girls stand in front of the table for the lesson.

Notes from home observations in Baku

“We (researchers) entered a small, dark studio apartment. I noticed an old man lying on the sofa; he was sleeping and loudly snoring. The TV was turned on and teacher asked to turn it off. Teacher’s voice disturbed the old man and he said something to the mother. He made comments several times and after mother’s quite comments to him he left the room.”

Notes from home observations in Sumgayit

“The room where the child was expecting the teacher was not lighted properly. There were books, papers and flowers on the table. We asked to turn on the lights; the lamp did not make any difference.”

Notes from home observations in Yevlakh

This was observed in almost all cases during the observations in rural areas and regions. Families with relatively good financial opportunity did not focus on providing a separate and quite space for a child to learn. And this issue did not seem to be concern of the teachers as well.

\(^\text{10}\) According to MoE data (2004), there are two such schools in the country, one located in Baku and another in Ganja. The MoE reports that there are about 8000 CWD receiving home education (2004).
3.1.2. Integrative and Inclusive Education

According to the parent survey, the second most prevailing educational provision for CWD in Azerbaijan is education at general schools (Graph 1, pp. 8). About 24% of surveyed parents reported their children have the opportunity to receive education through this system. However, the survey could not identify whether these classes were integrative or inclusive or neither. Officially, integrative classes are offered in only few schools and mostly in urban areas.\(^{11}\) On the other hand, the study found that there are cases, particularly in the regions and rural areas, where CWD were enrolled into mainstream school even though those schools were not designed to offer them adequate provision. Firstly, this could happen due to the fact that some parents obtained a fake health certificates for their CWD, which enables them to be enrolled into general school. It is possible that children with disabilities do not attend the class regularly, but are eligible to receive a certificate of completion of secondary education\(^{12}\). Second reason could be that parents cannot distinguish between home and general schooling; there are general schools that provide home education, though they officially enrol the disabled child into the school. As such, the CWD is considered attending the school, but in reality they are home schooling. Finally, it could be explained by the lack of knowledge of surveyed parents of the terms like ‘integrative or inclusive education,’ as well as cases of misreporting. One of the observers mentioned:

Integrated classes are understood as children with disability are given access to general school but are not included into the classrooms with their non-disabled peers. Instead they are provided with separate classrooms and teachers. Children are supposed to be taught according to the general school curriculum but in separation from all other children in order to meet their specific learning needs.

About 15.8% of surveyed parents (Graph 2) reported their children attending inclusive classes, a new system that has recently been initiated by the government in collaboration with international and national non-government agencies and piloted in several regions of the country, mostly in urban areas. Out of 51 school directors surveyed, 18 have reported offering inclusive classes. According to the MoE official, 182 CWD have been enrolled in inclusive educational programs (78 CWD in pre-schools and 104 in primary schools) since the start of the National Program on Development of Inclusive Education.

Advocacy efforts by the international child protection institutions and national civil society groups resulted in changing government policy towards education rights of children with disabilities. In recent years, the GoAz has enacted two major initiatives (The National Program on Development of Inclusive Education, 2005 and State Program on De-Institutionalization, 2006), which enabled

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\(^{11}\) According to the survey results with the school directors, only 4 schools in the survey target areas have integrative classes.

\(^{12}\) Although such certificate of completion may not play a big role for the future of CWD, parents are keen to obtain such diploma due to social, cultural, societal and even economical reasons. However, it is evident that there is a need for an empirical research to deeply explore the issue.
government agencies to foster new opportunities in inclusion of children with disabilities into mainstream schools. The growing emphasis on inclusive education reinforces new demands from the government. The government has increasingly been responsive to such calls from the civil society. For instance, recently CIE provided accessibility guidelines for the Public School Construction Guidelines prepared and endorsed by the MoE’s Education Sector Reform Project funded by the World Bank and the GoAz.

The study also revealed that there is a noteworthy support for inclusive education among the school community: about 37% of surveyed school directors and the same percent of teachers believe that CWD should be enrolled in inclusive classes. At the same time, the study revealed cases where individual schools or regional educational authorities have taken independent decisions to include children with mild disability into mainstream school education. Out of 43 surveyed village school teacher, 23 reported that their school had an inclusive class. This was an unexpected finding because officially inclusive education is piloted only in four district Centres (urban schools)

13 and none of the country’s rural schools have been officially directed to establish inclusive classes. But our data revealed that 16 village schools from Nakhchivan Autonomous Republic (NAR) and 7 village schools on mainland Azerbaijan have established inclusive classes without official decision of the MoE. In the case of Nakhchivan schools, it was regional ministry of education, which took decision and in the case of mainland schools it was the school directors who made decisions to enrol children with disabilities into general school. This finding allows inferring that there is at least minimal support and effort by the regional government and educational authorities to create opportunities for CWD. However, it is important to highlight that these efforts are limited to only ‘giving an access’ per se, and the quality and outcomes of such education opportunity is of big question as many of these schools don’t have necessary capacity to teach and educate CWD (e.g., trained teachers and their assistants, methodology, teaching aids, etc). For example, as it was observed by researches:

... all observed general schools could be divided in two groups. One group represented traditional organization of classroom with conventionally arranged desks, a whiteboard on the central, front wall, posters with alphabets, multiplication tables and other visual aids on the other walls. Another group was represented by the classrooms which were organized in activity Centres allowing children to get in groups and work independently with various materials and visual aids. In some classes we saw computers but did not see children using them. In one classroom in Baku school we noted a special place, “designated corner” for a pupil with special needs. However, we did not see any special facilities or equipment for children with physical disabilities. Even the schools with pupils with cerebral palsy did not have any special equipment to accommodate their physical needs. In almost all classes CWD were sitting at the back desks and spending most of the time working with teacher assistants.

Although teachers and teacher assistants working in pilot inclusive schools are trained by NGOs they still do not have enough knowledge and experience to meet educational need of CWDs. Observations confirms this finding:

...lesson pace in inclusive classrooms have the same structure as we observed in special and boarding schools. Even in the classes where teachers tried to give different, say, non-conventional start to the process, they would end up asking oral questions and concentrate on the information the pupils could recall or reproduce rather than focus on giving more freedom and facilitate independent learning. Even in non-conventional classes teachers’

13 Obviously, urban term may have varying definitions; in this report the term ‘urban’ refers to all central cities and towns, including district (rayon) Centres (e.g., Yevlakh, Sheki) and regional cities (Ganja, Nakhchivan).
primary goal was to check the knowledge of mathematical operations, reading and writing skills and reciting a poem. We saw teachers making good steps toward implementation of a child-Centred approach facilitating informal conversation between the children by asking questions, helping children to give answers using self-made expressions but we did not see them employing these strategies when they were teaching a new concept and explaining a new topic.

... One of the common features observed was that most of the teachers did not know what kind of educational needs their pupils with disabilities had. They were not also informed about the medical/psychological help they need or receiving at the moment. When we (researchers) asked questions regarding the diagnoses of the pupils with disabilities the teachers would either ask the children themselves or respond in a very vogue manner.

...3rd grade teacher in Yevlakh region loudly asked a girl sitting at the back desk what her diagnosis was. This happened during a break, but all children, teacher assistant and research team were in the classroom. Girl’s reaction was interesting: she did not say anything and teacher did not make her to answer. She turned to us and said: “I think something is wrong with her heart.”

...In Sumgayit school a teacher told us that the girl in her class were having very difficult diagnosis but could not say what was it, but she could name the girl’s particular problems, like challenging behaviour and problematic family background. In almost all inclusive education classes teachers would always rely on teacher assistants’ knowledge of special needs children’s medical profile and diagnoses.

Observations of inclusive education classes show that teachers have very limited range of teaching methods to provide children with more meaningful learning. In some classes teachers successfully using methods such as group work/discussions and brainstorming. Some teachers considering learners’ individual characteristics to provide them with additional time to finish the task, but they would all require pupils to submit the task on one particular form and style. In all classes the learning activities were initiated by teachers and focused on their plans; all instructions would be given by teachers and rely on information in the textbook and handmade cards which would replicate the textbook information. Rarely teachers making connections to previously learned concepts.

Despite the limitations in inclusive and integrative classrooms MoE works towards achieving the goals of international documents and welcomes any initiatives by local and international NGOs to develop more sustainable programmes to meet educational needs of CWDs. MoE plays a significant role in provision of inclusive education as it is entitled to act as a coordinating body to streamline efforts and programs of various government and non-government agencies. One positive outcome is that at the ministry (subsequently, the government) level there is increasing recognition of the role that NGOs may be important in bringing about effective results. There is hope that this recognition will lead to improved cooperation between the state and civil society groups that may translate into increasing opportunities for more inclusive educational policies. Some national NGOs have accumulated a certain level of expertise in inclusive education and they are ready to share their experience with their government counterparts who lag behind in capacity and expertise. It must be noted, however, that generally inclusive education is a reasonably new concept for the country and a certain timeframe is needed to observe substantial improvements.
3.1.3. Special Education

Collected data indicate that about 11% of CWD attend special and residential (boarding) schools. According to the MoE official there are about 12 residential schools and 7 special schools under the administration of the ministry. These schools are remnants of the Soviet legacy, which foresee isolation of children from their non-disabled peers and the society at large. The ministry intends to shut down the boarding schools, or transform them into other forms of the educational institutions or rehabilitation Centres that will foster more integrative and inclusive principles.

Special schools have been established under the Soviet educational system and have undergone some minor improvements under the new Law on Special Education and according to the study findings; these schools play some role in equipping children with disabilities with basic skills and knowledge. According to the FGD with the teachers from special schools in Baku, although very few in numbers, they are equipped to accommodate the needs of CWD. Additionally, staff expressed that they have been trained well and their salary is higher comparing to salary levels at general schools. A significant number of school directors and teachers believe that CWD have to be enrolled in special schools (27.5% of directors and 25% of teachers). In the long run this educational arrangement offers promises to accommodate children with severe impairment, but its scope and size is not adequate to cover all such children. Existence and promotion of special schools may also contradict the provisions of the government programs on De-Institutionalization and Inclusive Education.

Despite the statements of teachers, observations conducted in the special and boarding schools proves that these schools do not have capacity in terms of infrastructure and quality of services to accommodate the needs of children with special educational needs. For example, during the observations it was not possible to find out if teachers working in the special and boarding schools were familiar with child-Centred methodology and if they were provided with opportunity to learn about it. Some of the comments from observers reflect following:

...we (researchers) saw all teachers having lesson plan and reviewed some of them. The plans were written according to the state program. It is more official document rather than working plan. We never saw teachers following their plans. In some cases it was obvious that a teacher could not follow the plan because of a child’s health conditions, developmental and mental problems. This approach could be understood as attempts to individualize teaching approaches and accommodate them to the particular needs of a child based on the learning difficulties and necessity to teach basic concepts. But as a fact we observed this approach to be used by all teachers with all children in all grade levels independently of the nature of their learning difficulties and health problems. Same content and same teaching approaches are suggested to all children.

... we observed teachers using very limited range of methods to explain new topic and present a new concept. Most of the time a teacher would talk and ask pupils to repeat what she was saying. Oral questioning was almost the only method to carry on the lesson: asking concrete question supposing recalling the information and expecting a concrete answer. Oral presentation and questioning was the only method to explain new topic and reinforce it.

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14 3644 CWD receive education in these institutions, according to official government statistics.
15 According to the government statistics, there are 5 additional boarding schools under the administration other governmental ministries (MoLSSP and MoH), serving to 513 CWD. The government policy towards these institutions is not clear. But there are talks of including them into De-Institutionalization Program of the GoAz.
16 It should be noted that the quality of the teaching in all schools (where CWD enrolled) is discussed at length in Teaching Practice section of this report. The study team could not independently verify the quality, conditions and infrastructure in the special schools referred by the focus group participants.
... Whatever activities children were engaged in independently of the type of educational provision the teacher would be the only initiators. Every activity was focused on recalling and remembering concrete information and structured around the tasks given in the textbooks.

According to the government data, there are 12 specialized boarding schools for children with disabilities. Left in despair for a long time after the independence, these schools facilitate total isolation of CWD and in reality offer limited services for them. These schools accommodate children until the age of 18 and there is no regulation or practice on where these children need to be transferred after this age. After many years of neglect, the government started to pay more attention to the needs of boarding schools. The Heydar Aliyev Foundation, a national foundation, is one of the major players and its interventions have resulted in significant improvements. However, these improvements are limited only to infrastructure and building supplies and often ignore issues pertaining to quality of teaching and availability of services. Although there is no long-term governmental vision yet, the MoE intends to transform boarding schools into rehabilitation Centres or special schools, which will follow more inclusive policies according to the State Program on De-Institutionalization. The study showed that support for boarding schools is also in decline – less than 15% of surveyed directors and teachers have supported such schools.

### 3.1.4. Other educational opportunities

There are a handful number of community-based alternative care Centres that have been established in recent years. Almost all of these Centres have been functional thanks to foreign donor funding and are available both in urban and regional (but not rural) settings. Varying in the degree of quality, size and scope of work, these alternative care Centres are seen as pioneers in new approach towards CWD education and care. The GoAz has inherited three of these Centres from an international development agency, which might trigger opportunities for other Centres to receive some kind of government recognition and therefore support. However, thus far the government has sent mixed signals in this regard, leaving much ground for speculations and rumours. Currently, almost all of the Centres are dependent on foreign funding and face organizational management and professional development challenges. It is also important to mention that all inclusive education pilot projects in the country implemented with the support and expertise of these Centres since the regular school do not have trained specialist staff.

According to the FGD with the NGO representatives and government official interviews, many of these NGOs have accumulated an immense amount of knowledge, expertise and skills in two broad directions: efforts in educational and rehabilitation services for children with disabilities and their parents; and efforts in policy development and capacity building for the government. There are NGOs that have been active in both directions, particularly those of internationally affiliated and there are others who acted in one of the directions. International NGOs such as United Aid for Azerbaijan (UAFA), Save the Children, International Medical Corps (IMC), and local NGOs such as Mushvig, Goygurshagh, Caspian Mental Health and others were active in support, education and rehabilitation services, which resulted in providing basic and vocational education for children with disabilities, offering legal and psychological support programs for families of CWD, parental education and others.

On the other hand, there are agencies that have been actively working with relevant government agencies in project piloting, capacity building and policy design. UNICEF, World Vision and IMC (currently not active in the country) are among the international agencies that operate or have operated in this role. Interviewed government officials have cited CIE – a local civil society group –

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as the prime counterpart for government ministries in learning and applying the international experience in policy and methodology of inclusive education. CIE is one of the leading agencies in piloting inclusive education in the country and has gained substantial endorsement from all stakeholders. The government is willing to collaborate with local reliable civil society organizations and there is increasing shared value and shared responsibility available among these players.  

3.2. Barriers to Education

3.2.1. Availability
The study revealed several key barriers to the access, availability, quality and affordability of education for CWD. It showed that availability is seemingly not a major barrier to education as only 16% of children with disabilities do not receive any kind of education. However, the data showed that CWD have limited choices for their schooling. Only universally available option across the country is home education, while other are limited to mostly urban areas. Particularly, integrated and inclusive education is not an option available for majority of children, which can be regarded as another key barrier to the education of children with disabilities. This gap is more prevalent in rural parts of the country, as majority of rural children do not have chances to receiving education with their non-disabled peers even in special or integrative schools. The only provision available in all rural parts of the country is home education, which has disadvantage as it facilitates isolation. Additionally, there are many quality-related issues regarding to this education type, such as lack of trained professionals, availability of teaching materials, low self-esteem of teachers, lack of teacher support systems and others.

Educational arrangements such as inclusive and integrative education are available only to a few children with disabilities living in central cities. According to the available government and survey data (2006), out of all study target region, the only location where all kind of services available are Baku and Sumgayit cities – two major industrial Centres of the country. Only six large regional Centres do offer three out of five available provisions and in the remaining parts of the country only home education is available.

MoE official admitted that there is no adequate number of alternative care and educational Centres, rehabilitation agencies, pre-school institutions available to meet the very needs of children with disabilities. The central government has enacted several laws and regulations to make services available for children, however many laws do not have functional implementation mechanisms, or the civil servants are not ready to apply these new stipulations or adequate funding is not allocated to make implementation possible. In other words, there are problems of effective and efficient policy-making and problems of institutional/administrative character. It is obvious that the change towards an education philosophy that will include CWD is a long-term process; however, there is a clear need for all relevant government agencies and civil society organizations to work hand-in-hand to fill in the gaps.

Availability is also limited by the lack of specialists. Many schools, particularly in the regions, do not have qualified specialists to accommodate services needed for CWD. According to the survey data, about 90% of schools do not offer occupational therapy; about 70% of schools do not have speech therapists and only 0.8% of schools offer vocational skills. The only favourable situation is with regard to psychological therapy, as 58.1% of teachers reported that their school offers this type of services because schools are required to have psychologists. Only 25.8% of surveyed parents of CWD reported that their children receive special services (e.g. speech therapy).

\[\text{Data in these paragraphs was derived from interviews with the GoAz officials and NGO representatives.}\]
Finally, inclusive educational arrangements for CWD are limited only to pre-school and primary education levels. This means that many children with disabilities of 10 years of age and older have limited choices of educational services. Considering limited policy mechanisms with regards to capacity building of teachers of secondary education, the seriousness of the issue is abruptly visible. Many teachers at secondary and higher level of education have no or limited knowledge, expertise and practical skills in teaching and educating CWD either at home or at general schools. There are issues with regards to the availability of higher education opportunities for CWD. However inclusive education pilot project started by CIE and World Vision in pre and primary schools is being continued at secondary school. This can be regarded as a promising fact towards the inclusive education developments in the country and willingness of the government to continue reforms in the field.

3.2.2. Accessibility
This study has explored physical accessibility of educational institutions available for the children with disabilities. In this regards, more emphasis is given to integrative, inclusive, special and boarding schools and less emphasis on home education. However, it should be noted that there are accessibility issues pertaining to home education as well; for instance, there are reports that teachers have hard time accessing homes of CWD in rural and regional locations due to lack of transportation means, worsening road conditions, extreme winter conditions and refusal of parents to accept teachers at home.

Access is one of the major concerns for education of children with disabilities: only a handful number of school buildings across the country are adequately equipped to accommodate the needs of CWD. The survey among parents and teachers indicates that accessibility of the school buildings is problematic. The Graph 3 clearly indicates that physical accessibility and accommodation of CWD is a challenging question for the most schools. The same or very similar picture is seen in the data from teacher/school director surveys, FGD and expert interviews. About 55% of teachers and close to 60-70% of school directors stated that their school building is not accessible or cannot accommodate the special needs of CWD. This conclusion was confirmed by the two MoE officials during interviews, saying that the significant majority of school buildings cannot accommodate the needs of children with disabilities.

![Graph 3. Parents’ satisfaction level with the school infrastructure (%)](image)

Question: Are you satisfied with the level of infrastructure to accommodate you child’s needs?
Moreover, lack of affordable and accessible transportation means hinders children’s abilities to attend newly established special schools or community-based alternative care Centres in regional towns. The government’s financial assistance mechanisms to support transportation of children do not meet such needs: the existing regulation foresees families of CWD to receive 10 AZN (about $12) per month to cover transportation needs. However, there are barriers to this.

First, this amount is enough to cover only minimum amount of trips to and from school. Second, the regulation limits this provision to only those children who attend special school. Therefore, considering that only 3.5% of surveyed children attend special schools, the overwhelming majority of children with disabilities either cannot benefit from such government assistance or this assistance is not adequate to meet their real needs.

Many teachers of regional schools did emphasize that accessibility is one of the serious barriers for the children with disabilities’ education. FGD with these teachers revealed that due to lack of public and specialized transportation system in the rural settings of the country many children are deprived of chances to attend mainstream school. These limitations force children to receive education at home. The data shows that transportation is not problematic only for rural areas. Parents and teachers in urban areas state that public transportation system in cities such as Baku and Sumgayit is not adequately designed to accommodate the needs of CWD. Considering high poverty levels among families of CWD, who cannot afford private transportation means, lack of specialized public transportation can be regarded as a serious barrier to accessibility of schools.

Finally, as shown in the Graph 3 (pp.16), the school buildings’ infrastructure is not designed to accommodate special needs of children with disabilities. A significant portion of these schools don’t have specialized toilets and hygiene conditions made available for CWD (over 80% of teachers and 75% of directors reported that their schools’ toilet cannot accommodate children with special needs). About 20% of parents reported that their schools’ visual aids are not satisfactory. About 63% of surveyed directors and 53% of teachers reported that their school’s visual aids do not meet the needs of children with disabilities. These findings facilitate a conclusion that facility accessibility is one of the most serious obstacles to the education of children with disabilities in the country.

All these obstacles are not observed in the schools only. In general, public buildings, streets, restaurants and cafes, public transport in the county are not developed considering the needs of people with disabilities.

### 3.2.3. Affordability

The study’s findings with regards to affordability yield controversial results. Seemingly affordability is not a barrier to education of children with disabilities. In fact, only about 5.1% of parents, whose CWD are involved in any kind of schooling, said that their children missed a class due to financial reasons. However, about 27.2% of parents, whose CWD who do not receive any kind of education indicated financial difficulties as the barrier to their children’s education (see Graph 4, pp.18). Families living in rural areas of the country place more emphasis of financial burdens comparing to urban areas – 43.2% vs. 20.7% respectively. This conclusion is confirmed by other studies, which encountered that rural poverty is more significant in Azerbaijan.

A significant majority of parents think that their child’s health status is the major barrier for education. In general, the data indicates that parents of CWD spend limited amount of family

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19 The study could not identify what and how health status is barrier to education. There could be several explanations for this: the commission’s decision; parent’s mis-perception about the severity of child’s disability; misreporting; lack of knowledge of educational provisions that accommodate CWD and others. Definitely there is a need to explore this issue further.
earning for the education of their children (only 5% of monthly income). When asked to prioritize expenses if income will be increased, the majority of these parents did prioritize food, pharmaceuticals, medical expenses and clothing, and less than half of the parents listed educational expenses as priority. There are at least two possible explanations for these results: 1) parents do not adequately value education, thus allocate limited amount for this purpose; 2) parents really have limited educational expenses related to their children with disabilities and there are other sources that cover most of the education expenses. Clearly, there is a need for additional research to study this particular question, which can provide further suggestions on alleviating barriers for education.

Nonetheless, majority of parents expressed dissatisfaction with government financial assistance. As shown in the Graph 4, majority of families with CWD have less than 250 AZN (about US$305) of monthly income and they receive about 339 AZN (about $413) per year in cash from the government to support their children’s needs.

This research has tried to explore the financial opportunities available for the use of parents that will facilitate education of their children. According to the study data, parents of CWD receive about 10 AZN (US$12) per month as a transport fee from the government. Additionally, each parent of CWD is entitled to receive about 35 AZN (about US$40) compensation from the government to meet the needs (food, medical, clothing, etc.) of their child. According to the survey data, 92% of the parents stated that the government financial assistance do not meet the needs of their disabled child. The analysis of the government statistics also allow inferring that the governmental support remained minimal between 2002 and 2007, despite the fact that the country has experienced significant economic growth with state budget increasing 10 times between 2002 and 2007, whereas the average government financial assistance grew about 2.5 times. Considering the high inflation rates in the country, the level of financial assistance cannot be satisfactory. The overwhelming majority (83%) of respondents expressed dissatisfaction with the amount of government support. The study revealed that the families receive other kind of support from other sources (relatives, donations).

Graph 4. Reasons why CWD do not receive any education (parents, %).

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20 It should be noted that according to the official government statistics, the total amount of government financial allowances has significantly been increased. But this was due to sharp increase in the total number of recipients: in 2001 about 26000 children aged 16 have received government allowance; in 2006 this number have almost doubled to 51900 children. There is no official explanation in this sharp increase, but we can offer two plausible explanations: 1. it might be a result of improvements in the reporting scheme, so more CWD is detected and entitled for government allowance; 2. this might be a result of misreporting, or fake disability certificate, which is widely practiced in the country. For official government spending see http://www.azstat.org/statinfo/social_sec/az/005.shtml
21 It is not clear what is the inflation rate in the country. The inflation figures are contradictory – official sources claim it being less than 18% (annual) whereas international institutions put the figure as high as 22% for the year 2007. Local experts claim the inflation rate being about 30% in consumer prices for 2007.
23 The government allowances are not indexed to the inflation rates in the country. It is at the discretion of the president of the country to increase allowances.
3.2.4. Quality

Additional caution was taken in this section as quality of education is a rather controversial and complex issue to study. The study tried to cover a maximum number of factors that may influence the quality of education. According to the data, there are many factors that have direct or indirect impact on the quality of education for CWD. Teacher preparedness, teacher salaries, assessment tools/indicators, special teaching and child Centred methodologies, aids and school infrastructure are a few to list. This study tried to explore the quality of educational provisions from the perspective of users and providers, and through the assessment undertaken by the external observers.

According to the survey data about 93.1% of parents of CWD said that they are satisfied with teachers who train their children. When asked about reasons for this satisfaction, about 55% said they like teacher’s attitude towards their disabled child and 25% of parents said they like teacher’s attitude (or behaviour) towards parents. Only 17% of parents expressed satisfaction with the teaching process in the classroom.

On the other hand, parents expressed less satisfaction with the education process in general (Graph 5). About 55% of parents expressed satisfaction with the education process, whereas 37.7% said it was less satisfactory, and 7.7% said non-satisfactory. However, when parents were asked why they were satisfied, more than half simply stated that they observed “development”24 in their disabled child, only about 8% of parents said their child can read and write, and about 6% percent said they did not notice any change in their child. This allows inferring that parents may have limited knowledge and skills in assessing the quality of the teaching and education process.

In general, it is clear that parents are generally satisfied with the current level of education. Teachers and school directors were a little more conservative in assessing the quality of education process: only 52% of teachers and 45% of directors are satisfied with the education process.

The survey data also revealed that majority of respondents believe that teachers who are directly involved in education of CWD need intensive training and capacity building. The majority of school directors, teachers and parents share this conclusion. For instance, out of 51 surveyed school directors, 34 reported that their school teachers are not specialists to teach children with disabilities. Additionally, almost all interviewed government experts have expressed serious concerns about

\[24\] Due to limitation in the survey methodology, it was not possible to clarify what kind of “development” parents observed in their child.
availability of specialists and their preparation process. Many stated that NGOs (CIE, UNICEF) together with GoAz (MoE) have been active in training teachers; however these efforts were limited in scope, quality and size. For instance, only 35% of surveyed teachers stated that they have received specialized training on skills how to teach CWD. Moreover, the overwhelming majority, about 79% of them, have expressed need for additional trainings. An overwhelming majority of surveyed directors, 47 out of 51, expressed need for additional training for teachers. The experts cautioned that the government needs to take serious steps to fill in the gap and allocate necessary resources for specialist preparation; otherwise, the GoAz may fail to implement meaningful reforms in the field. Additionally, many interviewed teachers stated that there are no teaching methodologies, skills, and strategies available for their perusal though they are eager to learn them. Lack of textbooks, teaching and visual aids add to the controversy over the ability of teachers to deliver quality education. Finally, teachers expressed dissatisfaction with the fact that there are no specialists (e.g. speech therapist, psychologists) in the schools who are needed to provide special services for CWD. These services, according to teachers, would create additional opportunities for them to improve the quality of education.

Another key factor that can hinder the quality of the education provided for children with disabilities is related to the support and reward system of teachers. The study found that in most cases, particularly in rural areas, teachers of CWD do not receive additional salary for their extra work. According to the survey data about 56.2% of surveyed teachers are not rewarded for their extra work. The FGD with teachers of mainstream schools have also discovered a similar picture, where many teachers have complained about their compensation levels. Teachers emphasized the lack of teacher assistants, stating that according to the educational regulations teachers working with CWD have to be provided with teacher assistants, who support the teaching process offering necessary services to children with disabilities in the class or at home in case of home schooling. However, this provision is not prevalent across the country, particularly in rural/regional schools (according to the survey data only about 19% of teachers have assistants. Majority of surveyed teachers and those participated in FGD strongly believe that availability of teacher assistants will ease the teaching process significantly for the teachers, disabled students and their non-disabled peers. Schools involved in inclusive education pilot projects were assigned teacher assistants as a part of the national program on inclusive education. Since the program ends in January 2009 this staff unit will be cancelled and teachers hired for the pilot projects will be made redundant.

The study also found that there is lack of standardized indicators to measure teacher and student performance in education of CWD. The government also recognizes that the educational arrangements do not have effective measurement system that will enable all stakeholders – parents, teachers, school managers, civil society and the government – to draw conclusion on the state of affairs of education for children with disabilities. According to the study records there is acknowledgement in the country that the Soviet quality indicators are outdated and do not comply with new educational arrangements, whereas available international standards are not studied well enough to incorporate them into the system.

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25 For instance, about 70% of surveyed teachers acknowledged that it is very or somewhat difficult for them to teach CWD, while only 30% said that they don’t have any difficulties. More than a half of the surveyed directors reported having difficulties in teaching children with disabilities.

26 Director survey data puts the figure even below 50%.

27 According to the study data, teacher assistants are provided only in inclusive education pilot schools in the following cities and towns: Baku, Sumgayit, Mingachevir and Yevlakh. There is anecdotal evidence that there are cases where there is no teacher assistant available even in these schools.
3.3. Family, government and other support systems

One of the key focus areas of this study was families of CWD who play a vital role in enabling children with disabilities to receive education. In order to capture the full range of factors that can affect parental decision, the study designed survey questionnaire for the parents of non-disabled children, organized FGD with them, and asked views of teachers and experts. But the major emphasis was given to the parents of CWD. About 90% of surveyed parents reported having one disabled child, 9.7% of them having two children with disabilities. 67% of surveyed parents were mothers, whereas 24.4% were fathers, the remaining parents reported being grandparents of CWD. Among surveyed parents 24% had academic degree, 52.3% held a high school diploma, whereas about 10% of parents have only middle school education. An overwhelming majority of surveyed parents reported having a complete family (family with both parents).

At the same time the surveyed parents of CWD have reported several key needs of their children, which require substantial amounts of monthly earning. For instance, about half of the parents said that their children with disabilities have dietary needs. The survey data relays that about 40% of parents believe that they need about 300 AZN per month to cover the needs of their children with disabilities alone (mostly to cover food, medicine and clothing expenses). As was stated above over 80% of surveyed parents reported having less than 250 AZN total family earning per month (Graph 7).

The high unemployment rates, particularly in rural parts of the country, allow inferring that parents have limited chances to increase their family budgets. Poverty remains as one the key issues

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28 Employment rate is another indicator where official statistics contradict the international ones. According to the government data during last five years more than 650,000 jobs have been created, over 80% of them in the regions. However many local and international experts have serious doubts about reliability of such data.
for Azerbaijan, where about one fifth of the population lives under poverty line. Clearly, parents face serious financial challenges, which hinder their ability to facilitate education for their children with disabilities.

Surveyed parents stated that their extended families also support them, but this support is not significant. About 59% of surveyed parents of CWD expressed that they face psychological difficulties in dealing with their children with disabilities. Parents expect their family members and the government to assist them to alleviate these difficulties (Graph 8). About one third of the parents believe that medical treatment of their children with disabilities is the way out, whereas about 20% of them think that increased government financial assistance is needed to cope with difficulties.

About 10% of parents stated that they don’t know what can be done to help them. Very few parents have cited trainings or special support services for families. It can be argued that due to lack of previous practice, many parents do not envision any systematic full-range of family support services that can be done either by government or civil society groups to ease their challenges. Considering that more than 40% of parents reported that their children with disabilities cannot self-service, the burden on parents is ominous. In this regard, a comprehensive family support services is vital to help parents of CWD.

Partnership between the school and families is one of the important aspects of successful education. Teachers are interested in involving parents in the educational process but there is a lack of skills to build this collaboration from both sides, families and school. Some teachers interviewed mentioned:

“I wish someone could explain parents how it is important to come to school more often and find out how their children do here.”

“There has to be a great work done with the parents, we cannot work with difficult children without their support.”

On the other hand, there are attitudinal problems that parents can face in Azerbaijan. The most prevailing understanding of child disability in the country is based on “defectology.” In other

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Here again there is mismatch between the government data and alternative data: the GoAz claims that poverty level declined below 15%, whereas international agencies such as WB believe that it is still high at around 25%, acknowledging significant improvement since 2003. The last household budget survey of 2002 by WB revealed that the poverty was extremely high in regions, particularly in Nakhchivan Autonomous Republic, IDP and refugee settlements, and suburbs of Baku. For more visit the WB’s web-site www.worldbank.org
words, many view these children with some “defects” that have to be kept out of the society or cured at a special facility. According to the results of interviews with the representatives of community-based rehabilitation Centres many parents of CWD hold the same or similar view. Therefore, many parents feel discomfort to walk their disabled child into public places, parks or schools alike. One mother said the followings to the manager of a rehabilitation Centre:

“While every time riding in the bus I was thinking that everyone looks at me and my son; I assumed that he shouts loudly and draws people’s attention. Then I started to concentrate on my son rather than people in the bus, describing him the things on the street. I realized I was changing day-by-day and now I am very comfortable in public places.”

Many respondents place great role on mass media institutions in raising awareness among the public. When asked if mass media institutions (TV, radio, newspapers) allocate enough resources (airtime, articles) highlighting the issues related to the needs of CWD and their families, about 56% of surveyed parents said that mass media does not highlight at all or the level is not satisfactory. About 27% of teachers and the same percentage of directors expressed the similar view. However, only 19% of teachers and 31.4% of directors are fully satisfied with the mass media’s efforts. Significant majority, more than half of the surveyed teachers and 41% of directors said that they are somewhat satisfied with mass media coverage. A significant majority of parents of non-children with disabilities believe that mass media’s job is not satisfactory and they are expected to do more.

3.4. Expectations from Education
The value of education has always been an important factor to measure: what is expected from education as much investment is contributed towards it by both the people and government? The study tried to understand the perceptions of education by different stakeholders. 73.4% of surveyed parents of CWD reported that their children are willing to receive education as they observed enthusiasm in them. About 45% of the same parents reported that their children are involved in extra-curricular activities in- or out-of-the-school (majority of these children are interested in painting)\(^{30}\).

A significant majority of surveyed parents expressed confidence that education will have positive impact on the future lives of their children with disabilities (Graph 9). Even more confidence is expressed by surveyed teachers and directors.

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\(^{30}\)Interestingly, more rural children have extra-curricular activity than urban children. Though study data do not offer explanation for this, one plausible interpretation could be that environment is more inclusive in rural areas comparing to cities and towns.
The respondents believe that education is helping to improve basic knowledge of children with disabilities and will increase opportunities for future career development of them. In this regard many believe that the government needs to prioritize the vocational/skills-oriented education for CWD.

The study survey among parents and teachers revealed that they observe significant change in children with disabilities receiving education. The Table 2 demonstrates that the most observed change that parents reported is increased positive attitude towards parents and peers. The similar picture is seen in the data from teachers: they also reportedly observed more attitudinal development among children with disabilities attending schools. Emotional development was another area observed by parents, teachers and directors.

<table>
<thead>
<tr>
<th>Table 2. What development changes did you observe in CWD after attending school (1 = less, 5 = more)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents</td>
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<tr>
<td>----------</td>
</tr>
<tr>
<td>Attitude towards parents</td>
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<tr>
<td>Attitude towards peers</td>
</tr>
<tr>
<td>Emotional development</td>
</tr>
<tr>
<td>Daily life skills</td>
</tr>
<tr>
<td>Independent thinking</td>
</tr>
<tr>
<td>Health conditions</td>
</tr>
</tbody>
</table>

Parents of non-disabled children also strongly support CWD getting education. Analysis of FGD with them indicates many of them (particularly in the regions) believe that receiving education is the right of every child and is necessary for all children including CWD. They believe that social integration of children with disabilities can be facilitated by giving them educational opportunities. Parents from Yevlakh region stated that inclusive education should be endorsed in all schools because it helps children to accept and adapt each others’ differences. However, a small number of parents of non-disabled children think that CWD mainstreaming into general school should strictly be based on their diagnoses and only those children can be enrolled who will not negatively impact the learning process of other pupils. These parents believe that CWD can be destructive in the classroom.

The majority of parents of non-disabled children used words like “ill children” when referring to CWD. This misconception then reinforces parents’ conclusion that “ill children” cannot study with “healthy children.” Nonetheless, there was one clear finding that almost all parents acknowledged a need and expressed support for educational opportunities for CWD in one or other form.

3.5. Knowledge and attitude in the society

Throughout the study one point stood out clearly – many believe that the society is not ready to accept and foster new approach to educational opportunities for CWD. The majority of interviewed experts, civil society representatives, school community members believe that inclusive educational arrangement is a fundamental change in educating children with disabilities, therefore there is a need for more time to reforms. They argue that the Soviet legacy of defectology and isolation have left serious perceptions and stigma in the people's mind, which require to be dealt with. Only half of the surveyed parents of CWD and teachers stated that there is a positive attitude towards children with disabilities in the society. While less than 10% believe that attitude is negative, yet a significant percent of parents and teachers think that attitudes are neither bad nor good.

31 Yevlakh is one of the four IE pilot regions. Such views from parents can be regarded as a robust change in societal attitudes.
FGD with parents of non-disabled mothers indicate that parents have limited knowledge and perception about disabled child’s enrolment into general school. Many believe that only CWD with mild disability or with physical disability should be allowed into mainstream school. The data from FGD indicate that parents of non-children with disabilities (particularly from regions) believe that children with serious mental disability should be kept out of the school and can be enrolled in special schools. At the same time, about 20% of surveyed parents of CWD expressed disagreement for their child’s attendance in general school\textsuperscript{32}. On the other hand, only 58% of surveyed teachers supported CWD enrolment into general school. They are afraid of mistreatment or misbehaviour against CWD by their non-disabled peers. Moreover, many interviewed teachers believe that it will pose challenges if CWD will be taught together with non-disabled pupils; e.g., it will negatively impact non-children with disabilities; there will be a need for extra time, or the quality of teaching will decline as more time is required to train CWD\textsuperscript{33} and so on. Finally, the significant majority of teachers believed that the society (parents in particular) is not ready to accept inclusive education. Such perceptions have been regarded as a serious barrier to educational arrangements of CWD by the experts, and they argued for comprehensive public education campaigns to alleviate this problem for effective reforms in the field. Some believe that there is a need to work with the society to break the stigma, perceptions about and understanding of children with disabilities and their needs before launching inclusive education reforms.

However, the above-shown study figures allow inferring that the societal attitudes towards CWD are not so negative to be barrier for education of children with disabilities. The FGD with parents of non-disabled revealed that they are generally positive for CWD attending mainstream schools. Additionally, as shown in the Graph 10, the majority of parents of CWD expressed that their children have significant positive experience in the school. The only issue that rose was the assumption that children with severe mental impairment could be dangerous for others in the classroom. In other words, it seems that societal attitude towards CWD attending mainstream schools is not a fundamental problem and lack of specific knowledge about the severity of disability could trigger existing perceptions.

\textsuperscript{32} The survey questionnaire did not explore this issue further, which poses limitations on interpreting this high disagreement among the surveyed parents. Obviously there is a need for more research on this question; nonetheless, one possible explanation could be existing stigma among parents of CWD and or previous unsuccessful experiences.

\textsuperscript{33} Of course this is a sign of stigma. An Evaluation Report of pilot Inclusive Education program conducted by an independent reviewer in 2006 revealed that “86% of teachers reported that presence of children with disabilities in classroom affected positively or did not affect at all the overall quality of education.” (Children with Disabilities – Inclusive Education Project: Second Year Evaluation Report, 2006, Centre for Innovations in Education, Eyyub Hajiyev, MSW).
3.6. Services

Special service for children with disabilities is one of the important factors in enabling smooth and meaningful education. Therefore availability of such services is a key measure to assess the quality of education offered to CWD. The study revealed that the need for such services is paramount: an overwhelming majority of surveyed parents (94.6%) said that they themselves serve their children with disabilities. About 25% of them said that their children receive additional services provided by specialists. About a half of the teachers and the same percentage of directors think that children with disabilities can use services available to them. The following paragraphs will describe the findings with regards to various aspects of such services.

The existing legislation in Azerbaijan stipulates that individuals with special needs have the right to seek free services from Medical-Pedagogical-Psychological Commission (MPPC) and Medico-social expert commissions (MSEC). Additionally, they are entitled to receive compulsory and vocational education, psychological services and speech therapy. However, this legislation’s stipulations are vague in language and often fail to specify what kind of services and special offers available for children with disabilities and their families (more on this please see the relevant section of this report).

According to the existing legislation, there is a special body under the auspices of the MoE, MPPC, which is authorized to take decision about the educational provision for CWD. A legacy of Soviet era, the commission is comprised of experts from the ministries of health, education and labour and social protection and is responsible to examine every disabled child on annual basis and appropriate them to one of the available educational provisions: home education, integrative class, inclusive class (this opportunity only exists since 2004), special school and boarding school. MPPC is established at the regional level with one central commission based in the capital city. According to the existing official regulations, it is the responsibility of MoE to manage the MPPC and MoLSPP to manage the MSEC both at the central and regional level.

According to the data collected from FGD with the teachers of special schools (in Baku), these schools provide a wide range of special services for CWD. According to them the schools are equipped to meet the educational and medical needs of children with disabilities. As other schools are concerned, study found that not all schools can provide the necessary services. For instance, many teachers stated that their school has psychologists only and a few said that there is speech therapist available in their school. Only 25.8% of surveyed parents reported that their children with disabilities receive additional special services. Whereas 80% of school directors and the same percentage of surveyed teachers reported their school provides services. Parents expressed need for variety of specialists, where need for physical therapist leads the list (28%). Parents reported their children need speech therapist, occupational therapist, psychologist and general medical service. The study data shows that parents living in rural and urban areas have emphasized on the same specialists while expressing their children’s needs for special services.

On the other hand, according to the survey data, the schools provide psychologists, speech therapists, physical therapists, and labour therapists. As shown in the Graph 11 (pp.27), according to the survey with teachers, the most prevailing special service available in the schools is psychological. The survey among school directors also gave similar results: out of 41 schools directors, 30 reported having psychologist only. Additionally, there are physical therapist and

34 There are different terms used for this school. One of the other terms is ‘residential schools’ that will be used by this report.
35 No explanation could be derived from the study data about this significant discrepancy between parent data and teacher/director data. One explanation could be that parents simply are not aware of or never received such services at school.
speech therapists available. However, as data indicates, the majority of rural schools cannot provide many services\textsuperscript{36}. This disparity can be explained by the fact that according to the official regulation the general schools are required to have psychologist, but not other specialized services.

The study could not reveal reliable data about the quantity and quality of trainings provided for these specialists. According to the MoE official, the higher institutions of the ministry have programs to prepare speech therapist, psychologist and medical university prepares physical therapist. Occupational therapist is a new profession in the country and thus there is a significant gap in this area. On the other hand, some NGO experts believe that most of these university programs lag behind in quality of curriculum and enabling students to get practical skills. For instance, the experts believe that the university psychology program has highly theory-based curriculum and offer limited practical skills to future school psychologists. Moreover, this university program teaches students on how to work with non-disabled children, but not with CWD. Additionally, these students have been trained more on psycho-diagnostics rather than applied-educational skills. Finally, university programs still work on the concept of “defectology”, which does not incorporate the principles of inclusion. Experts attribute the similar assessment to other specialists available in the country. In fact, almost all interviewed government officials pointed out to the difficulties in this aspect of education of CWD. The MoE official reported about a new university program, which will prepare social workers. This is a program implemented with the support from Open Society Institution – Assistance Foundation. The first group of 25 undergraduate students will be admitted in the fall of 2008 at the Baku State University under the Department of Social Sciences and Psychology.

As was mentioned in previous sections, there are a handful number of community-based rehabilitation Centres which offer special services for children with disabilities. Mostly established by the parents of children with disabilities, all of the Centres have been affiliated with an international partner agency and in most cases their staff have been trained by international experts. Varying in size, quality, methodology, target and scope of work, these Centres accomplish significant amount of work fulfilling pressing gaps in rehabilitating children with disabilities. Although there are differing assessments about the quality of their services, everyone agrees that they have to be encouraged to continue their important efforts.

\textsuperscript{36} It should be noted that the rural school data might not be statistically significant, as only 27 teachers answered this question who teach at rural (village) schools.
There are several drawbacks regarding these Centres; first, majority of these Centres located in the urban areas (mostly in and around Baku, Sumgayit and Ganja) and can serve to limited number of children with disabilities. Second, as mentioned the Centres employ different rehabilitation methodologies, which makes their assessment and quality assurance difficult and sometimes impossible. Third, there is no reliable relationship between these Centres and the government, which may result in financial and operational instability of the Centres. Fourth, these Centres are not widely known and recognized in the country. In fact, less than 5% of the surveyed parents mentioned rehabilitation Centres as available services, which they know of. An overwhelming majority of surveyed teachers and directors also did not know about these Centres. Fifth, the majority of the Centres’ staff is paraprofessionals, who have been re-trained through international and national trainings and other methods. Finally, many of these Centres have serious weaknesses in terms of their professional and organizational outlook, which can be seen as obstacle for them to attract beneficiaries.

MPPCs positioned themselves as alternative source of services. According to the existing legislation, these commissions have to offer necessary special, counselling and consultative services to CWD and their families. Comparing to rehabilitation Centres, MPPCs are well known among the stakeholders: 17 directors out of 51, only 17% of surveyed parents of CWD, and 21% of teachers reported knowledge about MPPC services. The data show that still a significant majority of respondents don’t know about the roles and responsibilities of MPPCs. The similar picture was observed in the discussion with parents and teachers of non-children with disabilities: the absolute majority of them did not know about MPPC.

One interesting finding that the study came up is the relationship between the knowledge about MPPC and parents’ income and education. The cross-tabulation between these variables indicates that those families who earn more are less aware of the services of the commission (Table 3).

<table>
<thead>
<tr>
<th>Family monthly income (AZN)</th>
<th>Do you have information on Pedagogical-psychological-medical commission?</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 50 AZN</td>
<td>Yes</td>
<td>39</td>
<td>83,0</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>8</td>
<td>17,0</td>
</tr>
<tr>
<td>50 – 100 AZN</td>
<td>Yes</td>
<td>86</td>
<td>57,0</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>65</td>
<td>43,0</td>
</tr>
<tr>
<td>100 – 150 AZN</td>
<td>Yes</td>
<td>153</td>
<td>63,2</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>89</td>
<td>36,8</td>
</tr>
<tr>
<td>150 – 200 AZN</td>
<td>Yes</td>
<td>125</td>
<td>53,6</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>108</td>
<td>46,4</td>
</tr>
<tr>
<td>250 AZN and more</td>
<td>Yes</td>
<td>74</td>
<td>50,0</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>74</td>
<td>50,0</td>
</tr>
</tbody>
</table>

Interestingly, according to the data, families who earn less than 50 AZN per month are more aware of the services of MPPC. One explanation to this data is that poor families are in search of services. Additionally, the commission certified document may entitle the family for the government allowance, or at least there could be such perception among the parents. On the other hand, this data relays that wealthy families’ children do not get education because families need to receive permission from the commission to enable their disabled child to become eligible for education. In fact, the cross-tabulation between the variables indicates that children with disabilities of one third
of the families earning more than 250 AZN/month do not attend school, whereas children with disabilities of an overwhelming majority of parents earning less than 50 AZN/month do receive education.

Moreover, the study found that there is no significant relationship between the parent’s level of education and knowledge about the services of the commission. As shown in the Table 4, the level of education does not significantly impact the parent’s information about the commission: 45.7% of parents with middle school diploma (completed 1-9 grades) and 61.3% of parents with high school diploma (completed 1-11 grades) are aware of the commission - the difference is not significant. The same can be said regarding the university graduates: about 60% of them reported having information about the MPPCs.

Nonetheless, an overwhelming majority of surveyed parents, teachers and directors (88%, 87% and 92% respectively) approved the services provided by MPPC. This contradiction can be attributed to the fact that the majority of stakeholders are not fully aware of the roles and responsibilities of the Commissions. The comments provided by the respondents allow inferring about that: even if people know about MPPC, they don’t know about their services: majority of parents and teachers described MPPCs as entity, which issue a certificate. Very few parents reported receiving counselling or consultative advice on subject-related matter. Surveyed teachers and interviewed civil society representatives reported that in most cases the commission members are not enthusiastic about their job. Additionally, some people report that there are bureaucratic barriers and obstacles to pass through the examination. There is anecdotal evidence that some commission members seek informal payments from parents.

<table>
<thead>
<tr>
<th>Table 4. Cross-tabulation: level of education vs. information on MPPC.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education level of respondent</td>
</tr>
<tr>
<td>-----------------------------</td>
</tr>
<tr>
<td>Primary</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Incomplete secondary</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Secondary</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Vocational</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Technical</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>University (bachelor-level)</td>
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<td></td>
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<tr>
<td>University (master-level)</td>
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<td></td>
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</table>

Experts point out to several key drawbacks in the legislation and practice of the commissions. These issues cover broad range of matters. For instance, according to the legislation the commission should allocate 15-20 minutes to diagnose a CWD and approve or reject the previous diagnose. However, according to the international classification this time is too short for quality judgment.

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37 It should be noted that one of the reasons could be a lack of educational provision. But our data analyses complement each other in this case: families earning more don’t know about MPPC and their children do not receive education. One potential reason for this could be higher level of stigma among wealthy families comparing to poor families.

38 The data is not statistically significant in the cases of primary and university (master) education as number of respondents is too small.
Another key weakness is the current classification of mental disability in the country, which is the remnant of the Soviet era and is the only available guidance for the commission. Experts believe that this classification does not comply with the requirements of the World Health Organization (WHO) and contradict the inclusion. Finally, there is limited incentive for the commission members to commit themselves. Though the legislation stipulates that the commission members are entitled to receive extra salary (50% of their salary) but in practice only the commission chairs receive this reward. All these and other non-listed factors have been seen as serious impediment in the work of the commissions, according to the expert. Add to this, there is limited oversight of the work of the commissions in the regions. Clearly the commissions cannot provide meaningful services under the existing conditions.

3.7. Legislation

Having joined the international community and its major documents on the child rights, Azerbaijan has equally committed to conduct reforms within the national policy for improved protection of the rights of CWD. Evidently, the problems and challenges faced by these children are numerous and their solutions demand comprehensive and complex approaches. As in every context, it is undeniable that educational process should occupy one of the central places in the lives of CWD in Azerbaijan as well. Currently, many national and international stakeholders in Azerbaijan are interested in the reformation of the education system for the given category of children. Undoubtedly, a properly formulated strategy is necessary to launch this reformation and analysis of existing legislation is one of the primary steps in this long way. In order to reveal the scope of educational opportunities afforded by the national policy, it is necessary to analyze the content of different laws, regulations and other legislative acts.

This section of the report is built upon both the comparative analysis of the national laws and the relevant international documents (CRC, CRPD and Salamanca Statement) and the review of the regulations of the national laws. Comparative analysis conducted in terms of child rights, policy and organization, educational possibilities, training and preparation of educational and professional personnel, external support services and community perspective

3.7.1. Child rights

The principles of equality and non-discrimination as well as equity can provide a solid basis for state policy in numerous spheres. CRC constitutes the compilation of guiding principles which are irreplaceable for developing national legislation on children. Azerbaijan has signed and ratified this international document in 1992 and based on it and other relevant documents developed the Law on the Rights of the Child of Azerbaijan Republic (the National law hereinafter). It is expected that there should not be major contradictions between CRC and the national laws in general, including the rights and interests of CWDs.

CRC requires the States Parties to “respect and ensure the rights of each child within their jurisdiction without discrimination of any kind, irrespective of the child’s or his or her parent's or legal guardian’s race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status”. CRPD also repeats this provision prohibiting: “all discrimination on the basis of disability” and obliges “to guarantee to persons with disabilities equal and effective legal protection against discrimination on all grounds.”

National Law confirms the equal rights for all children. It is equally important to emphasize that the National Law that does not allow other legal acts of the national legislation to restrict the rights and freedoms of children defined by this law\textsuperscript{40}. Hence, neither children nor their parents or legal guardians can be discriminated based on disability. As it is defined in the preamble and Article 7 of CRPD, the “States Parties shall take all necessary measures to ensure the full enjoyment by CWD of all human rights and fundamental freedoms on an equal basis with other children” and that “in all actions concerning CWD, the best interests of the child shall be a primary consideration”. A close equivalent provision in the national legislation, we can emphasize the Article 11 of the National Law which recognizes “the right of every child to develop comprehensively, to be reared based upon national and international values, the principles of humanism and ethics”.

CRC considers the child as an individual who can make choices. It states that “States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child”\textsuperscript{41}. This also is mentioned in the Article 7 (3) of CRPD. National Law is partly consistent with this principle since it declares that “Every child has freedom of conscience, thought and speech. The parents, other persons and the state authorities should respect the freedom of conscience, thought and speech of the child…”\textsuperscript{42} However, it is not very clear from this provision whether the child can participate in “all matters affecting him or her” and whether his/her opinion will receive “due weight”.

There are particular provisions both in CRC and CRPD as well as in the National Law describing the needs and rights of the CWD. National Law declares that:

“Children with disabilities and children with mental or physical deficiencies have the right to receive medical, dialectological and psychological assistances. These services are provided immediately, free of charge or with preferential terms. The state is arranging social and psychological rehabilitation for these children, education corresponding to their abilities, as well as assists in selecting occupations and providing with employment. The state is taking appropriate measures to prevent child disability”.\textsuperscript{43}

It is important to mention that CRC is using only the term “mentally or physically children with disabilities” while the National Law distinguishes between “the children with disabilities” and “children with mental or physical deficiencies”. Evidently, such classification in the National Law does not comply with international terminology. For this purpose, it is enough to classify the given category of vulnerable children as “children with disabilities”. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law. CRC and CRPD establish the core principles which are not reflected in the National Law.

\textsuperscript{40} Article 2, The National Law (May 18 1998)
\textsuperscript{41} Article 12 (1), Convention on the Rights of the Child (1998)
\textsuperscript{42} Article 14, The National Law (May 18 1998)
\textsuperscript{43} Article 35, The National Law (May 18 1998)
\textsuperscript{44} Article 23 (1), Convention on the Rights of the Child (1998)
3.7.2. Policy and Organization

The functionality of the Azerbaijani legislation is built upon adopting laws and their mechanisms appropriately. After the Parliament adopts a law, relevant structures prepare implementation mechanism(s) for given law upon the President’s authorization. Usually, it is the Cabinet of Ministers (CoM) which prepares and approves documents on law mechanisms. Without these documents, the laws are considered to be “dead” legal acts.

Despite the Salamanca Statement calls for equality for children, youth and adults with disabilities in primary, secondary and tertiary education, the legislation in Azerbaijan is still supporting special school system for children with all disabilities. The Special Education Law (May 2001) mostly indicates special schools as a provision for CWD. It also specifies what “child with disabilities” means, “A person who has physical, psychological and mental problems, and cannot be educated without special provisions.” The Law also develops a classification of disabilities: a) physical defects – physical delays as result of infections, problems with some organs; b) psychological inhibition – problems with psychological development, speech defects, socio-emotional problems, autism; c) complex defects – complex of physical, physiological and mental problems; d) mental retardation – cognitive problems as a result of central nerve system; e) severe defects – severe complex of physical, physiological and mental problems which do not allow to be educated on the base of state educational standards. However, the Special Education Law has some parts, which give children with special needs a right to be educated in mainstream or inclusive classrooms. It gives a description for inclusive school/classroom, “General education school which is accommodated to develop an environment to educate CWD with their non-disabled peers.” This paragraph of the Law reflects some recommendations of the Salamanca Statement about accommodations and education in regular classrooms. Yet the Law puts limitations on types of disabilities to be accepted into these classrooms.

To determine the needs and diagnosis of people with special needs Special Education Law requires the development of the Special Committee. Responsibilities of the Committee, developed on the base of Decree No74 on Establishing Psychological-Medical-Pedagogical Commission (2002) include: a) to assess and evaluate child in early years in order to confirm or reject the medical diagnosis; b) to give a recommendation on the type of schools for child depend on his/her disability; c) to consult parents about possibilities of appropriate schools; d) to give recommendation during Individual Education Plan development; e) to consult doctors, teachers and social workers about disabilities and how to work with children with different needs. All these services have to be provided for CWD for free. If the Expert Committee decides that a child with disability can be educated in a regular classroom then a school principal can not refuse to accept the child into the school and Local Executive Department is responsible for accommodating the school as well as providing the child with educational materials and special services.

3.7.3. School Factor

The Salamanca Statement welcomes the development of inclusive schools, appropriate forceful policy, financial support and special service provisions. The system in Azerbaijan has to be modernized to meet the needs of teachers, children and parents. There is not flexibility in the curriculum to find weaknesses of students and help them to overcome difficulties. Schools in Azerbaijan do not have technical support and equipment to meet the needs of the children. As a result, regular schools are not ready to accommodate children with SEN.

45 The Cabinet of Ministers of the Republic of Azerbaijan (29 April, 2002) Decree No74 on Establishing Psychological-Medical-Pedagogical Commission
The Salamanca Statement sees school management as a main instrument to push the system towards the inclusion, indicating that school principle can play a role in making the school more responsive if she/he is given more authority and adequate training. School directors can participate in trainings and get appropriate skills and knowledge on how to accommodate children with SEN. Unfortunately in Azerbaijan they do not have an appropriate technical support and authority to make independent decisions for action. Even schools which accept CWD are not provided with special services and accommodations, and modifications are not made to make them suitable for the task. Although Decree No87 on “Organization of the Teaching Process in Integrative School Settings” is a step to achieve inclusive education settings in schools, the Decree has some points, which automatically close the doors of regular school to people with special needs. First of all, this Decree approves mainstream classes with 8-10 children with special needs in a regular school. The Decree puts some limits on who, i.e. people with which disabilities can be accepted into regular school and sets ratio of children with SEN to non-disabled in the classroom to 20/80 ratio.

CRC mentions the necessity of “achieving right to education progressively and on the basis of equal opportunities”. The National Law describing the child’s right to education does not contain the principle of equality. This provision makes clear that “every child has right to education based on the legislation of Azerbaijan Republic on education. The state education system creates conditions for the development of child’s personality, full acquirement of necessary knowledge and skills. Children’s avoidance of the compulsory general school education is prohibited.” The National Law indicates to the necessity of providing children with education corresponding to their abilities. Undoubtedly, the abilities and capacities of children are different but the rights are equal. CRC also denies the possibility of limiting opportunities since it demands “the development of the child’s personality, talents and mental and physical abilities to their fullest potential.”

CRC demands higher education to be “accessible to all on the basis of capacity by every appropriate means” and this provision is also not reflected in the National Law. According to the state policy, it is required to submit medical statement upon admittance to high schools in Azerbaijan. It creates a direct barrier for the CWD.

The CRC obliges the states to “take measures to encourage regular attendance at schools and the reduction of drop-outs rates”. The National Law does not require the state supervision and monitoring of educational process. For the CWD in Azerbaijan the issue of attendance is specifically important since they face many physical and material obstacles which eventually lead to drop-outs. For instance, the Azerbaijani law does not require the physical accessibility of schools for CWD.

Another internal inconsistency in the National Law is that its provision on state programs does not include CWD. The Article 3 declares that “the state policy should be directed toward upbringing the children within the necessary material and domestic conditions, educating them based upon progressive standards, and assisting them to become decent citizens”. The Article 30 tries to comply with this statement by declaring that, “the special (state) programs are providing the children who live in the areas of and are exposed to the influences of military conflicts, epidemics, natural and ecological catastrophes with the protection. These programs also cover the orphans and children who lost one of parents, children from poor and martyr’s families”. Even though the CWD are separately covered by the Article 35, they are not mentioned as a category of disadvantaged.

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49 Article 29 (b), Convention on the Rights of the Child (1998)
50 Article 28 (e), Convention on the Rights of the Child (1998)
children falling under special state programs. However, the further legislative practice proves the existence of special programs dealing with the needs and rights of CWD.

The Special Education Law (2001) contains the regulation on arranging special education at regular education institutions. It states that, “According to the legislation of the Azerbaijan Republic, individuals with disabilities have a right to be educated at regular educational institutions with special conditions based upon decision of psychological-medical-pedagogical or medical-social expert commission”. However Special Education law does not require creating those conditions at regular schools. The further analysis of the Azerbaijani legislation demonstrates that in many cases the terms “inclusive education” and “integrative education” are given the same meaning. For example, the Special Education Law gives a definition to some terminology used in the field:

1) Person with limited health conditions – is a person with a physical insufficiency, mental and psychological inhibitions, who is experiencing difficulties in educational process if appropriate conditions are not developed;
2) Integrative education – education of children with limited health conditions together with healthy children in the classrooms with developed special conditions for them;
3) Integrative classroom – classroom in general education school with developed special conditions to educate children with limited health conditions together with healthy children.\textsuperscript{51}

However, the terminology used in the Special Education Law itself contradicts the notion of inclusive education since it was chosen on the base of the medical diagnosis. The definition of integration is given without the explanation of the integration, as the preferred models are not described in the document. Inclusion is not mentioned in this document at all. “Inclusion” as specific terminology comes up in the normative acts and decrees by the CoM later on. As a result, in all documents following the Special Education Law terminology and understanding of the definitions of integration and inclusion are mixed.

After special pre-school and general education school, the Special Education Law entitles individuals with disabilities to professional training based upon their abilities, capacities and interests, and to employment upon completing education and professional training. It is an interesting fact that the Special Education Law employs the term of “special education programs” for pre-school and general school education but evidently, the document does not consider any special education program within professional training. This can be interpreted in two ways: either the state wants to integrate these children at professional training level, or it does not possess enough resources for further arrangement of special education. Undoubtedly, the international norms welcome inclusive education, but it is explicitly expressed that these children are entitled to additional support within inclusive settings. The provision on professional training in the Special Education Law does not consider this additional support. The Law on Rehabilitation and Social Protection of Disabled (25 August 1992) also contains provision on professional training and speciality development for disabled at education and other state institutions.

The further consideration of the laws brings to certain collisions and contradictions regarding further levels of education. According to the Special Education Law (2001) and General Education Law (2001) CWD are not entitled to higher levels of education. The Special Education Law does not contain any provision regarding technical-college and high school education for these children. The General Education Law considers the organization of special professional training courses,

\textsuperscript{51} The Government of Azerbaijan Republic (2001) The Special Education Law
schools and lyceums for physically children with disabilities. Articles 18 and 19 on technical schools and colleges and high schools (high colleges, conservatories, academies, universities etc) do not mention children or youth with disabilities. As a result, CWD are only entitled to pre-school, general school and primary professional training education. However, the Law on the Rehabilitation and Social Protection of Disabled (25 August 1992) explicitly describes the entitlement of disabled to all levels of education within the national context:

“the general school, general professional and high education of disabled is conducted at the mainstream education or the special education institutions when it is required. In order to provide special conditions for education of disabled, specialized departments or sections are organized at the technical-professional schools, colleges and high schools.... Special conditions are arranged for admission exams of disabled...”

The provisions of the Special Education Law requiring separate regulations for implementation are mainly covered by the Section III of the law. This section describes the organizational issues of the special education. The section on organization of home education states that, “for individuals incapable of visiting education institutions because of the health conditions, the education process should be arranged by appropriate education institutions at home”\(^\text{52}\). The second paragraph of this article is imposing the responsibility on relevant executive structures for defining the disability types requiring home education and arranging such education. Consequently, the CoM adopted the Decree No077 on “the List of diseases granting the right to home education and the Regulation on Organization of Home School (or Education)”\(^\text{53}\). While this list concretely presents the medical aspect of diseases, it is also incomplete. One of the major legal implications of this document is that the arrangement of home education is regulated by MPPC. However, this regulation does not define the body or structure responsible for the implementation, supervision and monitoring of home education. The Law on Rehabilitation and Social Protection of Disabled (25 August 1992) also contains provision on home education which grants material support and privileges to parent or legal representative of the child.

The Article 10 of the Special Education Law on Organization of Education at Stationary Institutions (Hospital Conditions) requires arranging home education if individuals with disabilities should remain in the hospital conditions for longer periods (more than 21 day). The Law on Rehabilitation and Social Protection of Disabled (25 August 1992) defines the same right for children staying at clinic conditions\(^\text{54}\). In difference from some other regulations, Decree No88 on Organization of Education for Stationary (Hospital) Conditions clearly indicates that Ministry of Education should organize the education process, namely it identifies the responsible body for the implementation\(^\text{55}\). Moreover, it defines the directly responsible structure: “the organization and management of the education at the stationary medical unit is implemented by the nearest general education school”. Furthermore, the local education bodies are in charge of monitoring such educational process. In own turn, chief medical doctor should be engaged in defining the time and format of the education which involves establishing coordination of tasks between the medical and educational units. Even though there is no a clear-cut task division this document presents a relatively clearly described mechanism for its implementation.

The Decree No87 of the CoM from May 29, 2002 approving the Regulation on Education at the Education Institutions with Integrative Settings, is referring to the Article 12 on “Organization of

\(^{52}\) Article 9, The Special Education Law (2001)

\(^{53}\) The Cabinet of Ministers of the Republic of Azerbaijan (May 10, 2002) Decree No077 on “the List of diseases granting the right to home education and the Regulation on Organization of Home School (or Education)”

\(^{54}\) Article 20, The Law on Rehabilitation and Social Protection of Disabled (25 August 1992)

Integrative Education” of the Special Education Law. The regulation states that the development of integrative education is provided by the state. But neither the previous nor the following paragraphs of the regulation name procedures and mechanisms to support a direct implementation, supervision and monitoring of the integrative education. This regulation does not distinguish between the inclusive education and integrative education since it defines that, “education institution with integrative settings is a regular school with special conditions created for the purpose of joint education of individuals with disabilities and without disabilities”. Paragraph 7 of this regulation states that the education of deaf, blind children and children with vision less than 40 percents cannot be organized together with non-disabled children. The document does not clarify the reasons of such denial. The regulation is continuously empowering the psychological-medical-pedagogical commission in deciding on cases for admittance to integrative education as well as for changing the type of education in general. Unfortunately, it does not make the regulation more concrete and explicit.

The Statute on Pre-School Institutions (2004) requires the availability of social-pedagogical service at pre-school institutions. This service is to work on establishing connections between these institutions, families and society and consulting parents. This presents an example of establishing services at places which means bringing the services to child, instead of taking child to services. The paragraph 33 of the Statute on Pre-School Institutions is imposing on the Ministry of Education the management of these entities, but this act does not clearly define mechanisms for implementing this document, as well as supervising and monitoring the implementation process. Decree No078 on The Statute on Special Education Institutions (2002) does not also mention any structure responsible for the implementation of this regulation, as well as supervising and monitoring of the implementation too.

3.7.4. Recruitment and Training of Educational Personnel
Preparation of educators is one of the most important points of the Salamanca Statement. According to statement, pre-service training programs should be provided to all teachers of primary and secondary school. In Azerbaijan only one university involved in pedagogy and teacher preparation provides a course on inclusive education. This course is provided at the State College of Pedagogy as a part of Step-by-Step Program (SbS), which is run by CIE. As a part of the National Inclusive Education Pilot Program (NIEPP) a group of professors were also trained on inclusion. NIEPP administration is trying to prepare a team of professionals, who will develop a curriculum for institutions involved in development of teachers’ in-service and pre-service programs. NIEPP also provides training on inclusive education for teachers, teacher assistants, and school administrators working in the program. These activities are implemented on the base of decision made by the MoE but there is not a legislative documentation reflecting on these aspects.

3.7.5. External Support Services
The Salamanca Statement states that provision of special services is an important component for success of inclusive education policies. CRC states that “States Parties recognize the right of the disabled child to special care and shall encourage and ensure the extension, subject to available resources, to the eligible child and those responsible for his or her care, of assistance for which application is made and which is appropriate to the child’s condition and to the circumstances of the parents or others caring for the child”. CRC does not specifically describe types of services and

56 The Cabinet of Ministers of the Republic of Azerbaijan (May 29, 2002) The Decree No87 on “Organization of educational process in integrative school settings”
57 The Cabinet of Ministers of the Republic of Azerbaijan (4 March, 2004) Decree No024 on “The Statute on Special Pre-School Institutions for Individuals with Disabilities”
assistances which can be explained by variety of needs of CWD. The National Law also generally considers the provision of children with social assistances. National Law mentions that “…relevant executive structures may provide additional assistances and privileges to the children who are in need”\(^{59}\). However the law does not demand the availability of additional support when it is required, rather it allows the executive structures to be decision makers.

It is possible to compare the Article 35 of the National Law with the third paragraph of the Article 23 of CRC which specifically mentions the requirement of ensuring that “the disabled child has effective access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities…” But, the major difference is that CRC emphasizes that all these should be done in a manner conducive to the child’s achieving the fullest possible social integration and individual development, including his or her cultural and spiritual development, which cannot be found in the National Law.

There is contradiction within the national legislative documents regarding organization of out of school education for CWD. The General Education Law lists creative clubs, sport and art schools, studios, libraries etc. and mentions the right of schoolchildren to use the services of relevant institutions free of charge or with preferential terms\(^{60}\). There is no equivalent or similar provision in the Special Education Law. However, the Law on the Rehabilitation and Social Protection of Disabled (25 August 1992) mentions the out of school education for CWD. It state that in order to contribute to comprehensive development of children with disabilities, to activate them socially, to attract their attention to labour, science, technique, art and sport, the relevant executive structures should create required conditions for out-school education of children with disabilities\(^{61}\). It also states that talented children with disabilities are entitled to receiving free music classes, acquiring skills in fine and artistic arts at mainstream education or at other relevant institutions out of special schools. In order to prove the incompliance of previously mentioned national legislation with international documents, it is enough to mention that CRPD demands the state parties to ensure that CWD have equal access with other children to participation in play, recreation and leisure and sporting activities, including these activities in the school system.

Although the texts of Decree No85\(^{62}\) and Decree No74\(^{63}\) mention certain structures responsible for the implementation, the coordination of tasks is not explicitly reflected. The Statute on the MPPC confirms the extraordinary competency of the commission by stating that the right to education of individuals with disabilities is confirmed by the document given out by the MPPC.

The Decree No73\(^{64}\) meets the requirement of the Salamanca Statement about taking full account of individual differences and situations. This Decree requires providing all CWD with speech pathologist in both special and regular schools. Unfortunately, only two types of special services can be provided in Azerbaijan: speech pathology and physical therapist. Azerbaijan does not have any formal degree programs to prepare special service providers within the country.

\(^{59}\) The Article 29, The National Law (May 18 1998)  
\(^{60}\) The Article 26, The Special Education Law (2001)  
\(^{61}\) Article 18 and 19, The Law on the “Prevention of Disability, Rehabilitation and Social Protection of Disabled” (25 August 1992)  
\(^{63}\) The Cabinet of Ministers of the Republic of Azerbaijan (29 April, 2002) Decree No74 on “Establishing Psychological-Medical-Pedagogical Commission”  
\(^{64}\) The Cabinet of Ministers of the Republic of Azerbaijan (29 April, 2002) The Decree No73 on “Providing speech pathologist”
3.7.6. Priority Areas
The Salamanca Statement indicates three main target areas to be developed: early childhood education, girls’ education and transition from education to adult working life in all these areas the role of local culture in Azerbaijan is unpredictable. Sometime girls with special needs are isolated from the society more than boys. For example, only five of twenty children involved in the first year of NIEPP were girls. However, the index of non-disabled girls’ involvement in education is almost the same as the boys. During 2002-2003 academic year 90 per cent of boys and 87 per cent of girls, in during 2003-2004 94 per cent of boys and 91 per cent of girls of relevant age group enrolled the first grade. In 2002, 51,410 students enrolled in primary/secondary and 120,039 in higher education system, and only 11 and 71 of them respectively were people with special needs. In general there are 20,000 children with special needs and only 27.6 per cent of them are educated in special, boarding or home schools.

Decree No72 gives the right to people with SEN to be accepted into vocational schools to get a technical profession. Only people who get the permission of either Psychological-Medical-Pedagogical Committee or Medical-Social Expert Committee can apply to those schools. In this process the level of disability and the number of years attended to the compulsory schooling are considered. Some people with SEN, who do not have a compulsory education, can be accepted in to vocational schools and there are no age restrictions for applicants. This Decree also validates the right to get a degree and to be employed. However, it does not spell out the process of employment and non-discriminatory measures for people with SEN. Acceptance into a vocational school is a positive step in helping people with SEN to get a job, but unfortunately no proper work condition are provided in work places.

3.7.8. Community Perspective
The Salamanca Statement supports an involvement and awareness of community in inclusive and special education programs. Parents have rights to be informed about educational programs and consulted on special school and inclusive school provisions for their children. Both national and international legislation considers parents or legal guardians as important stakeholders of educational process. The Salamanca document regards parents as privileged partners while considering the special educational needs of their child. It states that the choice in the type of education provision they desire for their child should be accorded to the extent possible. The Education Law states that, “parents (or individuals replacing them) have the right to select an education institution as well as an educator for their child”. However, the Special Education Law (2001) rather limits this right of parents by only allowing them to participate in defining the type of special school for their child. This is where the contradiction occurs between the Special Education Law and the decree on the role of MPPC. MPPC is given the full responsibility on deciding the type of provision for CWD without the parents’ decision. Even though the Special Education Law (2001) allows the parents’ to reject MPPCs decisions, it does not clarify the procedures to consider complaints. Special Education Law (2001) obliges parents and other legal representatives of CWD to apply to the relevant executive and educational structures for provision of education at regular schools. Undoubtedly, this “right” expressed in the form of the obligation appears when the commissions decide on possibility of educating the child at regular schools.

67 The Cabinet of Ministers of the Republic of Azerbaijan (29 April, 2002) Decree No72 on “Vocational schooling for people with disabilities”
Unfortunately parents in Azerbaijan are still passive in this process. Among the factors contributing to this phenomenon are: poor education of parents, especially in the rural areas; lack of information given by the authorities about parents’ and children’s rights; poverty, especially in rural areas; and corruption at most levels of the government, due to which even those who are aware of the legislation and their rights cannot get the provisions that they are entitled for.

3.7.9. Resource Requirements
The Salamanca Statement recommends the development of inclusive schools to achieve education for all, and that this must be recognized as the key government policy. The Statement sees this as the only effective way to get adequate resources. The government and MoE support all projects directed at having more inclusive classrooms and schools, but unfortunately they cannot afford to provide schools with necessary resources. Mostly this responsibility relies on NGOs, implementing the pilot projects. Government does not have a module of providing teachers with resources, and children with special services. However, on February 3rd, 2005 the President signed the National Action Plan (NAP) for five years (2005-2009), which aims to develop the conditions to move from special education to inclusive education. The NAP mostly covers the technical changes, such as equipment, furniture, maintenance of schools to meet the standards of inclusion.

The Special Education Law (2001) covers some aspects of the financing also. The Article 25 of this document regulates the special education financing. Even though the article classifies the financing sources as state and local budgets, it does not name structures or institutions which should undertake direct responsibility for funds allocation. It states that relevant executive structures should arrange the transportation of children educated in special state education institutions. Mechanisms of this provision are not comprehensively described in separate documents, but later developed Decree No.193 presents one of the forms of implementation mechanism.

Evidently, apart from pure teaching and learning context, availability of material support for students is one of primary conditions for realizing educational process. There is no separate law or regulation describing the entitlements of CWD to different types of material support aiming to make their education possible. It has been already mentioned that these children are under the full state provision which means that they should be taken care of at every step. The Special Education Law confirms this by mentioning their entitlements to free services, educational materials and facilities, transportation fees etc. However, in addition, they CWD are also entitled to certain types of allowances and pensions. The following are the legislation norms granting right to allowances and pensions for CWD which should supposedly make educational process more accessible to them:

1) The Law of the Azerbaijan Republic on Social Allowances (approved by the President of the Azerbaijan Republic on February 7, 2006) includes disabled people and CWD under 16 in the category of “individuals incapable to work”. Further, it distinguishes “allowance for disability” (Article 4.0.1.3.) and “allowance for CWD younger than 16” (Article 4.0.1.4.) among other types of allowances. Accordingly, the Decree of the President of the Azerbaijan Republic on Additional Measures for Strengthening Social Protection of Population (22 January 22, 2007) is appointing the allowance for CWD under 16;


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69 The Cabinet of Ministers of the Republic of Azerbaijan (13 December, 2004) Decree No193 on the “Funds paid to parents and other legal representatives of children involved in special education for transporting them to special schools, health and rehabilitation centres, and medical institutions”
disability. The Article 12 allows allocating this type of pension for insured individuals who became disabled before 19 in case they possess one year of insurance length;

3) The Law of the Azerbaijan Republic on Provision of Pensions for Citizens (approved by the President of the Azerbaijan Republic on September 23, 1992) mentions the pension for disability among other types of state employment (social insurance) pensions. Further, the law defines that individuals taking care of CWD younger than 16 are entitled to employment pension. In the Article 14 the law concretizes that mothers taking care of CWD are entitled to pension when these children become eight years old.

4) The Law of the Azerbaijan Republic on Social Insurance (approved by the President of the Azerbaijan Republic on February 18, 1997) includes in the list of social insurance the criteria of “disability” and “child care” as well. Even though parents or legal representative(s) of child with disabilities are direct beneficiaries of the social insurance for child care, still practically, the child should benefit from both types of insurances.

5) The Law of the Azerbaijan Republic on Targeted State Social Assistance (approved by the President of the Azerbaijan Republic, October 21, 2005) clarifies that if children are residing at the state institutions then they are not taken into consideration as family members while social assistance is appointed for family. Practically, it repeatedly underlines that children residing at the state institutions, including the CWD are under full state provision;

6) The Law of the Azerbaijan Republic on Health Protection of Population (approved by the President of the Azerbaijan Republic on 18 February, 1997) in general entitles the population to the state provision on social assistance. Accordingly, CWD may receive certain support based upon this law as well.
4. Conclusions and Recommendations

This study intended to explore the level of educational provision for CWD in Azerbaijan in terms of policies, resources and practices, and emphasize the main implications of the lessons learnt with respect to policy and teaching practice reform.

The goals of the study are: 1) To assess the state of educational provision for CWD in Azerbaijan from CRC perspective in terms of legislation, policies, resources and practices, and emphasize the main implications of the lessons learnt with respect to policy reform; 2) To analyze economic and financial issues affecting the inclusion of all children in basic education; 3) 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 CWD 4) To provide recommendations to strengthen the capacity of the government and other partners in Azerbaijan to bring about policy reforms, ensure adequate resource allocation, and promote programming that supports inclusive education.

The study revealed that as other former Soviet Union republics, Azerbaijan’s education system is not fully adequate to accommodate educational needs of CWD. There are serious challenges in accessibility, affordability, availability and quality of educational provisions in Azerbaijan. Majority of these barriers can be alleviated with better government regulations and policies that address the real needs of CWD and their families. The interviews with the government officials allow inferring that there is a lack of coordination among different state agencies involved in child care and education. Most importantly, it seems that the government has not yet clearly identified the visionary path that it wants to pursue with regards to educational arrangements for vulnerable children.

It is also clear that much is needs to be done by the civil society organizations with regard to public education (raising awareness among people, parents, etc.) and government advocacy. The study revealed that there is still stigma, wrong perceptions about and limited understanding of issues related to CWD and their families. Moreover, the stigma and misperceptions exist among the families of children with disabilities, who are not empowered enough to take leadership in seeking and creating opportunities for education of their children. Nonetheless, there is a well-grounded hope that existing political will and support, increasing government budget allocations to public education system, improved recognition and collaboration between and among the government and civil society agencies and changing attitudes will result in proactive, responsive, effective and efficient policies in order to achieve “education for all.”

The study findings indicate that families of children with disabilities in Azerbaijan face immense amount of moral, financial and administrative challenges, which hinder parents’ abilities to effectively seek educational opportunities for their children. Whereas the existing support system, both formal and non-formal, fall short in equipping the families with effective and efficient vehicles in resolving issues of children with disabilities. As study data showed, an overwhelming majority of parents seek additional support from the government and their family members. Available government support services are limited to mere monthly cash allowances, which do not meet even very basic physiological needs of the children and don’t meaningfully contribute to the education of CWD. Additionally, the parents of CWD are in serious need of institutional and non-institutional psychological and moral support services, which are largely unavailable or inaccessible across the country.

Despite the difficulties, majority of the families are in support of education as they believe it will ease the future life of their children with disabilities. The GoAz needs to consider this belief as a strong family foundation for education of CWD and therefore should streamline all policies and
projects to benefit from this belief. Additionally, civil society establishments should use this opportunity and put forward efforts to transform such beliefs into behaviour and practice among parents (of CWD and TDC), school community and the wider community.

The study findings allow inferring that there is a serious lack of special services to meet the needs of children with special needs. This gap is strongly associated with the out-dated approaches of the Soviet era, which has narrow medical approach. On the other hand, due to segregative policies of the past, many general schools do not have special service specialists as it was (and still is) not required by the system. Additionally, higher education institutions of Azerbaijan have limited programs to prepare professionals to full in the gaps. Available teacher training curriculum has a narrow focus on theoretical aspects of services, and in many cases entire curriculum is not available (e.g., occupational therapy, social work).

The most widely available services are offered by the MPPC. However, the study concluded that there are serious problems associated with the work of the commissions and MPPC has to undergo serious re-structuring or reforming. Under these circumstances, it is clear that the educational provisions in the country are not fully equipped to carry out the very role, which will enable the CWD to receive quality and beneficial education.

Analysis of the regulations shows that the mechanisms lack concrete description of tasks and accordingly, responsible structures for the implementation, supervision and monitoring of those tasks. In reality, it significantly complicates defending and realizing the rights which are granted by the national legislation itself. For that purpose, it is very important to work with those documents in order to make them viable and fully functioning instruments for realization of existing rights in places. However, it is clear that, in case of developing new legislation guaranteeing inclusiveness of education, these regulations will need a radical consideration. After all, it is an inescapable task since the existing education system should be reformulated in order to mainstream the CWD.

Having reviewed the situation in the field, analysed data, and reviewed available legislative base, the following three major policy recommendations have been developed. Each recommendation reveals specific suggestions and steps to achieve it.

1. **Special and inclusive education reforms must become a part of the General Education reforms in the country.**

   The MoE considers inclusive education as a strategic goal of the government. However the General Education Law has not been approved yet and its draft has been under the consideration of Azerbaijan Parliament since 1993. Inclusive education must be the art of democratization process in any developing country. Unfortunately inclusive education is not considered to be a part of the general education reforms and democratization processes in Azerbaijan yet. In this regard, the following points are to be recommended:

   1.1. **The government should design and implement a comprehensive pre-service and in-service teacher and specialist preparation program.**

   The study findings showed that the lack of specialists in the field of teaching and special services is a key barrier to educational opportunities provided by the system. Taking into consideration the scope and size of the problem and the existing conditions on the ground, the following three-layer framework can be recommended:

   a. **Short-term:** Organize short intensive in-service training for the current workforce. The target group is teachers and teacher assistants, and special service workers at schools and kindergartens. NGO sector and donor programs can extend necessary support to the government to achieve this goal.
b. **Mid-term:** Design and put into practice one to two-year pre-service and in-service, i.e. college (teacher training and medical colleges) programs to meet the mid-term demands in the country. The target groups for this program are existing workforce and young school graduates. The government’s recent commitments to fundamentally reform the vocational education system and future career aspiration of recent graduates from the regions make this goal realistic and attractive.

c. **Long-term:** Develop full-time university academic programs (bachelor, master and PhD-level) in relevant fields to bolster specialist preparation, teacher training, research and development, and policy formulation. The country’s aspiration in joining to Bologna Process is a promising factor in implementing this program. Moreover, in recent years, a few state universities have implemented joint educational programs in collaboration with foreign, particularly USA and European universities; these experiences can become the precedent for future initiatives, as many universities in the country lack necessary academic and administrative resources to run quality course programs in the mentioned disciplines.

1.2. **Accessibility should become one of the key priorities of the government in future policies and regulations.** The government has significantly increased infrastructure expenditures, through investments from the national budget and other sources. It is admirable that in the years of 2003-08 the government has built or reconstructed over 1300 schools in the country, which accounts for almost one third of the total number. We recommend that the government should add disabled accessibility plans and designs in new school building and other relevant facilities.

The government should develop mechanisms to provide families across the country with financial assistance to compensate transportation cost. Provision of specialized transportation can bring efficiency and effectiveness to the education of CWD. To achieve this it is important to review The Law of the Azerbaijan Republic on Targeted State Social Assistance and make necessary changes to meet the needs of people with disabilities.

2. **The national concept of special and inclusive education should be developed by the government. The government’s strategy on education should be developed by outlining one general model of inclusion for Azerbaijan and the necessary steps to achieve it.**

Research shows that there is not a common understanding of inclusion in the country. Many studies indicate that defining inclusion and disability is a challenging task as there are varying understandings among and within the nations. The survey data says that many respondents are confused when it comes to inclusive education: what is it? or can all children study together? In this regard, one policy recommendation is to re-design the official classification of disability, which will clearly outline and define disability, its level, appropriate education arrangement, etc. Following steps could be taken to achieve this goal:

2.1. **Establish a Task Force (TF) to design a new government policy on definition/classification of disability including local and international experts (both Soviet-educated and Western-educated), NGOs, governmental agencies, with clearly defined goals, objectives, and time-framed action plan.** TF is to report to the MM and provide recommendations for the Office of the President and MM. In order to stimulate quality, productivity and efficiency it would be very sufficient to provide TF with budget to run its operations, including paying its members.
2.2. **Research in the field should be encouraged by the government to identify gaps in the policy.** Research is given a far lower priority than administration and policy making in the country. Financial support of research, including the dissemination and analysis of the results should be considered as an important part of the developments in the field. Of course there are some problems related to the conduct of research that are characteristic not only for Azerbaijan, but also for all developing countries. The lack of financial support, consideration of research results, appropriate conditions and access to modern literature and libraries are among the factors.

2.3. **On-going public awareness campaigns could be developed to keep the society informed about the problems and issues in the field.** The study found out that there is a lack of information about the inclusive education, CWD, understanding of the problems concerning CWD in the country. In order to increase the general awareness among the citizens and foster understanding and support towards CWD and their families, the well-tailored, on-going awareness campaigns can be supported. The international development agencies offer wide variety of expertise in the field, which the GoAz can benefit from. The mechanisms such as peer education and peer counselling are prime examples.

3. **The system of special service provision should be considered by the government as a key issue in achieving quality in the education of children with disabilities.**

Provision of support services is of paramount importance for the success of inclusive education policies (Salamanca Statement, 1994). This includes educational psychologists, speech and occupational therapist, social workers etc. Although provision of services is approved by the government, there are no appropriate mechanisms to support implementation of this document in practice (for example, Decree No73 on Providing speech pathologist from 29 April, 2002).

Government should consider provision of necessary specialized and non-specialized services for CWD and their parents. For example, special schools can be turned to the resource centres and provide CWD, their parents or inclusive schools with special services. Establishing family and child support Centres in big cities and district capital towns would also be highly recommendable.

3.1. **Existing community based rehabilitation centres should be promoted and their experience used to develop and improve the provision of special services.** Community-based rehabilitation centres have to be supported and expanded through government financial assistance and technical support mechanisms (such as performance standards, treatment methodology, etc) as an alternative service providers in addition to state providers.

3.2. **And finally, roles, functions, mandate and responsibilities of the Medical-Pedagogical-Psychological Commissions could be reviewed and necessary changes made to meet the needs of children with disabilities.** As was discussed above, there is a general consensus that MPPC not always can fully meet the needs of CWD and their families. Many experts cite the legislative and regulative barriers, which affect the effectiveness and efficiency of this agency. In this regard it is recommended that the government to revise the functions and mandate of the commission. The government can look at reforming this agency using various models. For instance, some of the roles of the Commission can be delegated to separate bodies in order to streamline effective and timely services, e.g., establishing Family and Children Support Centres nationally. These Centres can be mandated providing the much needed counselling services.
Another option could be transformation of MPPCs to the special education departments in regions in order to assign, assess and monitor quality education and services for mainstreamed CWD. In that case MPPC taking into consideration its multifunctional and multi agency capacity, can offer a wide range of services to local CWD and their families, educators and service providers such as professional development, re-training, sharing information and resources, counselling, parent education-training in parenting skills, and etc. The commission can offer specialized sophisticated services that require experts who can be selected, trained and assigned for home visits, for service provision at regular schools or at local education departments. On the other hand, taking into account the positive experience of other countries, it can be recommended to the government to involve school management, parents and children into decision-making process of CWD enrolment into general school. The appropriate model of this process has to be found out.
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