



## Knowledge hub - Collection of best practices

### Summary of the best practice

1. Title of the best practice (e.g. name of policy, programme, project, etc.) \*

Expanding inclusive education strategies through the Girls' Education Challenge

2. Country or countries where the practice is implemented \*

Kenya

3. Please select the **most relevant** Action Track(s) the best practice applies to \*

- Action Track 1. Inclusive, equitable, safe, and healthy schools
- Action Track 2. Learning and skills for life, work, and sustainable development
- Action Track 3. Teachers, teaching and the teaching profession
- Action Track 4. Digital learning and transformation
- Action Track 5. Financing of education

4. Implementation lead/partner organization(s) \*

Leonard Cheshire (Lead Partner); Cheshire Disability Services Kenya; Social Impact Institute; Ability Africa Foundation; UK FCDO

5. Key words (5-15 words): Please add key descriptive words around aims, modalities, target groups etc. \*

inclusive education; girls with disabilities; community engagement; holistic inclusive education approach; male mentors

6. What makes it a best practice? \*

Leonard Cheshire's project aimed to increase the educational and vocational opportunities of 2,260 girls with disabilities in five counties within the Lake Region of Kenya. It tackled the specific barriers that girls with disabilities face in order to improve their quality of life, skills and livelihood opportunities.

## Description of the best practice

### 7. Introduction (350-400 words)

This section should ideally provide the context of, and justification for, the practice and address the following issues:

- i) Which population was affected?
- ii) What was the problem that needed to be addressed?
- iii) Which approach was taken and what objectives were achieved? \*

The girls in this project were helped to transition through primary into secondary school, vocational training and self-employment, or adult education and home learning programmes. In tandem, the project worked to build positive attitudes and community support for disabled children. It also worked with families to create households that are willing and able to support the girls' journey through to adulthood and beyond.

i) Affected population: Children with disabilities

ii) Problem to be addressed: 33 million children with disabilities are not in school and girls with disabilities make up the majority of out of school children. Stigma and discrimination is a key barrier for children with disabilities to gain access to a quality education. Social norms are difficult to change and take time to change. But this project has demonstrated effective strategies which drive and enhance the process of transformation.

iii) Aims of the project were to:

- Support girls with disabilities to progress within mainstream primary schools and to successfully transition to secondary education and vocational institutes
- Support girls with disabilities to improve their learning outcomes in literacy and numeracy
- Support the Government of Kenya, local authorities, and structures to take forward inclusive education practices to ensure the sustainability project achievements

The programme adopted a holistic model to tackle the stigma and discrimination preventing children with disabilities, especially girls, from gaining a quality education. This included: community wide awareness-raising and training; child to child activities; teacher training; individual assessment and support mechanisms; policy change; creating an accessible learning environment.

Originally, the project aimed to close gaps between girls with disabilities and girls without disabilities in key outcomes. However, after the start of the COVID-19 pandemic, the project adjusted expectations, focusing on supporting girls with disabilities to sustain outcome achievements.

## 8. Implementation (350-450 words)

Please describe the implementation modalities or processes, where possible in relation to:

- i) What are the main activities carried out?
- ii) When and where the activities were carried out (including the start date and whether it is ongoing)?
- iii) Who were the key implementation actors and collaborators? (civil society organizations, private sector, foundations, coalitions, networks etc.)?
- iv) What were the resources needed (budget and sources) for the implementation?

\*

i) Activities included:

- Developed literacy and numeracy learning materials adapted for children with disabilities to reach 5,000 children in 50 schools Ran 50 children's clubs, reaching around 20,000 children, which encourage leadership and the sharing of experiences of girls with disabilities
- Provided transportation and assistive learning devices to allow girls to attend school
- Provided health assessments and psycho-social support to beneficiary girls
- Assisted with school-going costs while also providing income generating activities to encourage households to be economically self-sufficient
- Created positive attitudes towards disability through community activities and parent support groups
- Worked with key government ministries to ensure that the project contributes to the government's agenda including a comprehensive Inclusive Education Policy

ii) Activities were carried out in the Kenya Lakes region from 2017-2022. Operated in 5 sub-counties which were: Kisumu East, Siaya, Homabay, Migori, and Kuria East.

iii) Leonard Cheshire (NGO) was the lead implementor and worked closely with 83 educational institutions including 50 primary schools, 25 secondary schools and 8 vocational institutions

iv) The project was funded by the UK's Foreign, Commonwealth and Development Office

## 9. Results – outputs and outcomes (250-350 words)

To the extent possible, please reply to the questions below:

- i) How was the practice identified as transformative? (e.g., impact on policies, impact on management processes, impact on delivery arrangements or education monitoring, impact on teachers, learners and beneficiary communities etc.);
- ii) What were the concrete results achieved with regard to outputs and outcomes?
- iii) Has an assessment of the practice been carried out? If yes, what were the results? \*

To achieve its ultimate outcomes, the project targeted several intermediate outcomes supporting attendance levels of girls with disabilities, promoting the adoption of inclusive education practices by teachers in schools, supporting girls' self-esteem through supports in and out of school, supporting changes the inclusive education policy environment, and promoting improved attitudes and practices at the community level towards children with disabilities. Key results included:

- **School Attendance:** The project supported girls with disabilities to attend school as frequently as girls without disabilities, across the three time periods attendance records were reviewed from 2019-2021.
- **Teaching quality:** Teachers trained by the project demonstrated a greater understanding of inclusive education and identified several strategies they have put in place to support children with disabilities in lessons. The project supported teachers to adopt inclusive education practices in the classroom. Inclusive practices also resulted in girls with disabilities feeling more supported by their teachers. 90.3% of girls with disabilities feel their learning needs are supported by their teachers at Endline compared to 85.7% at Midline and 68.9% at Baseline.
- **Self-esteem:** The project supported a larger proportion of girls with disabilities to sustain and improve their self-esteem between Midline and Endline, than girls without disabilities in non-project schools. Qualitative evaluation findings suggest that self-esteem was supported by increased socialization between children with and without disabilities in Child-to-Child Clubs and through a more inclusive school environment.
- **Girls with disabilities supported by the project see secondary school as a means to access better career opportunities and several explained how their aspirations had changed since they had received support to attend secondary school.**
- **Community attitudes:** 81.7% of girls with disabilities at Endline reported that their parents took at least 2 positive actions to support them to stay in school. Positive actions included providing them with the necessary materials and support and speaking out to improve how the community treats children with disabilities.
- **Policy:** The project supported the standardization of quality standards for EARCs. Minimum Quality Standards for EARC Services were adopted in November of 2021. • The project provided technical advice and resourcing to support the passing of the Sector Policy on the Provision of Education and Training for Learners and Trainees with Disabilities in 2018.
- **Learning:** The project supported girls with disabilities to improve their literacy levels between Baseline, Midline and Endline through the adoption of inclusive education practices by teachers. Girls with disabilities improved literacy scores by 10% between Baseline and Midline and 7% between Midline and Endline, on average.
- **Transition:** At Endline, girls with and without disability were equally likely to successfully transition. Teachers trained by the project report that inclusive education practices, role models, and encouragement has supported children with disabilities to successfully transition within school and to secondary school. At the end of the project, evaluation shows that girls with disabilities are more likely at statistically significant levels to transition to vocational training than girls without disabilities.

## 10. Lessons learnt (300 words)

To the extent possible, please reply to the following questions:

- i) What were the key triggers for transformation?
- ii) What worked really well – what facilitated this?
- iii) What did not work – why did it not work? \*

The programme identified a range of lessons that are critical to achieving quality education for children with disabilities. Amongst the key lessons were the importance of adopting a holistic approach which entailed working with the education system, policy-makers, teachers, parents and the wider community.

Stigma and discrimination was identified as a key barrier to accessing quality education at the start of the project. Therefore the substantive efforts made throughout the project to offer opportunities for children with disabilities to socialise with other children without disabilities and to break down societal attitudes that prevented children with disabilities from being supported to access school were critical to the success of the programme. This was achieved through a range of activities including child-to-child clubs; a male mentor scheme where fathers and male leaders within the community were sensitised on the importance of education for girls with disabilities; and the establishment of school-based inclusion teams to provide support to teachers on implementing inclusive education practices.

A second critical lesson was the importance of establishing and partnering education assessment and resource centres. This enabled early identification of children with impairments that could affect their learning, which then enabled school to identify specific reasonable adjustments of assistive technology requirements that were needed to support quality learning for children with disabilities.

A final lesson, and key challenge the programme faced has been the need for better integration with inclusive education programmes into mainstream education systems and, in particular, ensuring that inclusive education is financed as part of the mainstream education programme, rather than being seen as an 'add-on' that is not sufficiently resourced.

## 11. Conclusions (250 words)

Please describe why may this intervention be considered a “best practice”. What recommendations can be made for those intending to adopt the documented “best practice” or how can it help people working on the same issue(s)? \*

This inclusive education model should be considered best practice as it has demonstrated that it achieves significant increases in access to, quality of and progression through education for children with disabilities. This is achieved through a range of inter-connected approaches that operate in a systemic way to achieve sustainable change. It tackles some of the root causes of the lack of inclusion of children with disabilities in education, especially the stigma and discrimination that underpins many of the challenges faced by children with disabilities and can have a wider impact on community engagement and quality of education for all. Leonard Cheshire believes this is an innovative approach that can be adapted, replicated and scaled up to address the challenge of transforming education in a way that will achieve SDG4, as well as contributing to achieving SDG5 and other relevant SDGs. The model has been thoroughly evaluated from baseline all the way through to endline of the project, with very significant positive outcomes for children with disabilities.

## 12. Further reading

Please provide a list and URLs of key reference documents for additional information on the “best practice” for those who may be interested in knowing how the results benefited the beneficiary group/s. \*

[https://girlseducationchallenge.org/media/g04mcgkx/lc-kenya\\_endline-report-web.pdf](https://girlseducationchallenge.org/media/g04mcgkx/lc-kenya_endline-report-web.pdf)  
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