

**PRE-PRIMARY AND GRADE ONE TEACHERS**

**TRAINING MANUAL**

**ON**

**INCLUSIVE EDUCATION**

**HOMA BAY & KAKUMA REFUGEE CAMP**

**JUNE 2021**

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First Published in 2021

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Published and printed by Leonard Cheshire

# Introduction

Research over the past two decades has highlighted the importance of the early years of a child’s life, showing that experiences in this period determine capacity (education and earnings), health and longevity, as well as personal and social adjustment. The development of a child occurs progressively and sequentially from conception and is shaped by genetic potential in response to different influences. During the early years, protective factors determine the extent to which a child is able to take advantage of opportunities and develop resilience in the face of challenges. Young children who are exposed to risks and adversity often need additional support to enable them to compensate for missed learning; this is most effectively provided during the unique early ‘window of opportunity’ of early childhood. However, once this opportunity is missed, children seldom catch up what has been lost, without intervention. Children with disabilities who receive little or no support to catch up, are more likely to fall behind their peers, drifting into the margins, with a steadily widening gap between themselves and those that are striding ahead.

Early Childhood Development services have been referred to as ‘a powerful equaliser’ (CSDH 2007) because of the contribution they can make during the period when children are most able to make up for the disadvantages that they inherit from previous generations, or challenges in their own development, such as disability. An important function of these services is to identify and support children at risk for compromised development. If this is done at an early stage, and appropriate support is provided, it can reverse the effects of deprivation and enable children to grow and develop to their full potential, thus reducing the need for remedial services later in life. Support provided during this period has the greatest impact on those who are most disadvantaged.

Inclusive learning environments can provide children with disabilities access to early intervention and opportunities to develop socially, physically, intellectually and emotionally. In providing a platform for children from the earliest age to learn and discover the world together, they form a cornerstone for the development of an inclusive and equitable society, where diversity is celebrated and not the basis of discrimination.

Inclusive education has been defined as

*…an education that promotes mutual respect and value for all persons and builds educational environments in which the approach to learning, the institutional culture and the curriculum reflect the value of diversity*. (UNESCO 2020)

Sustainable Development Goal 4 is ‘to ensure inclusive and quality education for all…’, with one of its targets being that by 2030, all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education. Teachers have a critical role to play in promoting and implementing inclusive quality learning environments and need to have tools and resources to do so. Inclusive approaches must not be treated as a specialist topic but seen as a core element of teacher education, with all teachers prepared to teach all children in their class. Another essential component of inclusive education is recognition of the role of parents and the importance of fostering partnerships between parents and teachers.

Within this context, the purpose of this training manual is to equip pre-primary and Grade One teachers with knowledge, skills and attitudes of working with children with disabilities in inclusive settings. The teachers will be supported to gain understanding on the rights of children with disabilities to inclusive education, particularly at ECDE level, and how this is entrenched in Kenyan legislation. They will also acquire skills and knowledge on the protection of children with disabilities.

Through this training, teachers will get to learn the advantages of educating children with disabilities together with their peers in local schools. They will learn ways of identifying functional difficulties of children in a classroom situation and explore ways of identifying **children’s needs and learning styles** as well as **strategies that support learning and participation** of all children. They will be able to identify barriers to and within education, and work with school administrators and parents towards removal of such barriers, towards ensuring a welcoming and child-friendly environment at home, school and in the community.

The teachers will reflect on the Pre-Primary and Grade One Competence Based Curriculum (CBC) designs and establish content that may require differentiation, such that all children learn effectively and at their own pace. The training shall encourage use of digital technology in the teaching and learning process.

## Users of the manual

This manual will be used by Pre-Primary and Grade One teachers, School Managers, Head teachers, County Education Officers or any school personnel or professionals who support inclusion in project schools at Homa Bay and Turkana Counties, mainly at Kakuma Refugee Camp. It guides on key content and activities to be included in the training. Its timing coincides with the introduction of the Competency-Based Curriculum (CBC) in Kenya.

The manual has **Notes** after each session. These notes provide extra information to boost the understanding of a concept covered. However, they are not comprehensive. Participants are expected to continue with their learning and where possible, carry out further study on the areas covered.

## Purpose and outcomes of the training

The training is intended to promote and strengthen inclusive practices in line with the Competency Based Curriculum for Pre-Primary and Grade One levels.

By the end of the training, the teachers will be able to:

1. Have improved knowledge about the importance of early inclusion and the legislation that supports early years’ inclusion, within rights-based framework.
2. Screen and identify children with disabilities as well as areas on which support is required.
3. Make instruction child-centred and inclusive by differentiating content, materials, methods of instruction, learning environments, classroom management and assessment with an emphasis on play-based learning.
4. Work collaboratively with parents, colleagues and community members to plan removal of barriers, provision of support and promotion of inclusive education.
5. Actively support partnerships with parents.
6. Plan for **t**ransitions between educational levels, by involving parents, pre-primary and primary school staff.
7. Promote the safeguarding of young children with disabilities.

## Approach of the training

This manual supports four (4) days of consecutive training, with at least one facilitator in the same room as participants. Given the current restrictions of COVID-19 additional inputs and support will be offered remotely. It comprises of theoretical inputs as well as practical exercises.

Each session will begin with a plenary presentation, which will be followed by processes to facilitate engagement viz. group work; role plays; dramatization, work that uses materials available in the settings or discussion of cases studies.

This training is based on principles of adult learning as follows:

Participants are encouraged to bring their own knowledge, experiences and questions to enrich the training and share their good practices.

All sessions and activities are developed with the aim of eliciting engagement and facilitating discussion.

Training content is aligned with the larger context of supporting transformation at the site/region or county level, and addresses issues that participants understand and are motivated to work on.

The style is fully inclusive and favors access, participation and achievement for all participants.

## Training programme

|  |  |
| --- | --- |
| **TIME** | **ACTIVITY** |
|  | **DAY ONE** |
| 8.00-8.30am | Registration of participants |
| 8.30-9.30am | **Session 1: Introduction, setting the climate and context of the training**   * Opening and welcoming remarks * Introductions of participants * Ground rules * Overview of workshop; early learning in context * Expectations of participants |
| 9.30-10.30am | **Session 2: Children who are excluded from and within the education system**  Identification of barriers and factors that lead to exclusion of children from and within the education system and the impact that this has on them. |
| 10.30-11.00am | **TEA BREAK** |
| 11.00-12.00am | **Session 3: Models of disability and their implications for teaching strategies and inclusive practices**  Moving away from the medical/charity model towards the social and human rights model of disability |
| 12.00-1.00pm | **Session 4: Approaches to education; special, integrate and inclusive education**  Differences between Special, Integrated and Inclusive Education |
| 1.00 – 2.00pm | **LUNCH BREAK** |
| 2.00-3.00pm | **Session 5: Legislation supporting the rights of children with disabilities to inclusive education**  Right to inclusive education for children with disabilities and how this is entrenched in global, regional and national legislation |
| 3:00 – 3:15pm | **TEA BREAK** |
| 3.15 – 4.30pm | **Session 6: Removing** **barriers and promoting inclusive education**  Strategies to promote inclusive education  Creating a welcoming ethos for all children |
|  | **DAY TWO** |
| 8.00 -8.30 am | Registration of participants, preliminaries and recap |
| 8.30-10.30am | **Session 7: Screening and identification of children with disabilities**  Teacher’s role in observation  Identification, Screening (Washington Group Questions) and support intervention measures at the school level |
| 10.30–11.00am | **TEA BREAK** |
| 11.00-11.30am | **Session 7 cont:** Identification, Screening (Washington Group Questions) and support intervention measures at the school level  Referral to EARCs  Informing the development of Individual Education Plans |
| 11.30-12.45pm | **Session 8: Parental engagement and empowerment – strengthening partnerships**  Parents as partners  *A parent of a child in an inclusive setting to share experiences.* |
| 12.45– 1.30pm | **LUNCH BREAK** |
| 1.30 – 3.00 pm | **Session 9: Play-based learning and the Teaching and Learning process in an inclusive setting** |
| 3:00-3.15pm | **TEA BREAK** |
| 3.15-4.30pm | **Session 9 cont:**  Play-based learning and the teaching and learning process |
|  | **DAY THREE** |
| 8.00 – 8.30am | Registration, Preliminaries and Recap |
| 8.30-10.30am | **Session 10:** **Competence Based Curriculum (CBC) Design Components**  Part 1: Components of the CBC Curriculum Design |
| 10.30-11:00am | **TEA BREAK** |
| 11.00-1.00pm | **Session 10 cont:**  Part 2: Specific learning outcomes, learning experiences, teaching learning resources and assessment differentiation |
| 1.00– 1.45pm | **LUNCH BREAK** |
| 1.45- 3.:15 pm | **Session 11: Children with disabilities: safeguarding in the context of inclusive education**  *Conducted by Sightsavers* |
| 3.15–3:30pm | **TEA BREAK** |
| 3:30-4:30pm | **Session 11 cont:** *Conducted by Sightsavers* |
|  | **DAY FOUR** |
| 8.00 – 8.30 am | Registration, Preliminaries and Recap |
| 8.30 -10.30 am | **Session 12: Support systems for inclusive education**  Part 1: Schemes of Work and Lesson plans |
| 10.30-11.00am | **TEA BREAK** |
| 11.00-1.00pm | **Session 12 cont:**  **Part 2:**   * Record of Work * Progress Records * Individual Educational Plan * Transitions * Class register |
| 1.00-2.00pm | **LUNCH BREAK** |
| 2.00- 4.00 pm | **Session 13: Planning for and sustaining change**  Communities of Practice (CoP)  Action plans/ Way forward |
| 4:00-4:.15pm | **TEA BREAK** |
| 4.15-4.30pm | **Post-training evaluation**  **Closing Ceremony** |

# DAY 1

## Session 1: Introduction, setting the climate and context of the training

1 Hour

### 1.1 Session Outcomes

By the end of the session, the participants will be able to:

1. enhance interpersonal skills for cordial working relationships;
2. develop name tags for easy identification and communication between participants;
3. establish ground rules;
4. have an overview of the content of the workshop;
5. recognize early learning as a component as the Nurturing Care Framework;
6. identify workshop expectations.

### 1.2 Key areas to be covered

1. Participants introduce themselves.
2. Making of name tags.
3. Setting training ground rules.
4. Early learning within the context of domains of well-being of young children and the Nurturing Care Framework.
5. Workshop expectations.

### 1.3 Suggested Learning Experiences

1. Participants are guided to tell their names through use of games.
2. Participants are asked to write, type and print individual names.
3. Use different ways of displaying their name tags.
4. In groups participants identify workshop ground rules.
5. Individually participants are asked to write down their workshop expectations.
6. Group discussion on the Nurturing Care Framework from their own experience and the extent to which addresses the holistic needs of all young children.

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| **Examples of ground rules:**   1. Observe COVID guidelines at all times 2. Time management 3. Appropriate use of phones 4. Respect each other’s opinion 5. Use of local available resources 6. Doing assignments on time 7. Proper use of resources |

### 1.4 Suggested Resources

Sheets of cardboard, papers, felt pens, computers, printers, polythene bags, strings, pins

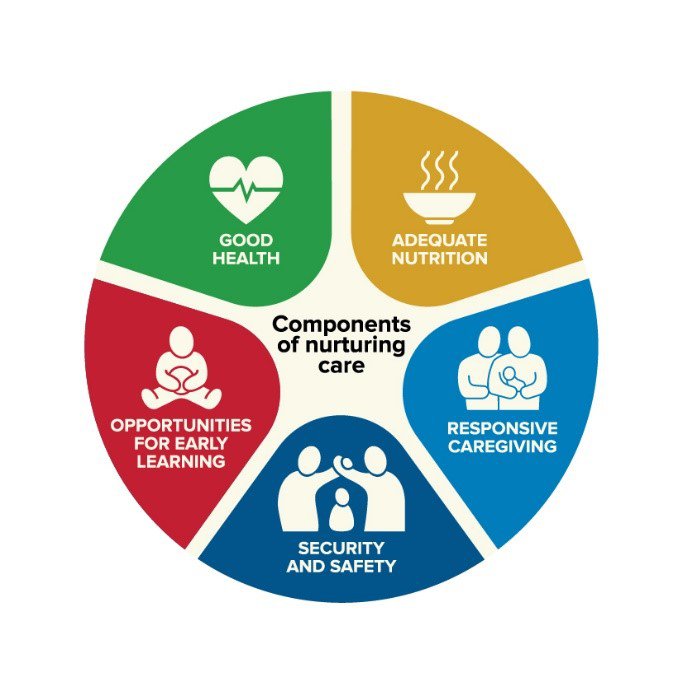


Figure 1: The Nurturing Care Framework WHO, UNICEF, World Bank Group 2018)

The domains of care that young children require in order to meet their developmental potential

## Session 2: Children who are excluded from and within the education system

1 hour

### 2.1 Session Outcomes

By the end of the session, participants will:

1. be able to identify children who are excluded from the pre-school and the education system;
2. be able to explain why some learners are excluded from and within the education system and the factors that perpetuate such exclusion;
3. be more aware of the impact of such exclusion on individual children, their families and communities.

### 2.2 Key Areas to be covered

1. Children excluded from and within the education system.
2. Reasons why children are excluded from and within the education.

### 2.3 Suggested Learning Experiences

* + 1. The participants discuss the difference between children excluded *from* the education system and those excluded *within* it.
    2. In groups participants discuss which children they notice who do not go to pre-school in their county/region and reasons for this.



* + 1. Participants identify children are excluded *within* pre-schools and discuss reasons for his.
    2. Participants dramatize situations in which a child experiences discrimination on a regular class.

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| **Notes:**   * Children excluded **from** education: This may be the case where the parents of a child with a disability do not send them to school; or they remove the child from school to assist with household responsibilities. There may be truancy. * Children excluded **within** education. This means that children attend school, but are excluded from certain activities or lessons, or are present in lessons but are not learning or participating.  Dramatization  1. Childignored by the teacher   Jane is a 5-year old girl, who sits at the back of her PrePrimary 1 class. When the teacher asks questions Jane raises her hand but she is ignored by the teacher. However, within the lesson the teacher asks another question; she calls upon Jane to answer, but she gives the wrong answer. All the children laugh at her, but the teacher does not intervene.  *What happens to Jane when this experience occurs repeatedly?*  *How could the teacher’s approach have been different and what would be the impact of ths?*  John is a 5-year old boy who uses a wheelchair. Whenever his class is going out for Psychomotor Activities, the teacher asks him to remain behind in the classroom and wait until the other children come back.  *How do you think John feels?*  *How do other learners feel?*  *How could the teacher’s approach have been different and what would be the impact of this?*  (c) Child excluded from certain activities  Alex has limited vision, which makes it difficult for him to colour within the lines of different shapes. When the learners are asked to shade in shapes and display their work, the teacher tells Alex not to carry out the activity as he would waste the paper and colouring pencils.  *How do you think Alex feels?*  *How do other learners feel?*  *How could the teacher’s approach have been different and what would be the impact of this?*  (d) Emphasis on child’s weaknesses and failures  Lucy is a 5-year old girl in PP2, who struggles with many different areas of learning. When assessed by the teacher, Lucy’s performance is rated as being ‘poor’ in all activity areas. Ranking of the children’s achievements always has her name at the bottom.  *How could the teacher’s approach be different and what would be the impact of this, particularly for Lucy?* |

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| **Notes:**  Young children who are at risk of exclusion from or within education:  These include children who:   * Have disabilities (especially those with severe or multiple disabilities). * Are older than most other children in pre-school. * Have serious or chronic health conditions. * Are homeless or live on the streets. * Have to do chores in the home. * Spend many hours supporting their family’s livelihoods (e.g. Collecting materials for recycling; caring for babies). * Are refugees or affected by conflict or humanitarian crisis. * Belong to minority groups. * Do not speak the language of instruction. |

## Session 3: Models of disability and their implications for teaching strategies and inclusive practices

I hour

### 3.1 Session Outcomes

By the end of the session the participants will be able to:

1. identify different models of disability and understand how they shape practices;
2. understand more about the social and human rights model of disability and its implications for teaching strategies and inclusive practices.

### 3.2 Key Areas to be covered

Models of disability

1. Charity model/Medical model
2. Social/Human rights model

### 3.3 Suggested Learning Experiences



1. In groups participants discuss how people in their own school/community typically respond to persons with disability. Which model/approach is used? How does it affect people’s practices towards young children with disabilities, especially in school settings?
2. Participants role play the following scenarios illustrating inclusive practices, based on the social and human rights model of disability.

A small group of children are seated in a circle on the floor, while the teacher is reading a story to them. As she reads, she shows them pictures from the book. Samuel is hard of hearing and cannot follow the story, because he cannot hear well what the teacher is saying. He loses interest in the story and becomes distracted by toys in the classroom. The teacher scolds him in front of all the children for not listening and not paying attention.

*Based on the social/ human rights model of disability, what could have been a more inclusive teaching practice used by the teacher?*

A teacher takes a small group of children on a trip to a watch a soccer match. One of the children has difficulty walking and uses crutches to move around. When they get to the venue, they realise that the building has a long flight of steps up to the main entrance. The child using crutches is unable to enter and attend the event. He is told to go home as he cannot attend the match.

*Based on the social/ human rights model of disability, what could have been your response?*

***Focus on removing barriers rather than ‘fixing’ the person.***

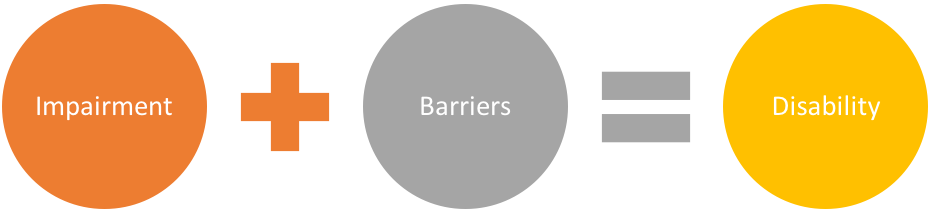
|  |
| --- |
| **Notes** Models of disability There are different models or ways of understanding disability, and each of these influences our approach to people with disabilities. These are the Medical, Charity, Social and Human Rights models. We need to understand the damaging effects of the Medical and Charity Models, and how these approaches entrench the dependency and dis-empowerment of people with disabilities. We base our work in inclusive education on the Social and Human Rights Model of disability. 1. Charity/Medical Model  1. This model focuses on individuals who are identified by their impairment. 2. The **individual is perceived as the problem**; there is something wrong with them that need to be fixed in order for them to fit into society. 3. Persons with disability are portrayed as victims, suffering from misfortune; they are pitied and need to be helped through the charity of others. 4. The assumption is that the person with disability needs medical intervention to be ‘cured’ or failing that, they need to be ‘cared for.’ 5. Persons with disabilities are perceived as passive recipients of services and subject to the decisions of others, often medical personnel.  2. Social/Human Rights Model  1. This model focuses on the **barriers in society** that disable and exclude people with impairments. 2. The model highlights that it is not their impairment that causes a person to be unable to participate in society, but the **barriers** that exist within **attitudes, environments, policies and practices.** 3. This model therefore focuses on *removing barriers* rather than ‘fixing’ the person. 4. It sees persons with impairments as an integral part of a diverse human society and culture. It affirms diversity as an essential element of humanity. 5. It stresses that all humans have rights, and that all rights apply to all humans. 6. Persons with disabilities are rights holders and decision-makers and drivers of their own lives. Their motto is “nothing about us without us”. |

**Other useful resources**

**Relationship between disability and impairment**

The UN Convention on the Rights of Persons with Disabilities (2006) uses the following rights based definition of disability:

“*Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others”.*



**Isaac case study (See appendix)**

## Session 4: Approaches to education: special, integrated and inclusive education

1 hour

### 4.1 Session Outcomes

By the end of the session, the participants will be able to:

1. Critique current trends of placing young children with disabilities within the Kenyan education system and the implications of this;
2. have clarity on the differences between special education, integrated education and inclusive education;
3. Realize and apply the concepts and values of inclusive education for young children.

### 4.2 Key Areas to be covered



1. Features of segregated or special education.
2. Features of integrated education.
3. Features of inclusive education and the philosophy underlying it.

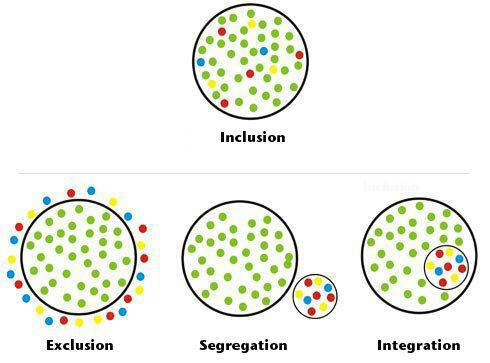


Figure 2: Visual representation of different types of education provision

### 4.3 Suggested Learning Experiences

1. In small groups participants discuss educational provision for young children with disabilities. Which approach do you think is being followed in your region/county? What are the implications of this for children with disabilities?

**Special/segregated education**

1. Poor parent/child relationship, as special schools are often distant from the child’s home and community.
2. In special schools, learners with disabilities are educated – and may live – separately to other children.
3. Subjects choices at special schools are often limited, and learners may not be able to graduate with equal qualifications to those in mainstream schools. This may hinder access to secondary or tertiary education and/or have opportunities work, especially in professional positions.
4. Learners with disabilities do not meet and interact with a diverse range of peers. They cannot learn from other children without disabilities or be stimulated through interaction with them.
5. When learners with disabilities are educated in special schools, their peers without disabilities do not have many opportunities to spend time with them. Children without disabilities can therefore grow up thinking that disability is much rarer than it actually is, or believing that disability is to be feared. This continues discrimination into the next generation.
6. The costs of special schools are high. Where primary school is free and compulsory, those in special school often have to pay for accommodation.

Despite these factors, some people feel that special schools have the advantage of specialist teachers and that they can provide technical skills and equipment such as Braille. Some special schools are able to provide smaller classes and more individual attention for children with disabilities. However, special schools mean that children with disabilities are educated through a separate system from other children in society.

**Integrated education**

This is a process through which learners with and without disabilities learn together, but where the **learner is expected to adapt to the environment. No adjustments or modifications are made to the curriculum or to the learning process.**

**Inclusive education**



Inclusive Education is defined by UNESCO as:

“…a process of addressing and responding to the diversity of needs of all learners through increasing participation in learning, cultures and communities, and reducing exclusion within and from education.”

2. Participants role play a group of Grade One children on their first day of school. The class includes a child who has a hearing loss, one who struggles with concentration and a child who is using a wheelchair. Show the elements of an inclusive classroom and demonstrate the following:

* All learners feel welcome in the class.
* All children participate actively in play and learning
* The teacher affirms all learners, building on their strengths and supporting them in areas where they experience challenges during the learning process.
* Children respect and support each other with the teacher creating a positive and conducive environment for doing so.

3. Based on the role play, participants discuss

* 1. What are the values underlying inclusive education?
  2. What do you think the impact is on young children with disabilities? On those without disabilities?

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| --- |
| **Notes**  The philosophy of inclusive education is based on the belief that **all children** can learn and reach their full potential, when given the opportunity, effective teaching and appropriate resources.  **Inclusive education…**   1. Recognizes and responds to the diversity of children’s needs and abilities including differences in their ways and pace of learning. 2. It uses individualized teaching methods, adapted curricula as well as tailor-made teaching and learning resources. 3. All children are able to be part of their community and develop a sense of belonging and become better prepared for life in the community as children and adults. 4. Provides an opportunity for children with diverse abilities and interests to interact, discover and learn together. 5. Encourages family involvement for all children. 6. Involves inclusive, interdisciplinary services, collaborative problem-solving and teamwork.   Inclusive education focuses on the process of adjusting home, school, and society so that all individuals, regardless of their differences, can have the opportunity to interact, play, learn, work and experience a sense of belonging. |

## Session 5: Legislation supporting the rights of children with disabilities to inclusive education

1 hour

### 5.1 Session Outcomes

By the end of the session the participants will:

1. be aware of the rights of children of children with disabilities to inclusive education, as contained in international rights treaties and African rights treaties;
2. be aware of national policies and legal provisions that support inclusive education in Kenya;
3. be able to identify legal bodies that offer child protection in Kenya.

### 5.2 Key Areas to be covered

1. International rights treaties that provide for inclusive education.
2. African regional rights treaties that provide for inclusive education.
3. National policies regarding Inclusive Education.
4. Legal bodies in Kenya that offer children protection.
5. Incorporating knowledge about rights of children with disabilities to inclusive education and safeguarding within life skills programmes, as applicable to young children.

### 5.3 Suggested Learning Experiences



1. In small groups, ask participants to discuss their response to the following statement: “The right to education enables children with disabilities to achieve all other rights”.
2. Select one of the global treaties for discussion in different groups (one per group). Using the Internet, participants search for information about the rights of children with disabilities to education. (This should include both international and regional (African) rights treaties.) Do you think that they adequately cover the rights of young children with disabilities to inclusive education?
3. Using the Internet, participants are asked to search for Kenyan policies and legal documents that address inclusive education.
4. In groups participants identify legal bodies that offer child protection in Kenya. These could include the Ministry of Gender, Children and Social Development, the Department of Children Services and the Judiciary.
5. Participants discuss how the knowledge that children with disabilities have the right to inclusive education impacts on their work in the ECDE sector.
6. In groups participants discuss the value of introducing knowledge about rights as part of life skills to young children and what these means in practice.

**Notes**

#### 1. International legal frameworks on inclusive education

|  |  |  |
| --- | --- | --- |
| 1948 | The Universal Declaration of Human Rights | This declares that **human rights** are **universal** – to be enjoyed by all people, no matter who they are or where they live. The **Universal Declaration** includes civil and political **rights**, like the **right** to life, liberty, free speech and privacy. It was the first time in history that a document with universal value (it refers to “all members of the human family,” which means all of us) was adopted by an international organization. |
| 1990 | **United Nations Convention on the Rights of the Child** | Considering that the child should be fully prepared to live an individual life in society, and brought up in the spirit of the ideals proclaimed in the Charter of the United Nations, and in particular in the spirit of peace, dignity, tolerance, freedom, equality and solidarity. |
| 1990 | **World Declaration on Education for All Jomtien Declaration** | First agreement on targets of ‘Education for All’. |
| 1994 | The Salamanca Statement on Principles, Policy and Practice in Special Education | A call that schools should accommodate all children regardless of their physical, intellectual, social, emotional linguistic or other conditions. This should include disabled and gifted children, street and working children, children from remote or nomadic populations, children from linguistic, ethical or cultural minorities and children from other disadvantaged or marginalized areas or groups. |
| 2000 | **Framework for Action, Dakar**  **EFA goals and Millennium Development Goals** | Sets a target that all children have access to a complete free primary education by 2015.  Focus on marginalized communities and girls.  Reaffirms the Salamanca Statement |
| 2006 | **United Nations Convention on the Rights of Persons with Disabilities (CRPD)** | Promotes the right of persons with disabilities to Inclusive Education. Article 24 of the CRPD covers many aspects of education at different stages of people’s lives. Its priority is to encourage children with disabilities to attend school at all levels (para 2(a)). It asserts that the best way to do this is to focus on the best interest of the child (para (2b)). |
| 2015 | **Sustainable Development Goals (SDGs)** | The SDGs are a set of 17 global goals outlining vital changes that the world needs to achieve before 2030.  SDG 4 focuses on education. It says that we must ‘Ensure inclusive and quality education for all and promote lifelong learning’.  SDG target 4.2 is: by 2030 ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education |
| 2016 | **General Comment 4 on the Right to Inclusive Education** | The Committee on the Rights of Persons with Disabilities, which is responsible for monitoring implementation of the CRPD issued this statement on inclusive education. It is based on the understanding that inclusion is the key to achieving the right to education.  Early childhood interventions can be particularly valuable for children with disabilities, serving to strengthen their capacity to benefit from education and promoting their enrolment and attendance. All such interventions must guarantee respect for the dignity and autonomy of the child…. States parties are urged to ensure access to quality early childhood development, care and pre-primary education, together with the provision of support and training to parents and caregivers of young children with disabilities (para 65). |
| 2019 | Cali Commitment to equity and inclusion in education | This reaffirms the commitment to inclusion in education which was adopted in the Salamanca Statement 25 years ago.  The Cali Commitment defines inclusion as being:  *… a transformative process that ensures full participation and access to quality learning opportunities for all children, young people and adults, respecting and valuing diversity, and eliminating all forms of discrimination in and through education. The term inclusion represents a commitment to making preschools, schools, and other education settings, places in which everyone is valued and belongs, and diversity is seen as enriching*(p. 1). |

**The core principles of the Convention on the Rights of Persons with Disabilities are:**

1. Respect for inherent dignity, individual autonomy including the freedom to make one’s own choices, and independence of persons;
2. Non-discrimination;
3. Full and effective participation and inclusion in society;
4. Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity;
5. Equality of opportunity;
6. Accessibility;
7. Equality between men and women;
8. Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

#### 2. African regional legal frameworks

##### (i) African Charter on the Rights and Welfare of the Child (1990)

The content of the **Charter** is similar to that of the CRC: many of the **rights** are the same but it **differs in a** number of ways. The key **differences between** the **African Charter** and the CRC are that the **Charter** includes an article setting out the responsibilities of children; it also prohibits child marriage.

##### (ii) African Disability Rights Protocol (2018)

Based on the values and principles contained in the CRPD, the African Disability Rights Protocol provides for rights of persons with disabilities within the unique context of the African continent and from an African perspective.

#### 3. National policies that have a bearing on early childhood development and education of children with disabilities

Kenya has ratified key International treaties which provide for education of children with disabilities and protection from abuse and neglect. The government has sought to implement these provisions through the enactment of the Children Act (2001) and in the Kenyan Constitution (2010) among others.

E.g. World Declaration on Education for All Jomtien Declaration 1990, the NARC Government 2003 show a Kimani Maruge join primary school grade one at 84 years.  He holds the [Guinness World Record](https://en.wikipedia.org/wiki/Guinness_Book_of_Records) for being the oldest person to start [primary school](https://en.wikipedia.org/wiki/Primary_school).



Important legislative provisions that have a bearing on early childhood development and education of children with disabilities include the following

* Constitution of Kenya (2010)
* Children’s Act (2001)
* Basic Education Act (2013)
* Kenya Vision 2030
* Sector Policy for Learners and Trainees with Disabilities (2018)
* National Early Childhood Development Policy Framework (2006)

The Children’s Act 2001 is an act of parliament that makes provision for the following:

* Parental responsibility
* Fostering, adoption, custody, maintenance, guardianship
* Care and protection of children
* Administration of children’s institutions
* Domestication of the CRC & ACRWC

The Act is currently under review to align it to the Kenya Constitution and address emerging issues on children

In discharging its functions, the Department of Children’s Services makes reference to international instruments (CRC), Regional instruments (ACRWC), the Kenyan Constitution, other relevant statutes, the Children’s Act, policies, guidelines, regulations and the National Plan of Action.

There are also organisations of civil society in Kenya and the region, which are making efforts towards inclusion. For example, the African ECD Network is a resource of information, training and networking opportunities for teachers. It was established in 2015 is comprised of organisations from civil society, academic institutions, the private sector and government. Its intention is to provide a platform to further excellence and collaboration in protecting children's rights, influence policy and practice, strengthen partnerships, and share experiences and knowledge of ECD from an African perspective.

## Session 6: Removing barriers and promoting inclusive education

1 hour

### 6.1 Session outcomes

By the end of the session, the participants will be able to:

1. identify strategies to remove barriers at school and community level;
2. identify strategies to promote inclusive education for young children.

### 6.2 Key Areas to be covered

1. Barriers to inclusive education.
2. Strategies of removing barriers and promoting inclusive education.

### 6.3 Suggested Learning Experiences



1. In groups, participants discuss barriers to inclusive education in the following areas at school and community level. Consider social, systemic, educational barriers. Why are children with disabilities not in school? They identify strategies that can be used to reduce or remove these barriers.

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| --- |
| **Notes**   * Misconceptions about causes of disability. It is seen it as a curse; a result of spiritualism and witchcraft, which results in hiding of children with disabilities. * Often children with disabilities start school at older age. * Teachers’ attitudes. They feel underprepared and not able to provide adequate support. * Rigid instructional methods and curriculum. * Inaccessible environment e.g. toilets, playground. * Teachers and schools not supported. * Parents are not involved. * There is a lack of appropriate teaching and learning resources and equipment. * Poor quality teaching. * Most of the EARCs are poorly resourced and lack the capacity to conduct functional assessments. |

Figure 3: Barriers to inclusive education

2. In groups participants discuss ways of removing barriers and promoting education that is responsive to and inclusive of every learner.

Figure 4: Strategies for promoting inclusive education

*Source: LC Training materials*

3. In groups, participants discuss how the attitude and approach of the teacher can either be a barrier or an enabler of inclusion. Focus on how this can create a welcoming ethos for all learners.

Table 1: Competence Requirements in Early Childhood Education and Care (UNESCO 2012)

| **Knowledge** | **Practices** | **Values** |
| --- | --- | --- |
| Knowledge of various developmental aspects of children from a holistic perspective (cognitive, social, emotional, creative…) | * Building strong pedagogical relationships with children, based on sensitive responsivity * Observing children in order to identify their developmental needs * Planning and implementing a wide range of educational projects that respond to children’s needs supporting their holistic development * Documenting children’s progress systematically in order to constantly redefine educational practices Identifying children with special educational needs and elaborating strategies for their inclusion | * Taking into account children’s needs in order to promote their full potential and participation * Adopting a holistic vision of education that encompasses learning, care and upbringing * Committing to inclusive educational approaches |
| Knowledge of children’s different strategies of learning (play-based, social learning, early literacy and numeracy, language acquisition | * Creating and organising effective learning environments * Arranging small-group project work starting from children's interests (inquiry-based learning) * Encouraging children’s personal initiatives * Supporting children's symbolic play through appropriate provision of structured and unstructured materials * Generating an appropriate curriculum that stimulates emergent literacy, maths and science skills * Promoting language acquisition from a multilingual perspective (recognising children’s home language and supporting second language acquisition) * Offering more personalised and individual learning support to children with special educational needs | * Adopting a child-centred approach that views children as competent, active agents and as protagonists of their own learning * Understanding learning as a co-constructed and open- ended process that ensures children’s successful social engagement and encourages further learning * Adopting a cross-disciplinary approach to learning * Adopting a multilingual approach that encourages learning in contexts of diversity |
| Knowledge of communication with children and participation | * Valuing and encouraging children's expression through different languages (painting, dancing, story-telling…) * Making accessible to children the cultural heritage of local communities as well as the cultural heritage of humankind (arts, drama, music, dance, sports… ) * Encouraging children to engage in cultural production as a way to express themselves * Involving children in community-based projects (festivals, cultural events,…) and valuing their contributions (through exhibitions, documentaries…) * Co-constructing pedagogical knowledge together with children | * Adopting a rights-based approach to ECEC in which children’s right to citizenship encompasses their full participation in the social and cultural life of their community * Promoting democracy, solidarity, active citizenship, creativity and personal fulfilment |
| Knowledge of working with parents and local communities | * Analysing the needs of local communities to work effectively with parents and disadvantaged groups * Establishing relationships with parents based on mutual understanding, trust and cooperation * Enabling open communication and reciprocal dialogue with parents * Creating systematic opportunities fostering dialogue and exchanges (e.g. documentation, but also welcoming practices…) * Involving parents in the decision-making processes (collegial bodies, parents-teachers committees,… ) and taking their perspectives into account * Co-constructing pedagogical knowledge together with parents and supporting their parental role * Organising initiatives involving parents as well as members of local communities (e.g. workshops, debates and open conferences,…) * Building up support for ECEC services within local communities * Establishing collaborative relationships with other professionals (e.g. health and social services) | * Adopting a democratic and inclusive approach to the education of young children and families in order to sustain social cohesion * Recognising the educational responsibility of parents as main educators of their children during the early years |
| Knowledge of team working (interpersonal communication and group-work dynamics) | * Continuously reviewing practices individually and collectively * Sharing and exchanging expertise with colleagues in team meetings * Engaging in discussion and learning from disagreement * Developing educational practices together with colleagues through joint work * Co-constructing pedagogical knowledge through documentation and collective evaluation of educational practices | Adopting a democratic and critically reflective approach to the education of young children |
| Knowledge of working in contexts of diversity | * Developing inclusive practices that facilitate the socialisation of children and families within a plurality of value systems and proactively address discrimination * Facilitating intercultural dialogue within ECEC services and in the wider community through parents’ involvement * Dealing with unpredictability and uncertainty * Elaborating a pedagogical framework that sustains inclusive practices within ECEC services | Adopting a democratic and inclusive approach that values diversity |
| Knowledge of the situation of ECEC in the broader local, national and international context | * Actively engaging with local communities in promoting children’s and families’ rights and participation * Networking with other professionals (e.g. professional associations, trade unions) and engaging in local political consultation | Rights-based approach to ECEC that promotes children’s and families' active citizenship, solidarity and lifelong learning |
| Health and care of young children and basic knowledge of social protection | Implementing appropriate practices in relation to children’s safety, hygiene and nutrition | Commitment to child welfare and well-being |

# DAY 2

## Session 7: Identification, Screening (Washington Group Questions) and support intervention measures at the school level

2 hours 30 minutes

### 7.1 Session Outcomes

By the end of the session the participants will be able to:

1. discuss the importance of keen observation in the learning situation;
2. discuss the need to ask themselves the question why a learner is behaving in a different way during the learning process;
3. explain the importance of early identification of children who may be experiencing different barriers to learning;
4. identify persons who can assist with the early identification of children who experience barriers to learning;
5. make use of screening tools to identify what support a child might need;
6. Identify referral systems for children who may need more detailed assessments or additional support.

### 7.2 Key Areas to be covered

1. The need for the teacher to be observant.
2. Asking the question as to why learners may be behaving or responding in particular ways.
3. Importance of early identification of children with functional difficulties and disabilities.
4. Importance of early identification of a child’s need for support in education.
5. Screening tool - Washington Group Questions.
6. Referral for more in-depth assessment, diagnosis or support.



### 7.3 Suggested Learning Experiences

1. Participants share experiences on observations they have made in their classes. In pairs, participants discuss the importance of the teacher being a keen observer during the teaching and learning process; asking themselves why a child may be behaving in a particular way. How are ongoing observations recorded, analyzed and used for ongoing planning, monitoring and revisions?



2. In groups, participants share experiences of how they identified a child who had some difficulties in their class. What helped them in this process? What did they do?

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| --- |
| **Notes** 1. Importance of early identification of children with disabilities Early identification of a child’s difficulty enables early intervention in response to it. This is the unique opportunity in the pre-school setting: to address difficulties before the child goes to higher grades. Early intervention implies the application of targeted programmes which reduce or remove barriers to learning which undermine or prevent a child’s effective participation in learning. Addressing these barriers early provides an effective foundation for learning for the child’s schooling and beyond. It means that the cycle of failure, frustration and exclusion is broken. Many young children who receive quality early support will no longer need specialized and costly support later in life. 2.  The teacher’s role in identification and intervention During the early school years, teachers are well positioned to identify if a child is experiencing any barriers within the learning environment. Through careful observation and use of screening tools they may be able to recognize a range of learning needs, and areas for which individual children need support.  What can the teacher do?  *Source LC Training Materials*   * Look for signs that the children are experiencing difficulties attending school, or not participating in learning. This is a key role of teachers in a preschool setting – to identify and remove barriers in the setting that prevent participation, learning and enjoyment. * Observe the children carefully and consistently over time; notice changes in behaviour or the child’s demeanor Some children with at risk factors for their development and with disabilities will come to the setting with different capacities to participate, engage in play and learn and will not necessarily display change in behavior over time. * Look for signs that children are not happy or comfortable. * Listen to learners and parents, and give them opportunities to talk about their joys, as well as difficulties and concerns. * Find or link up with a network of people who could help the child, the parents and the teacher. * Encourage parents to be in contact with relevant people who could help, and not to be scared. * Commit to learning from colleagues or other personnel who may have advice or experience relevant to the child’s problems and needs.     What are some of the signs that teachers could look out for?  **Seeing difficulties**  Squinting, red eyes, sore eyes, watery eyes, rubbing eyes, eyes looking tired, sensitive to light, bumping into things, tripping over, not noticing or seeing things that others can see, moving head to see things, holding things close to face to see them, distracted, frustrated or misbehaving.  **Hearing difficulties**  Seeming to ignore spoken instructions or ignoring when name is called, mishearing or misunderstanding things, frequently asking teacher/friends to repeat what they have said, seem distracted or frustrated or misbehaving, speaking loudly without realising, watching a speaker’s lips closely, frequent ear infections or pain.  **Learning difficulties**  Seeming to ignore or misunderstand information or instructions, not remembering things, not managing to complete tasks, not keeping up with classmates, seeming frustrated or behaving badly, being disorganized, easily distracted, poor concentration, poor co-ordination, struggling to learn new concepts.  **Mobility or motor skill difficulties**  Having difficulty walking or moving around or moving/walking slowly or awkwardly, difficulty holding/manipulating items, poor co-ordination, avoiding certain activities/games, clumsy or making a mess accidentally, experiencing discomfort or pain.  **Difficulty with learning**   * Working at a slow pace. * Trouble following directions. * Trouble staying focused on a task. * Difficulty understanding abstract ideas. * Lack of attention to detail, or too much attention to detail. * Poor social skills.  3. Early identification by parents Having been with them since birth, parents the most important role in identifying their child’s strengths and difficulties. They are aware of their child’s behaviour at home – during mealtimes, playing with siblings and at night; whether they assist with chores or other household tasks. They are able to compare the milestones of one child with those of another. If a parent is concerned about their child’s growth and development, or feels that they are having trouble in learning, they should be encouraged to discuss the matter with the teacher.  The concerns raised by a parent should be taken seriously, and a joint decision made about the need for further investigation or assessment. The focus must be on ensuring that the child gets the necessary support (intervention) so that they are able to play and learn effectively.  However, sometimes parents do not recognize their own child’s difficulties or deny that they are there. Teachers may identify a disability of the child, even if the parents haven’t given any input. Should a teacher observe a learning or behavioral difficulty of a child, then he or she may request a formal assessment to be carried out. This could be done by the EARC and requires the consent of parents. Priority should be given to developing a partnership relationship with parents that includes their right to be consulted about all decisions and actions planned for the child. 4. Screening tests Screening tests are important.  They are designed to identify academic or learning challenges, sensory or physical challenges of children. Screening test instruments wouldn’t give an accurate or definite measurement of a learner’s disabilities or the type of services required.  **The Washington Group / UNICEF Child Functioning Module Questions on Disability**  The Washington Group Questions Child functioning modules are a set of questions that are specially designed to identify children who have difficulty with certain functional abilities and may be at risk of limited participation or exclusion from education and learning opportunities than other children of the same age group. The questionnaire covers different domains of functioning relevant to child development such as; seeing , hearing, mobility, self-care , communication and comprehension, learning, remembering , attention concentration, coping with change, relationships and affect (anxiety and depression) The tools can help teachers to understand what domain and level of functional difficulties a child might have in order to provide the right type of support. The Washington Group Questions are not a diagnosis tool and therefore it is important a child identified with a functional difficulty should be referred to a specialist for further assessment and diagnosis.  There are two screening tools for children; one is for children between the ages of 2-4 years and the other for children aged between 5-17 years  **Instructions to the person completing the Washington Group Questions**  *Source: LC Training Materials*  The following questions are intended to be used within a programme or educational facility, to screen for children with functional difficulties. The following questions should be asked to the child’s primary caregiver. Please ensure both the child and the primary caregiver are together during the screening exercise. (This tool should not be used on children under the age of five years).  Please ask **all** of the following questions, applying the skip functions where necessary and with every question asked please read out the response options every time.  Wait for a response, if the primary caregiver has not understood the question please repeat the question and the answer options.  If the caregiver is unable or uncomfortable to respond to the question it is fine to move on to the next question.  When the respondent provides their answer tick or circle this answer on the tool.  **Remember**  In your introduction and throughout the questionnaire do **not** use the term disability. This tool is only asking about functional difficulties.  Please do **not** change the question or provide additional examples.  Remember to follow the skip functions it is not necessary to ask each question where a skip function applies.  Please ensure you have got written consent from the guardian (and where possible from the child) to conduct the screening exercise.  Please ensure the environment is conducive and accessible for the questionnaire to be administered, including, any accommodations that might need to be considered such as a sign language interpreter.  **i. The Washington Group / UNICEF Child Functioning Module Questions on Disability for children aged 2-4 years**  **Instructions to the person completing the Washington Group Questions**  The following questions are intended to be used within a programme or educational facility, to screen for children with functional difficulties. The following questions should be asked to the child’s primary caregiver. Please ensure both the child and the primary caregiver are together during the screening exercise. (This tool should be used on children under the age of five years only).  Please ask **all** of the following questions, applying the skip functions where necessary and with every question asked please read out the response options every time.  Wait for a response if the primary caregiver has not understood the question please repeat the question and the answer options.  If the caregiver is unable or uncomfortable to respond to the question it is fine to move onto the next question.  When the respondent provides their answer tick or circle this answer on the tool.  **Remember**  In your introduction and throughout the questionnaire do **not** use the term disability. This tool is only asking about functional difficulties.  Please do **not** change the question or provide additional examples.  Remember to follow the skip functions it is not necessary to ask each question where a skip function applies.  Please ensure you have got written consent from the guardian (and where possible from the child) to conduct the screening exercise.  Please ensure the environment is conducive and accessible for the questionnaire to be administered, including, any accommodations that might need to be considered such as a sign language interpreter.  **Please read the following to the child’s primary caregiver:**  I would now like to ask you some questions about any difficulties your child may have doing certain activities.  There are 16 questions and they all have the same multiple-choice answers which I will read to you.  I would like you to pick the answer that best fits your child’s level of difficulty. This might be 1) you have no difficulty doing that activity, 2) some difficulty doing that activity, 3) a lot of difficulty doing that activity, or 4) you cannot do that activity at all.  Do not worry there are no right or wrong answers or if you can’t answer a question you can also choose not to answer that question.  Shall we begin? |

|  |  |  |
| --- | --- | --- |
| CHILD FUNCTIONING (age 2-4) CF | | |
| **CF1**. I would like to ask you some questions about difficulties your child may have.  Does (name) wear glasses? | Yes 1  No 2 | 2⇨CF3 |
| **CF2**. When wearing his/her glasses, does (name) have difficulty seeing?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 1⇨CF4  2⇨CF4  3⇨CF4  4⇨CF4 |
| **CF3**. Does (name) have difficulty seeing?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF4**. Does (name) use a hearing aid? | Yes 1  No 2 | 2⇨CF6 |
| **CF5**. When using his/her hearing aid, does (name) have difficulty hearing sounds like peoples’ voices or music?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 1⇨CF7  2⇨CF7  3⇨CF7  4⇨CF7 |
| **CF6**. Does (name) have difficulty hearing sounds like peoples’ voices or music?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF7**. Does (name) use any equipment or receive assistance for walking? | Yes 1  No 2 | 2⇨CF10 |
| **CF8**. without his/her equipment or assistance, does (name) have difficulty walking?  Would you say (name) has: some difficulty, a lot of difficulty or cannot do at all? | Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF9**. With his/her equipment or assistance, does (name) have difficulty walking?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 1⇨CF11  2⇨CF11  3⇨CF11  4⇨CF11 |
| **CF10**. Compared with children of the same age, does (name) have difficulty walking?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF11**. Compared with children of the same age, does (name) have difficulty picking up small objects with his/her hand?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF12**. Does (name) have difficulty understanding you?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF13**. When (name) speaks, do you have difficulty understanding him/her?  Would you say you have: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF14**. Compared with children of the same age, does (name) have difficulty learning things?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF15**.Compared with children of the same age, does (name) have difficulty playing?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF16**. Compared with children of the same age, how much does (name) kick, bite or hit other children or adults?  Would you say: not at all, the same or less, more or a lot more? | Not at all 1  The same or less 2  More 3  A lot more 4 |  |

**ii. The Washington Group / UNICEF Child Functioning Module Questions on Disability for Children Age 5-17**

**Please read the following to the child’s primary caregiver:**

I would now like to ask you some questions about any difficulties your child may have doing certain activities.

There are 24 questions and they all have the same multiple-choice answers which I will read to you.

I would like you to pick the answer that best fits your child’s level of difficulty. This might be 1) you have no difficulty doing that activity, 2) some difficulty doing that activity, 3) a lot of difficulty doing that activity, or 4) you cannot do that activity at all.

Do not worry there are no right or wrong answers or if you can’t answer a question; you can also choose not to answer that question.

Shall we begin?

|  |  |  |
| --- | --- | --- |
| CHILD FUNCTIONING (age 5-17) CF | | |
| **CF1**. I would like to ask you some questions about difficulties your child may have.  Does (name) wear glasses or contact lenses? | Yes 1  No 2 | 2⇨CF3 |
| **CF2**. When wearing his/her glasses or contact lenses, does (name) have difficulty seeing?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 1⇨CF4  2⇨CF4  3⇨CF4  4⇨CF4 |
| **CF3**. Does (name) have difficulty seeing?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF4**. Does (name) use a hearing aid? | Yes 1  No 2 | 2⇨CF6 |
| **CF5**. When using his/her hearing aid, does (name) have difficulty hearing sounds like peoples’ voices or music?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 1⇨CF7  2⇨CF7  3⇨CF7  4⇨CF7 |
| **CF6**. Does (name) have difficulty hearing sounds like peoples’ voices or music?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF7**. Does (name) use any equipment or receive assistance for walking? | Yes 1  No 2 | 2⇨CF12 |
| **CF8**. Without his/her equipment or assistance, does (name) have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. [Or insert country specific example].  Would you say (name) has: some difficulty, a lot of difficulty or cannot do at all? | Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 3⇨CF10  4⇨CF10 |
| **CF9**. Without his/her equipment or assistance, does (name) have difficulty walking 500 yards/meters on level ground? That would be about the length of 5 football fields. [Or insert country specific example].  Would you say (name) has: some difficulty, a lot of difficulty or cannot do at all? | Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF10**. With his/her equipment or assistance, does (name) have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. [Or insert country specific example].  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 3⇨CF14  4⇨CF14 |
| **CF11**. With his/her equipment or assistance, does (name) have difficulty walking 500 yards/meters on level ground? That would be about the length of 5 football fields. [Or insert country specific example].  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 1⇨CF14  2⇨CF14  3⇨CF14  4⇨CF14 |
| **CF12**. Compared with children of the same age, does (name) have difficulty walking 100 yards/meters on level ground? That would be about the length of 1 football field. [Or insert country specific example].  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 | 3⇨CF14  4⇨CF14 |
| **CF13**. Compared with children of the same age, does (name) have difficulty walking 500 yards/meters on level ground? That would be about the length of 5 football fields. [Or insert country specific example].  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF14**. Does (name) have difficulty with self-care such as feeding or dressing him/herself?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF15**. When (name) speaks, does he/she have difficulty being understood by people inside of this household?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF16**. When (name) speaks, does he/she have difficulty being understood by people outside of this household?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF17**. Compared with children of the same age, does (name) have difficulty learning things?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF18**. Compared with children of the same age, does (name) have difficulty remembering things?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF19**. Does (name) have difficulty concentrating on an activity that he/she enjoys doing?    Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF20**. Does (name) have difficulty accepting changes in his/her routine?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF21**. Compared with children of the same age, does (name) have difficulty controlling his/her behaviour?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF22**. Does (name) have difficulty making friends?  Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all? | No difficulty 1  Some difficulty 2  A lot of difficulty 3  Cannot do at all 4 |  |
| **CF23**. How often does (name) seem very anxious, nervous or worried?  Would you say: daily, weekly, monthly, a few times a year or never? | Daily 1  Weekly 2  Monthly 3  A few times a year 4  Never 5 |  |
| **CF24**. How often does (name) seem very sad or depressed?  Would you say: daily, weekly, monthly, a few times a year or never? | Daily 1  Weekly 2  Monthly 3  A few times a year 4  Never 5 |  |

#### 5. Educational Assessment and Resource Centers (EARC)

For children who might need further investigation, assessment and support, an individual evaluation at an Educational Assessment and Resource Center (EARC) may be the best option. This is particularly important for children in pre-school or early grades, so that there can be intervention to address the issue as early as possible.

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| **Notes**  EARCs were introduced in Kenya in 1984. Their primary purpose is to ensure:   * early identification, * assessment, * intervention and * placement of learners, such that they get the support that they need.   The aim of the EARCs is to improve the growth and quality of services by placing emphasis on assessment and early intervention. The intention is to support every child’s learning and development by ensuring that the results of comprehensive assessments are integrated within a plan for the class and the individual child (through an IEP if needed). Effective early identification and intervention strategies are based on multidisciplinary teams of professionals, accurate assessment of the support needs of children and clear referral systems. |

## SESSION 8: Parental engagement and empowerment - strengthening partnerships

1 hour 30 minutes

### 8.1 Session Outcomes

By the end of the session, the participant will be able to:

1. discuss the importance of parental engagement and empowerment in the learning of their children;
2. explain the importance of parental engagement and empowerment to the success of inclusive education;
3. discuss how teachers can strengthen partnerships with parents;
4. discuss ways of mobilizing the communities in support of inclusive education;
5. share experiences with a guest speaker – parent of a child with disability in an inclusive setting.

### 8.2 Key Areas to be covered

1. Importance of parental engagement, empowerment and partnerships.
2. Importance of parental engagement, empowerment and parnterships to the success of inclusive education.
3. Lack of parental engagement and empowerment in the learning of their children.
4. Ways of mobilizing the communities in support of inclusive education.



### 8.3 Suggested Learning Experiences

1. A small group of participants act out a roleplay of a granny who comes to preschool asking to register her grandchild who has a disability. The role play takes the form of an interview. Characters should include the granny, the child and the teacher.

The rest of the group watch the role play and then respond to what they saw taking place.

Discuss the themes of parental engagement, empowerment and partnerships. To what extent where these affirmed or undermined?

2. A parent of a child with disability in an inclusive setting shares their experiences.

**Examples of questions/themes that can be explored in discussions with parents:**

* Tell me about your child (name, age, disability, gender, educational level, interests)
* How has inclusion at pre-school/ school impacted on your child?
* What supports have been helpful to enable your child to access and progress in school?
* What have been some of the challenges to your child’s learning/ education? Have you had all the support that has been needed?
* What advice can you offer to teachers who are willing to include children with disabilities in their classes/schools? What advice can you offer for other children?
* How can we as teachers, parents and children work together?

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| **Notes**  Parental engagement is vital. The school day is approximately 5 hours, while the family have responsibility for the other 19 hours. We need to emphasise that the parent/carer is the person with responsibility for the child. Partnership is about working with the parent/carer not telling them what to do.  **Importance of parental engagement and empowerment**   1. Parental engagement can have a huge impact on a child’s adjustment and performance at school. It also makes a difference to the child’s self-esteem and well-being. 2. Close communication between teacher and parents is important to avoid misinterpretation of information between them. 3. When parents are involved, the work of teachers can be more effective, and their wishes, feelings and perspectives on their children's development taken into account. 4. Parents may lack the skills of early identification of their child’s disability unless the disability is visible or when there is a significant delay in achievement of developmental milestones. 5. It is also critical **during transition stages** between home and preprimary settings, and preprimary and primary education, where parents should be a member of the team that supports transition planning and adjustments to the new setting.   **What can we do as teachers to make our classrooms a welcoming space for parents?**   1. In most cases teachers contact parents when they need to report a problem with a learner’s work or behaviour, and because of this, parents often view communication with their child’s teacher in a negative light. Instead, the teacher should send regular updates and convey positive messages to the parents about their child and the progress that s/he is making. 2. Make the school welcoming for parents by allocating a dedicated space for them where they can talk while they are waiting for their children. 3. Tackle language barriers, as these might inhibit parental involvement in their child’s school life. 4. Teachers and parents’ groups could be set up at the level of the setting to look into issues of inclusion and implement small actions. 5. Involve parents in the learning of their children. E.g. invite them to come to their child’s class and carry out some activities with them, such as telling stories. Have children visit farms in the neighbourhood to learn some concepts. 6. Embrace positive aspects of technology and encourage parents to do the same. 7. Observe confidentiality.   **What can parents do to support their child’s learning and education?**   * Parents should be encouraged to play with their children. * Spend time with your child, take an interest in what s/he is doing; sit at his/her level and listen to what s/he is saying. Avoid a situation in which the only interaction with your child is giving instructions on what to do or not to do. * Encourage your child to read, or look at pictures. Talk to your child about what is in the world around him/her; extend his/her vocabulary. * Provide for the basic needs of your child at home, include a regular time for going to bed and waking up. * Encourage your child to play with everyday items such as plastic cups, pots and spoons. * Talk and sing to your child. * Praise your child, be proud of him/her! * Include him/her is household routines that are at an appropriate level * Encourage your child to ask questions and try to answer them in a way that s/he can understand. * Take an interest in what your child is doing at school; who her friends are and what s/he enjoys or finds difficult. * Consult the teacher regularly on your child’s progress though regular visits to school, find out from the teacher what you can do to assist in supporting your child’s learning.   **Community mobilization and partnerships**  This is the process of bringing people together for the purpose of raising awareness on an issue, in this case inclusive education. As people become more involved they are likely to become more able to participate and more active in supporting inclusive education in their communities. Strategies may include working with community leaders, traditional leaders and/or other key influencers to raise their awareness of the importance of inclusion in early learning, especially for children with disabilities.  Teachers may be instrumental in supporting campaigns, such as those encouraging healthy eating among young children or promoting parenting programmes.. They may be catalysts in encouraging community members to prioritise the needs of young children. |

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# DAY 3

## Session 9: Play-based learning and the teaching, and the learning process in an inclusive setting

2 hours 30 minutes

### 9.1 Session Outcomes

By the end of the session the participants will be able to:

1. define play and recognize its importance;
2. identify factors to consider during play and early learning during COVID 19;
3. discuss types of play;
4. practice using play-based learning to enable children acquire specific learning outcomes in different learning areas;
5. develop and adapt play materials using locally available items;
6. identify factors to be considered in the management of the teaching and learning process in an inclusive setting.

### 9.2 Key areas to be covered

1. The importance of play as a critical means of learning among children.
2. Factors to consider during play and early learning during COVID 19.
3. Types of play.
4. Play based learning activities.
5. Making items and equipment to encourage play.
6. Factors to be considered in the management of the teaching and learning process in an inclusive setting.

### 9.3 Suggested Learning Experiences

1. Using the curriculum designs, participants work in groups to practice using different types of play activities to achieve the intended learning outcomes in different learning areas. Materials and equipment will be provided for each group.
2. Using locally available materials participants make and modify play items for use in an inclusive setting. Base it on one of the children described in the case studies in the Appendix of this manual.
3. In groups participants discuss factors to be considered in the management of the teaching and learning process in inclusive settings.

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| **Notes**   1. **Play based learning**   *What is play?*  Play is any activity that is pursued for joy. It is an essential part of children’s growth and development. It consists of those activities performed for self-amusement that have behavioral, social, and psychomotor rewards. It is child-directed, and the rewards come from within the individual child; it is enjoyable and spontaneous. However, play can be constructed such that specific outcomes are achieved.  ***Why is play important for young children?***  Play is the primary means by which children explore their world and begin to make sense of the world around them. Teachers can support this play-based philosophy by offering and encouraging the engagement in play-based activities centred around academic areas that will allow for cognitive development as well as activities that will promote social and emotional learning. A play-based learning environment is generally set up into sections. There are typically sections for science, literacy, writing, reading, dramatic play, blocks and building, and social studies. These areas of learning will then incorporate play-based materials and curriculum activities that the children will find engaging and fun. safe to learn, play and explore. It will be organized in a way that supports the child’s social and emotional development as well as cognitive learning.  In a **play-based/ child-centred preschool program**, children are able to choose activities based on their interests. Learning activities such as creative arts, literacy, numeracy, social studies, science, etc. are presented to children through play. Teachers encourage children to play, facilitating cognitive, social & emotional, creative and adaptive skills through the process of play.  Play-based learning helps children develop social skills, motivation to learn, and even language and numeracy skills. Through play and with the use of play items such as old tires as cars, counting bottle tops etc, children learn many different skills they will need in their life. “Children's play unlocks their creativity and imagination, and develops listening, reading, thinking, and problem solving skills as well as further develops motor skills. It provides the base foundation for learning.”  Learning how to play with others enables children to gain skills in compromising, conflict resolution and sharing. Play helps in the development of fine and gross motor skills. Age-appropriate play focuses more specifically on developmental ages and the general guidelines for safe, appropriate and stimulating play equipment. Activities and learning experiences are set up to support ways in which young children  learn best: learning by doing, hands-on, trial and error, play, sensory exploration, and having positive role models to watch and imitate.  ***How can children be protected from COVID 19 during play?***   * Keep reminding children about COVID 19 measures to take during learning. Integrate playful content and approaches to physical distancing requirements. * Facilitate small group activities. * Wearing masks and ensuring they are of the right size and cover mouth, nose and chin. They should not keep touching the masks and children must be advised not to share masks. * Encourage frequent cleaning of hands using running water and soap  1. **Play-based learning activities**   Children need various types of play in order to support and facilitate meaningful learning opportunities as when using play, they develop language, motor, social, emotional, and cognitive abilities. Whatever the type, play can work to help children learn important skills that they will need as adults.   1. **Object play** – Playing with objects allow children to learn about things around them such as colours, shapes, smell. form, texture, weight and how things work.   **Mathematics Activity**  **Strand:** Classification  **Sub strand:** Sorting & grouping  **Specific Learning Outcome**  By the end of the sub-strand, the learner should be able to:   1. group objects according to a specific attribute to create sets of similar objects;   **Learning Experience**  Sort objects according to given attributes and tell the attribute used.   1. **Independent play –** Playing alone with intense focus. It helps in developing concentration and the ability to create, construct and do things independently.   **Psychomotor and Creative Activities**  **Strand:** Picture Making Techniques  **Sub strand:** 1.1 Drawing  1.1.2 Dot joining  **Specific Learning Outcome**  By the end of the sub-strand the learner should be able to:   1. develop simple pictures by dot joining techniques for enjoyment;   **Learning Experience**  Joining given dots using coloured pencils   1. **Social play – Play that involves others**   **Theme:** Family  **Sub-theme:** My family  **Specific Learning Outcomes**  By the end of the sub-theme the learner should be able to:   1. name the family members for example father, mother, brothers and sisters to have a sense of belonging.   **Learning Experience**  Act roles played by different family members.   1. **Story telling – Telling or acting out a story**   Language Activities  Sharing stories from their communities.   1. **Imitative play – Imitating others e.g. drivers**   **Environmental Activities**  **Strand:** Social Environment  **Sub Strand:** Our School  **Specific Learning Outcome**  By the end of the sub strand the learner should be able to;  a) talk about people working in the school for identification;  b) appreciate the work done by people in school;  **Learning Experience**  Imitate role of people working in the community for example, famers, fishermen, doctors. A child is called upon to imitate though actions work done by people in community, the others say the name given to people who do such kind of work.   1. **Role play** – assuming a role as an object, animal or character.   **Environmental Activity**  **Theme:** Animals at home  **Sub theme:** sounds made by animals at home  **Specific Learning Outcome**  By the end of the sub-theme the learner should be able to:  a) made sound made by animals at home;  **Learning Experience**  Game: Making sounds made by different animals found at home. (a child produce a sound made by an animal found at home. The other children mention the animal which makes the sound.   1. **Physical play** – running, jumping, climbing, swimming and other activities carried out for enjoyment.   **Creative and Psychomotor Activities**  **Strand:** Fun Games  **Sub strand:** Traditional games  **Specific Learning Outcome**  By the end of the sub-strand the leaner should be able to:  a) identify various traditional and modern games for performance;  b) perform different traditional games for enjoyment;  c) perform various game for fun.  **Learning Experiences**  Walking on a rope   1. **Exploration** – Exploration of real or imagined environment.   **Environmental Activities**  **Strand:** Plants  **Sub strand:** Plants found in the environment  **Specific Learning Outcome**  By the end of sub strand the learner should be able to;   1. identify the types of plants found in the home environment;   **Learning experience**  Nature walk - collecting different plants in the school environment and arranging them according to attributes of their choice.   1. **Games** – Play with rules   **Indoors, outdoors, traditional games**  10. **Puzzles** – Games that challenge mental ability.  **Environmental Activities**  **Strand:** Health Practices  **Sub strand:** Foods/feeding  **Specific Learning Outcome**  By the end of the sub strand the learner should be able to:   1. talk about different food eaten at home;   **Learning Experiences**  Join puzzles on foods  **11. Sports –** Based on physical com or play real or imagined instruments.  **12. Arts –** Drawing, painting, modeling  **13. Constructive play**- building with blocks, sand, paper  **c) Making and adapting play materials**  Most of these materials used to make play materials should be of bright colours, interesting, age appropriate and locally available. Items such as old plastic bottles or boxes, coloured paper or card, large beads, pieces of clothes, plastics can be collected in the environment and used in making different play items.  Ball made from plastic papers and string  Adapting the ball  By adding a string to the ball, it becomes appropriate for a learner with vision or physical difficulties.  **d) Elements of an effective teaching and learning process**  An effective teaching and learning process requires consideration of the following:   * importance of preparing for a lesson in advance. * choosing the appropriate venue and arrangement of the teaching learning process, including group work. * the need to speak clearly and use appropriate vocabulary. * the importance of giving every learner an opportunity to contribute and make sure that others listen. |

#### Numbers of learners

Planning with the number of children in mind assists in:

* Identification of appropriate venues
* Setting up the most appropriate classroom arrangement
* Selection of strategies to be used
* Identifying resources to be used

#### Preparing in advance

* As the teacher, you will need to collect and prepare or make the materials you will need in the teaching learning process. Most materials should be easy to find or make at low or no cost. If you are unable to find or make any of the materials suggested you may need to modify the activity or modify the material.
* Organise each day’s teaching resources before the lesson and make sure you are familiar with the strand and activities for each session – **Lesson Plan.**
* You need plenty of time to organise your materials and check the seating arrangements.
* The weather may dictate the organization of the teaching learning process.

#### Choosing a venue and arranging the space

* Choose a space that is big enough to accommodate the children sitting in groups and which also has some space for activities that require movement.
* Plan in advance for children who find it difficult to concentrate; and minimize distractions.
* If there is only a small room available, see if you can use an outside space for any activities that require movement.
* All young children need safe and accessible spaces to move around in. Venues and facilities (such as toilets and playgrounds) should provide for children with mobility disabilities, so that they are able to interact with other children.

#### Organizing small groups

* For small group activities, divide children into groups of about 5 or 6 (depending on number of learners in the class).
* Where possible, ensure that there is a balance of girls and boys in each small group.
* To make the learning process more interesting and fun, ask each group to give themselves a name. For example, you could have an animal theme and groups might decide to call themselves The Lions, The Elephants, or The Leopards.

#### Managing the teaching and learning sessions

* Have a set of simple ‘rules’, and discuss these with the children. Create symbols or pictures for these and display them on the wall. Keep the rules as simple and clear as possible, focusing on what we should do and not on what we should not do.
* These could include:
* We take turns
* We help each other
* We share
* We arrive on time
* We listen when someone else is speaking
* Stick on the walls all flipcharts containing diagrams, and display other resources you have used during each lesson. Leave the flipcharts on the walls for the duration of the teaching a concept. Ensure that they are at the reach of the children. This helps to remind children of information and ideas they have heard about or discussed.
* Children drawings and work should also be displayed.

#### Write clearly with a good colour contrast

Children who have difficulties with seeing will be able to see written or drawn more easily if:

* Your writing or drawings are clear and large.
* Good contrast is used. You should use a black pen on a whiteboard, or white chalk on a blackboard.
* If the blackboard is old and faded, you may need to repaint it. It is a good idea to stand at the back of the class to assess your own board writing: can you read it clearly? Ask your colleagues if they can read it clearly, and ask your learners
* The child sits near the board if they need to, in a position which avoids glare from side windows and overhead lights, and which avoids shadow.
* Diagrams are drawn clearly and show relevant information without unnecessary clutter.
* Always verbalize out whatever you are drawing/writing on the chalk board.

#### Face the class and do not move around when speaking

* Children who do not hear well will need to focus on your face and body language.
* Those who have difficulty learning or understanding will better be able to concentrate and more fully understand if they can see you clearly.
* When speaking or demonstrating, make simple, clear movements to illustrate your meaning, and ensure every child can see you.

#### Give everyone an opportunity to contribute and make sure that others are listening

**Individual interactions** between the child and a teacher need attention. They are important for all children and particularly for children with disabilities. A balance between **child- initiated activities and teacher-led activities** should be mentioned, as well as the balance of activities that support progress in different developmental domains and responds to key milestones.

Difficulties that some children have in **communication, play and behavior need particular attention** as they may limit the child’s participation in play and learning, and create pressure on teachers, if strategies for addressing them are not developed. Some children will need more than stimulating learning environment and child centered play based curriculum, which could involve support with communication (pictures, graphic signs, sign language, technology), guidance through daily activities and routines, facilitated peer interactions and assistive technologies.

* It is important for children to develop and demonstrate listening skills and respect for other learners.
* Quieter learners need to feel confident that everyone is going to listen before they speak in class. Make sure you include the quieter, shy learners by asking them questions and praising them for contributing.
* Use paired and group activities in your lessons and check the groups to make sure everyone is included.
* Learners need to see respect for others modelled by the teacher, such as reminding the rest of the class to listen quietly. As well as making space for shy students, this is one way to prevent bullying.
* It is also helpful to praise different types of contribution and good behaviour, rather than only praising learners who answer questions correctly or enthusiastically.
* Monitor your engagement with all learners in the class – is there anyone who does not get much attention from you?
* Take into account differences in children’s ability levels, interests and background.
* Modify, change, adapt, extend and vary aspects of the curriculum.
* Ensure that all teaching practices support different abilities and needs.
* Recognise that all children learn differently and may need different types of support.
* Ensure that play and learning opportunities are appropriate for all of the different children.

## Session 10: Competence Based Curriculum (CBC) design ccomponents and modifications

*Source: KICD Facilitator’s Manual modified for use in an Inclusive Setting*

30 minutes

## Part 1: Components of the CBC curriculum design

### 10a.1 Session Outcomes

By the end of the session, the participant will be able to:

* identify components of Competence Based curriculum designs for appropriate interpretation;
* identify factors to consider when carrying out adaptations to suit learners needs.

### 10a.2 Key Areas to be covered

* Components of curriculum design



* National goals of Education
* Level learning outcomes
* General learning outcomes
* Specific learning outcomes
* Learning Experiences
* Key inquiry questions
* Learning resources
* Assessment
* Modifications done to make the specific learning outcome, learning experiences, teaching learning resources, and assessment differentiated.

### 10a.3 Suggested Learning Experiences

In groups participants study the PP1, PP2 and Grade 1 CBC curriculum designs, and identify the components of the designs.

**Components of the curriculum design**

*Source: KICD facilitator’s Manual*

1. **National Goals of Education**
2. Foster nationalism, patriotism, and promote national unity
3. Promote social, economic, technological and industrial needs for national development
4. Promote individual development and self-fulfillment
5. Promote sound moral and religious values
6. Promote social equity and responsibility
7. Promote respect for and development of Kenya’s rich and varied cultures
8. Promote international consciousness and foster positive attitudes towards other nations
9. Promote positive attitudes towards good health and environmental protection.

**ii) Level Learning Outcomes**

By the end of the Early Years Education, the learner should be able to:

1. Communicate appropriately using verbal and/or non-verbal modes;
2. Demonstrate basic literacy and numeracy skills;
3. Apply digital literacy skills for learning and enjoyment;
4. Apply creative and critical thinking skills in problem solving;
5. Practice hygiene, proper sanitation, safety and nutrition to promote health practice appropriate etiquette for interpersonal relationships;
6. Explore the immediate environment for learning and enjoyment;
7. Demonstrate acquisition of emotional, physical, spiritual, aesthetic and moral development;
8. Demonstrate appreciation of the country and its rich, diverse cultural heritage for harmonious living;
9. Exhibit appropriate organizational skills.

## Part 2: Specific Learning Outcomes, learning experiences, teaching learning resources and assessment differentiation

2 hours

### 10b.1 Session Outcomes

By the end of the session, the participant will be able to:

1. modify specific learning outcomes to suit learners with diverse learning needs;
2. modify suggested learning experiences to suit learners with diverse learning needs;
3. modify teaching learning resources to suit learners with diverse learning needs;
4. modify assessments to suit learners with diverse learning needs.

### 10b.2 Key Areas to be covered

1. Modifying specific learning outcomes;
2. Modifying suggested learning experiences;
3. Modifying teaching and learning resources



1. Modifying assessments.

### 10b.3 Suggested Learning Experiences

Base these on one of the children described in the case studies in the Appendix of this manual.

1. In groups, participants pick a learning area from the curriculum designs, a level learning outcome, general learning outcome and a specific learning outcome. They identify a child in their class who experiences a particular barrier to learning.
2. In pairs participants discuss how they could modify the learning outcome for this child.
3. In pairs participants discuss how they could modify the learning experience for this child.
4. In pairs participants discuss how they could modify the teaching and learning resources for this child.
5. In pairs participants discuss how they could modify the assessment for this child.

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| **Notes**  **Competency Based Assessment**  The main purpose of assessing learners is to:   * Inform teaching and learning decisions * Establish the level of learner’s competence * Ascertain progress against the learning outcomes * encourage learners to make judgments about their performance * Enhance learner motivation * Identify where intervention, focused support or referral is required * Make decisions regarding choice of subject, course and careers pathways   .  **Formative assessment or Assessment *for* learning** (AFL) is an investigative tool to monitor the progress of an individual learner in meeting the learning outcomes in a subject or learning area. It involves gathering data during the learning process, and provides feedback to both the learner and you to help improve learning. This approach helps build an accurate and detailed profile of your understanding of the curriculum and inform teaching so that you can provide appropriate assistance to the learner.  **Assessment as Learning**  Assessment as Learning occurs when a learner is assisted to develop a capacity to be independent, **self-directed** to set individual goals, monitor own progress/ self-assess, and reflect on his/her learning. A learner can self-assess when you provide the learner with a clear picture of steps required to reach proficiency, a set criterion that have a variety of examples or models of decent work for comparison.  **Assessment of learning**  This summative assessment and is carried at the end of a unit or task. It is designed to provide information on the achievement of a learner to parents, educators and learners themselves.  Other forms of assessment include:  Checklists: assist the teacher to determine areas of focus to enable the learner to develop relevant knowledge and skills.  Rating Scales: Use of descriptive words, such as always, usually, sometimes and never  Questionnaires: A list of questions on various aspects of a person’s situation  Project Method: a set of activities implemented within a set timeframe  Learners identify a need in their community where they can provide services based on what they have learned.  Journaling: the learner keeps a record of their personal feelings, thoughts and experiences daily.  Portfolio: a purposeful collection of work samples, self-assessments and goal statements that reflect a learner's progress.  **Summative assessment**  They include tests, examinations, performances, presentation, portfolios, and a variety of written, oral and visual methods. They provide feedback to educators, parents and learners, about a learner’s achievement to make decisions for appropriate placements or further studies.  **Assessment Rubrics**  Assessment rubrics provide the teacher with a tool to ensure that grading is fair and consistent for all learners. Some of these use of rating scales - such as exceeding expectations, meeting expectations, approaching expectations and below expectations.  Avoid comparing a child’s performance with those of other children, but rather measure their progress against their own learning outcomes. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Performance** | **Enter ratings**  **Above expectation** | **Enter ratings**  **Meeting expectation** | **Enter ratings**  **Approaching expectation** | **Enter ratings**  **Below expectation** |
| **Outcome** |  |  |  |  |

**For learners whose attainment is below expectation:**

* **Progress made from previous best attainment**
* **Support that will be provided to reach next target/s**

**Case study on Assessment**

Julia is a seven year old girl in Grade 1.

**Learning area:** Creative Arts

**Strand:** Shading

**Sub Strand:** Shading within limited area

**Specific Learning Outcome:** By the end of the lesson, the learner should be able to shade within given areas.

Julia has challenges with controlling her muscles. The teacher has adapted Julia’s pencils by enlarging them so that she can grip and control them more easily. She gives Julia an outline of a circle to shade. Julia shades inside the circle, but she does not shade at the edges of the circle for fear of shading outside the edges.



As Julia’s teacher, fill in the Assessment Rubric below:

**Sample Report**

Name *……………* Class *……………* Year *…….* Term *……* Age *…*

|  |  |  |
| --- | --- | --- |
| **Learning areas** | **Skills** | **Performance Indicators** |
| Language Activities |  |  |
|  |  |
|  |  |
| Mathematics Activities |  |  |
|  |  |
|  |  |

**Note to parents:** Description of progress made and support that can be provided at home in each learning area.

**Factors to consider when carrying out modifications:**

* + - 1. The specific learning need of the learners.
      2. Limitations of the learner in acquisition of a certain learning outcome.
      3. Learning experiences- differing types of activities that teachers can use including individual, paired, small group or whole class activities:
* Within each of these types of activities, teachers can vary activities. Some small group activities, for example, could have learners who are all working at the same level. Other activities could have multi-level learner ability groupings;
* All children should receive support and attention from the teacher and teachers need to carefully plan their activities for all differing groups within their teaching.
* Allow for different learning styles or intelligences.

1. Time frame
2. Use an assessment approach and plan that is flexible and accommodates a range of learner abilities and needs.
   * Allow for oral and written and activity based assessment tasks.
   * Give multiple choice options.
   * Focus on abilities and interests of the children.
   * Apply accommodations and concessions- Braille, extra time, reader, audio-visual equipment.

## Session 11: Child Safeguarding

Aim:

For participants to develop a deeper understanding of child safeguarding and to familiarise themselves with Kenyan Ministry for Educations Safety Standards Manual (2008)

By the end of this module participants will be able to

* Understand what is meant by child safeguarding.
* Understand the background and importance of the Safety Standards and guidelines.
* Understand why children with disabilities are particularly vulnerable to various types of abuse.
* Identify ways of improving child safeguarding strategies in schools

## Part 1: Background to child safeguarding

Duration: 45 mins

### 11a1 Learning Outcomes:

* Participants understand that children have rights according to the Convention on the Rights of the Child (1989) and United Convention on the Rights of Persons with Disabilities (UNCRPD)
* Participants understand key elements of Kenya safety advice and Standards.

### 11a2 Content Outline:

* Children’s rights
* Kenya SSMSK (Ministry of Education 2008) & TSC Circular 6/2017 Safety of Learners in Learning Institutions
* Key issues in SSMSK
* Key issues in Circular 6/2017

### 11a3 Competences:

* Reflects upon different articles from the Convention on the Rights of the Child (1989)
* Identifies the educational rights of children with disabilities, as outlined in Article 24 of UNCRPD.
* Discusses global commitments to inclusive education and links these to the Kenyan context.
* Links international legislation to the Kenyan school context
* Reflects upon the importance of the safety standards and TSC Circular.
* Articulates the importance of school safety.
* Describes key recommendations of the TSC regarding school safety.

**Methodology:** Plenary, clarification of key messages

**Resources:** Kenya SSMSK & TSC Circular 6/2017 Safety of Learners in Learning Institutions, notes

### 11a4 Teaching Procedure:

| **Step** | **Time**  **(Mins)** | **Learning Outcome** | **Activity** | **Resources** |
| --- | --- | --- | --- | --- |
| **1** | 15 | Know that children have rights to protection under the United Nations Convention on the Rights of the Child (1989) and other legislation | Children have many rights that are described under national and international law for example UNCRC and are agreed by Government of Kenya.  **For example, UNCRC** (UNICEF 2017)  **Article 5** All adults should always do what is best for you.  **Article 19**  You have the right to be protected from being hurt or badly treated.  **Article 20**  You have the right to special protection and help if you cannot live with your parents.  **Article 23**  If you are disabled, you have the right to care and education to help you develop and lead a full life.  **Article 32**  You have a right to protection from work that is bad for your health or your education.  **Article 33**  You have the right to be protected from dangerous drugs.  **Article 34**  You have the right to be protected from sexual abuse.  **Article 36**  You have the right to protection from any kind of exploitation (being taken advantage of).  **Article 37**  You have the right not to be punished in a cruel or hurtful way.  **Article 39**  You have the right to help if you have been hurt, neglected or badly treated. |  |
| **1** | 10 | Reflects upon the importance of the Kenya safety standards and TSC Circular | There are 2 key documents regarding safety in Kenya SSMSK (Ministry of Education 2008) & TSC Circular 6/2017 Safety of Learners in Learning Institutions | SSMSK  Circular 6/2017 |
| **2** | 20 | Articulates the importance of school safety | 1. In plenary guide participants through SSMSK 2. In plenary ask participants to answer the following questions  * What are the benefits of school safety (ref p5, 2.1)? * List 6 threats to schools’ safety (ref p5, 2.2) * Who should be represented in the School safety Sub-Committee (ref p11, 5.1)? * Which person do you think has prime responsibility for the safety of children?  1. Discuss responses in plenary | SSMSK |

## Part 2 What is Child safeguarding?

**Duration:** 30 mins

### 11b1 Learning Outcomes:

Participants develop their understanding of safeguarding.

Participants recognise the factors that make children with disabilities particularly vulnerable to abuse.

### 11b2 Content Outline:

* What is safeguarding?
* Types of abuse
* Abuse in schools, homes and communities

### 11b3 Competences:

* Describes what is meant by child safeguarding.
* Identifies various types of abuse.
* Factors that make children with disabilities vulnerable to abuse
* Describes why children with disabilities are particularly vulnerable to abuse.
* Identifies ways in which children with disabilities are abused.
* Identifies ways to improve the situation of children with disabilities.

**Methodology:** Plenary, group work with feedback.

**Resources:** Handout 3, Chart showing different types of abuse

### 11b4 Teaching Procedure:

| **Step** | **Time**  **(Mins)** | **Competence** | **Activity** | **Resources** |
| --- | --- | --- | --- | --- |
| **1** | 30 | Describes what is meant by child safeguarding.  Describes why children with disabilities are particularly vulnerable to abuse | 1. Distribute Handout 3 – read through, check for understanding. 2. Remind participants that young children are particularly vulnerable to abuse because they are less likely to understand what is right and wrong and less likely to be able to articulate their worries.  * Various types of abuse are inter-related. e.g. physical abuse is also emotional abuse as it causes great emotional damage.  1. Why are children with disabilities particularly vulnerable to various types of abuse? Record on flipchart   -perceived as ‘different’ from other children?  -less physically strong - ‘easy prey’?  -harder to inform responsible adults about abuse?   * Negative social attitudes encourage abuse? * VI children unable to identify perpetrators therefore unable to report them | Handout |

## Part 3: Reporting Procedures

**Duration:** 1 hour

### 11c1 Learning Outcomes:

* Participants identify a clear set of procedures to support children’s welfare.
* Participants demonstrate an understanding of the strategies needed to ensure that learners are secure to report concerns about their own welfare.

### 11c2 Content Outline:

* Existing school systems
* Design a clear procedure/system for a child to identify concerns about their well-being.

### 11c3 Competences:

* Identifies existing systems for identifying safeguarding issues.
* Demonstrates clarity in outlining the process for a child in school to identify concerns about their welfare.
* Identifies strategies for raising awareness about child safeguarding with learners.
* Demonstrates understanding of key messages that learners need to know to improve their safety in school.

**Methodology:** Plenary discussion, small group work

**Resources: F**low chart activity - paper

### 11c4 Teaching Procedure:

| **Step** | **Time**  **(Mins)** | **Competence** | **Activity** | **Resources** |
| --- | --- | --- | --- | --- |
| **1** | 15 | Identifies existing systems for identifying safeguarding issues | 1. Emphasise that the most important part of the training is to ensure that we have simple systems in place to ensure that children are safe and that they are comfortable to self-report when they are having problems. 2. In plenary discuss what currently happens in our schools |  |
| **2** | 30 | Demonstrates clarity in outlining the process for a child in school to identify concerns about their welfare | 1. In school groups design a flow chart explaining what the best procedure for a child might be to identify concerns about their well-being: 2. What is the potential difficulty for the child? 3. What should the child do? 4. Who is responsible for following up? 5. What is the timescale for following up? 6. Who checks that the issue is resolved? 7. Each group feedback in plenary 8. In plenary brainstorm ‘What strategies could be implemented within school to raise awareness among learners about child safeguarding?’[[1]](#footnote-1) | Flipchart Paper and markers |
| **3** | 15 | Identifies procedures for reporting concerns as part of the project | 1. Outline what participants should do if they have safeguarding concerns within schools participating in the project. |  |

#### Handout: Child safeguarding

* Child safeguarding is about protecting children who are participating in any activity from harm or abuse.
* Child safeguarding can involve prevention – in other words creating an environment in which children are free from abuse.
* Child safeguarding can also involve responding to a reported example of child abuse.

**What is child abuse?**

Child abuse happens when a child is harmed, usually as a result of the failure of a parent/carer or organisation/community to ensure a reasonable standard of care and protection.

There are several types of child abuse, including:

• **Physical abuse**

Physical abuse is deliberately hurting a child in ways that can cause injuries such as bruises, broken bones, burns or cuts. Physical abuse is not accidental - children who are physically abused suffer violence such as being hit, kicked, poisoned, burned, slapped or having objects thrown at them. Corporal punishment is a form of physical abuse and never acceptable. Physical abuse is closely related to other types of abuse (see below).

**• Emotional/mental abuse**

Emotional abuse involves persistent or severe emotional ill-treatment or rejection, such as degrading punishment, threats, bullying, and not providing children with the necessary care and affection. Emotional abuse adversely affects the behaviour and emotional development of children. Other harmful experiences such as exposing children to violence in the home are also classified as mental abuse.

• **Neglect**

Neglect is understood as the failure by a parent or caregiver to provide a child with the conditions culturally necessary for their physical and emotional development and wellbeing. Neglect of children with disabilities is more common than neglect of children without disabilities and is often under-reported.

**• Sexual abuse**

Sexual abuse is any kind of sexual activity involving a child, whether or not the child is aware of or consents to what is happening. Sexual abuse involves the use of a child for sexual gratification by an adult, significantly older child or an adolescent, violating the child´s integrity and exploiting their position of dependency. Sexually abusive behaviour includes rape, incest, fondling genitals, masturbation, voyeurism, exhibitionism and exposing or involving the child in pornography or any other sexual activity, real or simulated, including on the internet or in any other medium.

**• Exploitation**

Exploitation of a child refers to the use of a child for work or other activity for economic gain which may be hazardous or harmful to the child´s health or development or interfere with the child´s education. This includes, but is not limited to, child labour and child prostitution. Sexual exploitation occurs when a child is used by someone else for sexual purposes (see definition of sexual abuse above).

• **Harmful traditional practices**

These refer to cultural rituals, traditions or other practices that have a harmful and negative impact on the life, health, physical and psychological integrity and development of a child. Such traditions include Female Genital Mutilation (FGM) and forced early marriage. They may also include various rituals or ceremonies involving children, particularly those associated with witchcraft. In some countries, children with albinism are particularly vulnerable to these types of practices.

**Gender responsive approaches to child safeguarding**

Are girl pupils (or boy pupils) particularly vulnerable to abuse? If so, why and how can schools prevent such abuse happening? What specific strategies will help girls in particular (and/or boys in particular)?

# DAY 4

## Session 12: Support systems for inclusive education

*Source: KICD Facilitator’s Manual modified for use in an Inclusive Setting*

## Part 1: Schemes of Work and Lesson Plans

Duration: 2 hours

### 12a.1 Session Outcomes

By the end of the session, the participant will be able to:

1. identify components in the scheme of work that should be modified to make them appropriate in an inclusive setting;
2. identify components in the lesson plan that should be modified to make them appropriate in an inclusive setting;
3. establish system for management of information relating to learner support.

### 12a.2 Key areas to be covered

1. Scheme of Work
2. Lesson Plans



### 12a.3 Suggested Learning Experiences

1. In groups the participants to go through the different components of the scheme of work and identify areas that should be modified to suit learners with diverse learning needs in an inclusive setting.
2. In groups participants are asked to describe components in a lesson plan that should be modified in order to accommodate learners with diverse learning needs in an inclusive setting.

|  |
| --- |
| **Notes** 1. Professional Documents Professional documents are used in the preparation, implementation and evaluation of teaching and learning. They are documents that a teacher must have to keep track of his or her work, that of the learners as well as to make teaching and learning more effective. The teacher in an inclusive setting must ensure the documents take into consideration diverse learning needs of their learners. They include:   * Scheme of work * Lesson plans  2. Scheme of work for an inclusive setting A scheme of work is a document developed from the curriculum design. A scheme of work shows how the planned curriculum content is distributed within the time allocated in a given learning area.  A scheme of work helps the teacher to:   * decide on differentiated teaching and learning strategies to be used, taking into consideration the abilities, interests and needs of children. * plan on resources required, and adapt these same to suit individual children * plan for appropriate assessment.   A scheme of work has several components which include the following; week, lesson, strand/theme, sub-strand/subtheme, specific learning outcomes, suggested learning experiences, suggested learning resources, suggested assessment methods and remarks. 3. Lesson Plan for an inclusive setting A lesson plan is an important document for an effective teaching and learning process. The teacher in an inclusive setting must ensure that the necessary supports are factored into the lesson plan for children experiencing different barriers to learning. A lesson plan enables a teacher in an inclusive setting to:   * Present concepts and skills in a systematic manner using appropriate strategies to achieve the stated lesson outcomes, such that every child is able to participate in learning at the appropriate level * Plan, prepare, modify and assemble teaching and learning resources in advance. * Manage the given time for the lesson well. * Design appropriate assessment methods taking into consideration abilities of each learner. * Reflection should be on programmes towards learning outcomes by all learners.   **Components of the lesson plan and identification of areas where specific needs of a child should be incorporated:**  **Organization of learning -** This shows where learning will be taking place and mainly depends on the specific needs of different learners.  **Introduction -** The lesson should be introduced in an interesting and stimulating manner to arouse curiosity in the learners**.** Consider the experiences of all the learners so that no one is left behind.  **Lesson development -** The subject learning content manner is divided into steps. Each step should contain one main idea or experience. The teacher should vary and differentiate the content and the teaching and learning activities to suit all learners.  **Conclusion -** This summarizes the main points in the lesson. Consider what was set for and how it accommodated diversity within the classroom.  **Reflection on the lesson -** The teacher is expected to make an honest assessment of his/her performance during the lesson and in particular the extent to which it enabled all children to participate in learning.  The lesson planning will require infusion of aspects such as core competences, PCIs, values, non-formal learning activities, link to other learning areas, resources and assessment. |

**LESSON PLAN TEMPLATE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SCHOOL** | **CLASS** | **DATE** | **TIME** | **ROLL** |
|  |  |  |  |  |

**Strand/Theme/Topic**

……………………………………………………………………………………..….

**Sub-strand/Sub-Theme**

…………………………………………………………………………………………

**Specific Learning Outcomes**

By the end of the lesson, the learner should be able to:

1. ……………………………………………………………………………………………………………………………………………………………………………………………………
2. …………………………………………………………………………………………………………………………………………………………………………………………………

Joan should be able to: …………………………………………………………………………………………

**Key Inquiry Question**

* + - 1. ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**Core competences**

……………………………………………………………………………………….

**Values**

…………………………….………………………………………………………………

**PCIs**

………………………………………………………………………………………………

**Learning Resources**

1……………………………………………………………………………………………

2……………………………………………………………………………………………

**Organization of learning**

**………..…………………………………………………………………………………...**

**Introduction**………………………………………………………………………………

**Lesson development** (Assessment as Learning)

**Step 1**………………………………………………………………….………………………...

**2**……………………………………………………………………………………………

**3**……………………………………………………………………………………………

**Conclusion** (Assessment of Learning)

……………………………………………………………………………………………..

**Summary**

…………………………………………………………………………………………….

**Extension Activities** (these are activities given to learners who may be gifted and talented).

………………………………………………………………………………………………

**Reinforcement Activities** (these are activities given to learners who experience barriers to learning and may need additional time to master certain concepts or skills

………………………………………………………………………………………………

………………………………………………………………………………………………

**Reflection on the lesson/self-remarks**

**………………………………………………………………………………………………**

## Part 2: Record of work, progress records and Individualized Educational Plans and transitions

2 hours

### 12b.1 Session Outcomes

By the end of the session, the participant will be able to:

1. strengthening information systems and records of work for effective feedback in an inclusive setting;
2. develop progress records for effective feedback of each learner;
3. develop Individualized Education Plans for support of individual learners;
4. discuss the importance of class register in an inclusive setting;
5. be aware of the importance of transitions and how children can be supported to effectively adjust to the transition from Pre-primary to Grade One.

### 12b.2 Key Areas to be covered

1. Information systems and records of work in an inclusive setting.
2. Learner’s Progress Records.
3. Individualized Educational Plan (IEP).



1. Class register.
2. Transitions.

### 12b.3 Suggested Learning Experiences

1. Participants brainstorm on the importance of keeping learner’s progress records and discuss what systems they are currently using for this.
2. In groups participants discuss which learners may require an IEP and how it could assist them. Participants practice filling in of an IEP for a particular child in their class. Base it on one of the children described in the case studies in the Appendix of this manual.
3. In groups participants discuss the importance of keeping a class register and other records of the child in an inclusive setting. They share the tools that they have been using and practice taking a class register.



1. In groups participants identify key strategies that can support children’s effective transitions from pre-primary to Grade One.

|  |
| --- |
| **Notes** 1. Record of Work in an Inclusive Setting A Record of Work is a document kept by the teacher showing the work that he or she has done at the end of every lesson.   * Give evidence of work covered by the teacher. * A new teacher has an idea of where to start teaching and also gets to know what the teacher has been doing with a learner with special needs in the class. * Evaluation of schemes of work over a period of time.   ***Components of a Record of Work***  ***Time Frame:***  ***Work done: Remarks:***  ***Details of the teacher:***  The school management should also regularly sign the record of work. 2. Learner’s Progress Records: Individualized Education Plan (IEP) For some young children with disabilities accommodations in the setting and applications of inclusive principles would be sufficient to ensure that they participate effectively in learning. They are usually different levels of accommodations that settings are able to make to support children in this group. However, children with more complex needs may need more tailor-made support and they would benefit from IEPs.  An Individual Education Plan (IEP) is an effective tool for supporting the education of children who experience barriers to learning. IEPs are used to plan and track support for the child’s education and should involve the child, his or her parents or caregivers, teachers and other professionals. It describes what the teacher and other professionals will do to support the child’s learning, aiming to ensure that each learner is able acquire knowledge, skills, attitudes and values using his/her own learning style and at his/her own pace.  **Individual Education Plan**  *Source: KICD Facilitators Manual*  **Individualized Education Plan/Programme (IEP)**  An Individualized Educational Plan/Programme (IEP) is a written plan that describes what the teacher and other professionals will do to meet the special needs of the learner. Ideally an IEP should be developed by a multidisciplinary team which may consist of the learner, the regular teacher, a special education teacher, an assessment teacher and other professionals such as psychologists, speech therapists, occupational therapists, physiotherapists, social workers and the parents. An IEP focuses on individual learners needs and allows each learner to acquire knowledge, skills, attitudes and values at his/her own pace  **Components of Individualized Education Plan/Programme (IEP)**   1. **The learner’s present level of performance.**   The current level of performance of the learner is assessed to identify those skills the learner has strengths in and those that he/she has weaknesses or challenges. This can be done through observation, tests and interviews. For learning purposes, assessment should take place during the lesson. Assessment results may then be used in deciding what to teach and how to teach it.   1. **Long term and short-term learning outcomes**   After collecting information on the learner’s strengths and weaknesses, a statement describing what is expected in each area of special learning needs is made. This statement is referred to as a long-term learning outcome. This is the overall aim of the IEP. Long term learning outcomes give direction for an IEP. It states what is expected to be achieved within a specified period for example one month. The long-term outcome is then broken into short term learning outcome. These are competencies that should be developed to achieve the long-term learning outcome.   1. **Evaluation procedure and criteria**   This step describes how progress will be assessed and specifies how well the student is expected to perform. Evaluation criteria must define the standards that are to be used to assess progress or success. It is always good to evaluate progress after a specific short-term learning outcome.   1. **Diverse learners needs and related services**   The IEP must be clear in listing special needs the learner may be experiencing that call for an IEP. The identified challenges may be addressed by a special needs education teacher in the resource room. If the learner requires other related services in addition to the educational intervention, this should be specified as to whom, when and where these may be provided. Related services may include physiotherapy, occupational therapy, speech therapy, guidance and counselling among others.   1. **Implementation**   The IEP statement must give the date when the programme will start and the length of time it should take. It can be one year, a term or a month, depending on the skill area and the learner’s level of ability. The review date should also be stated. |

#### Individual Education Plan (IEP) for Pre-Primary and Grade 1

|  |
| --- |
| 1. **Reason for developing the IEP** (e.g. referral by parent, EARC, health professional or concerned teacher.) |
|  |

|  |  |
| --- | --- |
| 1. **Learner Profile** | |
| **Name** |  |
| **Date of birth** |  |
| **Age** |  |
| **Gender** |  |
| **School** |  |
| **Learner admission number** |  |
| **Grade** |  |
| **Living with both parents, one parent, relative or orphan** |  |
| **Name of Parent/Guardian** |  |
| **Occupation** |  |
| **Address** |  |
| **Telephone/ Mobile number** |  |
| **Date of initiation of IEP** |  |
| **Date of termination of IEP** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Screening and Assessment Results** | | | | | | | |
| Please use this section to summarise the findings from the WGQ screening tool. Highlight only those functional domains where a child has *some difficulty*, *a lot of difficulty* or *cannot do at all* | | | | | | | |
| **C.1 Summary of Washington Group/UNICEF Child Functioning Screening** | | | | | | | |
| **Date of .screening** |  | **Which CFM tool did you use to screen the child?** (please tick) | | | | **CFM 2-4 years**  **CFM 5-17 years** | |
| **Number of the CF Question where the answer indicates a Yes/No response** | | | | **Yes**  (tick if applies) | **No**  (tick if applies) | |  |
| CF1 | Wears glasses? | | |  |  | |
| CF4 | Uses a hearing aid? | | |  |  | |
| CF7 | Uses any equipment or receive assistance for walking? | | |  |  | |
|  | | | | | | | |
| **Number of the CF Question where the answer indicates a difficulty or high frequency** | **Please write out the CF question that was selected** | | **2. Some difficulty**  (or for frequency monthly, the same or less)  (tick if applies) | **3.**  **A lot of difficulty**  (or for frequency weekly, more)  (tick if applies) | **4. Cannot do at all** (or for frequency daily, a lot more)  (tick if applies) | | **Domain of functioning** |
| *e.g. CF24* | *How often does (name) seem very sad or depressed?* | |  |  |  | | *Affect* |
|  |  | |  |  |  | |  |
|  |  | |  |  |  | |  |
|  |  | |  |  |  | |  |
|  |  | |  |  |  | |  |
|  |  | |  |  |  | |  |
|  |  | |  |  |  | |  |

|  |
| --- |
| **C.2 Summary of assessment data and recommendations (to be completed by external professional, officer, health or social services worker)** |

List relevant educational, medical/health, sensory, psychological, speech and language, occupational, physiotherapy and behavioural assessments done by EARC or health and social services professionals

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessment/ Confirmation of impairment** | **Date** | **Summary of results and recommendations** | **Officer/Professional who conducted assessment** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

| 1. **Summary of barriers to access experienced by learner** | | | |
| --- | --- | --- | --- |
| **Barriers** | **Description of barrier** | **How these could be addressed** | **Who will take responsibility** |
| Environmental  -Transport  - Mobility  - Vision  Communication  Assistive devices |  |  |  |
| Attitudinal  -Family  -School  -Community |  |  |  |
| Socio-economic/ resources and home based support |  |  |  |
| Teaching practices and processes |  |  |  |
| Policies |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Learning and developmental assessment baseline and targets** | | | |
| **E.1 Summary of strengths and challenges with initial recommendations** | | | |
| **Learning area/ skill assessed** | **Present level of performance** | | |
| **Strengths** | **Challenges** | **Initial recommendations** |
| i. Communication and Social skills |  |  |  |
| ii. Pre-literacy and pre-numeracy skills |  |  |  |
| iii. Activities of daily living skills |  |  |  |
| iv. Sensory, Motor and Creative Activities |  |  |  |
| v. Orientation and Mobility Skills |  |  |  |

After establishing the present level of performance of specific skills or learning areas the teacher should develop long term goals broken down into smaller short-term learning outcomes.

**Long term learning outcomes:** These describe what the learner is expected to achieve and learn by the **end of the term**. The objectives written for each area in which the learner is experiencing difficulties, should be in line with the learner’s present level of performance/functioning.

**Short term learning outcomes:** These describe what the learner is expected to achieve/learn by the **end of the strand**.

| **E.2 Long term and short-term learning outcome targets** | | | | |
| --- | --- | --- | --- | --- |
| **Learning area/skill** | **Learning outcomes** | | |  |
|  | **Long term** | **Short term** | **Progress made** | **Date of evaluation** |
| i. Communication, Social Skills |  |  |  |  |
| ii. Pre- Literacy skills and Pre-numeracy skills |  |  |  |  |
| iii. Activities of Daily Living Skills |  |  |  |  |
| iv.Sensory, Motor and Creative Activities |  |  |  |  |
| iv.Orientation and Mobility skills |  |  |  |  |

The process of breaking down long-term learning outcmes goes on throughout the school year and is evaluated by the teacher on an ongoing basis (e.g. after each lesson). Remember that some learners may need more time to reach certain targets.

|  |
| --- |
| 1. **Reports and Signature pages** |

These forms must be completed and signed off every quarter:

|  |  |  |
| --- | --- | --- |
| **F.1 Progress record on learning outcome targets (Shows progress made by the end of each term)** | | |
| **Date evaluated** | **Skills area** | **Comment** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**F.2 Supplementary support received and barriers addressed**

|  |  |  |  |
| --- | --- | --- | --- |
| **Related services / barriers removed** | **Action taken and provider** | **Frequency** | **Location** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**F.3 Progress report and recommendations**

|  |
| --- |
|  |
| **Date:** |
| **Signature of Teacher:** |
| **Signature of Principal:** |

**Documentary proof in the form of examples of work, assessment records, health care assessments. List here and attach documents to file:**

|  |
| --- |
|  |

|  |
| --- |
| NOTES (continued) 3. Class Register A register is an official document with list of learners who are present in the class. It is marked in the morning and afternoon.  Importance of the class register   * To collect data that is useful to the teacher and other professionals. * It provides evidence of the child’s presence in the class at a given time.   4. Transition Practices from Pre-Primary to Grade One  The transition from preschool to first grade is recognized as a developmental milestone in children’s lives and has been shown to have an important impact on later academic outcomes. Teachers can play an important role in enhancing this transition, focusing not only on the learning but also on routines, social and emotional aspects.  Transition is a critical period not only for children, but also for their families who move into a different role together with their child. There is need therefore to design transition plans carefully to involve parents and help them to support their children through a period of change. The goal is to ensure that transitions are a positive experience for both children and their parents.  As they enter the formal schooling system of Grade One, children enter a new world of higher expectations where academic demands represent one of their main challenges. They also encounter a more structured learning environment, more teacher-directed activity and academic assessments. Given these factors, preschool transition into first grade represents one of the most significant and challenging periods children experience.  Various strategies may be used to foster a conducive atmosphere for transitions. These include an adequate transition plan involving teachers’ transition practices, school transition activities, strategies for parental involvement, the establishment of an effective communication between preschool and primary school which includes sharing a child´s portfolio between teachers and linking the curriculum from both educational levels. Staff from both pre-primary and Grade One need to collaborate closely in order to ensure curriculum continuity. This could be done through organizing a series of activities with meetings, where the children’s work (such as drawings, pictures and stories), are shared among teachers.  Factors to consider during transition   1. Physical environmental factors influence children’s transition from preschool to Grade One. For example, a larger school building and highly structured classroom (with more peers), may trigger anxiety among children who find the buildings unfamiliar and other children to be strangers. Stricter school rules, a tighter timetable and longer school hours may cause children to be fearful and uncertain about what is required. They may feel dislocated or disorientated. 2. The language of instruction may influence learners’ transition from preschool to Grade One. 3. School staff knowledge of, and relationships with preschools and practices around school transition can play an important part in ensuring smooth and positive transitions for young children. 4. Aligning the curricula and sharing written information between preschool and primary school can help to ensure positive children’s skills development across transitions. 5. Teaching methods and experiences also influence children’s transition from preschool to Grade One. As they gain confidence in exploring the world, in expressing their views, their creativity and development of their physical, social and intellectual capacities, young children can develop resources from which to draw during periods of transition. They need to be assured of continuous and nurturing support during a time of change and uncertainty. 6. Parental factors:  * The level of trust of parents towards teachers * Parents' opinion of school and learning. * When parents participate in more transition activities, they became more involved in their child’s education. |

## Session 13: Planning for and sustaining change: Communities of Practice (CoP) and action plans

30 minutes

### 13.1 Session Outcomes

By the end of the session, the participants will be able to:

* 1. explain the meaning of communities of practice;
  2. explain the benefits of communities of practice;



* 1. develop an action plan.

### 13.2 Key Areas to be covered

* 1. Meaning and value of communities of practice.
  2. Benefits of communities of practice.
  3. Action plan

### 13.3 Suggested Learning Experiences



* + 1. In pairs participants brainstorm ways in which they would be able to continue with learning, which could happen through “Communities of Practice”.
    2. Teachers, QASO SNE, QASOs from each school/county office develop an action plan.

|  |
| --- |
| **NOTES**  **1. A community of practice (CoP)**  A community of **practice** (CoP) is a network of individuals with common problems or interests who get together to explore ways of working, identify common solutions, and share good practice and ideas.  **2. Value of Communities of Practice**  *Source: Nitya Wakhlu, at the Experience Engagement conference in October 2015.*  Figure 4: Value of community of practice  **3. Benefits of Communities of Practice**  Communities of practice help people to be better at what they do, by providing an opportunity to:   * Encourage knowledge-sharing, leading to cultural change. * Supporting organizational development and research. * Sharing good practices. * Transferring and developing best practice. * Reusing of information. * Learning from previous mistakes. * Encouraging personal and professional development |

**PLANNING FOR CHANGE – SCHOOL ACTION PLANS**

*Source: LC Materials*

DATE:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **LEVELS** | **Actions to be taken** | **Who is responsible?** | **Time frame** | **Resources needed**  **-Within school**  **-From outside** |
| School level |  |  |  |  |
| Barriers identified |  |  |  |  |
| Support for individual children | Individual Education Plans |  |  |  |
| Other |  |  |  |  |

# Appendices: case studies

## (1) Elizabeth

Elizabeth is a little girl who is 7 years old. She is in pre-primary two. She lives in rural Siaya with Simon, her older brother, who attends the local primary school, her mother and father, and her grandmother. Her father works as a policeman, and her mother does not go out to work. She sometimes cooks for weddings in the community.

Elizabeth was born with a condition known as Downs Syndrome and has a heart condition that could affect her general health, energy levels and physical abilities. She has regular chest and ear infections, especially during the cold months. Although there is a community clinic, it takes Elizabeth and her mother the whole day to get there and back for her to receive treatment. Elizabeth's parents have been taking her to the clinic regularly since she was born as the clinic sister originally identified her condition and insisted on visits to monitor her development, heart condition and ear problems. She also arranged for a community rehabilitation worker to help the parents with Elizabeth’s physical and intellectual development.

Elizabeth’s parents understand Downs Syndrome, and know a great deal about her difficulties. They have tried to explain what they know about Downs Syndrome to their neighbours but have found it difficult to explain the condition to the grandmother. The grandmother is embarrassed about Elizabeth and is reluctant to go on outings with the family as she does not want people to notice the fact that she is “different”.

Elizabeth is able to walk, run and climb with no difficulty. She can also feed and wash herself and her mother is teaching her some simple chores. Elizabeth is a sociable child. She loves other children, and plays happily with the young children around her home.

At the age of three the community rehabilitation worker suggested to Elizabeth’s parents that she attend the local preschool. Even though the health care worker shared information with the preschool teacher, the teacher found it difficult to cope with Elizabeth in her class. She found it difficult when Elizabeth could not do the same things as the other children and especially when Elizabeth became stubborn and refused to do the work and ran outside to play. After three years at the preschool, the teacher and certain members of the community felt that Elizabeth needed to go to the special school 150 kilometres away. Elizabeth’s parents did not want to send her away and decided to approach the local primary school to accept Elizabeth into Grade One.

Elizabeth was accepted into Grade One at the age of seven at the same school her brother attends. However her parents are anxious about this move as they know it will be a big change for Elizabeth and they are concerned that the new teacher may not know anything about Down Syndrome, let alone how to work with their daughter. The parents want to make the change as easy as possible for both Elizabeth and her teacher.

Elizabeth’s teacher has spent some time looking at the recommendations that the early childhood centre teacher had made and noticed that Elizabeth cannot count. She has also noted that Elizabeth needs support in expressive and receptive communication and in some activities of daily living. She has spent a few weeks observing Elizabeth in the classroom and. playground. She has filled in the Learner Profile and has requested a meeting with the school support team to assist her to plan support for Elizabeth.

## (2) Isaac

Isaac is eight years old. He is in Grade 2. He is the youngest of six children and two of his older siblings are married with children of their own. His mother is in her early fifties and his father close to the age at which he intended to retire. However, his father feels that the concerns he has about Isaac might altered his plans, as Isaac has not developed in the way the other children in the family did. Isaac is obviously a very intelligent boy and has an excellent vocabulary for his age, but there seems to be something holding him back, especially in the way he reacts to people and situations.

Isaac is often fearful of new experiences. Even at the age of eight he still likes all the home routines to be the same and becomes unreasonably upset when he finds any change in his environment. He has a rigid set of interests, which he pursues relentlessly. He has been obsessed with space for a number of years and spends hours in his bedroom looking at books and building block in constructions. Isaac’s parents have tried continuously to help Isaac to invite friends home as he is always asking for friends, but when they come, he tends to ignore them or become annoyed and angry when they want to play with his toys. He sometimes throws temper tantrums when he does not get his own way and it seems as if he now has a reputation for being an “odd” child.

Isaac attends his neighbourhood school, which has been designated as an Inclusive School. His Grade 2 teacher is upset that she has to deal with a learner like Isaac in her class of 45 learners. She feels that she has not been given the training, nor does she have the patience to support Isaac. She finds him difficult to engage and often feels that he is going out of his way to annoy her. He does not respond to her, even when she tries to show concern and she finds this extremely frustrating and has expressed her feelings to the class. Isaac is aware of his teacher’s attitude and his behaviour has regressed. Recently Isaac has been crying a lot at home and having even more temper outbursts. Isaac’s parents are very anxious about this situation and have made an appointment to see the school principal.

## (3) Rashid

Rashid was abandoned at birth and was eventually placed in a convent that takes children with severe disabilities. The nuns soon noticed that Rashid was developing well in his language skills, even though he sometimes found it difficult to talk. He also was very alert, was able to enjoy and respond to television programmes and was an easy going and responsive child, despite his physical challenges.

Rashid is very sociable and popular amongst his peers in the convent. He has a good sense of humour and enjoys personal interactions with the adults who have cherished him since birth. Attempts to locate his parents through the social workers have been unsuccessful. It is rumoured that his mother was extremely young and delivered him in secret away from her family.

Rashid is now seven years old. He has very little independent functional movement. He has a customised wheelchair with head support and chest harness and he needs to be pushed by an adult. He also has a standing frame. He tolerates being positioned in this for short periods each day. Rashid is unable to clear his throat, his swallowing is significantly impaired and he struggles constantly to maintain his airway. With slow concentrated movements he is able to take objects held out to him. Rashid likes to paint. He is positioned in his wheelchair in front of an easel, the paint is loaded onto the brush and he holds this with a fist grip. An adult supports and guides his arm and hand while he paints and assists him to release the brush. Rashid requires total assistance to transfer in and out of his wheelchair and standing frame or on to the floor. He is fully dependent for all his toileting needs.

The nuns at the convent have heard about inclusive education and have approached the local school as they feel that Rashid needs stimulation from learners without disabilities and exposure to a “normal” environment.

## (4) Emma

Emma is a seven-year old girl who has never gone to school. She has been brought to your class by her mother, on the recommendation of the regional Curriculum Support Officer Special Needs Education (CSO SNE).

You invite Emma’s parents to come to school with her, so that you can get to know her and understand more about the support that she needs. Discussion with her mother reveals that in comparison to her older siblings, Emma has been delayed in a few areas of her development. Although she is physically active, and loves playing outside, communication is difficult for her. At home she is able say a few words and indicate when she wants to go to the toilet and when she is hungry, but outside of the household, people do not understand what she is trying to say. They often get angry and scold her when this happens or they tease her. As a result, Emma has become increasingly withdrawn and reluctant to interact with other children. Emma’s mother tries to encourage her to help with simple household tasks, such as sweeping the yard, but she gets distracted easily and forgets to clean the area behind the house. Emma’s mother feels that she needs to help Emma as much as possible with toileting and washing herself because she cannot do these tasks on her own. She is anxious about how Emma will manage at pre-school, as she is not used to going outside of her home without her mother.

You receive the small girl with big smile but she does not reciprocate. You imagine it’s just that the environment is new and unfamiliar to her. You take her to a seat and ask her to tell the others her name. She just looks at you and does not respond. The child sitting next to Emma raises her hand and shouts, “this new girl has soiled her uniform”. The other children start laughing. You ask them not laugh as this was not kind to Emma. You take Emma’s hand and ask the school support staff to get a second set of uniform and dress Emma, thereafter she joins the class. This behaviour repeats itself.

Realising the need for greater understanding of Emma’s functional difficulties, you conduct the WGQs, and in this way learn more about the extent of difficulties she experiences in the areas of communication, cognitive functioning, socialisation and self-care. You use this to develop an Individualized Education Programme for Emma.

# Post Training Evaluation Tool

To help us improve the quality and content of our teacher training on inclusive education Please could you kindly provide us with your feedback by completing the below post-evaluation questionnaire.

| **#** | **Question** | **Answer options** | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| **1.** | Have you ever had training in inclusive education before? | Yes | No | If Yes which organisation provided the training?  Which year did you complete the training? | | |
|  |  |  |  |  |  |  |
| **2.** | Overall, how satisfied were you with this training? | Very dissatisfied | Dissatisfied | Neither satisfied or dissatisfied | Satisfied | Very Satisfied |
|  |  |  |  |  |  |  |
| **3.** | How satisfied were you with the training venue | Very dissatisfied | Dissatisfied | Neither satisfied or dissatisfied | Satisfied | Very Satisfied |
|  |  |  |  |  |  |  |
| **4.** | How satisfied were you with the training materials | Very dissatisfied | Dissatisfied | Neither satisfied or dissatisfied | Satisfied | Very Satisfied |
|  |  |  |  |  |  |  |
| **5.** | How satisfied were you with the training facilitation | Very dissatisfied | Dissatisfied | Neither satisfied or dissatisfied | Satisfied | Very Satisfied |
|  |  |  |  |  |  |  |
| **6.** | Where you have noted some dissatisfactions, please tell us how we could improve in these areas or the training overall |  | | | | |
|  |  |  |  |  |  |  |
| **7.** | What are some of the key learnings you have taken away from the training? |  | | | | |
|  |  |  |  |  |  |  |
| **8.** | How do you think you might apply this learning in the classroom? |  | | | | |
|  |  |  |  |  |  |  |
| **9.** | How confident are you to screen children for functional difficulties using the Washington Group Questions? | Very unconfident | Unconfident | Neither confident or unconfident | Confident | Very confident |
|  |  |  |  |  |  |  |
| **10.** | How confident do you feel to teach children with disabilities? | Very unconfident | Unconfident | Neither confident or unconfident | Confident | Very confident |
|  |  |  |  |  |  |  |
| **11.** | How confident do you feel to develop IEP’s for individual children? | Very unconfident | Unconfident | Neither confident or unconfident | Confident | Very confident |
|  |  |  |  |  |  |  |
| **12.** | What aspects of inclusive education do you think might be more difficult for you to apply in the classroom and why? |  | | | | |
|  |  |  |  |  |  |  |
| **13.** | What further support /information would you need to increase your confidence? |  | | | | |
|  |  |  |  |  |  |  |
| **14.** | Where or from whom would you seek immediate support to help you with any challenges of inclusion in the school? |  | | | | |
|  |  |  |  |  |  |  |
| **15.** | How might you work with the EARC to support a child’s participation and learning in the classroom? |  | | | | |
|  |  |  |  |  |  |  |
| **16.** | How will you engage, parents/ caregivers more in the education of their children? |  | | | | |
|  |  |  |  |  |  |  |
| **17.** | Do you have any further comments about the training you would like to share? |  | | | | |

Thank you for your feedback

# References

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[International Forum on Inclusion and Equity in Education, Cali, Colombia, 2019](https://unesdoc.unesco.org/query?q=Conference:%20%22International%20Forum%20on%20Inclusion%20and%20Equity%20in%20Education,%20Cali,%20Colombia,%202019%22&sf=sf:*). Accessed at https://unesdoc.unesco.org/ark:/48223/pf0000370910

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# Other resources to support inclusion within early childhood development settings

<https://www.eenet.org.uk/inclusive-beginnings-eenets-latest-video-based-training-resource/>

EENET's Inclusive beginnings video-based training resources and manuals

<https://unesdoc.unesco.org/ark:/48223/pf0000370910>

Cali Commitment to Equity and Inclusion in Education, 2019

1. **Possible strategies:** Curriculum, Workshops with students, sharing information in school assemblies, Displaying the information throughout the school, creating a Child Safeguarding Champions Group, Developing an anti-bullying peer group. [↑](#footnote-ref-1)