



Education and Disability

The World Health Organization (WHO) states that over **1 billion people in the world (16%) are living with a disability**.¹ Contributing to this prevalence are **291 million children**, the majority of whom have limited access to quality educational opportunities.² In low-income countries, only 2% of children with disabilities are enrolled in school.³

Social Barriers

Children and youth with disabilities experience numerous barriers in accessing an education. For instance, parents and community members often lack knowledge about disabilities and their causes, instead relying on cultural superstitions that disabilities are the result of curses, witchcraft, or other supernatural means. These **beliefs propagate abuse, neglect, and even death for both people with disabilities and their families**. Pervasive stigmas about disability also affect quality of school life, prompting **discriminatory practices of segregation, punishment, ridicule, and abuse** that reinforce exclusion, narrow perceptions of ability, and penalize children for their disabilities.

Instructional Barriers

In addition, staffing shortages of teachers, aides, and medical personnel limit both the impact on and ability of children to thrive in an educational environment. Furthermore, existing staff members often lack the training and support to meet the needs of children and youth with disabilities. According to the Teaching and Learning International Survey (TALIS), **teachers in classrooms with a high percentage of students with special needs are likely to have the least qualifications and greatest professional development need**.⁴

Physical Barriers

At other times, children and youth with disabilities encounter physical barriers. They may be isolated, difficult to locate, and face additional obstacles getting to school due to **distance and mobility challenges**. Once at school, children with disabilities may encounter **buildings; classrooms; and water, sanitation, and hygiene (WASH) facilities that lack the necessary modifications** for them to navigate. In a 2017 study, **only 33% of countries provided adequate physical environments** for students with disabilities.

Physical Barriers (continued)



Learning opportunities are also hindered by a shortage of educational material presented in useable formats. Studies show that **only 41% of 88 countries provided appropriate materials** in their schools.⁶

Financial Barriers

While the Universal Declaration of Human Rights makes clear that every child has the right to a free basic education, many children from low-income families are **forced to stay home to help provide for their household**. In addition, compulsory items such as uniforms, school supplies, and exam fees, as well as adequate food and nutrition, may be out of reach for people with disabilities **who live in poverty at more than twice the rate of those without**.⁷ Complicating matters, there are a limited number of schools equipped to meet the needs of children with disabilities. This often places the onus on families to travel further distances and incur additional expenses such as boarding fees.

- 98% of children with disabilities are not in school.⁸
- Only half of children with disabilities complete their primary school education.
- Global literacy rates for people with disabilities are reported to be as low as 3% for males and 1% for females.¹⁰
- More than 1/5 of students may develop a special education need during the course of their education.¹¹

Legislative/Policy Barriers

Education for children and youth with disabilities is also hindered by a lack of legislation, policy, and plans for inclusive education. For countries where there is existing policy, there is often a **disconnect between governments adopting international standards and being able to apply them in practice**.

Overall, the denial of the right to education diminishes life outcomes for people with disabilities, affecting their future employment, financial stability, participation in civic affairs, and overall inclusion in community life.

Kupenda's Disability Interventions

Kupenda for the Children improves learning opportunities for thousands of children and youth with disabilities. We do this by offering a variety of support mechanisms designed to equip community leaders, education officials, and families to assist children with disabilities in accessing their educational rights in the most inclusive environments possible.

Educational Opportunities

Kupenda's trained staff refers school-age children with disabilities to local schools that are best suited to meet their needs. They also provide additional supports through:

- Constructing accessible learning facilities;
- Hiring and training teachers, assistants, and medical staff who can address a variety of special needs;
- Financing additional school fees, such as school supplies, toiletries, and boarding expenses when needed; and
- Providing appropriate medical care for students to perform at their optimal ability, including medical visits, occupational therapy, assistive devices, medication, and emergency support.

Cultural Sensitization

Kupenda educates influential community leaders, families, and individuals with disabilities about the correct causes of disabilities, legal rights, and needs of children with disabilities. The organization then collaborates with them to develop action plans to address gaps in inclusion. This results in:

- An improved capacity to recognize when a child or youth with a disability is not accessing the education they deserve,
- Referrals of hundreds of children and youth with disabilities to local schools,
- Community sensitization about disability that results in the reduction of stigma and harmful practices, and
- Creation of parent support groups who can encourage and assist one another in meeting their children's educational needs as well as advocate for other children with disabilities within the community.

Legal Counseling and Reform

Kupenda educates community leaders, families, and people with disabilities on their legal rights through one-on-one counseling, training workshops, and written guidance. These methods increase the awareness of people with disabilities about their rights, including the right to an education, transportation, and accessible environments and materials. In addition, Kupenda advocates for policy reform and implementation by monitoring and reporting on educational conditions for children and youth with disabilities to government and school officials. At other times, Kupenda coordinates accessible community forums where people with disabilities can respond to bills that concern them and become active participants during the legislative process.

Improved Outcomes

Kupenda's educational referral and support services provide thousands of children and youth with disabilities the opportunity to reach their full potential. With access to an education, these individuals experience a heightened level of security, inclusion, and fulfillment throughout their future.

Margaret



Margaret never imagined she would have the opportunity to receive an education because her community made her believe that her cerebral palsy prevented her from learning.

The closest school to her home was too far for her to walk. Additionally, her parents were having difficulty supporting their family's nutritional needs, let alone the additional school fees that would be required.

When Margaret was referred to Kupenda's staff in Kenya, however, she began to find newfound support. With the aid of staff and a sponsor, Margaret was given the necessary counseling and funds to attend school. She was also referred to an occupational therapist who helped her with physical coordination, including the muscle control she needed to write.

Today Margaret has diligently completed her primary and secondary education and is applying to colleges and vocational schools. Her future is no longer limited to just her dreams.

For more information:

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Footnotes

- ¹“Disability and Health,” World Health Organization, last modified November 24, 2021, <https://www.who.int/news-room/fact-sheets/detail/disability-and-health>.
- ² Bolajoko Olusanya et al., “Disability in children: a global problem needing a well-coordinated global action,” *BMJ Paediatr Open* 6, no. 1 (2022): e001397. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8883278/#:~:text=In%20addition%2C%20the%20prior%20and,mild%2Dto%2Dsevere%20disabilities>.
- ³ Debra L. Cameron et al., “Children with disabilities in low-income countries,” *Paediatr Child Health* 10, no. 5 (2005): 269-272. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2722543/>.
- ⁴ North Cooc, “Teaching Students with Special Needs: International Trends in School Capacity and the Need for Teacher Professional Development,” *Teaching and Teacher Education*, Vol. 83 (July 2019): 27-41. <https://doi.org/10.1016/j.tate.2019.03.021>.
- ⁵ “Realizing the Sustainable Development Goals for Persons with Disabilities,” *Disability and Development Report 2018*, 2018. <https://doi.org/10.18356/6b539901-en>.
- ⁶ “Realizing the Sustainable Development Goals for Persons with Disabilities,” *Disability and Development Report*.
- ⁷ Nanette Goodman, Michael Morris, and Kelvin Boston, “Financial Inequality: Disability, Race, and Poverty in America,” National Disability Institute, accessed October 5, 2022. <https://www.nationaldisabilityinstitute.org/wp-content/uploads/2019/02/disability-race-poverty-in-america.pdf>.
- ⁸ Cameron et al., “Children with disabilities in low-income countries,” 269-272.
- ¹⁰ “Factsheet on Persons with Disabilities,” United Nations, accessed June 14, 2022, <https://www.un.org/development/desa/disabilities/resources/factsheet-on-persons-with-disabilities.html>.
- ¹¹ “Global Education Monitoring Report,” UNESCO, last modified 2014, https://en.unesco.org/gem-report/sites/default/files/GAW2014-Facts-Figures-gmr_0.pdf.pdf.

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