Educating Girls with Disabilities

This study reviews how projects in the Girls' Education Challenge Phase II (GEC II) supported girls with disabilities (GWDs) and the outcomes of these interventions.

The most common interventions undertaken by the projects were teacher training, peer activities, after-school clubs for the GWDs, and community and family awareness sessions promoting the importance of education and providing assistive devices. GWDs across the programme showed improvements in socio-emotional skills including increased self-confidence and more positive interactions with family, peers, and community members, as well as some progress in literacy and numeracy outcomes. Detailed case studies in three countries showed improvements in socio-emotional skills and broader life skills, as well as increased aspirations. Interventions which included greater engagement with family and community members such as their active participation in interventions were particularly effective.

Background

The Girls' Education Challenge (GEC) Phase II is an eight-year (2017-2025) programme supported by the UK Foreign, Commonwealth and Development Office (FCDO) that aims to improve the learning opportunities and outcomes of over one million girls around the world.

The programme spans 17 countries and includes 41 projects through two funding windows: the Girls' Education Challenge – Transition (GEC-T) Window with 27 projects; and the Leave No Girl Behind (LNGB) Window with 14 projects targeting the most marginalised out-of-school girls.

Recommendations

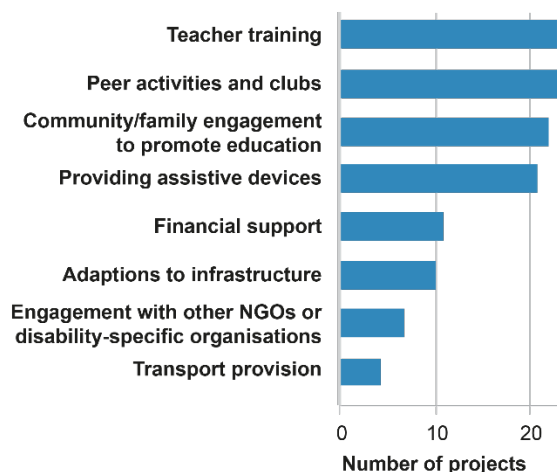|			
🔍	**Using the Washington Group Child Functioning Module (WG-CFM) can more effectively identify a wider range of functional difficulties faced by GWDs. Even though it takes longer to implement, it is likely to mitigate the risk of some GWDs being missed by project interventions compared to using only the six domains common to the WG-SS (Washington Group Short Set on Functioning).**	💡	**Inclusive teacher training based on the principles of Universal Design for Learning (UDL) should be designed as they incorporate mechanisms for providing greater support to GWDs in the classrooms. Local innovations in teaching and learning materials and approaches should also be encouraged.**
📋	Surveys and community engagement/ mapping exercises should be used to identify GWDs and be clear about their purpose.	⏰	Adequate accommodations such as additional time for task completion and provision of large print materials need to be made for GWDs during learning assessments.
⚙️	Adopting a twin-track approach can address general barriers towards inclusion for all children as well as providing individual support for children with disabilities.	🐷	Incorporating a life skills or vocational training component can help empower GWDs and contribute towards making them financially independent.
♿	Provision of basic facilities such as clean toilets, which are also adapted are of benefit for all including those with disabilities.	✊	Specialist support for teachers is recommended, particularly for supporting girls requiring the use of sign language and Braille.
📄	Availability of accessible and adaptable teaching/ learning materials for both teachers and students can help cater to a broad range of educational needs for GWDs.	🌿	Designing holistic interventions that target community members and the families of GWDs can be useful in fostering a positive community environment for GWDs.
🎓	Girls and children with multiple complex needs are often left out of the education system. Focusing interventions to include them in the education system are needed.	📊	Participatory methods should be used to centre girls' voices in monitoring data in programmes like the GEC, which were found in this study to offer valuable insights.

Prevalence of disabilities

The GEC follows the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) mandate in promoting a human rights approach to disability. Persons with disabilities are defined *as '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'*. This concept of disability moves away from a purely medical-based approach to one that also encompasses the role that attitudes, environment and institutional barriers play in limiting the participation of people with disabilities.

Overall, using the WG questions, 8.6% of girls in GEC-T projects and 4.9% of girls in LNGB projects reported at least one disability among the six domains that were considered across all the projects: seeing, hearing, walking, self-care, communication and remembering[1]. In LNGB projects, seven additional domains were considered (learning, concentrating, accepting change, controlling behaviour, making friends, anxiety, and depression); in these projects, 14% of girls reported at least one disability across all 13 domains. The increase in reported disabilities in the LNGB projects is primarily attributed to the prevalence of mental health issues, with 53% of girls with disabilities in the LNGB reporting experiencing either anxiety and/ or depression on a daily basis.

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[1] See the methodology box at the end of this brief for an overview of how disabilities were identified.

How did GEC II projects support girls with disabilities?

Forty of the 41 GEC II projects engaged with GWDs through their interventions[2]. Most projects (29 out of 40) included specific interventions for GWDs, while 11 projects addressed GWDs indirectly as part of a broader focus on marginalised groups.

Teacher training
Peer activities and clubs
Community/family engagement to promote education
Providing assistive devices
Financial support
Adaptions to infrastructure
Engagement with other NGOs or disability-specific organisations
Transport provision

0   10   20

Number of projects

Teacher training, focusing on understanding individual learners, how they learn, and how to support them, was delivered by 23 projects across both the GEC-T and LNGB Windows.

Social support components, such as girls' clubs, life skills sessions, or 'buddy' programmes, were implemented by 23 projects, mostly in the LNGB Window.

Family and community member engagement to promote the value of schooling for GWDs and to reduce stereotypes that prevented GWDs from being enrolled was undertaken by 22 projects. LNGB projects targeted out-of-school girls and used community engagement to identify and engage with target girls.

Assistive devices for GWDs were provided by 21 projects, including Braille textbooks, large-print stimuli, hearing aids, medical treatment (including surgeries), eyeglasses, and wheelchairs.

Less common interventions included **financial support** to GWDs to mitigate barriers to education and **infrastructure adaptations** in learning spaces, such as widening doorways, providing ramps, constructing disability-friendly toilets, and ensuring adequate ventilation and light.

During Covid-19 school closures, many projects adapted interventions to be inclusive of GWDs. Fourteen of the 27 project Implementing Partners that were interviewed described measures such as adapting learning materials, providing psychosocial support, and delivering lessons through phone calls, WhatsApp, radio learning or small in-person group classes.

All 27 Implementing Partners that were interviewed reported that the strongest motivation for targeting and supporting GWDs was a recognition of the multiple disadvantages that GWDs faced in their communities. Nonetheless, decisions about inclusion appear to be influenced by the type and severity of a girl's disability, as girls with severe and cognitive disabilities were most likely to be left behind. Four partners reported that organisational policies mandated the inclusion of GWDs, and three mentioned the FCDO's focus on disability and targeting requirements as influencing their organisation.

One girl with disabilities in Nepal used the photovoice activity[3] to note the use of sign language prompts. "When I am in the class and I forget the Nepali alphabet, then I can look around and see it on the wall. It reminds me of the Nepali alphabet, and I can practice."

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[2] One project did not include interventions to support GWDs but was conducting a monitoring exercise to be more inclusive of GWDs.
[3] Photovoice is a participatory technique that allows participants to record and present photographs where the photograph represents information, feelings, or memories (Shaw, 2020). In this study, GWDs were asked to present photographs based on three prompts including 'What do I like about my school?' They were given mobile devices for two days and asked to present four photographs for each prompt. They were then asked questions based on the pictures.

What outcomes were observed across the programme?

In GEC-T projects, learning outcomes of GWDs who received treatment improved by 3 to 4 percentage points in literacy at primary and secondary grade levels and by 3 percentage points in numeracy at secondary grade levels, between baseline and midline, over and above the control group. GWDs who received interventions showed improvements beyond those who did not. However, these results were not statistically significant when project-specific weights were added, suggesting that they may have been driven by two high performing projects (BRAC and CAMFED), which improved learning for all girls, both with and without disabilities.

GWDs in GEC-T projects also reported (through quantitative surveys) improvements in empowerment, life skills, and teaching quality, and an increased perception of safety in travelling to and from school. However, there was also a decrease in reported school attendance for GWDs.

In LNGB projects, learning outcomes in numeracy of GWDs who received treatment improved by 16 percentage points more than girls without disabilities, with no change in literacy. GWDs showed improvements at a similar or faster pace compared with girls without disabilities in numeracy. When applying weights using each project's sample sizes in calculating overall results, these results remained statistically significant. LNGB projects target the most marginalised out-of-school girls, including girls who have not achieved basic literacy and numeracy.

It is not possible to link improvements in learning outcomes of GWDs to specific interventions to understand which interventions may have driven these learning improvements due to insufficient data about specific interventions and project activities.
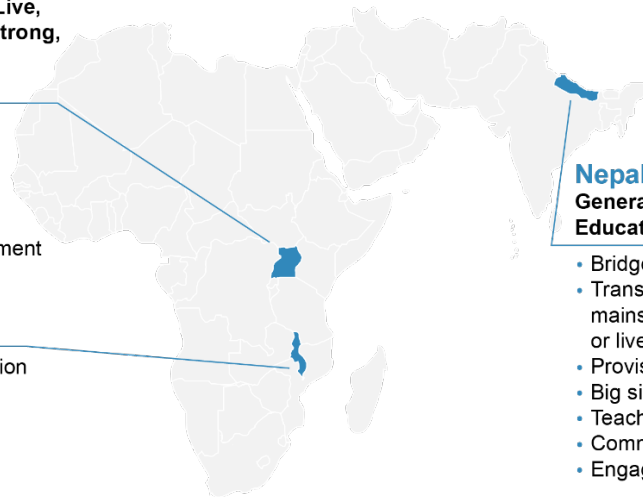
In-depth case studies: Malawi, Nepal, Uganda

The evaluation examined three case studies in detail, all of which targeted out-of-school girls (including girls with disabilities and married girls), parents/ caregivers, and teachers.

Uganda: Building Girls to Live, Learn, Laugh and SCHIP in Strong, Creative, Holistic, Inclusive, Protective Quality Education

- Creative learning centres
- Mother daughter clubs
- Vocational training
- Teacher training
- Community outreach
- Engagement with the government

Nepal: Empowering a New Generation of Adolescent Girls with Education (ENGAGE)

- Bridge classes
- Transition to: resource classes, mainstream schools, vocational training, or livelihood classes
- Provision of resources (cash and in kind)
- Big sisters
- Teacher training
- Community outreach
- Engagement with the government

Malawi: TEAM Girl Malawi

- Complementary basic education
- Girls' clubs
- Vocational training
- Teacher training
- Community outreach

In all three contexts, all sampled GWDs reported increases in their literacy and numeracy skills. GWDs spoke about assistive devices, classroom adaptations, and teaching support as contributing to their increased engagement with learning.

GWDs in all three contexts also reported increases in socio-emotional skills, including self-confidence and positive social interactions with peers, neighbours, and community members, as well as improvements in more general life skills. GWDs in Nepal and Uganda who were earning an income as a result of receiving vocational training expressed feelings of empowerment and increased confidence due to their newly gained financial independence.

GWDs reported fundamental barriers that hampered the inclusion of not just GWDs, but all girls, in all three contexts. These included physical barriers, such as lack of transport to and from schools, and infrastructural barriers, such as inaccessible and unclean toilets.

In all three project contexts, community members mentioned increased awareness about the need to educate GWDs. Community members also indicated that perceptions about girls' education, in general, became more positive.

Teachers emphasised their improved knowledge in supporting GWDs in the classrooms, such as giving extra attention to students with disabilities and changing seating arrangements. However, they felt they needed more support for much needed pedagogical changes and expressed a desire for further professional development, including knowledge of and/ or support with Braille and sign language.

In all three contexts, the use of participatory methods of photovoice and audio notes proved particularly useful in elevating the voices of GWDs and providing a tool to conduct in-depth interviews with them.
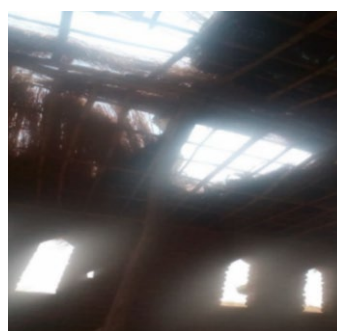
The lack of a thatched roof in a school was described in a photovoice activity by a girl in Malawi. "This roof disturbs me. The sun passes through it when it's sunny and I am disturbed by the rains during the rainy season. So, I don't like that. If the rain starts whilst still at home, I don't go to school and I don't like that. When it starts when we are in class, it becomes a problem because we must hide in the corners. This does not really help because the whole roof is damaged, and we usually get wet in class. The lessons are disturbed."

Methodology

This study addressed two research questions:

To what extent have GEC II projects supported GWDs (with a particular focus on learning outcomes) through their interventions, including approaches adopted during Covid-19, and what are the factors influencing these decisions?

What are the perceived and observed effects of the interventions adopted by selected GEC II projects on GWDs, their teachers/ educators, families/ caregivers, and communities?

Evidence relating to the first research question was drawn from secondary quantitative and qualitative data covering all 41 projects from external evaluations, project monitoring reports, and Covid-19 response reports. This was supplemented by interviews with project Implementing Partners for 27 of the 41 projects.

The second question examined three case study projects, drawing on data collected from GWDs, their parents or caregivers, teachers, community groups and government or national agency representatives. Primary qualitative methods, including semi-structured interviews, focus group discussions, and classroom observations, were used. The participatory methods of photovoice (which allows participants to record and present photographs representing information, feelings, or memories) and audio notes were also used to collect information directly from GWDs.

GWDs were identified using questionnaires based on World Health Organisation criteria. All projects used the Washington Group Short Set Questionnaire, in which respondents report their 'functioning' in six domains: seeing, hearing, walking, self-care, communication and remembering. Additionally, 14 projects used the Washington Group/ UNICEF Module on Child Functioning, which examines learning, concentrating, accepting change, controlling behaviour, making friends, anxiety, and depression; and one project also used the Patient Health Questionnaire on depression (PHQ-9) to identify the prevalence of anxiety and depression. Girls were considered to have a disability if they responded 'a lot of difficulty' or 'cannot do at all' in any domain or described 'daily' experience of depression and anxiety.

Limitations

Delays in obtaining fieldwork permissions and disruptions in fieldwork impacted project timelines.

Limited availability of project data impacted the type of analyses possible to assess changes over time. Quantitative and qualitative data were triangulated to respond to the research questions.

Sampling issues occurred in data collection for the first research question, where 27 out of the 41 Implementing Partners agreed to participate, and for the second research question, where it was not possible to include girls with a wide range of disabilities in our sample.

There were some differences across projects in the tools used to collect data on disability.

For more information

This research was carried out by the Independent Evaluation Team of the Girls' Education Challenge Fund Programme. The Independent Evaluation Team is a consortium of partners led by Tetra Tech International Development together with the Research for Equitable Access and Learning (REAL) Centre at the University of Cambridge and Fab Inc.

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This policy brief is a summary of findings, conclusions, and recommendations from the complete evaluation report which is available at: https://girlseducationchallenge.org/media/g0tdbbek/gec-ii-evaluation-study-4-disability-report_may2023.pdf

For more information about the Girls' Education Challenge, please visit: https://girlseducationchallenge.org

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