Research on Disability and Access to Inclusive Education

July 2023

CONTENTS

LIST OF FIGURES

LIST OF TABLES

ABBREVIATIONS

CBO	Community-Based Organization
CRPD	Convention on the Rights of Persons with Disabilities
CSOs	Civil Society Organizations
CWD	People with Disability
Cw/oD	Children without Disability
DIE	Disability Inclusive Education
EFASOM	Education For All Somalia Coalition
EMIS	Education Management Information Systems
EOL	Education Out Loud
ESSP	Education Sector Strategic Plan
FGD	Focus Group Discussion
FGS	Federal Government of Somalia
FMS	Federal Member States
GBV	Gender-Based Violence
IDPs	Internally Displaced People
IE	Inclusive Education
INGOs	International Non-Governmental Organizations
KII	Key Informant Interview
MOECHE	Ministry of Education, Culture and Higher Education
MoWHRD	Ministry of Women and Human Rights Development
NDA	National Disability Agency
NDP	National Development Plan
NGO	Non-Governmental Organization
OPD	Organizations of Persons with Disabilities
OOSC	Out-of-School Children
SSs	Special Schools
SEND	Special Educational Needs and Disability
SEMH	Social, Emotional, and Mental Health
SODEN	Somali Disability Empowerment Network
TLCs	Temporary Learning Centers
WGQ	Washington Group Questions

ACKNOWLEDGEMENT

The Research Team would like to acknowledge the support and cooperation of all those who participated in contributing information about inclusive education for out of school children (OOSC) living with disabilities. Specifically, we cite the support and contributions of the Key Informants that contributed in-depth information; Rahma Adbulkadir the Managing Director Mustaqbal Centre for special needs, Suaad Abdullahi the Chief Executive Officer Somali Institute of Special Educational Needs and Disability (SISEND), Abdikaqni Aliduh Abdi Special Education Needs Office at the Ministry of Education, Culture, and Higher Education, Abdullahi Hussien Osman Somali the Managing Director Disability Network, Abdulakdir Mohamed Isak Protection Specialist ADRA, Adam Mohamed Adam, the Coordinator of EFASOM, and Mohamed Moalin Osman Education Office Somali Community Concern (SCC). We would like to extend our gratitude for all those who contributed vital information through the focused group discussions and the many parents and other duty bearers who participated at the households through surveys, including children living with disabilities attending school, teachers of CWD and the head teachers who took part in the research. Finally, we would like to express our special gratitude to EFASOM coalition, civils societies for the support and technical guidance during the process and overall coordination of the work of the Research Team.

Thank you very much indeed!

EXECUTIVE SUMMARY

EFASOM is currently implementing an Education Out Loud (EOL) Project in Somalia in collaboration with Oxfam Denmark/GPE. The consortium carried out evidence-based advocacy research on access to inclusive education for OOSC living with disabilities to establish the current status of education for the CWDs, their level of participation and the effectiveness of the education system to accommodate them.

The specific objective of this advocacy research was to understand the educational experiences of children with a disability attending regular and special institutions and determine the nature and scale of supply-side barriers to OOSC with disabilities accessing inclusive education. The research also sought to determine the main demand-side barriers to OOSC with disabilities accessing inclusive education and to understand issues and challenges related to the legislative and policy environment to support and promote the education of children with disabilities.

The research used a participatory mixed approach that combined qualitative and quantitative techniques to provide the advantage of triangulating data and findings from different sources using surveys, observation schedules, KIIs and FGDs. Through the survey, four groups of respondents were reached including CWD out of school and in school including special schools, temporary learning centres and regular schools. The other three groups of respondents were parents/guardians and teachers. Qualitative data was collected from KII and FGD with EFASOM Coalition members, civil society groups, MOE staff and Local NGO staff. During the research, 173 observations were conducted, two FGD with 19 discussants done, and 6 informants with the KII conducted using a semi-structured questionnaire tool. The research also adopted an integration of the 'Washington Group Short Set of Questions and the UNESCO methodological guideline for assessing OOSC with disabilities and the UNICEF Guide for Including Disability in EMIS for the assessment of data collection coverage of access, participation, attitudes, systems' capacity, and the learning environments.

The research revealed several findings which are presented for each objective as follows:

For Objective One, The study shows that CWDs in school articulated knowledge of children's rights and rights of CWDs to education; ability to learn, their joy in learning, playing with friends in school and their liking for their teachers. On the flip side, CWD in schools are not very happy with the quality of their classrooms; lighting, overcrowding in classes and limited teaching and learning materials. Incidentally, issues concerning their safety in school, incidences of bullying and isolation were the least mentioned contrary to the concerns their parents have over the same. Supply-side concerns raised included the need to have CWD access classrooms and washrooms with ease, by having disability-supporting infrastructure that is wheelchair-friendly; the need to support teachers with training, and provision of learning materials and the improvement of lighting in the classrooms. Teachers exhibited a positive perception of attitudes towards CWDs despite the lack of or limited teaching and learning materials. Similarly, CWDs exhibited a positive attitude towards learning despite the prevalence of poor conditions of WASH facilities such as toilets. On recreational facilities, a reasonable number of 9 (45%) of schools reported having them despite many 11 (55%) of the beneficiary CWDs feeling unsafe to use them, mostly out of fear and anxiety. In rare cases, they reported incidences of being insulted by other children, abused or bullied.

On Objective two, the findings show that Out of the 33 teachers interviewed including 26 head teachers and 7 classroom teachers. Most head teachers 14 (54%) had good experience in the school having headed the same for between 3-5 years. The 28 schools reporting to CWD reported the enrolment a total of 2287 (609 Females) students with disabilities. 2106 of the CWD were enrolled in Special Disability Schools (SDS), 133 (5.8%) in the Temporary Learning Centres, and only 48 (2.1%) in the regular schools. On **Existing Inclusive Education (IE) Policies,** the head teachers and teachers are aware of the existence of the DIE, which was a similar finding with key informants and the focused group discussants. However, it emerged that the policies are hardly implemented. For example, the comprehensive Somali National Special and Inclusive Education policy that contains the rights of CWD does not have a budget allocation for implementation.

On Teachers training the majority of teachers, 22 (67%) have had training in DIE though most, 18 (82%) through In-service training over a period of 1 week and only 4 (18%) through Pre-service training. One private organisation reported giving orientation training to handle children with mental disability before formally employing them**.** The top three challenges mentioned were that the class sizes were too large for the delivery of DIE, insufficient teaching-learning materials and lack of appropriate assistive devices/ technology to support learning of CWD. Top three on list of solutions were teacher incentives, reduce overcrowding in classrooms, and make availability the correct teaching/learning materials and assistive devises. The least mentioned included disability-friendly environment, accessibility for CWDs and more exposure to DIE practice.

Objective three sought to determine the main demand-side barriers to parents of OOSC disabilities accessing inclusive education. The reasons given by OOS parents for their children not for not taking Children with Disability to school were disability, illness and poor quality of school/education. The most common disabilities included that of; legs impairment, paralysis, leg and arm disability and blindness. Other factors hindering access mentioned were; schools are too far, financial constraints, lack of supportive system and facilities to encourage access to schools. Schooling Preference for CWDs OOSC by Parents were special schools (60%), Special classrooms in regular schools (Mainstreaming – 29%) and Regular classroom in a regular school (Inclusion – 11%). The level of awareness of the parents of CWD OOS on the rights of children to education was 55.7%, compared to parents of CWD attending school was 98% while that of CWD in school was 100%.

On the Education System Capacity to Implement DIE, it emerged that most Schools do not meet the needs of children with disabilities with 78.6% of parents of OOSC and 98% of parents of CWD attending school noting so. Also, the majority, 72.9% of parents of OOSC and 40% do not feel CWDs are safe in the schools there are attending. Various reasons were provided for this including lack of adequate CDW infrastructure, a lack of confidence in the schools to protect their children, inadequate trained teachers and children being too young. However, the parents (54% of OOS and 68% of CWDs) were of the view that teachers are willing to support CWDs' learning.

Conclusions

1. The most preferred mode of educating children with disability in the areas around Mogadishu remains that of Special schools.
2. The teachers seem to see it as the best approach, so do parents whose children are out of school, and to an extent those whose children with disability are attending school.

3. Given the opportunity of access to education, children with disability in the regular, temporary and special schools attend classes regularly; far from the belief that CWD cannot learn, are disinterested in learning and good for nothing.
4. CWD in schools are more concerned with the quality of their learning, socialising and the enabling environment including classrooms; lighting, space and teaching learning materials more than issues concerning their safety in school, incidences of bullying and isolation contrary to the perception of most parents.
5. From the survey, it is clear that the most preferred mode of educating children with disability in the areas around Mogadishu remains the old approaches, that of Special schools.
6. The teachers seem to see it as the best approach, so do parents whose children are out of school, and to an extent those whose children with disability are attending school.
7. Leg related disabilities are the most prevalent form of disabilities among OOSC. Reported in this section, leg related disabilities were the most frequently, 34 (40.5%) mentioned by the household respondents of CWD OOS ranging from "leg Impairment", "leg and Arm disability" and "leg and back disability".
8. There is a mismatch between the opinion that inclusive education is better rewarding to CWD, their parents and to CW/oD compared to Special schools, and the choices of type of schools parents and teachers prefer CWD to be enrolled. Whereas they talk positively in favour of disability inclusive approaches, their preference for enrolling CWD is the special schools.
9. There are barely any regular inclusive schools enrolling CWD (only 2.1% CWD are enrolled) and yet teachers claim to have received several, varied trainings to be able to teach different types of SEND students.

Recommendations to the Ministry of education, culture and higher education

1. The MOECHE enforce the implementation of DIE policy to ensure that regular schools implement inclusive education, enrol CWD and provide support to teachers that already received training in teaching SEND through in-service. The MOECHE should provide more professional development opportunities to these and put in place strategies to provide pre-service training in inclusive education to new teacher recruits in regular teacher training institutions and special education institutions
2. MOECHE and state MOE should contribute to capacity development of its personnel and schools level personnel with first priority to teachers' in the development skills, tools and systems to strengthen delivery disability inclusive of education the regular schools and the temporary learning centers where uptake of inclusivity is still very low.
3. The government through the MOECHE should ensure that they implement the global and national legal and policy commitments that they have ratified are leveraged to promote continuity of free, inclusive education. This should be done within the context of EiE MS together with cluster partners to yield better, and faster results.

4. MOECHE should put in place programmes to build it capacity so that effective support and supervision for teachers and other education personnel working with DIE personnel is provided at all levels.
5. At the Pre-service teacher training, all teachers should receive initial training on inclusive education which include strategies for identifying and addressing learning needs of SEND for encourage their participation.
6. Increase opportunities for CWD and the normal to share recreational facilities to nature cooperation between and among groups, and to build confidence that improves the ability to interact and support CWD to eradicate anxiety and the fear of play with them.
7. Traditionally, teachers receive optional separate training modules on "special education". Yet, to end segregation in education, all teachers, support staff, and school leadership should be given the opportunity to acquire competencies to work in inclusive environments.
8. MOECHE working closely with the donor community through NGOs and Civil society should work on infrastructure remodelling; constructing ramps, renovating common areas for accessibility (e.g. bathrooms, toilets, watering points etc.), provide customized/adapted classroom furniture to ensure school accessibility and remove material barriers to CWD access to learning (accessible roads, transport, ramps, toilets etc.)

Recommendations to the Civil Society Organisations

1. The civil society organisations should employ a range of advocacy strategies to influence policies and practices in support of DIE in the IDP camps' learning centers and regular schools using EiE minimum standards lens to attract families and communities to support teachers and schools effort to expand access to safe and quality education to SEN children.
2. The civil society should advocate for humanitarian organisations to provide additional support DIE programmes through the clusters' Education in Emergencies (EiE) and Child Protection in Humanitarian Action (CPHA) actors working side-by-side to respond to the holistic needs of CWD affected by crises and forced displacement. By integrating child protection and education, a mutually reinforcing cycle created will reduce CWD's vulnerability in and out of school. An environment free of child abuse, harassment through bullying, isolation, neglect and violence as described in this research would promote better participation in education and attract OOSC with disabilities.
3. On the protection and wellbeing of CWD, the civil society should collaborate with Child Protection Actors to apply strategies which seek to reduce protection risks facing children with disability attending school. That way, the physical and emotional safety of CWD will be assured and their learning improved. Such collaboration with experts will help identify and implement appropriate psychosocial support and social emotional learning programmes which seek to promote student wellbeing.

4. The civil society and other humanitarian stakeholders support further studies to identify well-being and support needs amongst teachers to implement interventions that support well-being including; psychosocial support and social and emotional learning for teachers, peer-to-peer support and supervision, and favorable working conditions to enhance teaching and learning of SEND
5. The research findings established that teachers in the regular schools only attended short courses to gain an appreciation of SEND pedagogy. All education actors; MOECHE, INGOs, and Civil Society should, through the Teacher Education and Training Working Group plan and provide professional development opportunities that lead to certification for teachers and education personnel.
6. As quoted by the Managing Director of Mustaqbal centre for special needs, a private institution, "at the point of recruitment of teachers, we not only look for teachers with relevant qualifications, but we provide them with our own distinctive induction training before deploying them into the classroom". This is one, "Best practice" that all DIE providers should emulate and put into practice.
7. Work closely with school communities analyzing how community-based local education action plans integrate with government education policies on disabilities to instigate strategies to strengthen community participation in the dialogue with education authorities to address needs, rights and concerns of CWD in emergency-affected population
8. Lead relevant coordination mechanisms through the Education Cluster and collaborate with other relevant sectors like health to support early detection of disability and early intervention to provide services to families of infants and young children.
9. Engage with education authorities at district and central level to deliver disability inclusive education awareness and response in line with community needs and rights for ownership and care of CWD.
10. Civil society collaborate with CECs and Head teachers, and local administration to oversee the construction of inclusive amenities by engaging parents and community members to provide additional support to students, teachers, and families of SEND. Together, they can be instrumental in changing attitudes regarding inclusion.
11. Civil society and partners should promote advocacy for the rights of disabled children; training the community on the importance of education for the disabled children, raising awareness among the community to promote equal rights for all children especially those living with a disability and ensure that no child with disability stays at home.
12. Civil society and partners should take advantage of the existing, and documented policies like the 5-years national ESSP that has a budget to advocate for its implementation to include the local level educational policies that allocate 20% of revenues to the cause of PWD to be replicated elsewhere.

13. Taking with concern that most disabilities reported at HHs are leg related, there is need to conduct an in-depth research to attempt to establish the “Cause and effect” of this occurrence.
14. Civil society should take advantage of the Somalis being a Muslim society to use the existing Muslim scholars and Sheikhs to advance awareness creation to impart knowledge about disability for the change attitudes and to encourage useful practices in the community and families.
15. Encourage through the support of partners and other stakeholders, the education of children with SEND to become productive members in the development of their communities and country and to be role models for the next generation of children with SEND.
16. Advocate for the formulation and implementation of laws and policies to compel the government to apportion a fixed ratio (or percent) of all employment opportunities to people living with disabilities. Further to provide opportunities and build capacity using entrepreneurship initiatives of people with disability to develop a cadre of role models for children with SEND.
17. If the education system has to embrace the use of disability-inclusive education in regular schools, parents need to be educated in the value of CWD attending school. The evidence that parents with some level of education (primary education) all, 100% took their children with disability to school while those who never went to school did not.

1.0 INTRODUCTION

EFASOM is currently implementing an Education Out Loud (EOL) Project in Somalia in collaboration with Oxfam Denmark/GPE. The EOL project activities are only implemented by EFASOM coalition members in Somalia. EFASOM plans to do evidence-based advocacy research on access to inclusive education for school (OOS) children living with disabilities (CWD). The research intends to establish the current status of education for the CWDs, their level of participation and the effectiveness of the education system to accommodate them; the challenges and experiences of the duty bearers in seeking access and participation of CWDs in inclusive education.

1.1 The Purpose of the Research

According to UNESCO[1], little will change in the lives of children with disabilities until the attitudes of communities, professionals, media and governments begin to change. By analysing the nature of attitudes and prejudice towards people with disabilities as a critical first step in promoting awareness and challenging ignorance about the nature of disability, the EFASOM coalition purposes to undertake research to inform on the best approaches to conduct its advocacy and campaign activities to address this. At the end of the research, the findings will be shared in a validation meeting to engage at least 30 education stakeholders from line ministries of the Federal Government, local education groups, education partners, and international and local communities whose inputs will be used to improve the findings fit for policy formulation.

1.2 Objectives of the Advocacy Research

The specific objective is to:

1. Understand the educational experiences of children with disabilities in regular and special education institutions.
1. Determine the nature and scale of supply-side barriers to Out of school children with disabilities accessing inclusive education.
2. Determine the main demand-side barriers to OOSC with disabilities accessing inclusive education, and existing measures to overcome them.
3. Understand issues and challenges related to the legislative and policy environment to support and promote the education of children with disabilities

1.3 Research Questions

The research attempted to divulge answers to the following questions:

2. What are the educational experiences of children with disabilities in regular and special education institutions?
3. What are the major barriers to parents of disabled, out-of-school children that influence their decision not to take them to school?
4. What are the experiences of parents with disabled children attending regular schools?

[1] Education Sector Analysis Methodological Guidelines Volume III, May 2021

5. What is the capacity of the education system to implement disability-inclusive education?

2.0 LITERATURE REVIEW

There are many girls and boys with disabilities in Somalia with different forms of physical, psychological and social impairments. J. Mbugua (2020) posits that knowledge and awareness about the rights of children with disabilities are still low. Likewise, community attitudes towards children with disability are still largely negative with many believing that children with disabilities should not play with other children and that they cannot contribute to the welfare of their households. In some cases, schools can also hold unsafe environments for vulnerable children, children with disabilities, classmates, and teachers. Therefore, taking into account these risks is important for planning inclusive education, especially by including disability-sensitive behaviour management, conflict resolution, positive and collaborative attitudes and raising awareness of parents on bullying, including cyber-bullying, Alongside the mentioned negative attitude towards children with disabilities, is the practice of discrimination and ill-treatment of children with disabilities, even by own parents who support the practice of tying up children with disabilities with the excuse of protecting them. They believe that the practice is necessary to protect the children from harm such as being knocked down by a car, discrimination from outsiders, physical and sexual abuse, hurting other people or being hurt. Another justification provided for chaining was that it prevented the children from begging or that it was important to hide them from the public as they are viewed as a family curse.

Parents of children with disability are not spared from negative attitudes and stigmatisation in their communities. For instance, many believe that having a child with a disability is bad luck; that children with disabilities bring drought and poverty not only to the family but to the whole community. Insults and abuse from the community also betray the inherent deep structural negative attitudes.

According to UNICEF (2014) [2] collecting data on OOS children is just the first step in identifying the nature and scope of the problem affecting OOS children with disabilities. However, simply knowing about the existence of the children is not enough. What is needed is to identify the nature and extent of those barriers that are keeping children from attending school. By investigating the relationship between the existences of those barriers with the number of out-of-school children, we can begin to identify the key bottlenecks that are preventing children from attending school and fashion our policies to prevent them.

Concerning data collection, children with disabilities are particularly at risk of missing out on education, and those who are out of school are particularly prone to be poorly captured in databases and surveys. Estimating their number and defining their characteristics is vital to effective policy development. According to UNICEF[3] tracking the number of children with disabilities who are not in school can be challenging. EMISs only collect data on children in

[2] Mapping Children with Disabilities Out of School © United Nations Children's Fund (UNICEF) 2014

[3] Mapping Children with Disabilities Out of School - Companion Technical Booklet V5

school, and they often do not collect data on disability status. Surveys that collect data on childhood disability in the general population often have methodological problems. Fortunately, this is now changing as UNICEF and the UN Statistical Commission's Washington Group on Disability Statistics (WG) have recently developed and tested a new survey module for improved childhood disability data collection that is in line with new theoretical developments on defining and conceptualizing disability. Still, even armed with a new and improved survey for identifying children with disabilities there are many special issues involved in finding these children to map where they are located and uncover the barriers to schooling they face.

2.1 Technical Approach and Methodology

EFASOM research adopted an approach that integrated the use of the 'Washington Group Short Set of Questions on Functioning' (WGSS) and the UNESCO methodological guideline for assessing OOSC with disabilities to facilitate data collection. This approach is also in line with the UNICEF Guide for Including Disability in *Education Management Information Systems* (EMIS) for the assessment of data collection coverage of access, participation, attitudes, systems' capacity, and learning environments.

2.2 Research Design

We used a descriptive Research design. The choice of the descriptive investigation is informed by the fact that each of the expected disability parameters of access, participation, attitudes, systems' capacity, and learning environments have unique characteristics such as numbers, percentages, and proportions of CWD out of school and CWD attending a regular and special school that needed to be measured numerically. Additionally, survey questionnaires documented specific characteristics such as age, type of disability and gender that were represented descriptively. Secondly, the descriptive design enabled us to interact with the research respondents without influencing the study characteristics. This enabled us to collect data in its primary environment and use this data to answer the research questions in a descriptive sense.

2.3 Research Method

We utilized a participatory mixed methodology approach that combines qualitative and quantitative methods for this research. Using both quantitative and qualitative methods provided the advantage of triangulating data and findings from different sources; KIIs and FGDs from EFASOM coalition members, Local/international NGOs and government agencies. The Research survey also targeted four key grassroots respondents including disabled children in regular schools, the immediate duty bearers; parents and guardians in households, teachers trained in Special Education Needs (SEN), and selected community leaders and EFASOM coalition members. In essence, a mixed methodology was essential in triangulating different datasets to establish emerging meanings, themes, and factors that supported or authenticated the statistical data findings in response to the research questions.

Specifically, **qualitative** techniques relied on the use of in-depth key informant interviews (KII) and focus group discussions (FGD) to enable us to answer questions related to attitudes, feelings, social norms, and cultural beliefs that cause barriers to CWDs accessing education. Moreover, the use of qualitative techniques also helped elicit opinions, challenges and barriers to the inclusion of children with disabilities in education because of negative attitudes and stereotypes. On the other hand, **quantitative** techniques helped analyse survey questionnaires (parents of CWD attending regular schools and those with CWDs OOS), and the observation tool (schools' factsheet).

The research questions formed the basis for data mining from which information has been derived to respond to each of the research questions. For each of the research questions, the information needs, sources of the information, the methods used to extract the information, research tools used to extract the same and the sampling strategies were obtained. We used the methodological framework to establish the ***supply side*** of inclusive education by cross-examining evidence of the preparedness of schools to provide disability-inclusive education. Interrogation sought to establish the needs of parents and CWDs with help to get children to school, distance to school, and teacher competence with SEN, teacher attitude, teachers support to parents, special services or assistance, assistive devices/technology and school safety for CWDs. In addition, we used an observation protocol to assess the appropriateness and adequacy of the infrastructure, learning materials, assistive devices, teacher competence, and availability of support systems, curriculum, and learning outcome assessment systems. On the same measure, we used the same framework to establish the **demand side** barriers to the implementation of disability-inclusive education including information on the attitudes of teachers, parents, community members, pupils and possible prejudice or stigma. The outcome of the above activities was then used to generate comparisons on the survey responses including the reasons for not attending school, the enabling factors that make it possible for CWDs to attend schools (regular, special and TLS) and examining household burdens on duty bearers associated with the education of children with disabilities as well as those contributing to successful school attendance for children with and without disabilities.

2.4 Sampling and Sample Size Determination

The research targeted 173 observations questionnaires, 19 discussants with two FGD guides and a total of 6 informants with the KII semi-structured interview schedules.

2.5 Data Collection Methods

The research used both primary and secondary data collection techniques involving desk reviews, household surveys, key informant interviews, focus group discussions and observation. Below is a brief description of how the research was carried out.
The following are some of the proposed data collection methods:

2.6 Desk Reviews

By reviewing different literature, we became familiar with pertinent issues contending with the education access and participation of children living with disability in Somalia. Through desk review, we were able to explore the different challenges in undertaking this kind of study as well as gaining insights into the tools and best approaches, including the use of internationally recognised disability data collection strategies, methods and tools. Some of the documents reviewed included Rapid Assessment of the Status of Children with Disabilities in Somalia; Ministry of Women and Human Rights Development of the Federal Republic of Somalia, 2020, Tomlinson et al (2020); review of "Disability in Somaliland (2003)" in Disability and Society, Vol. 18, No. 7, p: 911- 920 and the "Education Sector Analysis Methodological Guidelines Volume III, May 2021" among others listed in the references section

2.7 Household Survey

The research was conducted using semi-structured questionnaires, with the majority of the questions being closed-ended. The questionnaires were administered by trained enumerators at the HH level. The survey aimed to gather mainly quantitative data on the information needs in line with the research questions for which the research sought answers.

2.8 Key Informant Interviews (KII)

The KIIs were designed using the open-ended questionnaire; the essence of which was to allow for non-standardized follow-up questions to provide in-depth analysis of issues arising out of the survey respondents. The target interviewee included EFASOM staff and its partners, MoE staff at national and state levels, community representatives and opinion leaders, and NGOs in the sector of education, specifically those partnering with EFASOM partners.

2.9 Observation

A standard observation walk-through schedule was developed as a checklist guide to establishing the appropriateness of various parameters for their fit to accommodate children with disabilities. These included but were not limited to infrastructure; classrooms' (doors, entry, floor, lighting); WASH facilities (Toilets (disaggregated for boys and girls), and disability access and provision of adaptive devices; low latches and door handles low, hanging bars, handrails, heights of the washstand, toilet seat, at the same height with wheelchair etc.). Lastly, teaching-learning materials and learning environment were assessed. As much as possible the assessment adhered to the Government Standards and the international standards of Universal Design and/or SPHERE standards, model schools to establish if they met the same.

2.10 Data Analysis and Reporting

For the quantitative data, descriptive statistics including frequencies, and percentages were analysed. Survey questionnaire responses were keyed into MS Excel using predefined templates that were aligned to the questionnaires, for which in-depth analysis was done. The resulting quantitative data was processed and tabulated into frequencies and percentages and exported into graphical presentations in clear and succinct forms for quick visual effects, as necessary. The quantitative data has been used to corroborate the thick descriptions of the findings expounded in qualitative data, and triangulated to give a rich and full picture of the research findings.

3.0 RESEARCH FINDINGS, ANALYSIS AND REPORTING

The research team reached a total of 198 of the sample population targeted at inception. Out of the 198 respondents reached, the highest was in the category of parents 70 (91.4% females) of out-of-school children living with disabilities.

Table 1: Target respondents reached by the research team

Category Tool	Male	Female	Total	Per cent Female
Parents of OOS CWDs	6	64	70	91.4%
KII	4	2	6	40.0%
CWD in Special, regular and SEMH s	12	8	20	33.0%
FGD	12	7	19	36.8%
Surveys - Teachers	23	10	33	30.3%
Parents of CWD in Regular Schools	38	12	50	24.0%
	95	**103**	**198**	**52.0%**

The second number of respondents reached is the category of parents, 50 (24% female) of children living with disabilities in regular schools. Other substantial numbers reached were the Survey of teachers, 33 (30.3% females) and CWD 20 (40% females) in Special, Regular and Temporary Learning Centre schools.

In targeting the six categories listed in Table: 1 above, the researchers planned to explore answers to the key research questions;

1. *What are the educational experiences of children with disabilities in regular and special education institutions?*
2. *What are the major barriers to parents of disabled, out-of-school children that influence their decision not to take them to school?*
3. *What are the experiences of parents with disabled children attending regular schools?*
4. *What is the capacity of the education system to implement disability-inclusive education?*

To find answers to the foregoing questions, the results of the study have organised the following chapters below in the order of responding to the questions.

3.1 Objective One Findings

Understand the educational experiences of children with disabilities in regular and special education institutions.

Research Question 1: What are the educational experiences of children with disabilities in regular and special education institutions?

The Research component on the educational experiences of children with disabilities in regular schools was undertaken to document the:

- *Knowledge of children's rights and rights of CWDs to education; ability to learn, perception of schools to provide inclusive education services, Safety of CWDs at school and the perception of mixing CWD and Cw/oD in inclusive education,*
- *Supply-side issues: Constraints (economic, social, environmental), Attitudes (self, community), and*
- *Fears harboured by Children with Disabilities on (School environment, Support Systems and Safety/security)*

A. BACKGROUND

The researchers undertook to explore the educational experiences of children with disabilities in regular schools and special education institutions in 6 districts of the Banadir Region of Somalia as shown Table 2 below. In the process, they reached out to a total of 20 schools; 10(50%) Regular Schools and 10(50%) Special Disability Schools.

Table 2: Schools with CWD Surveyed

	District	School Type			
		Regular	Special	Total	Per cent District
1	Howlwadaag	4	2	6	30%
2	Hodan	1	3	4	20%
3	Waberi	2	2	4	20%
4	Wadajir	1	1	2	10%
5	Warta Nabadda	1	1	2	10%
6	Yaaqshiid	1	1	2	10%
	Total	**10**	**10**	**20**	**100%**

School Attendance

In terms of school attendance, it is clear that all children with disability both in the regular schools and those in the special schools had no problem with school attendance as was established by the researchers who asked, "Did you go to school this academic year?" for which all the 28 (100%) responded affirmatively.

B. KNOWLEDGE

Children's Rights

On the knowledge of children's rights and rights of CWDs to education, the question, "*Do you think all children have the right to go to school*?" was asked of the respondents. All 20 (100%) responded with a "YES" demonstrating that they were all aware of the said rights.

CWD Perceptions on School

Ability to learn; the perception of schools' ability to provide inclusive education services to children living with disabilities. To start with, they were asked the question, "*Which parts of school life do you like the most*?" To answer this question with uniformity of purpose, they were given four fixed responses to pick from thus "I enjoy learning", "I like playing with my friends", "I like my teacher" and "Other or Don't Know".

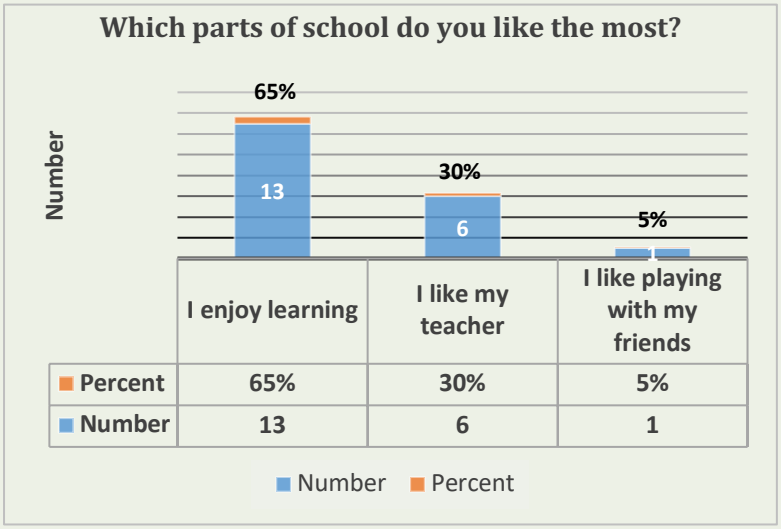


Figure 1: Which parts of school life do you like the most?

The majority 13 (65%) picked on the response, *"I enjoy learning"*. This response disproves the common assumption that children with disabilities cannot learn as demonstrated by myths in literature elsewhere. The second rate by the learners was the fact that they liked their teachers; far from the perceptions some parents hold that the teachers are not well placed to take care of CWDs. Lastly, at least one child expressed the joy of having the opportunity to play with friends in school.

A second question asked them on perception was, *"Is there something you don't like about your school?"* On this question, they were given 18 fixed responses to pick from so that they can point out as many issues as possible to elucidate negative perceptions possible. Table 3 below presents the findings and analysis of their responses.

A total of 37 responses were elicited by the 20 interviewees. Out of which, *"There is not enough light in the classroom",* 11 (29.7%) were the most frequently mentioned among the things that learners did not like about their school/s. As a consequence of the foregoing, *"not having enough light in the classrooms"*, the next most frequently mentioned was*, "I cannot see well what the teacher writes on the board"*, 7 (18.9%). Third the list of things the interviewees mentioned was also related to classroom conditions, *"There are not enough seats in the classroom"*, 5 (13.5%). Notwithstanding, the 6th mentioned that *"There are too many students in my class"* is still an issue involving classrooms condition.

Table 3: The things CWDs Don't like about their Schools

	Response [N = 20]	Frequency	Per cent
1	There is not enough light in the classroom	11	29.7%
2	I cannot see well what the teacher writes.	7	18.9%
3	There are not enough seats in the classroom	5	13.5%
4	I find it difficult to learn	4	10.8%
5	I cannot hear well	3	8.1%
6	There are too many students in my class.	3	8.1%
7	I don't have books/school	2	5.4%
8	Bullied - I don't have friends at school/I am being bullied	1	2.7%
9	Isolated - Other students don't like me/I don't_	1	2.7%
		37	**100.0%**

Apart from classroom issues, the CWDs also mentioned personal issues; I find it difficult to learn 4 (10.8%) and I cannot hear well 3 (8.1%), and safety concerns those of, *"Bullying - I don't have friends at school/I am being bullied"*, 1 (2.7%) and "Isolation - Other students don't like me" 1 (2.7%). For a clearer presentation, these areas of dissatisfaction with the schools and school environment have been summarised in the figure below.

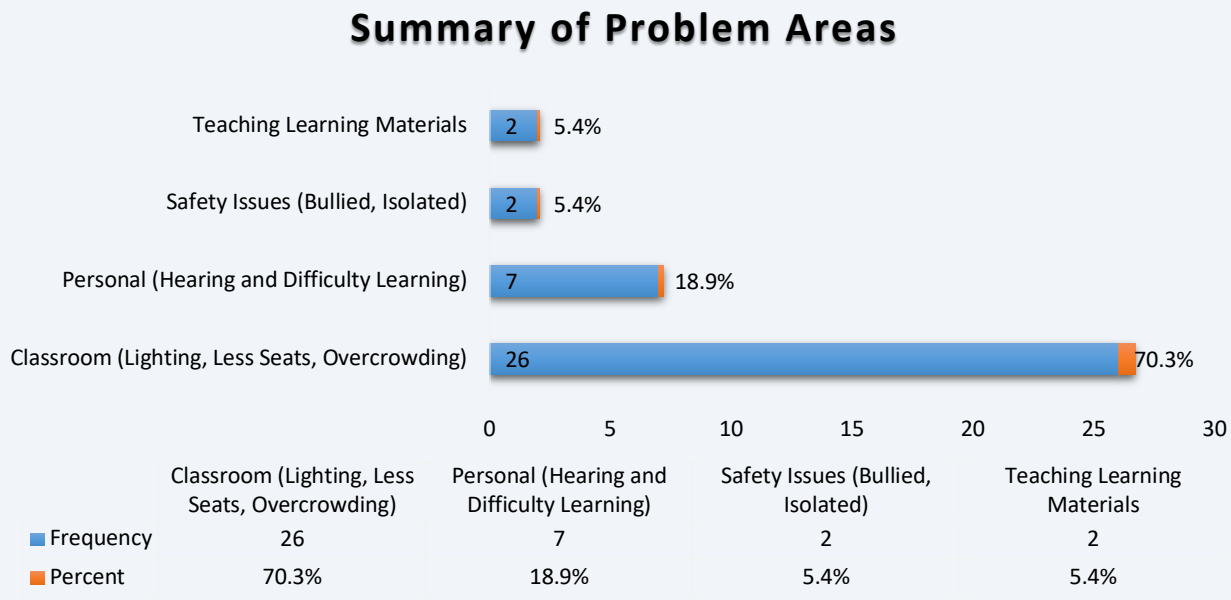


Figure 2: Summary of problem areas not liked by CWDs

As summarized in Figure 2 above, classroom issues due to poor lighting that make it difficult for the students to see clearly what teachers write on the board, limited provision of seats making the classes overcrowded were most reported 26 (70.3%) times. This is followed by personal issues (most likely due to disability) of difficulty hearing and difficulty learning, 7 (18.9%), then, an intricate issue concerning the safety of the school/class environment, that of bullying and isolation of CWD. Last, is the fact that some of the schools lack relevant teaching-learning materials, possibly including assistive devices and technology like Braille textbooks, hearing aids, and mobility devices like wheelchairs, etc.)

C. SUPPLY-SIDE ISSUES

This section tries to explore some of the constraints for CWDs accessing inclusive education. Some of these may be economic, social, environmental, and attitudes; either, self, parental or community. For instance, where children have expressed their apparent dissatisfaction with some services, environment and lack of teaching-learning materials, the researchers asked to know their recommendations that in their view could help address such constraints. In their response to the question, *"What could be done to improve your school (Please describe)"?* The interviewees responded with their perceived recommendations including; improve lighting in classrooms, brightly coloured markings/Contrast textures of surfaces, accessible classroom and washrooms (wheelchair-friendly), be more wheelchair-friendly (Avoid steps), large print on signs to mark classrooms, toilets, etc., support teachers with training and provide TLMs to reach SEND, provide audio equipment and audiobooks. The seven propositions were then regrouped into the three categories below thereby generating the cumulative frequency for analysis as presented in Table 4 below.

Table 4: Recommendation by CWD to improve their school

Categorized Responses	Cumulative Frequency	Per cent
Accessible classroom and Washrooms (wheelchair-friendly)	8	40%
Support teachers with training and TLMs to reach SEND.	7	35%
Improve lighting in classrooms.	5	25%
	20	100%

The recommendations the interviewee students provided was in line with their perceived solutions to issues they raised as dislikes about existing conditions of their schools. The recommendations included; providing disability accessible classroom and Washrooms, 8(40%), support teachers with training and provision of TLMs to reach SEND, 7 (35%) and improve lighting in classrooms, 5 (25%).

Perception of the Education System's Competence to Handle Inclusive Education

With the knowledge from the literature review, it is clear that achieving inclusion in the classroom is not only about knowledge, skills, infrastructure and learning materials but also about teacher attitudes. Well-trained and experienced teachers will have the right attitude that equips them with confidence in their ability to teach all children, with and without disabilities.

In this study, the researchers set out from the CWD in school their views of preparedness of teachers to implement inclusive education (IE). Asked, "Do your teachers care about your success at school?" and "Do your teachers help you learn?" In both questions all the interviewees were affirmative. In other words, in their perception, the CWD perceive their teachers positively in their abilities and correct attitude towards them.

On the provision and availability of teaching and learning materials, the question was asked, "Do you have books at home for you to read, apart from religious books and textbooks? In

response to the question, only 4 (20%) of the children reported having some books to read at home apart from religious books. 16 (80%) did not.

They were also asked to tell if their teachers were regular with school attendance, for which they stated that at least they observed on three occasions (15%) one to two days of teacher absence in the previous week.

Safe, Accessible and Inclusive Infrastructure

Accessibility is a perception that covers the usability of environments, amenities and resources by persons with disabilities in everyday life. Concerning the school environment, provisions must include safe pathways free of obstacles, disability-sensitive flooring, access to clean drinkable quality water, sanitation and Hygiene (WASH), recreational and sports facilities.

To assess the availability, accessibility and utility of the foregoing infrastructures, the researchers asked the following questions to the CWD respondents. “Does your school have safe drinking water facilities?” “Does your school have a functioning toilet?” If yes, “do you use a toilet in school?” If no to 13b, “why?” “Does your school have areas where children play and socialize?”

Functioning Toilet and Safe Drinking Water

The provision of WASH facilities (Figure 3) below, depicts an almost similar situation to these two parameters. Both indicate that WASH facilities are not adequate with toilets returning more "NO" of 13 (65%) from the respondent than "YES? Likewise in terms of water provision, the "NO" of 12 (60%) is much higher than those learners report "YES".

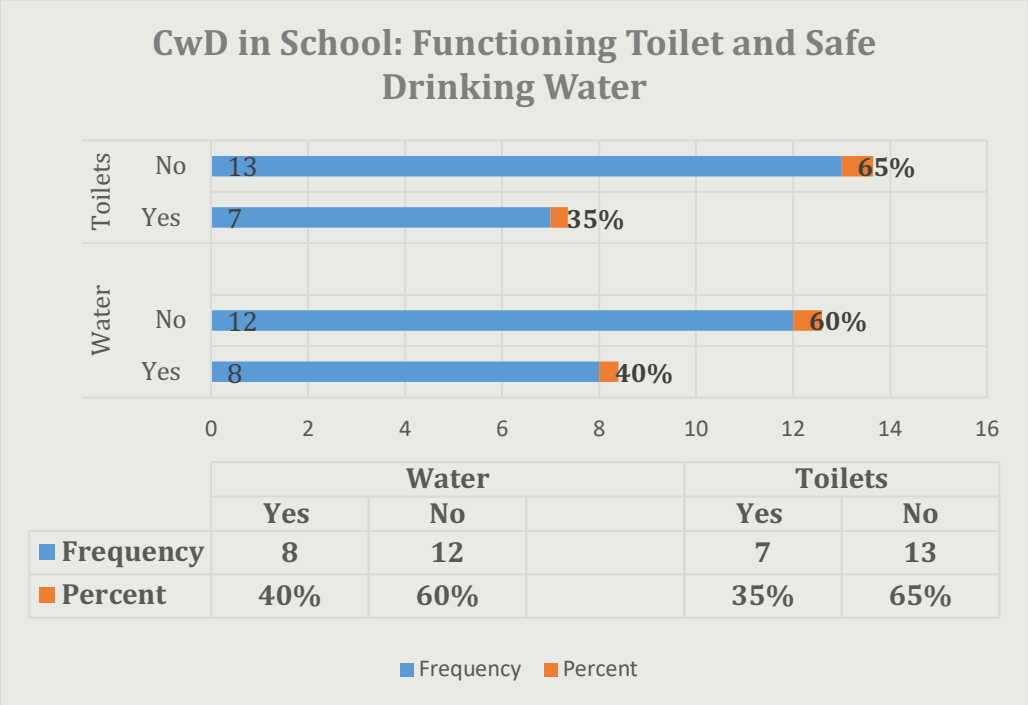


Figure 3: Functioning Toilets and Safe Drinking Water

The follow-up question of; if yes, do you use the toilets? All respondents were positive that they use the toilet irrespective of their condition.

Does your school have areas where children play and socialize?

In schools that do not have recreational and sports facilities, 11 (55%) were the majority.

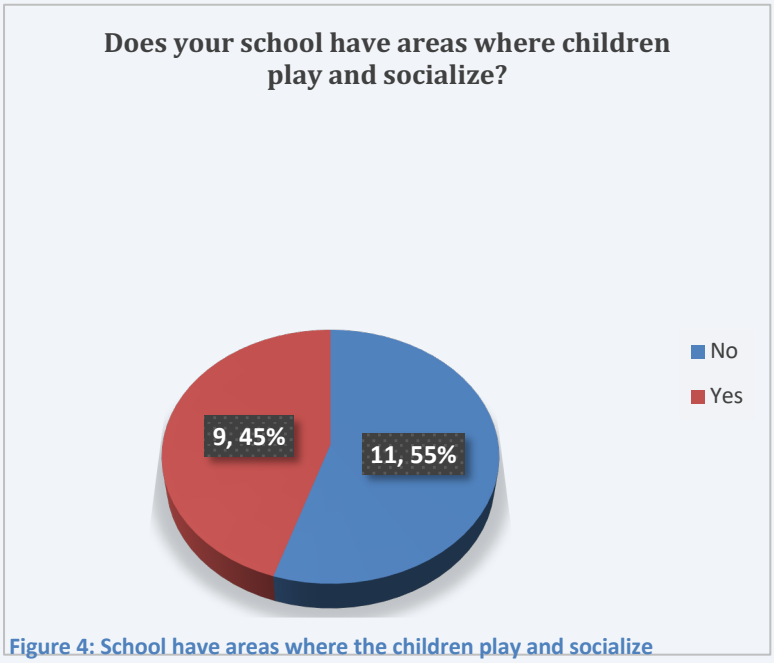


Figure 4: School have areas where the children play and socialize

Recreation is important to CWD as a component of constructive socialisation. Allowing children with and without disabilities to develop meaningful relationships in school through sports fosters their confidence in their ability to interact with one another and with other children in school.

Gained confidence and improved ability to interact also enhances cognition and learning, communication and interaction, sensory and/or physical needs and social, emotional and mental health of CWD (or with Special Education Needs and Disability –SEND).

Do you feel safe in those areas?

This question touches on the social, emotional and mental health (SEMH) conditions, which more often than not result in challenging behaviours displayed for many reasons, which may indicate underlying mental health difficulties (such as anxiety or depression) or emotional issues resulting from (such as isolation or attachment needs). It is crucial to look for the underlying causes of any behaviour and/or emotional state and aim to support these because, for some children with SEMH needs, the nature of these difficulties will affect their successful access to the curriculum, either temporarily or in the long term.

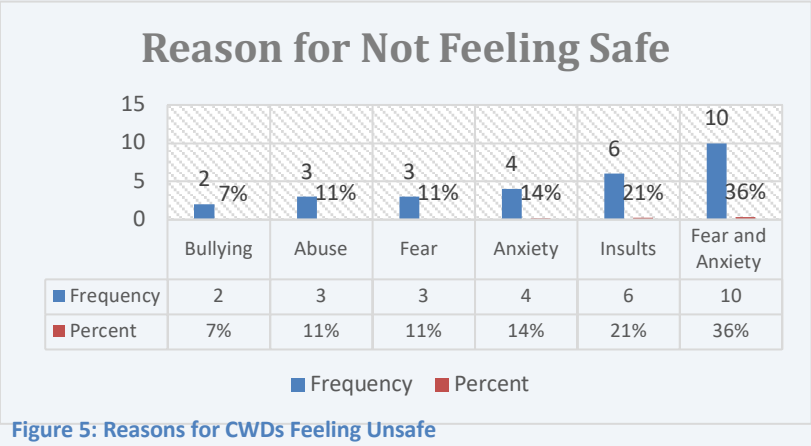


Figure 5: Reasons for CWDs Feeling Unsafe

In responding to the question, "Do you feel safe in those (recreational and sports) places, only 5 (25%) reported that they felt safe, yet another 11 (55%) reported not feeling safe and 4 (20%) were not sure.

Asked of the 11 CWDs who reported “not feeling safe”, to select as many choices (Anxiety, Insults, Fear, Abuse, and Bullying) as applied to their conditions and causes of feeling unsafe. Figure 5 herein illustrates the result of the analysis of their responses to justify their feelings of fear. The result of the inquiry revealed that fear and anxiety, 10 (36%) were the most reported condition, creating the perception of being unsafe followed by insults 6 (21%), then anxiety, 4 (14%), and fear and abuse each with 3(11%) and last, bullying 2 (7%).

Conclusion

Given the opportunity of access to education, children with disability in the regular, temporary and special schools attend classes regularly; far from the belief that CWD cannot learn, are disinterested in learning and good for nothing.

Recommendations

1. Teachers should be trained in inclusive education and provided with learning support & learning materials
2. There is need to have additional specialized teachers and assistants (Teacher Aides)
3. Ensure school accessibility and remove material barriers to learning - Accessible roads, transport, ramps, toilets etc.
4. Work on infrastructure remodelling; constructing ramps, renovating common areas for accessibility (e.g. bathrooms, toilets, watering points etc.), provide customized/adapted classroom furniture
5. Increase opportunities for CWD and those without to share recreational facilities to nature cooperation between and among groups and build confidence and improve ability to interact and support the differently abled so as to eliminate anxiety and the fear to play among the CWDs.

3.2 Objective Two Findings

To understand issues and challenges related to the legislative and policy environment to support and promote the education of children with disabilities.

The Capacity of the Education System to Implement Disability-Inclusive Education Regarding Teachers' Competence

Research Question: What is the capacity of the education system to implement disability-inclusive education?

- Existing Inclusive Education (IE) Policies
- Views about Disability-Inclusive Education (DIE)
- Teacher Knowledge of using DIE pedagogy
- Teacher training in DIE
- Bottlenecks in implementing DIE
- Solutions

In this section, the research intended to assess teachers' capacity to implement inclusive education in temporary learning centres and regular schools. However, it was considered necessary to visit the special schools as well to establish in-depth the policy issues, competence and attitude that teachers generally hold towards special educational needs and disability (SEND).

A. BACKGROUND

Geographical Scope

The researchers were able to reach out to teachers/head teachers for the survey in 10 districts, 33 teachers/head teachers (10 female, 23 male) in three types of learning institutions including Temporary Learning Schools, 15 (45.5%), Special Schools, 13 (39.4%) and Regular Schools, 5 (15.2%). Out of the 33 teachers interviewed, 26 were head teachers and 7 classroom teachers.

Table 5: Types of schools and number of teachers surveyed by percentage

Type of the School	Number	Per cent
Temporary Learning School	**15**	45.5%
Special school	**13**	39.4%
Regular school	**5**	15.2%
	33	100.0%

Of the 26 head teachers surveyed, 14 (54%) of them had at least headed the schools for 3-5 years and therefore had good experience and knowledge of the school, parents of CWD and the community. Another 7 (27%) reported having been in the schools for 6-9 years, which is long enough to have given them exemplary experience with the school environment.

Table 6: Length of time teachers and head teachers stayed in the schools surveyed

How long have you been heading the school? [N =26]		
Row Labels	**Frequency**	**Percentage**
3-5 years	14	54%
6-9 years	7	27%
0-2 years	6	23%
10-15 years	6	23%
Grand Total	**26**	**100%**

Do you have disabled children in this School?

Out of the 33 schools surveyed, 28 (85%) reported having children with disabilities and 5 (15%) had not.

Cumulatively all 28 schools reported having a total of 2287 (609 Females) children with disabilities. The CWDs aggregated by type of school and sex are presented in Table 7 below. The Special schools had the majority of CWD, 2106 (92.1%) followed far by the Temporary Learning Centres, 133 (5.8%), and the least were the regular school, 48 (2.1%).

Table 7: Number of CWDs in 28 schools surveyed by sex

If yes, please specify. How many in number? [N = 28]					
Type of the School	**# of Schools**	**Total CWD**	**Male**	**Female**	**% of Total**
Special schools	13	2106	1539	567	92.1%
Temporary Learning Spaces	10	133	104	29	5.8%
Regular Schools	5	48	35	13	2.1%
Total	**28**	**2287**	**1678**	**609**	100.0%
			73.4%	26.6%	

The near absence (2.1%) of children with disabilities in regular schools is a reflection of the way these schools are ill-prepared to implement disability-inclusive education (DIE). The data above as extracted from the teachers and head teachers, confirms the sentiments of the key informants who categorically declared that none of the regular schools they know of had any DIE programmes in their schools for CWDs.

Existing Inclusive Education (IE) Policies

To start with, the teachers/head teachers were asked if they are aware of Somalia's inclusive education policy. The head teachers and teachers who responded displayed a level of awareness of the existence of the disability inclusive education (DIE) policy as 55%, YES and 45% NO. Just like in the case of the key informants and the focused group discussants, teachers also expressed knowledge of the existence of such policies but that they have never been implemented nor enforced for implementation. On the part of the KII and FGD respondents, the question they were asked was, "*What government policies, national and State, are in place to support children with SEND and their families [mention as many as possible]?" Of the policies mentioned, which ones have been implemented in your State?*

The research question elicited mixed reactions from the key informants and the discussant groups. For instance, several respondents felt that there were no clear and sincere policies in the education of SEND and least of all no policy on the support of families with children with disabilities. The known educational policies are at the local level but most of them are unreliable. For instance, policies regarding funding exist in some states in the country and districts in Mogadishu allocate who allocate 20% of their revenues to the causes that invest in people with SEND living in those areas. At the national level, there exist very good educational policies such as the Somali National Special and Inclusive Education policy that has in all its sub-sectors policies elements rights of CWD and of disability inclusion education but none has been implemented to date. Moreover, the current national education sector strategic plan (to be implemented in the next 5 years) has a section on inclusive education in its budget.

Of the policies mentioned, which ones have been implemented in your State?

Despite many pointing out the fact that policies exist but their implementation has been wanting, at least one informant appreciated the fact that in the previous government, policy on employment in government positions mandated that 15% of all positions were reserved for people with disability.

On the question, "*Which other policies should be introduced to support children with SEND*?"
In response to this question, one discussant had this to say,

> *"First and foremost, before thinking of other policies to be introduced to support the education of children with SEND, the government must be seen to support, and to enforce the implementation of the existing policies".*
>
> ***CEO-Somali Institute of Special Educational Needs and Disability (SISEND)***

Suggestions that were fronted in the various groups of respondents included policy on inclusivity of different sectors working together in the support of SENDs. Strongly recommended were the departments of health working with education and WASH in support of the social welfare of CWD and SENDs. The other recommendation was the suggestion that Somali Sign Language be given priority for its development for the sake of the hard of hearing and the deaf. Policies concerning the employment rights of people with disability would motivate parents of children living with disabilities to grow interested in enrolling CWD in school and maintaining their learning. However, the bottom line for the informants and discussants was that the existing policies were to be implemented.

Teachers views about disability-inclusive education

In Table 8 below, the 5-Likert scale was used to measure teachers' views about disability-inclusive education. They were asked to value their level of agreement for each of a set of statements on views about disability-inclusive education on five-step progressive levels of agreement with each statement on weightings of 5 = Strongly agree (SA), 4 = Agree (A), 3 = Not Sure (NS), 2 = Disagree (D), and 1 = Strongly disagree(SD) to Tick (√) as appropriate.

Table 8: Teachers views about disability-inclusive education

Statement	Coefficient[4]	Percent
1. Education in special schools is the best educational practice to educate pupils with special needs/disabilities.	4.91	98.2%
2. All pre-service teachers must have teaching practice/internship in an inclusive setting.	4.85	97.0%
3. Inclusive education will be beneficial to pupils with special needs/disabilities.	4.70	93.9%
4. Inclusive education is the best educational practice to educate pupils with special needs/disabilities.	4.55	90.9%
5. All teachers should be trained and prepared to teach all pupils with diverse learning needs/disabilities in an inclusive setting.	4.52	90.3%
6. Inclusive education will benefit pupils without special needs/disabilities.	4.45	89.1%
7. I am in favour of disability-inclusive education.	4.18	83.6%

An analytical view of Table 8 above, the highest coefficient measure of the teachers/head teachers' views about disability-inclusive education is that "Education in special schools is the ***best educational practice*** to educate pupils with special needs/disabilities, 4.91 (98.2%)". This is followed by, "All pre-service teachers must have teaching practice/internship in an inclusive setting, 4.85 (97.0%)", then, "Inclusive education will be beneficial to pupils with special needs/disabilities, 4.70 (93.9%)", and fourth rated is "Inclusive education is the best educational practice to educate pupils with special needs/disabilities, 4.55 (90.9%)", fifth, "All teachers should be trained and prepared to teach all pupils with diverse learning needs/disabilities in an inclusive setting, 4.52 (90.3%)", sixth, "Inclusive education will benefit pupils without special needs/disabilities, 4.45 (89.1%) and last, "I am in favour of disability-inclusive education, 4.18 (83.6%)".

[4] Procedure for calculating the coefficient measure on 5 Likert Scale is explained in Annex II b

Demonstrating 5-Likert Scale Analysis Procedure

Table 9: Procedure for calculating 5-Likert Scale Co-efficiency Measure

For each of the following statements, please indicate (SA = Strongly agree, A = Agree, NS = Not sure, D = Disagree, SD = Strongly disagree): Tick (√) as appropriate									
	5 Likert Scale Weighting								
Statement of Assessment [**N=33**]	**Strongly agree Rating = 5**	**Agree Rating = 4**	**Not Sure Rating = 3**	**Disagree Rating = 2**	**Strongly Disagree Rating = 1**	**Cumulative Weighting**	**Freq**	**Coefficient CW/Freq**	**Percent**
Education in special schools is the best educational practice to educate pupils with special needs/disabilities.	5*30=150	4*3=12	3*0=0	2*0=0	1*0=0	162	33	4.91	98.2%
All pre-service teachers must have teaching practice/internship in an inclusive setting.	5*28=140	4*5=20	3*0=0	2*0=0	01*0=0	160	33	4.85	97.0%
Inclusive education will be beneficial to pupils with special needs/disabilities.	5*27=135	4*5=20	3*0=0	2*0=0	1*0=0	155	33	4.70	93.9%
Inclusive education is the best educational practice to educate pupils with special needs/disabilities.	5*26=130	4*5=20	3*0=0	2*0=0	1*0=0	150	33	4.55	90.9%
All teachers should be trained and prepared to teach all pupils with diverse learning needs/disabilities in an inclusive setting.	5*25=125	4*6=24	3*0=0	2*0=0	1*0=0	149	33	4.52	90.3%
Inclusive education will benefit pupils without special needs/disabilities.	5*18=90	4*12=48	3*3=9	2*0=0	1*0=0	147	33	4.45	89.1%
I am in favour of disability-inclusive education.	5*22=110	4*7=28	3*0=0	2*0=0	1*0=0	138	33	4.18	83.6%

Calculating Coefficient Score on 5 Likert Scale

Cumulative Weighting = Rating * Count (Number of time a rating is selected)

$$\text{Coefficient} = \frac{\text{Cumulative Weighting}}{\text{Frequency [N = 33]}}$$

$$\text{Percentage} = \frac{\text{Coefficient} * 100}{5 \text{ [Maximum Rating on 5 Likert]}}$$

$$\text{Frequency} = \text{Number of Survey Participants}$$

B. TEACHER KNOWLEDGE

The researcher allowed teachers and head teachers to self-evaluate their knowledge of disability-inclusive education by asking them a set of questions for which they were required to respond with a YES or a, NO. Table 10 below comprises the analysed results of this self-evaluation.

Top on the list of best, self-evaluated abilities in the teachers' cumulative opinion is; meeting the needs of learners with physical disabilities, 21 (64%), followed by assessing, testing, or evaluating the learning of children with disabilities, 19 (58%), then, meeting the needs of learners with learning disabilities, 17 (52%).

Table 10: Teachers Self Evaluation of their knowledge of DIE

Do you have adequate knowledge of/in the following?	Yes		No	
1. Meeting the needs of learners with physical disabilities	21	64%	12	36%
2. Assessing, testing, or evaluating the learning of children with disabilities	19	58%	14	42%
3. Meeting the needs of learners with learning disabilities	17	52%	16	48%
4. Meeting the needs of learners seen as having behavioural difficulties	16	48%	17	52%
5. Using varied learning activities to engage a diverse range of learners	14	42%	19	58%
6. Meeting the needs of learners who are blind or have low vision	9	27%	24	73%
7. Meeting the needs of learners who are deaf or hard of hearing	9	27%	24	73%

Other areas of fair competence include meeting the needs of learners seen as having behavioural difficulties, 16 (48%) and using varied learning activities to engage a diverse range of learners, 14 (42%). The last evaluated in terms of their judgement of perceived competence are meeting the needs of learners who are blind or have low vision, 9 (27%) and meeting the needs of learners who are deaf or hard of hearing, 9 (27%). From the above self-evaluation, it can be inferred that most teachers interviewed using the teacher survey are challenged in the instruction of CWD who are blind or deaf. Similar to the preceding challenges, there is a need for EFASOM and partners to give priority to teacher training in whatever form as has been suggested by teachers in Table 8 recommending that, "All teachers should be trained

> *As I told you earlier our company is private and we mostly deal with children who are mentally challenged. When we hire teachers, we only target those who are specialised to teach and provide the requisite services for these children before we engage them. In addition, irrespective of their claimed expertise, we first provide them with initial quality training and continue to do so every three months (i.e. we in-service them four times every year). It is only after they go through such an orientation that we allow them to interact with the children.*
>
> ***Managing Director- Mustaqbal Centre for special needs***

and prepared to teach all pupils with diverse learning needs/disabilities in an inclusive setting. The importance of training teachers before engaging them to teach SEND was expressed by a Centre manager during a KII who had this to say concerning the professional skills and competence required of their teachers to effectively support SEND children in their programmes.

C. TEACHERS TRAINING

Part of the inquiry in the research undertaking was to establish the status of training in disability-inclusive education among the teachers and head teachers. Asked them, “Have you had any training in disability-inclusive education?” Out of the 33, the majority of respondents, 22 (67%) indicated that they had received training in disability-inclusive education. Another 11 (33%) responded with ‘NO’ demonstrating that they had not had the training.

The second part of the question targeted those who responded with a, ‘YES' and were given to choose between Pre-service and In-service training. The response was that, In-service trained teachers were, 18 (82%) and Pre-service teachers were 4 (18%). Further, the research question is to know the entity that provided the In-service training out of the options of 'Teacher Training Institute, NGO, and faith-based organization, other….' It so happens that all 18 were provided in-service training by NGOs.

The in-service trainings were conducted over a period of 1 week, 16 (73%) and 1 month, 6 (27%). Information on the content of their disability-inclusive education training, and responses to the question, "In which of the following did you receive some training?" the analysed responses are given in Table 11 below.

Table 11: Content of In-service training by type of disability

Responses	Frequency	Percentage
Students with an emotional and behavioural disorder	22	23%
Students who are deaf or hard of hearing	19	20%
Students with physical disabilities (mobility challenges)	17	18%
Students with vision problems (blind or low vision)	16	17%
Students with learning disabilities	8	8%
Students with autism	8	8%
Students with multiple disabilities	4	4%
Students with blindness	1	1%
Total	**95**	**100%**

The most noteworthy types of disabilities that the respondents specified to have benefitted in their in-service training are the top four that were reported most frequently, 74 (78%). They included the teaching students with an emotional and behavioural disorder, 22 (23%), followed by students who are deaf or hard of hearing, 19 (20%), then, students with physical disabilities, 17 (18%) and students with vision problems (blind or low vision), 16 (17%).

Teachers' view of the value of the training they went through

The teacher's/head teachers' views on the training in disability-inclusive education provided them were asked to establish if the training gave them adequate knowledge and skills to confidently teach specific areas listed below.

Question: In your view, has your training in disability-inclusive education provided you with adequate knowledge and skill to confidently teach the following? This question elicited the responses presented in Figure 6 below.

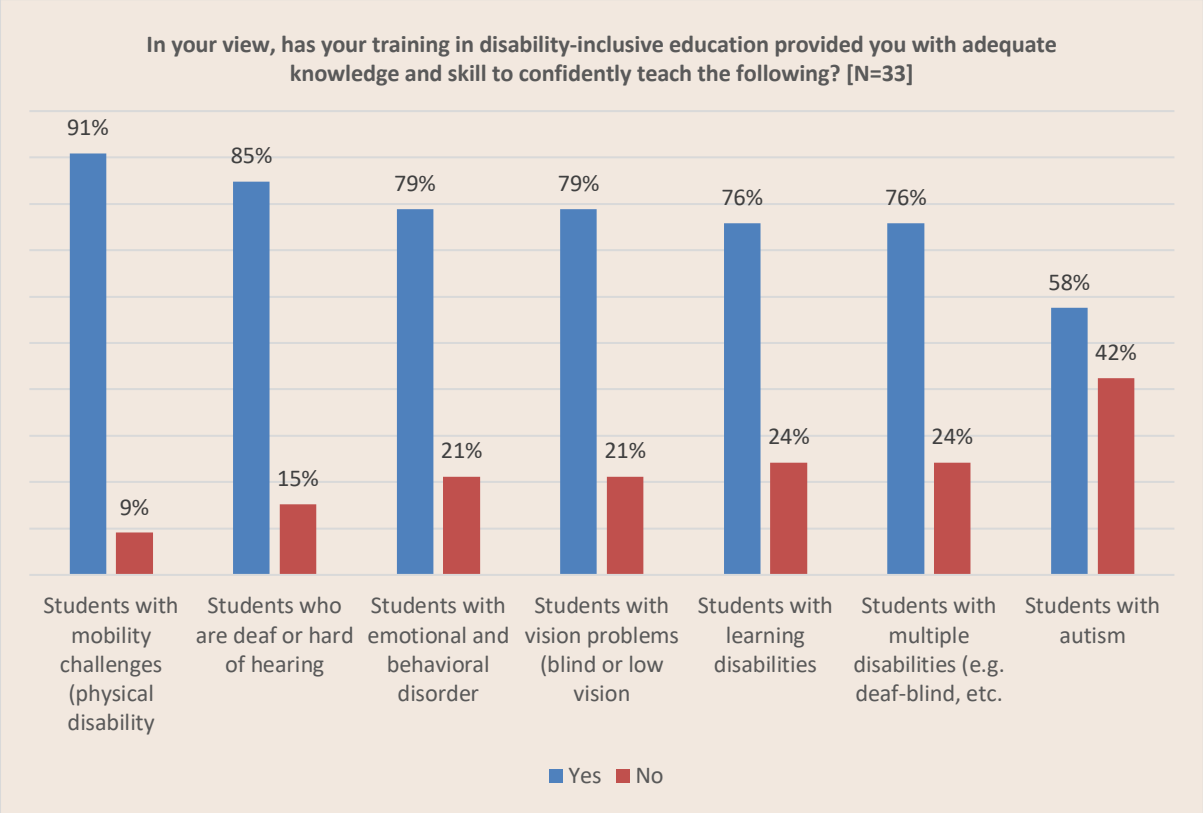


Figure 6: Adequacy of knowledge, skills and confidence to teach SEND with.

Apparently, from the reported gains teachers received out of the several in-service pieces of training, they have all reported an excellent gain in knowledge and skills except in handling students with autism condition. The gains in dealing with children suffering from autism was not only the least, 19 (58%) but bears a wider gap between the highest gain, 91% "those students with physical disability" (a deviation of 33%) compared to all others that bear deviations of between 3% and 6% from one to the other. The excellent areas of gained skills were reported as; Students with mobility challenges, 30 (91%) and Students who are deaf or hard of hearing, 28 (85%).

D. BOTTLENECKS

To assess the perceived bottleneck teacher experienced in delivering disability-inclusive education, the following question was asked, “As a teacher, which of the following difficulties/challenges do you face when delivering disability-inclusive lessons?” Table 12 below presents the results.

Table 12: Bottlenecks to implementing disability-inclusive education to SENDs

Response	Frequency	Percentage
The class size is too large for me to deliver disability-inclusive education in my classroom.	31	29%
Teaching-learning materials are insufficient for teaching	29	27%
Appropriate teaching/learning materials are not available	26	24%
The community does not support sending children with disabilities to school.	15	14%
The school does not have a conducive environment for disability-inclusive education	4	4%
The school infrastructure is not accessible for children with disabilities.	2	2%
Total	**107**	**100%**

Top on the list of difficulties/challenges teachers contend with in their daily chore of teaching CWD is led by, “The class size is too large for me to deliver disability-inclusive education in my classroom, 31 (29%)” followed by, “Teaching-learning materials are insufficient for teaching 29 (27%) and third on the list is, “Appropriate teaching/learning materials are not available, 26 (24%)”, and last, of significance is, “ The community does not support sending children with disabilities to school, 15 (14%). Indeed, by making cross reference (triangulating) with responses from that given by CWD attending regular schools, special schools and the Temporary learning centres (TLCs) also expressed the same concern in their response to a question on what they don’t like about their schools. In their case of CWD in regular schools, like in this of the teachers, the responses; ‘There are not enough seats in the classroom and there are too many students in my class, 21 (70.3%) had the highest frequency (figure 2, page 21 above) followed distantly by there is not enough light in the classroom, 12 (30.0%).

E. SOLUTIONS

The teachers were provided with choices of 8 possible solutions to pick from, which were relevant with their perception to provide solutions to the foregoing bottlenecks. Table 13 below presents the results. The question asked was, “Which of the following would help you to deliver disability-inclusive education successfully in your class/school?” [Select all appropriate options]

Table 13: Suggested solutions to Teacher Bottlenecks

Solution to the Teacher Bottlenecks		
Response	**Frequency**	**Percentage**
Teacher incentives	27	23%
Smaller class size (act on overcrowding in classrooms)	21	18%
Availability of correct teaching/learning materials	21	18%
Adequate teaching/learning materials	17	15%
Community engagement	16	14%
Disability-friendly environment	9	8%
Accessibility for children with disabilities	4	3%
More exposure to disability-inclusive education practice	0	0%
Total	**115**	**100%**

Once again, the top five perceived solutions to the effective delivery of lessons as suggested by the teachers coincide well with solutions CWD proposed to be done to improve their school, which included among other things; smaller classes (avoid overcrowding in classrooms), providing teaching/learning materials and training for their teachers.

Discussion

According to the IIEP-UNESCO (2021)[5], inclusive education can only work if teachers are prepared to teach in inclusive settings. That is to say that, "Teachers are at the centre of implementing any Disability-Inclusive Education". Notwithstanding the foregoing statement, in this study all the Key Informant Interviewees and all the participants in the Focused Group Discussion adamantly declared that there was none formal system of regular inclusive schools that enroll children with disabilities. In fact, the FGD group equated the thought of it to a dream.

In the KII/FGD opinions, apart from the physically challenged CWD who can easily be accommodated in the regular schools, the other categories of CWDs will still have to attend the special schools. The in-depth interviews and discussion groups support the idea of educating CWDs in special schools (SS) because children are better protected and well cared for. The benefits they enjoy in SSs were stated that they:

- face no discrimination from non-disability students,
- get services tailored to them according to their conditions,
- are taught by SEND trained teachers and,
- Become a community that understand and support each other.

Going by the research findings, special schools are still the appealing form of learning for CWD in Somalia. Moreover, the number (2287) of CWDs enrolled in the 28 schools surveyed, 2106 (92%) were in Special Schools compared to only 48 (2%) that were enrolled in regular schools. In addition, analysis conducted in this study, "Types of Schools parents of CWD OOS, parents of CWD in Regular Schools and Teachers, all prefer that children with disabilities be taken to Special schools – (Figure 9, page 35 below").

[5] Education Sector Analysis Methodological Guidelines Volume III, page 313

Throughout this chapter teachers have attempted to demonstrate extensively their knowledge of Disability-Inclusive Education (DIE), the content of their In-service trainings and classroom practice in the same. However, by triangulating this information with that of the key informants, focused group discussions, students' voices and even teachers themselves, doubts are cast on their competence to handle DIE effectively. For example, given 8 options to select from to suggest solutions to the bottlenecks they contend with in their profession, majority selected, "Teacher incentives", 27 (23%) and the professionally enhancing suggestion of, "Gaining more exposure to disability-inclusive education practice, 0 (0%).

Moreover, top on the list the KIIs and the FGDs suggestion of the main hindrance to CWDs accessing the regular schools is because the schools cannot handle DIE for the reasons that they lack qualified teachers to teach CWDs, secondly, they lack support staff that can provide extra support to SEND, the schools lack learning materials for example like the Braille that could allow the blind to learn, hearing aid for the hard of hearing etc. Other areas mentioned include the infrastructure of the schools not suitable to accommodate CWDs who need adaptive infrastructure e.g., tailored and safe roads for those who use wheelchairs, and safety concerns; risks of being ill-treated; bullied, insulted, ridiculed and at worst physically by other students, discrimination from the community, and low school acceptance of CWD due to fear of being stigmatized or shamed.

3.3 Objective Three Findings

To determine the main demand-side barriers to OOSC disabilities accessing inclusive education, and existing measures to overcome them.

Research Question: What are the major barriers to parents of disabled, out-of-school children that influence their decision not to take them to school?

The Research component on the barriers influencing the decision not to take children with disability to school was conducted to document the:

- Knowledge of children's rights and rights of CWDs to education; ability to learn, perception of schools to provide inclusive education services, Safety of CWDs at school and the perception of mixing CWD and Cw/oD in inclusive education,
- Supply-side issues: Constraints (economic, social, environmental), Attitudes (self, community), and
- Fears held by parents (school environment, support systems & safety/security)

A. BACKGROUND

Educational Background

Using the household questionnaire for parents of children with disabilities out of school, the research team reached a total of 70 (64 female) respondents in 10 districts. The respondents reported their education status thus; 53 (76%) never attended any education, 8 (11%) had some technical/vocational training, 5 (7%) had primary school education and 4 (6%) had some secondary education.

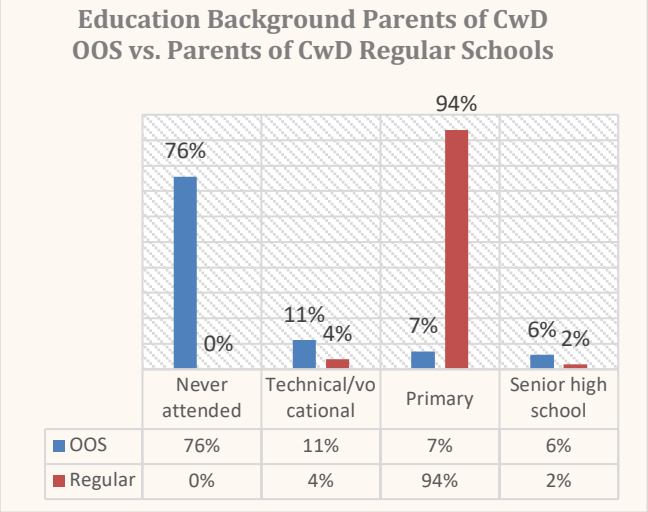


Figure 7: Education Background CWD OOS vs. CWD in Schools Parents

In attempt to establish some of the factors contributing to influence decision of parents of CWD OOS not to take them to school, we compare their education background with that of parents of CWD attending regular schools, Figure 7 below.

From the figure, it is observed that, the majority of parents of children with disability who are out of school, never attended school (76%) themselves. Compared with the parents of children with disability who are attending regular schools, majority of them attended school up to primary education (94%). It would appear to suggest a correlation between illiteracy levels of a parent (not having attended any schooling) to not taking one's child with disability to school, and vice versa for a parent with primary level of education. Although not rigorously tested for statistical correlation, the two extremes; 'never attended school (76%)' and attended school up to primary education (94%) is indicative enough.

Indeed, the findings above demonstrating that lack of education has the repercussion that CWD don't attend school is equally mentioned by the FGD groups. The discussants listed one of the factors hindering children with disabilities from attending school as being that of uneducated parents; who as a result might also bear the negative beliefs that children with SEND cannot learn, and even lack the awareness that special schools exist.

Number of School-age (6- 17 yrs.) children in the Households

Table 14: Children in Households by Sex, Disability and % get Disability

All Children Surveyed in Households by Sex, Disability and %get Disability [N = 701]			
Sex	All Children	With Disability	% Disability
Boys	383	83	11.4%
Girls	318	50	7.6%

Together all the households surveyed had a total of 701 (318 girls) children of which 133 (50 girls) lived with a disability. The occurrence of disability within the HHs surveyed was 19% (7.6% girls). These research findings are fairly accurate taking into consideration that they data was collected in similar environment like the CCCM managed sites, where according to the humanitarian needs overview report[6]– February 2023 estimates that one out of five (20%)

[6] https://reliefweb.int/report/somalia/somalia-humanitarian-needs-overview-2023-february-2023; page 31

newly displaced people has some form of disability. The report further quotes results of the survey involving 2,140 respondents around Kismayu indicate that 20 per cent [7]are persons with disabilities. Their global prevalence of PWD in Somalia is placed at 15% by the same report.

Children with Disability Accessing Schools (*Do all children with disability go to school?*)

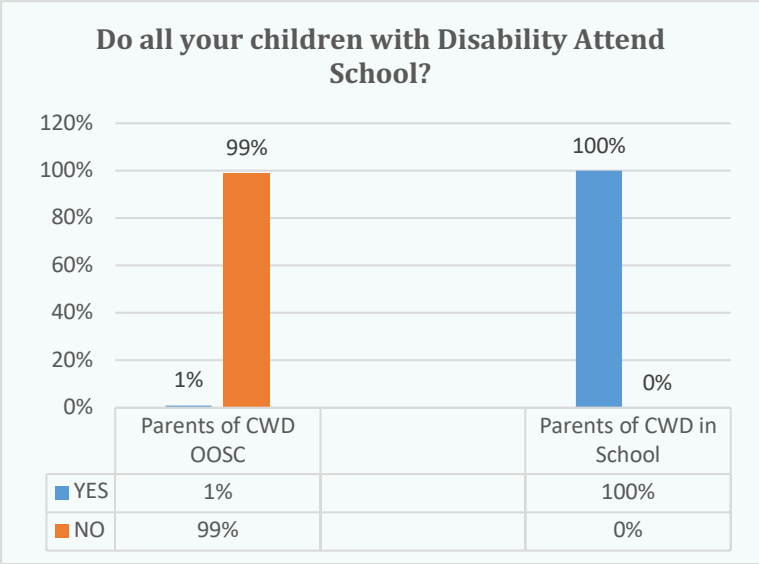


Figure 8: Parents of CWD OOSC vs. Parents of CWD in School

Only 1% of parents of OOSC reported that their children with disability attended school and 99% of the children were at home not attending any school. On the other hand, parents of children with disability attending regular and special schools had all (100%) of their disabled children enrolled in school. Incidentally, the parents reporting the 99% non-attendance, were themselves illiterate having, "Never attended" school.

Reasons for not taking Children with Disability to school

Top on their reasons for not taking CWD to school (Table 15 below) is the fact that the children have a disability, 65 (29.1%) followed by Illness, 50 (22.4%) and poor quality of school/ education, 39 (17.5%), No money for fees/uniforms/books, 38 (17.0%) and schools being unsafe, 27 (12.1%).

Table 15: Reasons Parents of CWD OOSC Give for NOT taking them to School

If not attending, why? (Choose all that apply)	Frequency	Per cent
1. Disability	65	29.1%
2. Illness	50	22.4%
3. Poor quality of school/education	39	17.5%
4. No money for fees/uniforms/books	38	17.0%
5. Schools unsafe	27	12.1%

The cause of disability that hinders OOSC from attending school, Table 16 were listed as: Legs Impairment, 19 (22.6%), followed by Paralysis, 13 (15.5%), Leg and Arm disability, 11 (13.1%), Blindness, 10 (11.9%) and Mental Disability, 9 (10.7%). The others less mentioned were; Deaf, 8 (9.5%), Autism, 7 (8.3%), Leg and back disability, 4 (4.8%), Seizures, 2 (2.4%) and least mentioned is a condition referred to as Deaf, 1 (1.2%).

[7] Page 28

Table 16: Types of Disabilities Explaining Why OOSCs Don't Attend School

Type of Disability	Number	Per cent
1. Legs Impairment	19	22.6%
2. Paralysis	13	15.5%
3. Leg and Arm disability	11	13.1%
4. Blindness	10	11.9%
5. Mental Disability	9	10.7%
6. Deaf	9	10.7%
7. Autism	7	8.3%
8. "Leg and back disability"	4	4.8%
9. Seizures	2	2.4%
	84	**100.00%**

Leg related disabilities were the most frequently, 34 (40.5%) mentioned by parents of CWD OOS ranging from "leg Impairment ", "leg and Arm disability" and "leg and back disability".

Apart from the disabilities and illnesses mentioned by parents of CWD OOS, the FGD groups contributing to factors that hinder CWD OOS from accessing school were listed as:

- Special schools are too far away from home and the inability of regular schools to cater for CWDs,
- Economic and financial barriers,
- Low level of community awareness on disability issues,
- Lack of supportive system and facilities to encourage access to schools (e.g., transport infrastructure and qualified teachers),
- Discrimination,
- Lack of enforcement of existing national policy that gives children with SEND their universal disability rights, and
- The lack of special orientation for children with SEND in schools.

Schooling Preference for CWDs OOSC by Parents

Given the choice of 3 types of schools, the parents of CWD OOS were asked, "*Which of the following schools would you like your child with a disability to attend?"* In response, they indicated preference to take them to Special schools for children with disabilities (60%), followed by Special classrooms in regular schools (Mainstreaming – 29%) and Regular classroom in a regular school (Inclusion – 11%). In the figure 9 below, comparison of preference for types of schools has been made for parents of CWD whose children are attending school and the preference of teachers according to their view of disability-inclusive education.

Types of Schools Parents of CwD OOS, CwD in Regular Schools and Teachers prefer

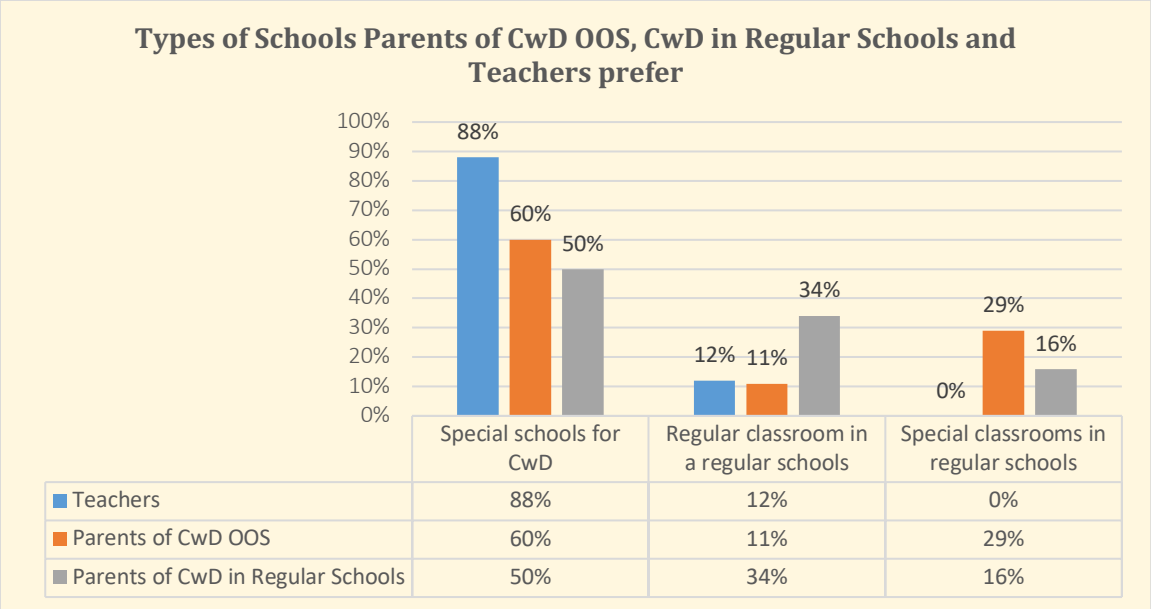


Figure 9: Types of Schools Parents of CWD OOS, CWD in Regular Schools and Teachers prefer

Teachers, 88% preferred Special schools for children with disabilities, and parents of CWD in regular schools, 50% preferred the same. On preference rating of individual types of schools, it would appear that special schools, inclusive schools and mainstream schools have 66%, 19%, and 15% ratings respectively.

Conclusion

From the survey, it is clear that the most preferred mode of educating children with disability in the areas around Mogadishu remains the old approaches, that of Special schools. The teachers seem to see it as the best approach, so do parents whose children are out of school, and to an extent those whose children with disability are attending school.

Leg related disabilities are the most prevalent form of disabilities among OOSC. Reported in this section, leg related disabilities were the most frequently, 34 (40.5%) mentioned by the household respondents of CWD OOS ranging from "leg Impairment ", "leg and Arm disability " and "leg and back disability".

Recommendation

Taking into consideration that most disabilities are leg related, there is need for further, and in-depth research to attempt to establish the "Cause and effect" of this occurrence. We may here speculate to reports in some literature[8] that the high of occurrences of IEDs in urban areas are the leading cause of mass casualties whose accidents often result in extensive injuries and multiple fractures which can lead to amputation and subsequent disability.

[8] Somalia Humanitarian Needs Overview 2023 (February 2023), page 93

If the education system has to embrace the use of disability-inclusive education in regular schools, parents need to be educated in the value of CWD attending school. The evidence that parents with some level of education (primary education) all, 100% took their children with disability to school while those who never went to school did not.

B. KNOWLEDGE

"Are you aware every child (with or without disability) has the right to education in Somalia?"

Part of the research assignment entailed testing of the knowledge of the duty bearers of OOSC on children's rights *(with or without disability)* and rights to education. The findings from the HH Survey on this question are presented in Figure 10 below.

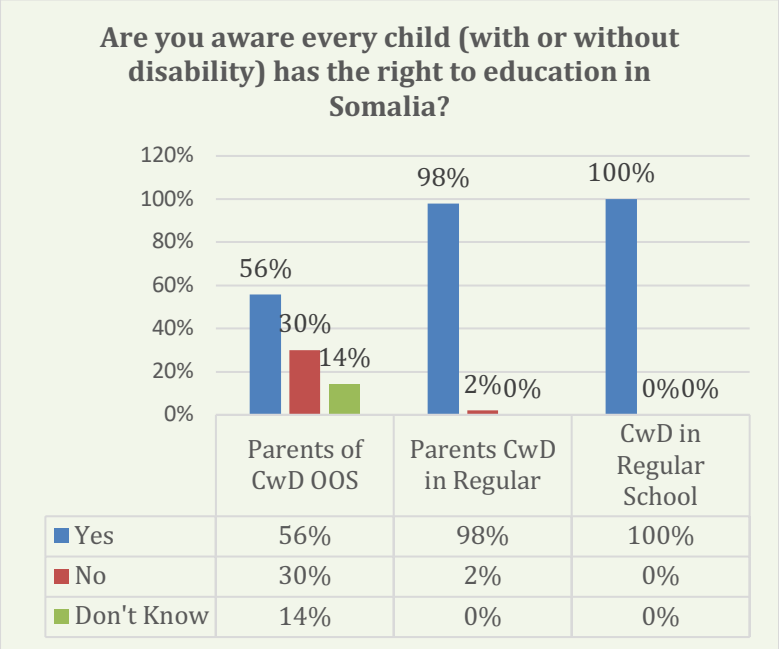


Figure 10: Awareness of Rights of all Children to Education

The level of awareness of the parents of CWD OOS on the rights of children to education (with or without disability) was Yes, 39 (55.7%), No, 21 (30%) and 'Don't Know', 10 (14.3%). Comparing these results with that of parents of CWD in regular schools and that of children with disabilities in regular and special schools, the differences in levels of awareness is great. Among the parents of CWD in regular schools, only 2% reported not being aware of those rights while 98% of them were aware. Children with disability in schools were 100% aware of the rights of children to education (with or without disability).

Benefits of Attending School for Children with Disability

The perception of parents of CWD out of school on whether there are benefits of taking their children with disabilities to school, a good number, 49 (70%) responded affirmatively with a "YES". The greater number of these parents believe that children with disability will benefit from attending school. This said, (27.1%) responding with a, "NO"; apparently holding on to the attitude that children with disability are good for nothing and therefore cannot benefit from attending school. Two (2.9%) responded with, 'Don't Know'.

Comparing the preceding perceptions of parents of CWD OOS with that of the parents of CWD in regular schools, figure 11. Parents of children in regular schools believed 100% that children with disability will benefit from attending school.

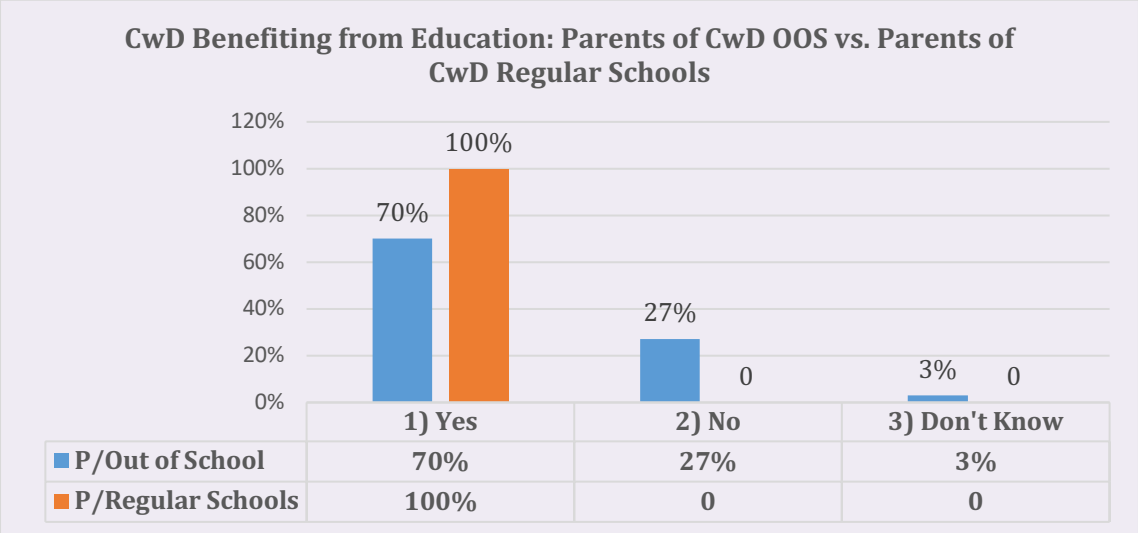


Figure 11: Do you think children with disabilities will benefit from attending school?

For their belief that by attending school the CWD would benefit, they were further probed to explain how the CWD would benefit. This question generated responses demonstrating diverse views of the parents expressing their opinion of how the CWDs would benefit from attending school.

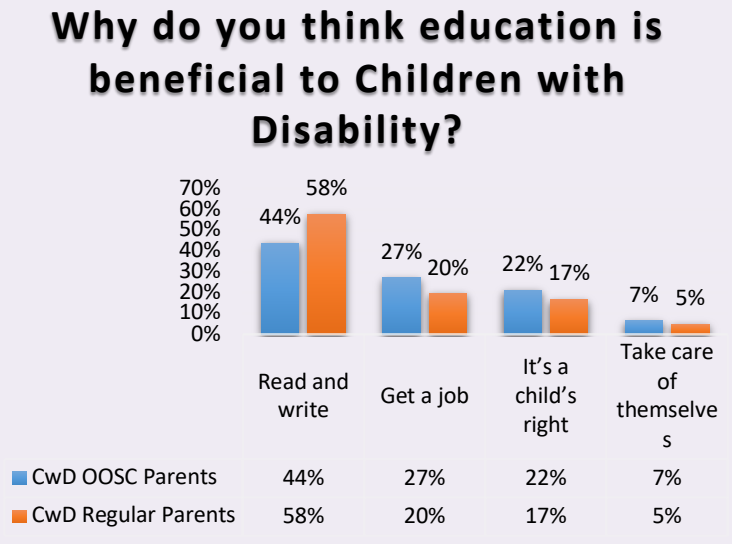


Figure 12: How would CWD benefit by attending school?

Starting with parents of CWD OOS, the greater number, 45 (44%) suggested that by going to school, they would know how to read and write. Another, 28 (27%) proposed that by going to school, the children would be able get a job, and yet, 22 (22%) thought that it is the right of CWD to attend school. The least suggested, 7 (7%) was that, by attending school they will be able to care for themselves in the future.

In comparing with the opinions of parents of CWD in regular schools, theirs was more or less the same except in the suggestion that gaining numeracy and literacy, the later, had more of the parents 58% suggesting so.

Discussion

Since education is generally believed to empower one socially and economically, apart from its ability to emancipate an individual, the greater suggestion of both cadre of parents that going to school CWD will be able to know how to read and write, 94 (51%) on the cumulative scale is unfair.

It must be emphasised that lack of adequate education is one of the factors contributing to poverty and exclusion for children with and without disabilities. Children with disabilities however face higher risks of long-term and life-long poverty due to exclusion from education. When a child goes to school, his/her chances of gaining employment and being able to care for himself increases. This is what was expected of both cadre of parents to suggest as key benefit of CWD attending school instead of knowing how to read and write. Secondly, through education, children with disabilities can be contributors and not only burdens on society. Providing quality inclusive education in the long term can reduce dependency on their families and community thereby promoting their potential economic capacity as well.

Moreover, on the social front, letting children with and without disabilities to learn together in an inclusive system, they develop meaningful relationships which raises their confidence in their ability to interrelate with one another and with their immediate communities and beyond. In addition, inclusive education makes all children realize that they are part of a community and that they can contribute to it in their own way. Therefore, it helps to build a more inclusive, tolerant and respectful society.

Local System Capacity to Implement DIE and Parental Attitude towards Educating CWD

The knowledge of OOSC's parents of the local system's capacity to implement inclusive education in the regular schools, and parents' attitude towards the education of CWDs was assessed using the root question, "*Do you agree with the following statements*?" followed by a set of five statements presented in Table 17 below. The first two questions assess the local capacity to implement disability-inclusive education while the last three questions, 3, 4 and 5 assess parental attitude towards the use of inclusive education for CWD in the regular schools and providing education for CWDs.

Table 17: Assessing Local Systems Capacity and Attitude of OOSC's Parents

Do you agree with the following statements?			
Response: [N = 70]	**YES**	**NO**	**Per cent Yes**
1. Schools cannot meet the needs of children with disabilities	55	15	78.6%
2. Children with disabilities would not be safe at school	51	19	72.9%
3. It would be bad to mix children with and without disabilities	15	55	21.4%
4. Children with disabilities do not need to be educated	4	66	5.7%
5. Children with disabilities are not able to learn	4	66	5.7%

Schools cannot meet the needs of children with disabilities.

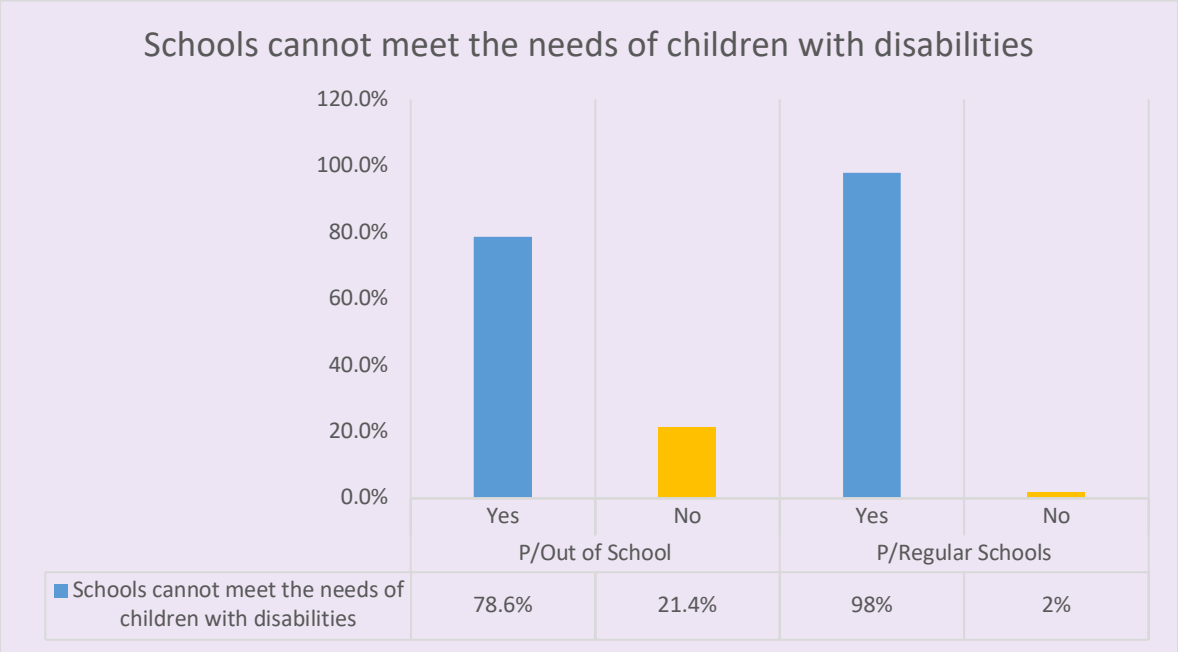


Figure 13: Can schools meet the needs of CWDs?

The responses given by the parents of OOS children with disability on whether they agree that schools cannot meet the needs of CWDs was 78.6%, yes. Compared with parents of CWDs in regular schools, the latter's, yes was 98%. Since they are the ones with experience of the schools by the fact that their children attend school, their response casts big doubt on the level of preparedness of the regular schools to provide disability-inclusive education. The inability of regular schools to provide inclusive education was equally sounded by the KII and FGD participants who even declared that DIE is still a dream. In policy papers the government has stipulated the context of DIE but lacks the implementation plan and action.

Discussion:

It is possible that parents are aware of the ill-preparedness of the schools to implement DIE as well as the lack of trained teachers with knowledge and skills to confidently teach CWDs with such diverse types of disabilities. It can also be remembered that every parents when asked about the kind of schools they would prefer their children with disability to attend school (also in Figure 9 page 35) preferred the "Special schools for CWD" (60%) than the "Mainstream schools (29%) and least, the Inclusive regular schools (11%).

Children with disabilities would not be safe at school

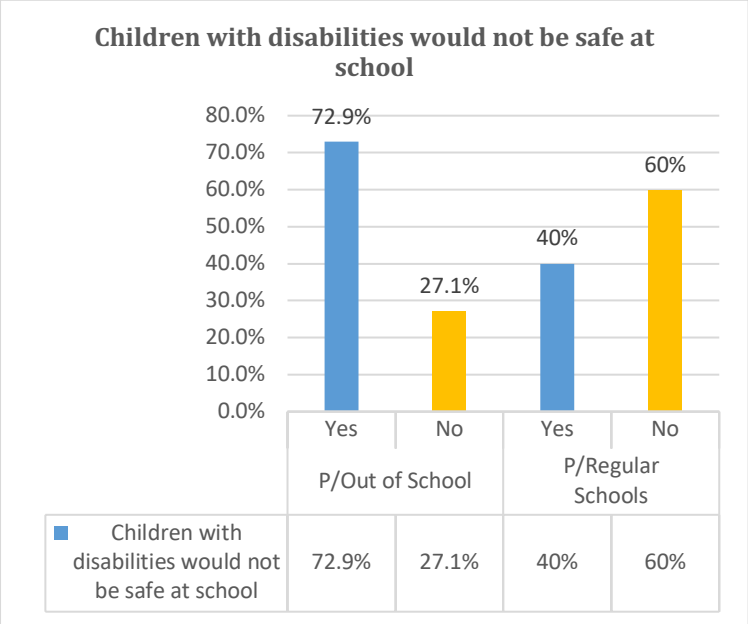


Figure 14: CWDs are not safe in school

The responses given by the parents on whether they agree (YES) or disagree (NO) with the statement that CWD would not be safe in school elicited among parents of CWD OOS 27.1% 'No' compared to parents of CWD attending school with, 60% 'No'. The greater 'No" depicting higher level of disagreement with the statement; meaning that their children who attend school are safe. They have that experience because their children with disability attend school. The parents of CWD OOS maybe keeping back their children from attending school due to such fears of safety of their children with disability. Again, it would be safe; according to available literature to assume that the schools are not ready/prepared to implement disability-inclusive education. The "risk" associated with inclusive education when implemented without the enabling environment and appropriate service delivery, and placing children with and without disabilities in the same classroom may result in uncalled-for conflict.

It would be bad to mix children with and without disabilities

The responses given by the parents of CWD, OOS were less on the 'Yes' 21.4% than responses given by parents of CWD in regular schools, 40%. This means that the latter is less in favour of mixing children with disability and those without. Is it possible that some of them could have experienced those negative acts of ill-treatment; bullied, insulted, ridiculed and possibly physically attacked in school by other children? It is also possible that the parent of CWD OOS has never allowed her/his child to go to school and therefore may not have the experience, positive or negative of mixing children with and without disability.

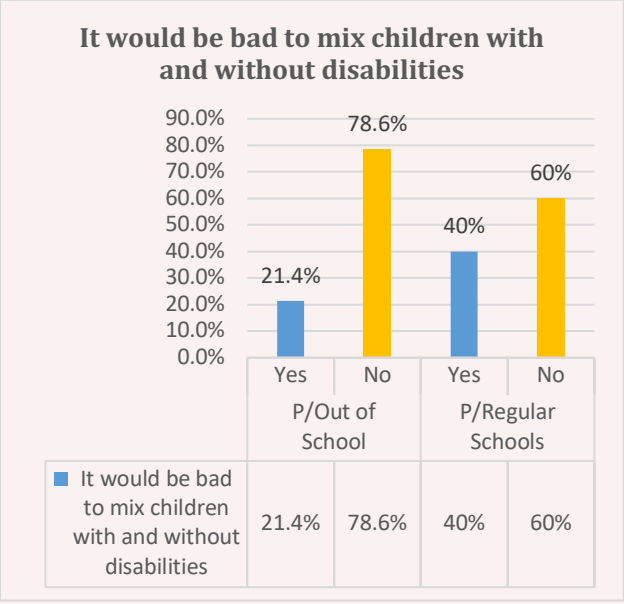


Figure 15: Mixing children with and without disabilities

The misconception that children with disability are not able to learn

Only few 5.7% of parents of CWD OOS hold to the misconception that children with disability are not able to learn. The rest of the parents 94.3% are aware that all children can learn. Comparing this category of parents with those of CWDs in regular schools, all 100% know that all children including their own with disability are able to learn. The misconception is censured by the voice of children with disability attending regular schools who expressed 65% in a survey that they enjoy learning more than liking teachers, 30% and like playing with friends 5%.

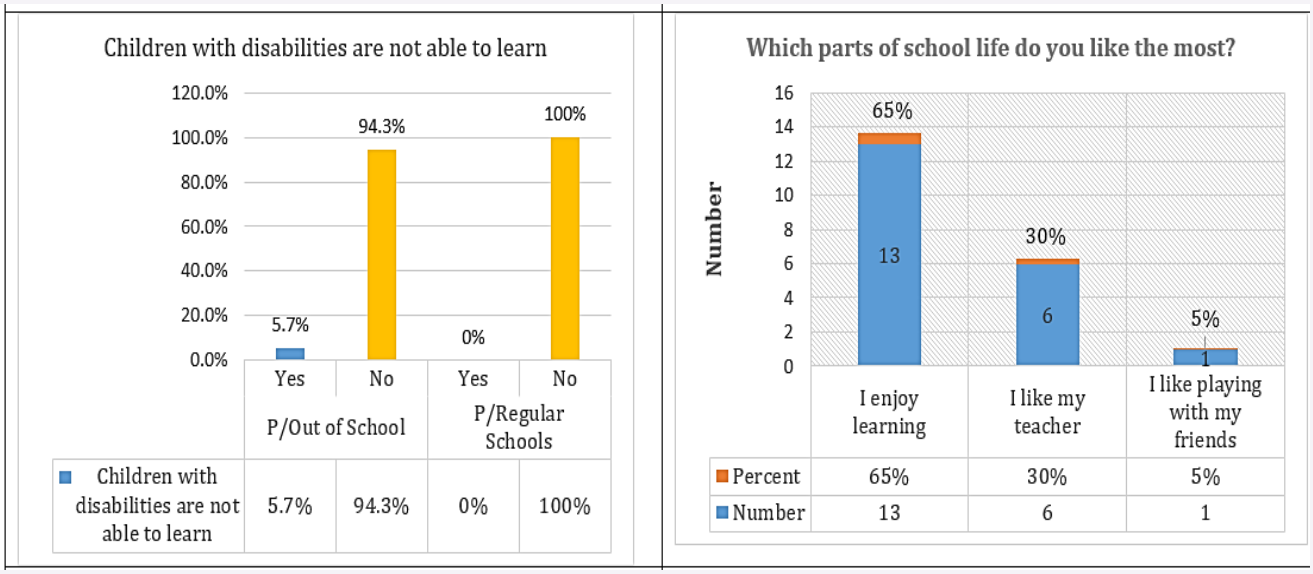


Figure 16: Misconception that CWD are not able to learn vs. Voice of CWD in school

C SUPPLY-SIDE ISSUES

If your child with disabilities was attending school, would she/he need help to get to school? /Does your child need help to get to school?

The supply-side issues that can encourage parents of OOS CWD to enroll them in a disability-inclusive education system are discussed. Some of the issues and factors affecting school enrolment and attendance were contextualized in the HH Surveys with the parents, and included; the kind of help/support required for the child to access school, type of disability, age of the child, distance to school, the time it takes for the child to get to school, safety issues on the way and in school and availability of relevant services for effective learning of SEND. These and many more are discussed in the paragraphs that follow.

CWD Need Help to Get to School: Parents of CWD OOS vs. Parents of CWD Regular Schools [N = 120]

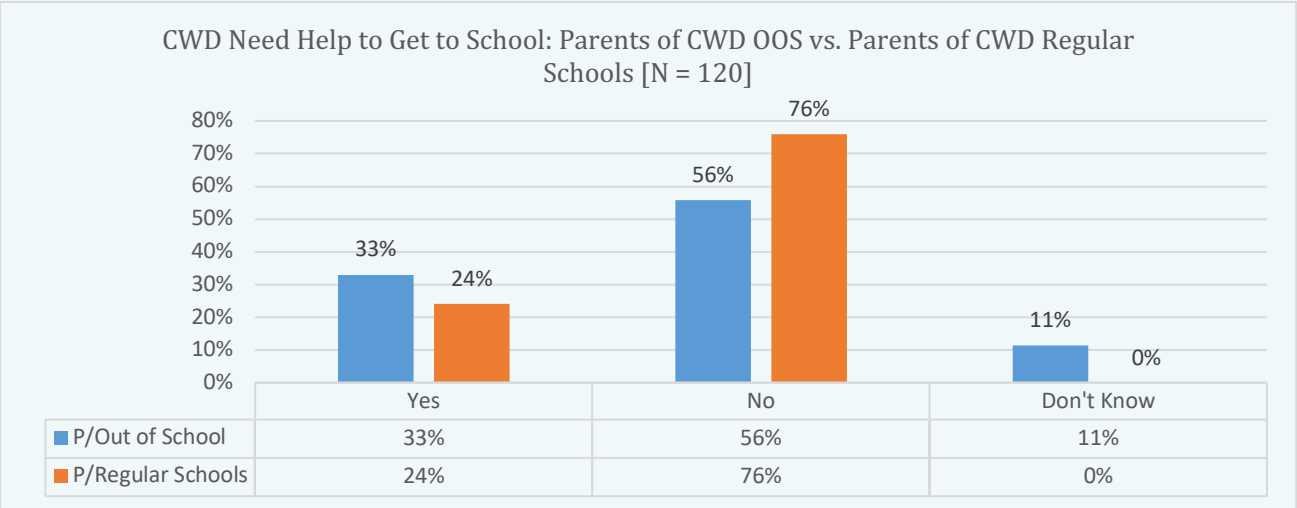


Figure 17: Would your CWD need help to get to school?

Out of the 120 respondents who were asked if their CWD needed help to get to school, 56% of the parents of OOS indicated they didn't need help to get their children to school.
In comparison, those with children attending school specified up to 76% of parents that they don't need help to get their children to school. Those who said yes, that they needed help to get children to school were 33% of the OOS children and 24% of the parents of CWD in regular schools.

The few parents who point out that their children would need help to go to school were further asked to give reasons they thought so. On the survey questionnaire, they were allowed to choose from three fixed responses as many as they thought applied to their situations.

Why CWD need help to get to School: Parents of CWD OOS vs. Parents of CWD Regular Schools

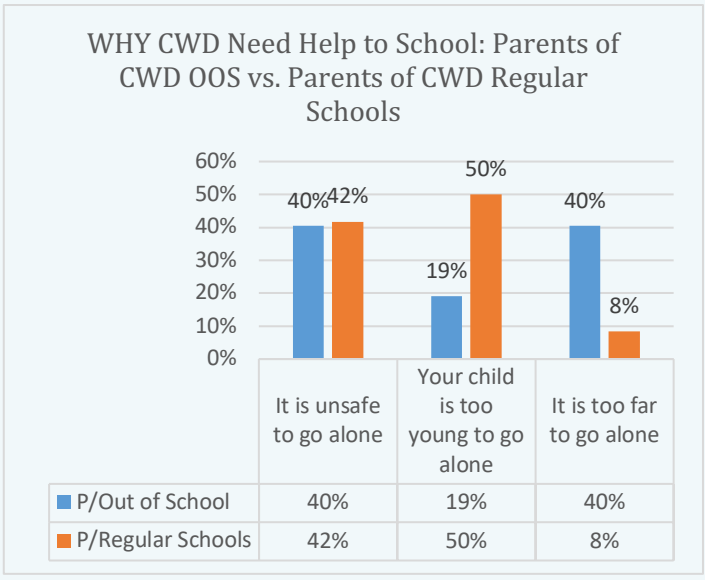


Figure 18: Why CWD need help to get to School

From the parents of CWD OOS, 40% stated that it was unsafe for the children to go to school alone compared with 42% of the parents of CWD attending regular schools. The next response was that of, 'the child is too young to go to school alone' specified by 50% of parents of CWD attending school against only 19% reporting the same. Lastly, the option of 'school is too far to go alone' had the majority 40% of parents of CWD OOS and only 8% of the parents of CWD children attending regular schools.

The fact that the reasons given OOSC being out of school because of distance, safety and age led us to enquire about the time it would take for the child to access the school from home. Table 18 below presents the responses.

Table 18: Time it would usually take for CWD to get to school

How long would it usually take your child to get to school? [N = 70]		
Responses	**Frequency**	**Per cent**
Don't Know	33	47.1%
Less than 30 minutes	31	44.3%
30-60 minutes	6	8.6%
	70	**100.0%**

The parents of OOS CWDs while responding to the question of distance it would take a CWD to get to school shows that those who "Don't Know", 33 (47.1%) were the majority, followed by “Less than 30 minutes”, 31 (44.35), and lastly, those who felt that getting a CWD to school require “30-60 minutes”.

Do you feel the teachers would be willing to support your child with disabilities to learn in school?

This question assessed parents’ perception of teachers’ ability to support children with disability in the system as it is at the time of research. Responses given by the 120 subjects in the households are presented in the Figure 19 below.

Teachers’ willingness to support CWD: Parents of CWD OOS vs. Parents of CWD Regular Schools

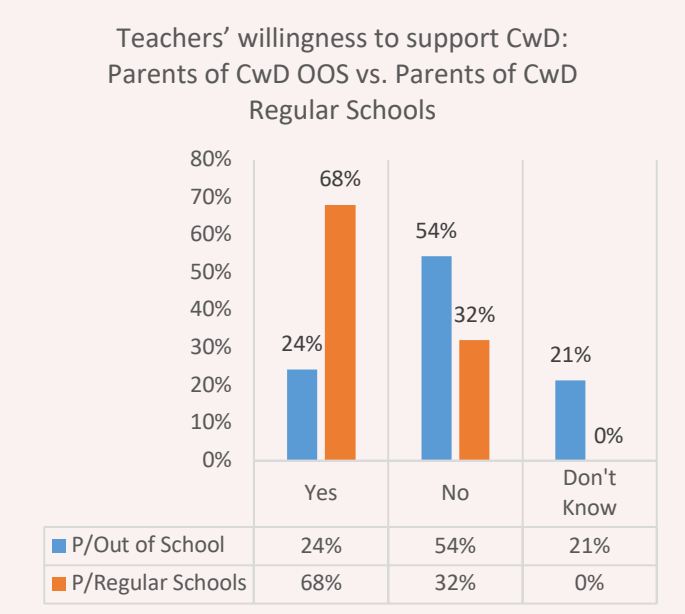


Figure 19: Teachers’ willingness to support CWDs

Out of the 120 parents of CWDs OOS and CWD in regular schools, the majority 54% of OOS responded with "NO", meaning they don’t perceive teachers as willing to support their children with disability. On the other hand, parents of CWDs in regular schools had the majority 68% responding with ‘Yes’, meaning they conceive teachers as willing to support their children with disabilities.

Apparently, the parents of OOSC don’t seem to have as much trust of the teachers’ ability to take care of children with disability. No wonder their

children are out of school. Some of the same category of parents 21% responded with 'Don't Know' demonstrating lack of awareness of the roles teachers can undertake with CWDs.

Are the schools fit to offer substantive services to CWD?

To answer this question, the researchers' asked the question, "Do you feel the schools have special services or assistance (speech therapist, support worker, sign language interpretation, etc.) that your child needs to attend school?

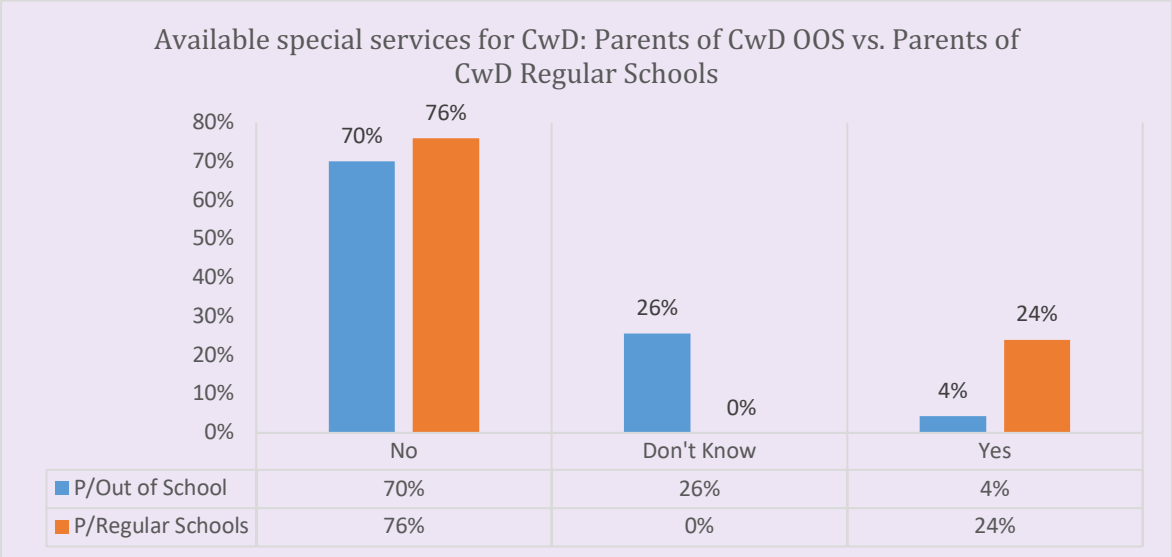


Figure 20: Schools have Special Services Needed by CWD to Attend School

The results of replies subjects of the research gave are presented in figure 20.

The 'No', implying the absence of CWD requisite services dominated the responses with the highest 'No" coming from parents of CWD in regular schools, 76% and from parents of CWD OOS, 70%. This result also can portray an expression of a lack of confidence or trust in schools' ability to offer the necessary services for the CWD to attend school.

Additionally, while 26% of the parents of OOS returned 'Don't Know' response, 24% of parents of CWD in regular schools returned a 'Yes' in acceptance that the schools have services like speech therapists, support workers, sign language interpretation, etc. Whereas the possibilities of presence of sign language interpretation maybe present, it could be the 'American Sign Language (ASL)" or any other because Somali sign language does not exist. In fact, the development of Somali Sign Language was one of the major concerns of the subjects of KII and of the FGD.

Availability of Assistive Devices

Do you feel the school has the assistive devices/ technology (Braille textbook, hearing aid, wheelchair, etc.) to support your child's learning at school?

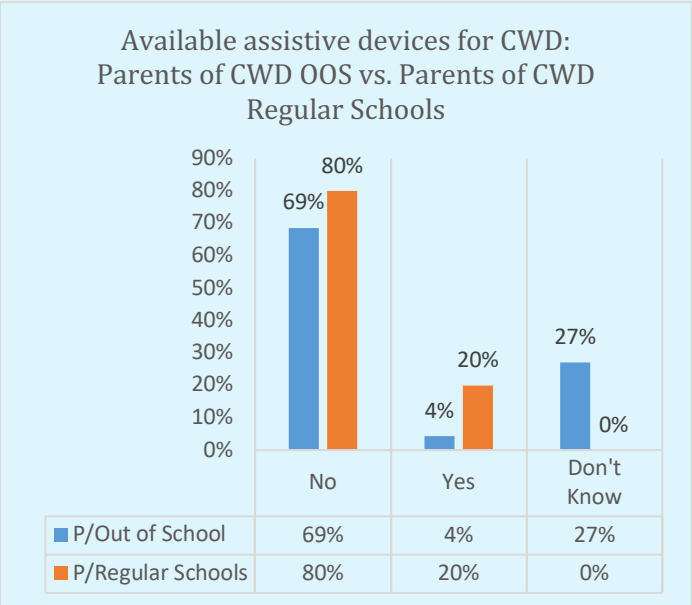


Figure 21: Schools have Assistive devices for CWD to Attend School

Like the immediate former responses of parents on perceptions of existing services in schools, likewise, perceptions of schools having assistive devices/technology like Braille textbooks, hearing aid, wheelchair, etc. elicited the same responses. Of those parents responding with, "NO", 80% of the parents of CWD in regular schools and 69% of parents of CWD OOS. The only, 'Yes' has been returned by 20% of parents of CWDs in regular schools.

Largely, the regular schools do not have the assistive devices/ technology (Braille textbook, hearing aid, wheelchair, etc.) to support your child's learning at school?

Is it safe for your child to be at school?

As mentioned in the literature review above, in some cases, schools can hold quite unsafe environments for vulnerable children, children with disabilities, classmates, and even teachers. Therefore, taking into account these risks, it was important to ask the same parents of CWD their perceptions on the safety of children with disability in school.

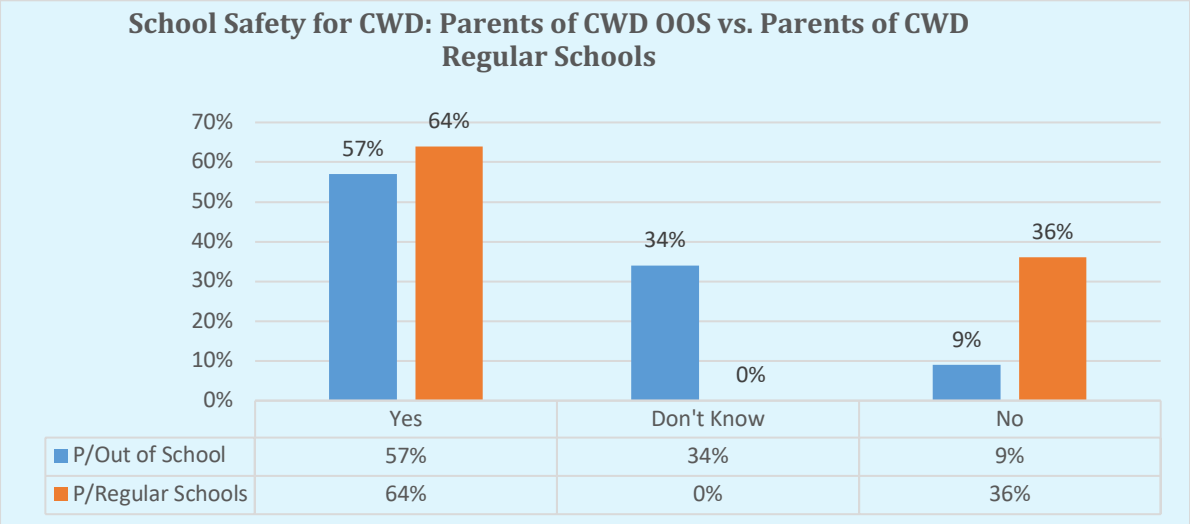


Figure 22: Perception of school safety of parents of CWD OOS and in Regular Schools

A good proportion parents 64% of parents of CWD attending regular schools and 57% of parents of CWDs OOS reported that their children were safe in schools. 34% of parents of CWD OOS returned 'Don't Know' for not being sure whether their children were safe in school or not. 9% of parents of CWD OOS and 36% of parents of CWD attending regular

schools respectively reported that their children with disability were not safe to be in school.

Reason for feeling your child is not safe in school

Of the few, 9% Parents of OOS and 36% of CWD attending regular schools who felt that their children would not be safe in school were asked to give reasons by selecting from six fixed responses (No toilets/urinals, no safe drinking water, bullying, no ramps, corporal punishment, long distance to/from school, and other) for as many as applied in their situation. Their responses are presented in the figure 23 below.

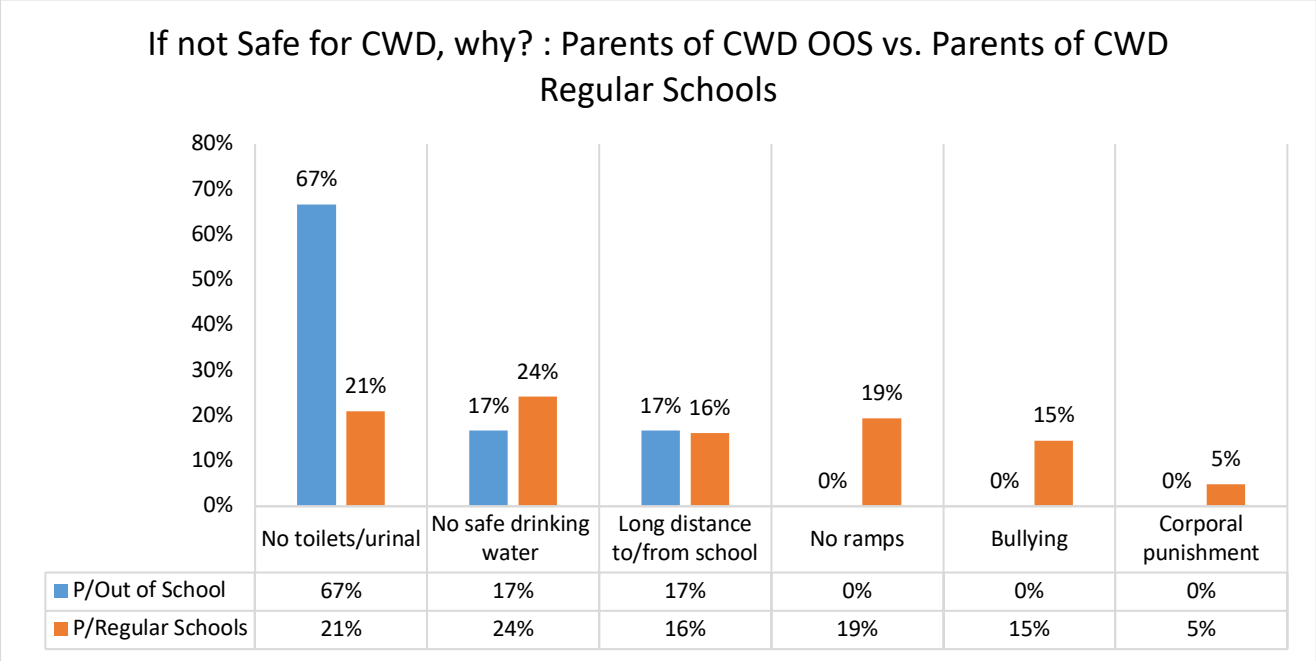


Figure 23: Reason for feeling your child is not safe in school

Lack of toilets, 4 (44%) and long distance to/from school 3 (33%) dominated the fears and concerns of the 6 parents who felt that their children with a disability would not be safe in school. Safe drinking water and lack of ramps in school were mentioned at least 1 (11%) as a matter of safety concern.

3.4 Objective Four Findings

Experiences of Parents with Disabled Children Attending Regular Schools

Research Question: What are the experiences of parents with disabled children attending regular schools?

- Knowledge of children's rights and rights of CWDs to education
- Supply-side issues: Challenges of access, teacher support to CWD and parents, and special services to encourage school attendance.
- Demand-side issues: Perception of the capacity of schools to provide education services; competent teachers, availability of assistive devices/technology and environment to encourage CWDs to attend school
- Recommendation: Possible solutions to the barriers identified to contend with CWD accessing and participating in school

A BACKGROUND

During the research study targeting parents of children living with disabilities and attending regular schools, a total of 50 households were reached. Out of which 38 (76%) female adults were subjected to the survey interviews and 12 (24%) males. Cumulatively their levels of education were; primary education, 47 (94%), Technical/vocational, 2 (4%) and senior high school, 1 (2%).

Asked concerning the number of school-age (6-17 yrs.) children in the households (Table 19), it was revealed that there were 305 (136 girls) children in the 50 households surveyed. Out of these, 255 (117 girls) were normal children, 50 (19 girls) were children living with disabilities.

Table 19: School-age children in HHs of CWD attending Regular Schools

How many school-age (6-17 yrs.) Children do you have?			
Category	**Boys**	**Girls**	**Total**
Normal Children [CW/OD]	138	117	**255**
Disabled [CWD]	31	19	**50**
Total	169	136	**305**
% Disabled [CWD]	**18%**	**14%**	**16%**

Disability occurrence in the HHs:

Out of the 50 CWDs, 31 (18%) were boys and 19 (14%) were girls. In all, the 50 children with disability make up 16% of the 305 school age children in the households.

Asked if all their children attended school, all the 50 (100%) respondents replied in the affirmative. Further interrogation of the duty bearers with the question, 'What type of schools do they attend? Their responses informed of three types of schools namely, regular

schools, temporary learning schools and special education schools as detailed in Figure 24 below.

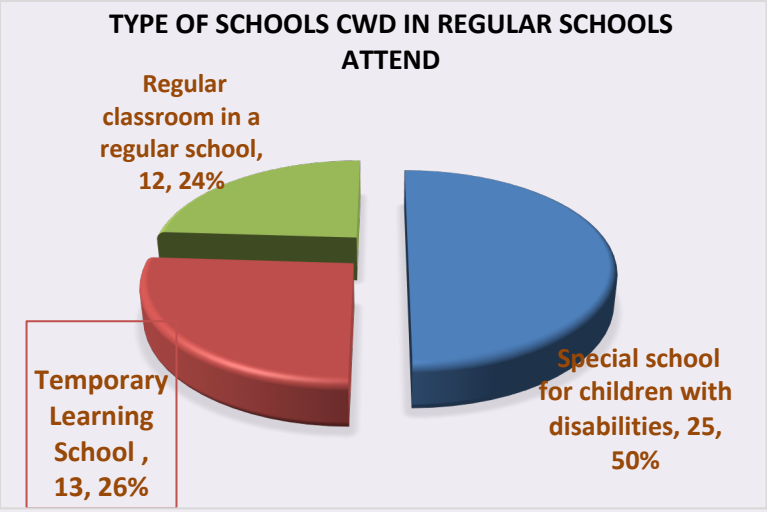


Figure 24: Number of CWD Attending Schools by Type of School

The CWD enrolled in the Special schools were 25 (50%), those attending the Temporary Learning schools were 13 (26%) and 12 (24%) attended the regular schools. Assuming that the parents of the CWD had free choice to select the schools they preferred their children with disability to enrol, it would look like half of all parents' favour taking their children to Special Disability-dedicated schools than to mainstreamed or inclusive schools. In this case, the Special schools has taken the majority followed by the Temporary Learning Centres (possibly due to population of IDPs or proximity to camp residents) and the least attracting SENDs was the Regular schools.

B KNOWLEDGE

Knowledge of children's rights and rights of CWDs to education

Parents of children with disabilities whose children are in school and regularly attending classes seem to be conversant with the rights of children to education as well as CWDs rights to education. Asked (to respond with a 'Yes or a No') the question, "Are you aware every child (with or without disability has the right to education in Somalia?" The 'Yes', 47 (98%) carried the day with only 1(2%) responding with a 'No'.

On the knowledge whether education can be of any benefit to a child with disability, all the parents 50 (100%) responded with, 'Yes' expressing their total support to all children with disability to attend school; no wonder all of them enrolled their CWD.

Asked to give reasons why they vouched to the fact that CWD would benefit from education, their responses to the fixed choices they were given to select from is presented in Table 20 below.

Table 20: Reasons to justify benefits of education to CWDs

If yes (education is beneficial), why?		
Response	**Frequency of mention**	**Percentage**
Read and write	49	58%
It's a child's right	17	20%
Get a job	14	17%
Take care of themselves	4	5%
Total	**84**	**100%**

Despite the larger response being, 49 (58%), the response; 'to know how to read and write' bears connotation with low perception of the potential benefits education can bring to CWDs. Education for CWD should not be thought of as a means to instil literacy and numeracy only, but to emancipate them socially and economically, which is what, 'caring for themselves', their families and society at large should target. Second in their perception was 17 (20%) that education is a child's right. Unfortunately, the most favourable perceptions leading to the emancipation are the least placed; those of 'get a job', 14 (17%) and 'Take care of themselves', 4 (5%).

The last question testing the knowledge of parents of CWD on children' rights asked, "Do you agree with the following statements? They were given five statements and asked to respond with a 'Yes' or 'No" if they agreed with the statements. Below, Figure 25 is the result showing how they responded to each of the statements.

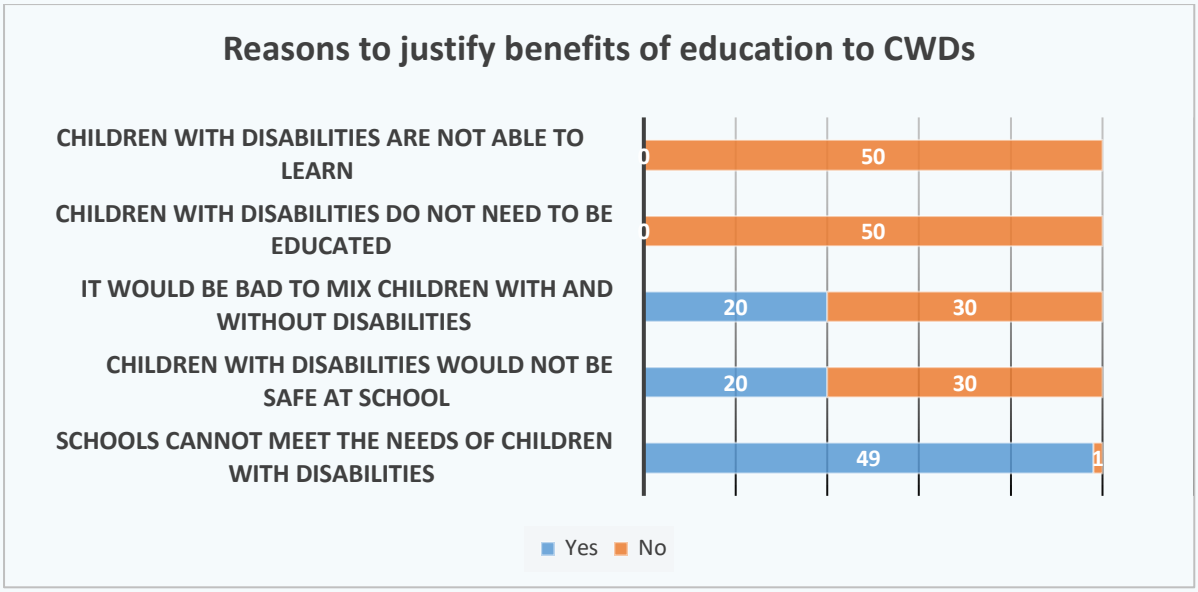


Figure 25: Parents' Perceptions on selected sets of attitudes, prejudice, unawareness on CWDs and capability of Duty Bearers

A mix of unawareness, prejudice, and negative attitude described in the two statements, "Children with disabilities do not need to be educated "and "Children with disabilities are not able to learn" were totally, rejected by all the respondents, 50 (100%). The other two, "Children with disabilities would not be safe at school" and "It would be bad to mix children with and without disabilities" likewise greater number of respondents rejecting, 30 (60%) each than accepting, 20 (40%) each. Schools cannot meet the needs of children with disabilities was agreed on by almost all 49 (98%) but one (2%).

C. SUPPLY-SIDE ISSUES

Supply-side issues: Challenges of access, teacher support to CWD and parents, and special services to encourage school attendance.

This section discusses school accessibility by CWD in terms of support required, age of the child and safety of the child to, and in school. The research question to the respondent was, Asked, "If your child with disability was attending school, would she/he need help to get to school?" Of the 50, 38 (76%) indicated that their children did not need help to attend school while 12 (24%) thought their children would need help to get to school.

For those who thought their children would need help to get to school were asked to pick from out of three probable explanations that best fit their perceptions of the need to. These were, your child is too young to go alone, it is unsafe to go alone and it is too far to go alone.

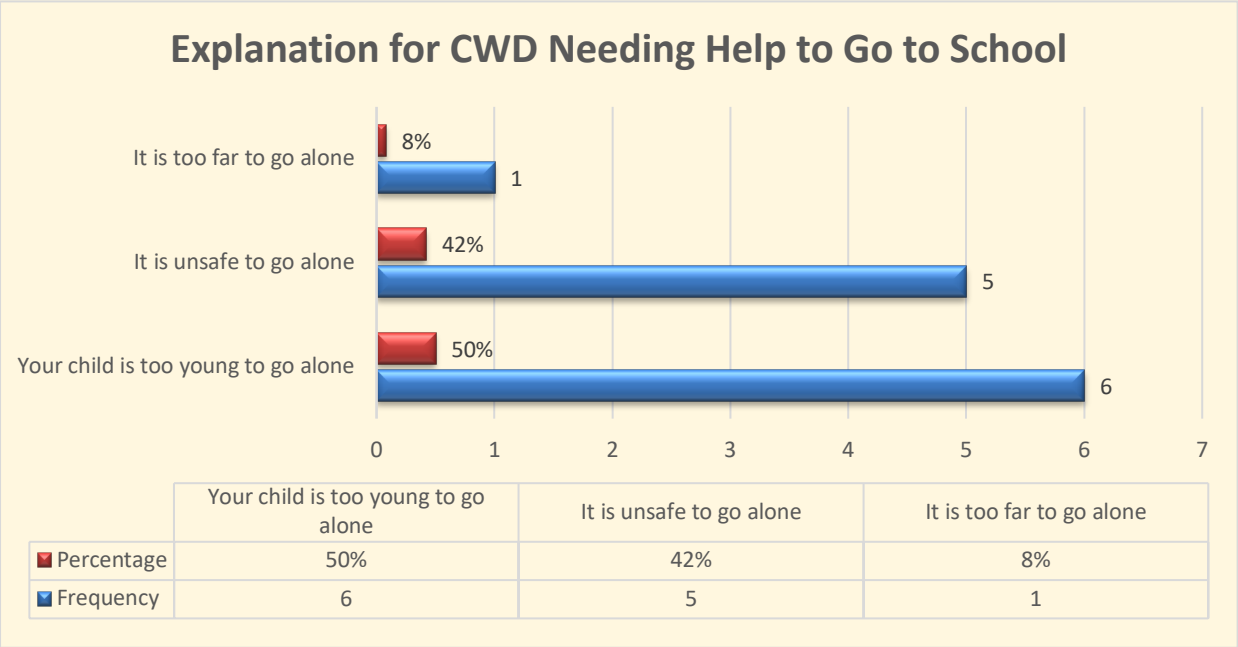


Figure 26: Why children with disability need help to go to school

Observed from figure 26, children with disability need help to get to school for two major reasons. "Your child is too young to go to school alone, 6 (50%) and "It is unsafe to go to school alone, 5 (42%)". The single (8%) explanation that, "It is too far to go alone" had no much significance in comparison.

Distance from Home: Another factor of supply, which is still part of access to education is distance of school from home. Distance often affects CWD, especially those who are physically challenged, visually disabled and Autistic children. Asked, "How long does it usually take your child to get to school?" Those who responded with "Less than 30 minutes were, 46 (92%), with "30-60 minutes were, 3 (6%)" and "Don't Know 1 (2%)".

Teacher support to Pupils: Parents' perception about teaching and learning as supply factors were also evaluated during the research. For example, the parents/care givers were asked, "Are the teachers willing to support your child with disabilities to learn in school?" The

parents in agreement were more, 34 (68%) than those who did not, 16 (32%) perceive teachers to be supportive of their children's learning in school.

Teacher Support to Parents: Parents' perception about teacher support to them as parents of children with disability was worse compared to support teachers gave to their children. Those who were in agreement of getting teacher support were only, 8 (16%) as compared to those who felt that teachers did not, 42 (84%) support them as parents of children with disabilities.

Special Services in School: The other area of supply-side issues is concerned with schools having special services, like speech therapy, support workers, sign language interpretation, etc. On responding to the question, "Does the school have special services or assistance (speech therapist, support worker, sign language interpretation, etc. that your child needs to attend school?" the majority, 38 (76%) responded with a 'No' that the schools do not have such services. Only, 12 (24%) responded with 'Yes" in acceptance that the schools had the said services.

Provision of assistive devices: The other supply-side issues is the provision of assistive devices to CWD like, Braille textbook, hearing aid, wheelchair, etc.), that the children need to attend school. Asked, "Does the school have assistive devices/ technology to support your children's learning at school?" those who didn't think the school did were the majority, 40 (80%) while those thinking otherwise, 10 (20%) were the minority.

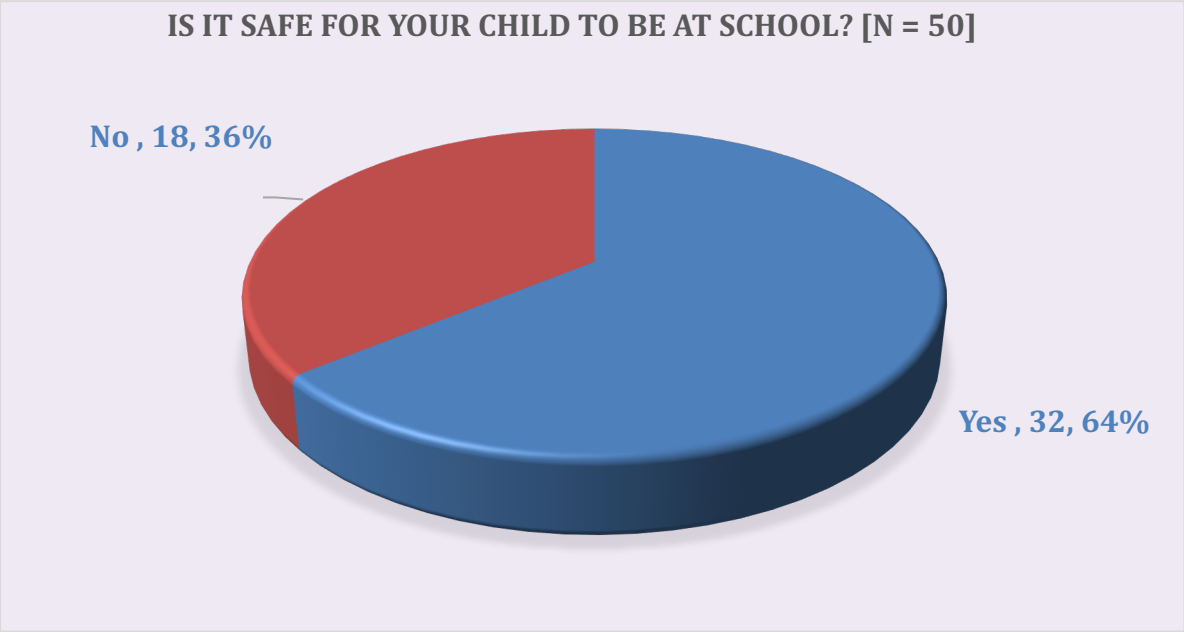


Figure 27: Safety of CWD in School

For the 18 parents reported that their children were not safe in school were further asked to select from seven plausible reasons for perceiving that their CWD were not safe in school. They were asked to select as many of the choice as they felt were applicable in their perceptions. These choices included no toilets/urinal, no safe drinking water, bullying, n ramps, corporal punishment, long distance to/from school and other (please specify).

REASONS for CwD Not BEING Safe in School [N = 18]

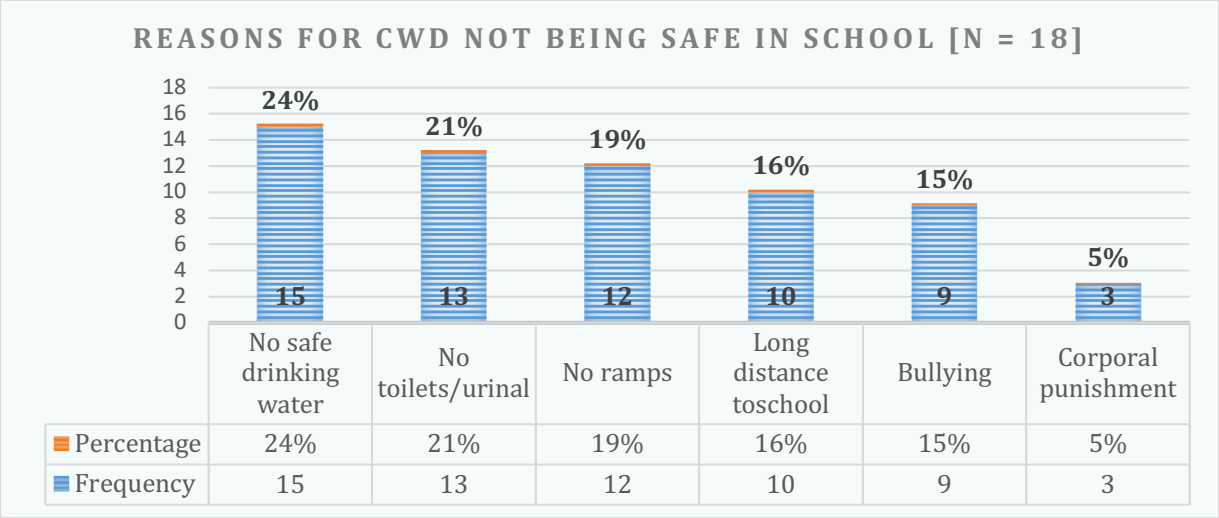


Figure 28: Reasons for CWD not being safe in schools

Parents reported that the reasons for perceiving CWDs not to be safe in school included; from most frequently mentioned to least as; no drinking water, 15 (24%), no toilet/urinal facilities, 13 (12%), no ramps, 12 (19%), long distance to school, 10 (16%), bullying, 9 (15%) and corporal punishment, 3 (5%).

D. DEMAND-SIDE ISSUES

Demand-side issues: Perception of the capacity of schools to provide education services; competent teachers, availability of assistive devices/technology and environment to encourage CWDs to attend school have been assessed as follow:

Asked if their children with disabilities missed any days at school in the past month, 'NO', meaning that children never missed school were, the majority, 37 (74%) and 'Yes' reported missing school were, 13 (26%).

Factors Contributing to CWD Absenteeism: Those who reported children missing to attend school on some occasions were provided with a set of five suggestion which would help them explain likely reasons for CWD missing to attend school. These choices included; doesn't like school, bullying, and assistive devices not available, school is too far and teachers are not welcoming

Reasons CWD Miss to Attend School [N = 13]

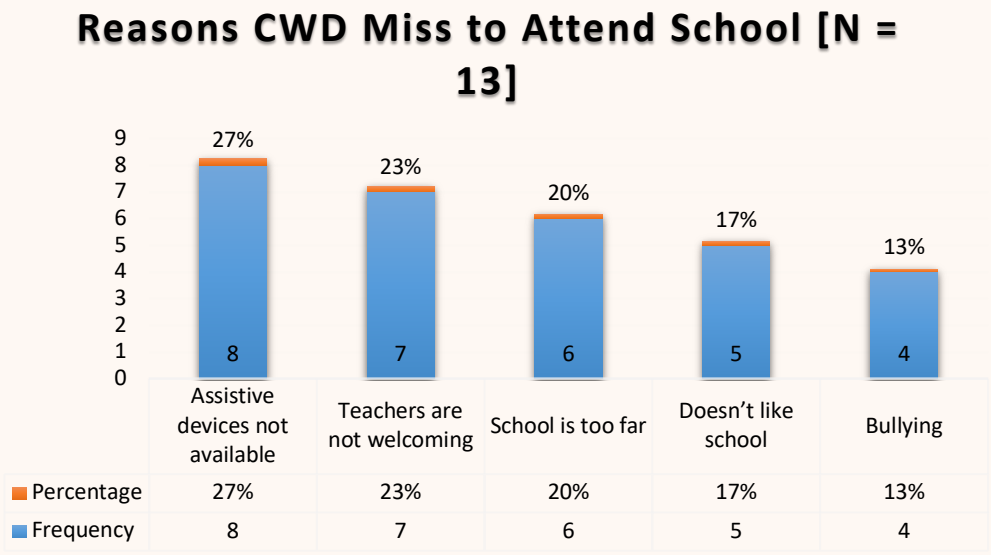


Figure 29: Reasons for CWD miss to attend schools

The highest frequently presented reason for CWDs missing to attend school was assistive devices not available, 8 (27%), followed by teachers are not welcoming, 7(23%), school is too far, 6 (20%), doesn't like school, 5 (17%) and bullying, 4(13%).

With the preceding descriptions of contributing factors to CWD not attending school regularly, they (parents) were asked to recommend what needs to be done to motivate CWDs to attend school more often. The question, 'What will help to get your child with disabilities to go to school (Table 21 below)?' had provision of five alternatives from which to select their responses (as many as applied). This choice included, assistive devices (hearing aids, wheelchair, glasses, etc.), availability of special services (sign language interpretation, speech therapist, etc.), safe and welcoming school environment, transport to/from school and scholarship/financial assistance to help cover the cost of tuition.

Table 20: What will help to get your child with disabilities to go to school?

Response	Frequency	Percentage
Assistive devices (hearing aids, wheelchair, glasses, etc.)	47	29%
Availability of special services (sign language interpretation, speech therapist, etc.)	45	28%
Safe and welcoming school environment	39	24%
Transport to/from school	24	15%
Scholarship/financial assistance to help cover the cost of tuition	5	3%
Total	**160**	**100%**

Out of the options parents selected to help to get their children with disabilities to go to school, assistive devices (hearing aids, wheelchair, glasses, etc.), was the highest frequently mentioned, 47 (29%), followed by availability of special services (sign language interpretation, speech therapist, etc.), 45 (28%), safe and welcoming school environment, 39 (24%), transport to/from school, 24 (15%), and Scholarship/financial assistance to help cover the cost of tuition, 5 (3%).

E. RECOMMENDATIONS

Recommendation: Possible solutions to the barriers identified to contend with CWD accessing and participating in school

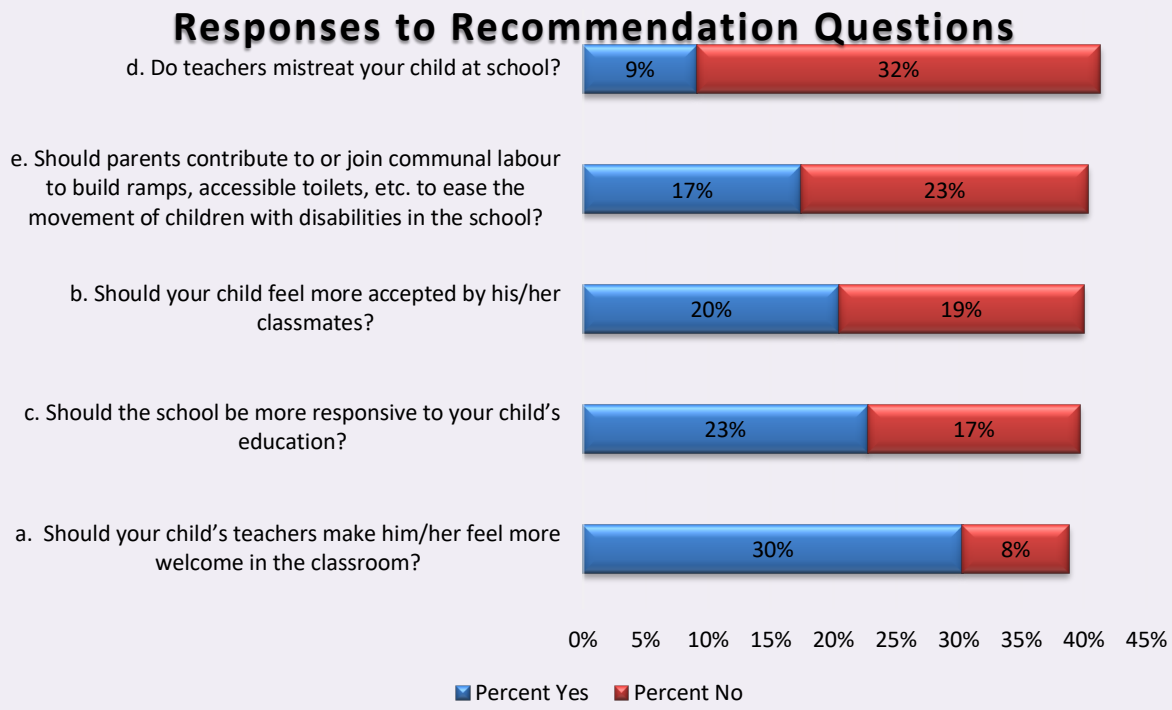


Figure 30: Recommendations of Parents of CWD in Regular Schools

The recommendations

1. Teachers should make all children feel welcome in the classroom
2. School should be responsive to children's education
3. Children should feel accepted by their classmates
4. **No,** Teachers **should not** mistreat children at school
5. Contrary to the recommendations proposed by parents that parents should not contribute to or join communal labour to build ramps, accessible toilets, etc. to ease the movement of children with disabilities in the school, the actually should.

4.0 CONCLUSIONS

1. The most preferred mode of educating children with disability in the areas around Mogadishu remains that of Special schools.
2. The teachers seem to see it as the best approach, so do parents whose children are out of school, and to an extent those whose children with disability are attending school.

3. Given the opportunity of access to education, children with disability in the regular, temporary and special schools attend classes regularly; far from the belief that CWD cannot learn, are disinterested in learning and good for nothing.
4. CWD in schools are more concerned with the quality of their learning, socialising and the enabling environment including classrooms; lighting, space and teaching learning materials more than issues concerning their safety in school, incidences of bullying and isolation contrary to the perception of most parents.
5. From the survey, it is clear that the most preferred mode of educating children with disability in the areas around Mogadishu remains the old approaches, that of Special schools.
6. The teachers seem to see it as the best approach, so do parents whose children are out of school, and to an extent those whose children with disability are attending school.
7. Leg related disabilities are the most prevalent form of disabilities among OOSC. Reported in this section, leg related disabilities were the most frequently, 34 (40.5%) mentioned by the household respondents of CWD OOS ranging from "leg Impairment ", "leg and Arm disability " and "leg and back disability".
8. There is a mismatch between the opinion that inclusive education is better rewarding to CWD, their parents and to CW/oD compared to Special schools, and the choices of type of schools parents and teachers prefer CWD to be enrolled. Whereas they talk positively in favour of disability inclusive approaches, their preference for enrolling CWD is the special schools.
9. There are barely any regular inclusive schools enrolling CWD (only 2.1% CWD are enrolled) and yet teachers claim to have received several, varied trainings to be able to teach different types of SEND students.

5.0 RECOMMENDATIONS

Recommendations to the Ministry of education, culture and higher education

1. The MOECHE enforce the implementation of DIE policy to ensure that regular schools implement inclusive education, enrol CWD and provide support to teachers that already received training in teaching SEND through in-service. The MOECHE should provide more professional development opportunities to these and put in place strategies to provide pre-service training in inclusive education to new teacher recruits in regular teacher training institutions and special education institutions
2. MOECHE and state MOE should contribute to capacity development of its personnel and schools level personnel with first priority to teachers' in the development skills, tools and systems to strengthen delivery disability inclusive of education the regular schools and the temporary learning centers where uptake of inclusivity is still very low.
3. The government through the MOECHE should ensure that they implement the global and national legal and policy commitments that they have ratified are leveraged to

promote continuity of free, inclusive education. This should be done within the context of EiE MS together with cluster partners to yield better, and faster results.

4. MOECHE should put in place programmes to build it capacity so that effective support and supervision for teachers and other education personnel working with DIE personnel is provided at all levels.
5. At the Pre-service teacher training, all teachers should receive initial training on inclusive education which include strategies for identifying and addressing learning needs of SEND for encourage their participation.
6. Increase opportunities for CWD and the normal to share recreational facilities to nature cooperation between and among groups, and to build confidence that improves the ability to interact and support CWD to eradicate anxiety and the fear of play with them.
7. Traditionally, teachers receive optional separate training modules on "special education". Yet, to end segregation in education, all teachers, support staff, and school leadership should be given the opportunity to acquire competencies to work in inclusive environments.
8. MOECHE working closely with the donor community through NGOs and Civil society should work on infrastructure remodelling; constructing ramps, renovating common areas for accessibility (e.g. bathrooms, toilets, watering points etc.), provide customized/adapted classroom furniture to ensure school accessibility and remove material barriers to CWD access to learning (accessible roads, transport, ramps, toilets etc.)

Recommendations to the Civil Society Organisations

1. The civil society organisations should employ a range of advocacy strategies to influence policies and practices in support of DIE in the IDP camps' learning centers and regular schools using EiE minimum standards lens to attract families and communities to support teachers and schools effort to expand access to safe and quality education to SEN children.
2. The civil society should advocate for humanitarian organisations to provide additional support DIE programmes through the clusters' Education in Emergencies (EiE) and Child Protection in Humanitarian Action (CPHA) actors working side-by-side to respond to the holistic needs of CWD affected by crises and forced displacement. By integrating child protection and education, a mutually reinforcing cycle created will reduce CWD's vulnerability in and out of school. An environment free of child abuse, harassment through bullying, isolation, neglect and violence as described in this research would promote better participation in education and attract OOSC with disabilities.
3. On the protection and wellbeing of CWD, the civil society should collaborate with Child Protection Actors to apply strategies which seek to reduce protection risks facing children with disability attending school. That way, the physical and emotional safety of CWD will be assured and their learning improved. Such collaboration with experts

will help identify and implement appropriate psychosocial support and social emotional learning programmes which seek to promote student wellbeing.

4. The civil society and other humanitarian stakeholders support further studies to identify well-being and support needs amongst teachers to implement interventions that support well-being including; psychosocial support and social and emotional learning for teachers, peer-to-peer support and supervision, and favorable working conditions to enhance teaching and learning of SEND
5. The research findings established that teachers in the regular schools only attended short courses to gain an appreciation of SEND pedagogy. All education actors; MOECHE, INGOs, and Civil Society should, through the Teacher Education and Training Working Group plan and provide professional development opportunities that lead to certification for teachers and education personnel.
6. As quoted by the Managing Director of Mustaqbal centre for special needs, a private institution, “at the point of recruitment of teachers, we not only look for teachers with relevant qualifications, but we provide them with our own distinctive induction training before deploying them into the classroom”. This is one, “Best practice” that all DIE providers should emulate and put into practice.
7. Work closely with school communities analyzing how community-based local education action plans integrate with government education policies on disabilities to instigate strategies to strengthen community participation in the dialogue with education authorities to address needs, rights and concerns of CWD in emergency-affected population
8. Lead relevant coordination mechanisms through the Education Cluster and collaborate with other relevant sectors like health to support early detection of disability and early intervention to provide services to families of infants and young children.
9. Engage with education authorities at district and central level to deliver disability inclusive education awareness and response in line with community needs and rights for ownership and care of CWD.
10. Civil society collaborate with CECs and Head teachers, and local administration to oversee the construction of inclusive amenities by engaging parents and community members to provide additional support to students, teachers, and families of SEND. Together, they can be instrumental in changing attitudes regarding inclusion.
11. Civil society and partners should promote advocacy for the rights of disabled children; training the community on the importance of education for the disabled children, raising awareness among the community to promote equal rights for all children especially those living with a disability and ensure that no child with disability stays at home.
12. Civil society and partners should take advantage of the existing, and documented policies like the 5-years national ESSP that has a budget to advocate for its implementation to include the local level educational policies that allocate 20% of revenues to the cause of PWD to be replicated elsewhere.

13. Taking with concern that most disabilities reported at HHs are leg related, there is need to conduct an in-depth research to attempt to establish the “Cause and effect” of this occurrence.
14. Civil society should take advantage of the Somalis being a Muslim society to use the existing Muslim scholars and Sheikhs to advance awareness creation to impart knowledge about disability for the change attitudes and to encourage useful practices in the community and families.
15. Encourage through the support of partners and other stakeholders, the education of children with SEND to become productive members in the development of their communities and country and to be role models for the next generation of children with SEND.
16. Advocate for the formulation and implementation of laws and policies to compel the government to apportion a fixed ratio (or percent) of all employment opportunities to people living with disabilities. Further to provide opportunities and build capacity using entrepreneurship initiatives of people with disability to develop a cadre of role models for children with SEND.
17. If the education system has to embrace the use of disability-inclusive education in regular schools, parents need to be educated in the value of CWD attending school. The evidence that parents with some level of education (primary education) all, 100% took their children with disability to school while those who never went to school did not.

Annex I: List of Key Informants

SN	Name	Gender	Organization	Title	Contact
1	Rahma Adbulkadir	Female	Mustaqbal Centre for special needs	Managing Director	+252 61 6311186
2	Suaad Abdullahi	Female	Somali Institute of Special Educational Needs and Disability (SISEND)	Chief Executive Officer	+252 61 8401546
3	Abdikaqni Aliduh Abdi	Male	Special Education Needs – Ministry of Education, Culture, and Higher Education	Office	+252 61 8233232
4	Adbullahi Hussien Osman	Male	Somali Disability Network	Managing Director	+252 61 5841666
5	Abdulakdir Mohamed Isak	Male	ADRA	Protection Specialist	+252 61 8426865
6	Mohamed Moalin Osman	Male	Somali Community Concern (SCC)	Education Office	+252 61 5903590

Annex II: List of Focus Group Discussion

FGD List.pdf

Annex III: Number of School-age (4 – 17) children attending school Reported by Parents of CWD OOs and CWD in Regular Schools

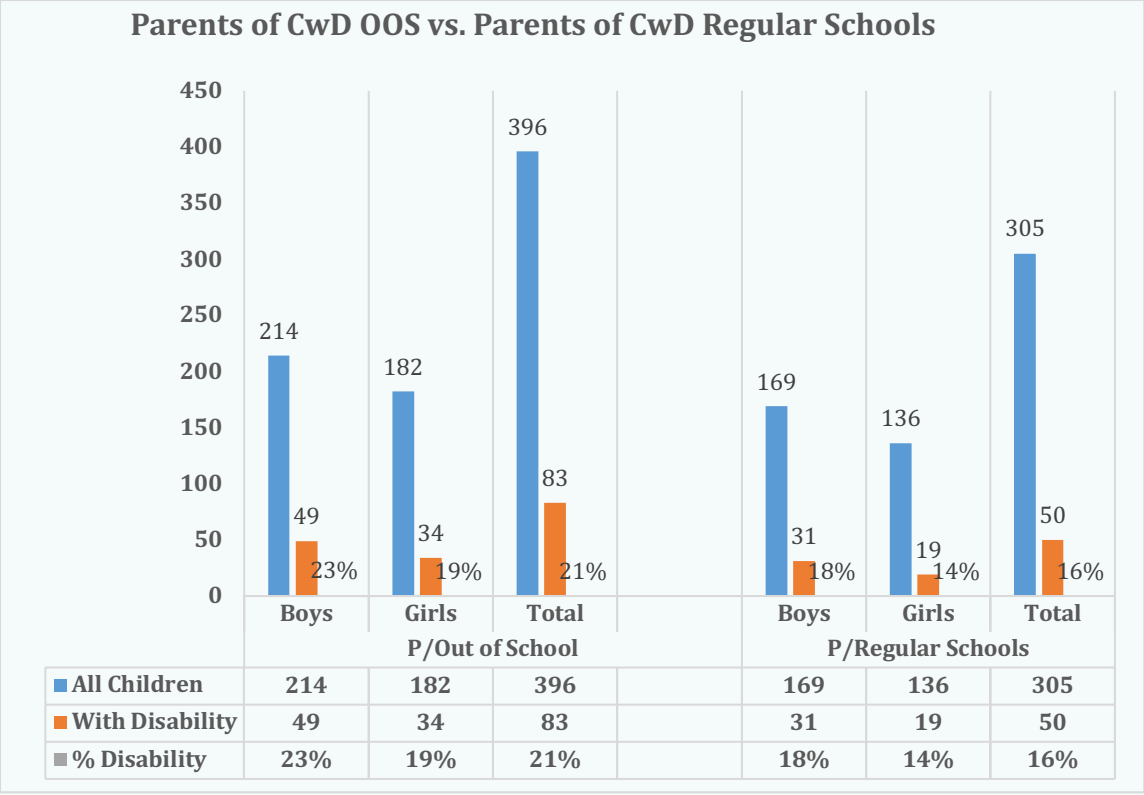


Figure 31: Number of School-Age Children (6-17 yrs.) in the HHs

Annex IV: Types of Schools and CWD Enrolment

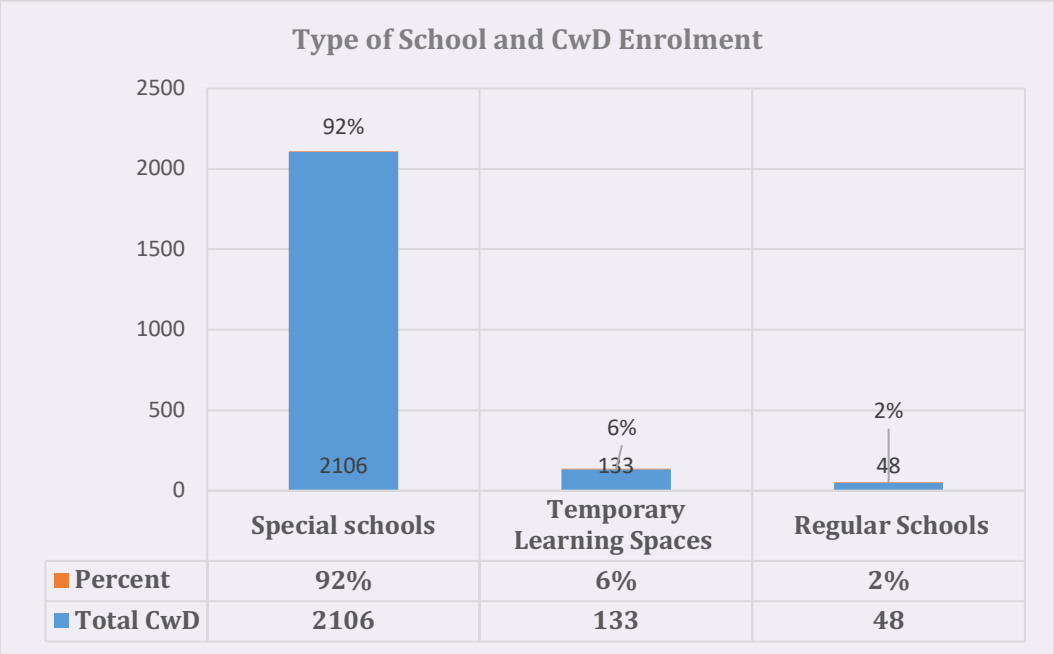
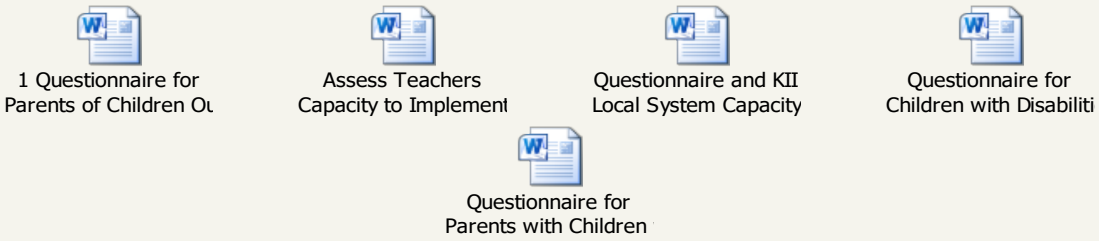
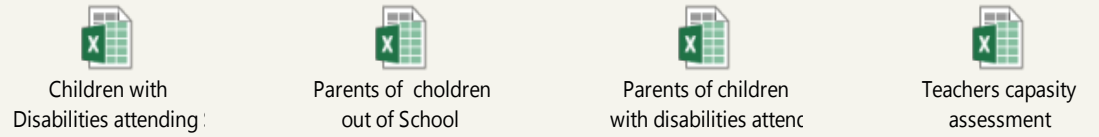


Figure 32: Types of Schools and CWD Enrolment

Annex V: Data Collection Tools



Data Collection – Row data



Annex VI: References

1. A rapid assessment of the status of children **with disabilities** in Somalia: Ministry of Women and Human Rights Development (MoWHRD) of the Federal Republic of Somalia, 2020
2. Sally Tomlinson, Osman Abdi Ahmed: Disability in Somaliland (2003) IN: Disability and Society, Vol. 18, No. 7, p: 911- 920
3. Protection survey supporting children with disabilities in Somaliland: CESVI & Handicap International Hargeisa, Somaliland, 2012
4. Education Sector Analysis Methodological Guidelines Volume III, May 2021
5. Mapping Children with Disabilities Out of School © United Nations Children's Fund (UNICEF) 2014
6. Humanitarian Programme Cycle: Needs Overview Somalia 2023

Annex VII: Case Study

Mohamed Jabriil

16 years Old

“My name is Mohamed Jibril Moalim. I belong to one of the people with special needs with the age of 16 years old. I request for education, welfare, and support.” says.
Mohamed lives in this IDP camp named “Budul” locally known as “Xaq-dhowr” located in Kaxda district of Mogadishu. Mohamed went blind at first month of birth for unknown reason. He is the elder brother of 6 children.

Mohamed's mother
Mrs. Isha Abukar Mohamed

Mohamed's mother, Isha Abukar Mohamed, is of the people of displaced from the lower Shabelle, “I have six children. Mohamed is one of my children. After I gave birth to Mohamed, his eyes went blind within 14 days of birth, a scar appeared in the eyes. Mohamed is satisfied to return educational institutions, but Mohamed does not give me the impression that I let him go alone to somewhere else because he needs my care as a mother. He needs care to a bathroom, or provision of food, or I wash his clothes.”

EDUCATIONOUTLOUD

advocacy & social accountability

GPE Transforming Education

OXFAM DENMARK
A just an equal future

Education For All Somalia
EFASOM

Research on Disability and Access to Inclusive Education July 2023

Education For All
Somalia Coalition (EFASOM)
http://efasom.org/
https://www.facebook.com/efasom;
https://twitter.com/EFASOMSomalia
WhatsApp+252615505177;
Skype adam.herse
Address: Apr#13, 3rd Flr,
Aaran Plaza,
Near Hayat Supermarket
Talex, Opposite Premier Bank,
Maka al Mukarama Street,
Mogadishu, Somalia