



Inclusive education for children with disabilities

Teacher training pack

Contents

Acknowledgements	3
Acronyms	4
Glossary	5
Introduction	7
Training modules	
Part 1. Inclusive education	
1. What is inclusive education?	11
2. Child rights	18
3. Barriers to education	29
4. What is disability?	36
5. Reflecting on inclusive education	41
Part 2. Including children with disabilities & difficulties	
6. Including children with visual impairments	46
7. Including deaf children	56
8. Including children with physical disabilities	69
9. Including children with intellectual disability	76
10. Including children with certain conditions	86
11. Including children with specific learning difficulties	94
12. Including children with emotional and behavioural difficulties	99
13. Including children with communication difficulties	103
14. Assistive technology for children with disabilities	109
15. Communicating with children with disabilities	116
16. Making schools accessible for children with disabilities	122
17. Identifying children with disabilities	131

Part 3. Core competencies for inclusive classrooms

18. Classroom communication	145
19. Mother-tongue education	149
20. Individual education plans (IEPs)	152
21. Differentiation	159
22. Inclusive lesson planning	166
23. Classroom and behaviour management	169
24. Encouraging children to work together	177
25. Inclusive assessment	186
26. Counselling	193
27. Child safeguarding	201
28. Combatting bullying	205

Part 4. Working together: partnerships for inclusion

29. Child-to-child strategies	212
30. Parents and communities as partners	219
31. Action planning for inclusion: individual and school plans	226
Conclusion	231

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The cover image shows children playing tag at the Community-Based Childcare Centre in Chisomo, Malawi. The project is supported by Comic Relief. Photo: © Sightsavers/Adriane Ohanesian

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Acronyms

CBR	Community-based rehabilitation
CVI	Child/children with visual impairment
CWD	Child/children with disabilities
DPO/OPD	Disabled People's Organisation/Organisation of Persons with Disabilities
IE	Inclusive Education
PTA	Parent-Teacher Association
PWDs / CWDs	People/children with disabilities
SDGs	Sustainable Development Goals
SMC	School Management Committee
SpLD	Specific learning difficulty/difficulties
UNCRC	United Nations Convention on the Rights of the Child
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities

Glossary

Counting off	A technique to split large groups into smaller groups – e.g. for groups of 4, count participants ‘1, 2, 3, 4, 1, 2 ...’ Then group all the 1s together, then all the 2s etc...
Curriculum	Curriculum refers to the full range of learning opportunities available to students, inside and outside the classroom. ‘Plus curriculum’ refers to the additional learning opportunities sometime required by students with disabilities. For instance, children with visual impairments require access to orientation and mobility training.
Differentiation	Differentiation is making teaching and learning practices responsive to the different abilities and needs within a classroom.
Disability	According to the United Nations Convention on the Rights of Persons with Disability (2006), disability is caused by the interaction of two factors – the physical, mental, intellectual or sensory impairments of the disabled person, on one hand, and the various barriers (particularly negative attitudes) which prevent that person participating in society, on the other hand..
Elicit feedback	Invite participants to share feedback in a training module.
Formative assessment	Formative assessment is the on-going process of assessment that occurs in classrooms – for instance, teachers assess their pupils when they watch them working or ask them questions.
Gallery walk	A training technique - fix pictures / flipcharts to the wall or floor and ask participants to walk around to view and discuss them.
Inclusive education	Refers to the presence, participation and achievement of all children in education.
Individual education plans	IEPs outline the additional support that children with special educational needs will receive. IEPs identify: who will provide this support; what this support will involve; the goals to be achieved; and whether the goals were achieved.
Learning style	Refers to the different ways in which pupils prefer to learn. For instance, some pupils may learn particularly effectively through using their sense of sight (visual learners), others may learn particularly effectively

	through listening (auditory learners), and others may learn particularly effectively through doing and moving (kinaesthetic learners). Most pupils have a dominant learning style but tend to learn using a blend of styles.
Lesson objective	An objective identifies what you want your pupils to be able to do or understand by the end of each lesson.
On-task	Pupils are 'on-task' when they are focused on a learning activity.
Plenary	When the facilitator talks to the group, asks and answers questions, and facilitates discussion.
Proactive classroom management	Proactive classroom management is when you create the conditions in your classroom that promote good behaviour among learners. Proactive classroom management reduces the need for reactive classroom management (see below).
Reactive classroom management	Reactive classroom management is how teachers respond to unwanted pupil behaviour. It is often referred to as discipline.
Risk	Children 'at risk' are exposed to danger, harm or loss (the term is often used in relation to child safeguarding)
Summative assessment	Summative assessment is the formal, periodic assessment that a teacher carries out – for instance, tests, examinations and learning assignments.
Specific/special educational needs (SEN)	Children with SEN have additional learning needs related to their impairments/conditions. They may therefore require additional educational support – for instance, one-to-one assistance, assistive technology and individual education plans (IEPs) etc.
Think – Pair – Share	This involves asking participants to discuss/think about a question in pairs then share their thoughts with each other or with the whole group.
Twin track approach	There are many different definitions of the twin track approach (TTA). In this manual, TTA will be defined as a twofold approach for promoting inclusive education for children with disabilities. On the one hand, TTA involves strengthening the capacity of schools to provide a better standard of education for all their pupils, including children with disabilities. On the other hand, it involves strengthening schools so they meet the specific educational needs of children with disabilities more effectively.

Introduction

The purpose of this training pack is to develop the capacity of teachers to make their schools and classrooms more inclusive for children with disabilities – and, in the process, provide all their pupils with an improved standard of education. The content of the training modules is based on recommendations of best practice from the Committee on the UN Convention on the Rights of Persons with Disabilities (General Comment 4)¹ and other good quality, tried and tested materials.² The core teacher competencies for inclusive education contained in these modules are set out in the diagram below.³



¹ Available to download here: <http://www.ohchr.org/EN/HRBodies/CRPD/Pages/GC.aspx>

² For instance: UNESCO, 2015. *Teaching Children with Disabilities in Inclusive Settings. Embracing Diversity: Toolkit for Creating Inclusive, Learning-Friendly Environments*. UNESCO: Bangkok. All sources are acknowledged in the text of this training pack.

³ Adapted from UNESCO, 2001. *Understanding and Responding to Children's Needs in the Inclusive Classroom*. UNESCO: Paris.

Part 1 provides an overview of key concepts in inclusive education, including information about the barriers faced by children with disabilities and wider national and international efforts to remove these barriers.

Part 2 discusses the specific support and stimulation required by children with diverse disabilities, difficulties and conditions.

Part 3 discusses the generic skills and competencies that teachers need to acquire, not only to meet the needs of children with disabilities in their classes but those of all children.

Part 4 suggest ways to build partnerships with parents and the wider community to improve inclusion. It includes action-planning modules for individual teachers and their schools.

Gender is a recurring focus of the training pack, and textboxes in the modules discuss issues relating to inclusive education for girls with disabilities.

All Training Modules are structured in the same way:

- **Module objectives:** the goals of each training module.
- **Information to share with participants:** the key information the facilitator needs to share with participants.
- **Training activities:** the activities necessary for learning.
- **Indicators of achievement:** the signs that participants have acquired the necessary skills and knowledge.
- **Extension activities:** the activities participants can carry out after each module to deepen their understanding of key issues.
- **Ongoing support and supervision:** ways in which the facilitator can provide on-going support for participants.

All the modules are written in clear, simple language, and most of them are stand-alone. Many of them feature short videos (usually 2-5 minutes long) available on the internet. It is recommended that participants watch these videos as they are valuable learning resources. As much as possible, we have selected videos which are either globally relevant or set in sub-Saharan Africa countries. The modules also identify texts which participants can download from the internet in order to further develop their knowledge of inclusive education.

Facilitators may decide that they do not have sufficient time to deliver all the training modules. In the light of this, they should a) identify the training needs of the participants and b) select those modules which best meet those needs. The modules should be delivered over an extended period of time – say, a school year. If the modules are delivered over a shorter period of time, it is likely participants will become confused and struggle to absorb large quantities of information.

All the training sessions can be facilitated by an inspector, a head teacher, a senior teacher, or any other persons with expertise and experience in the education of children with disabilities.

The modules recognise that teachers already possess a great deal of inclusive education expertise – the modules simply provide opportunities for teachers to build on this knowledge and share this knowledge with one another.

Please note that this training pack does not include any ice-breakers, energisers or other fill-in activities. It is recommended that these are selected and used as appropriate by the facilitator. It is also recommended that at the end of each module, the facilitator summarises key learnings and checks for understanding.

Part 1. Inclusive education

1. What is inclusive education?⁴

 1 hour 30 minutes

Module objectives

By the end of this module participants will be able to:

1. Define inclusive education.
2. Identify the key elements of inclusive schools.
3. Recognise that inclusive education is only possible through both disability-specific interventions (targeting children with disabilities in particular) and holistic interventions (targeting all children in schools, including children with disabilities).

Resources

- Laptop/project/screen
- Flipchart paper
- One sign saying 'TRUE' and another saying 'FALSE'
- Marker pens
- Handouts and Facilitator's Note

Information to share with participants during this module

All the information to be shared can be found in **Handouts 1 and 2** and the **Facilitator's note**.

Activity 1: Introduction to inclusive education 50 minutes

The purpose of this activity is to define inclusive education.

In plenary, explain to participants that you would like them to turn to their neighbour and brainstorm what they think is meant by 'inclusive education.' Allow a few minutes for participants to generate ideas and encourage them to write down a few bullet points. Emphasise that there are no right or wrong answers – we are just exploring at

⁴ Sources and inspiration for this module include: EENET, 2006. *Inclusion in Action Workshop Methodology*. EENET: Manchester. Atlas Alliance, EENET, Handicap International, 2011. *Teacher Training in Inclusive Education: Facilitators Manual*. Atlas Alliance: Oslo. UNCRPD Committee, 2016. *General Comment No. 4. Article 24: Right to Inclusive Education*. UNCRPD Committee: New York. UNICEF Rwanda, MINEDUC, Handicap International, 2009. *Teacher Training Manual 1: Introduction to Special and Inclusive Education*. UNICEF: Rwanda.

this stage. Invite one male and one female participant to come to the front of the room and ask them to list onto flipchart the answers that other participants call out. The facilitator should elicit feedback from the floor. Explain and clarify where needed. (30 minutes)

Sample answers may include:

- Equality
- Education for all
- Accepting and respecting differences
- Involving marginalised children (girls, children with disabilities, children from ethnic minorities, street children etc.)
- Recognising different abilities
- Making buildings accessible – e.g. building ramps
- Being child/learner friendly

Video: Inclusive education in Bangladesh⁵

Show participants the video on inclusive schools in Bangladesh supported by Plan International (15 minutes).

Plan Bangladesh video: <https://www.youtube.com/watch?v=9fiNgijKbA>

In plenary, ask participants to identify everything that is inclusive about the schools in the video. Ask the participants if they could introduce into their schools any of the inclusive practices shown in the video.

Activity 2: Walking debate 🕒 25 minutes

Put the sign saying ‘**True**’ on one wall of the room. On the opposite wall, put the sign saying ‘**False**’. Ask all the participants to stand. Then tell them you are going to read a number of statements related to inclusive education. After each statement, they must decide if the statement is true or false. They should then move to the side of the room marked True or False.

Read out the statements in the **Facilitator’s Note**. After you have read out each statement and the participants have responded, ask one or two participants why they think the statement is true or false. After they have provided their views, tell them if the statements are true or false, explaining your reasons (see **Facilitator’s Note**). It is important that you treat participants’ views with respect during this exercise. Sometimes there will be a case for saying a statement is true AND a case for saying a statement is false – there will be no obvious right answer.

⁵ The facilitator will need a laptop for this activity.

Activity 3: Twin track approaches to disability inclusion 🕒 15 minutes

In plenary, explain that education authorities can adopt two complementary approaches in order to promote inclusive education for children with disabilities. On the one hand, they can carry out **disability-specific** improvements which particularly benefit pupils with disabilities. For instance, if they build ramps in schools, this will particularly benefit children using wheelchairs and if they provide braille books this will particularly benefit blind pupils. On the other hand, education authorities can carry out more **holistic** improvements which will benefit all pupils in schools, including children with disabilities. For instance, if they make sure all children in schools have reading and writing materials this will benefit all children, including children with disabilities. Provide the participants with some examples of improvements (see list below) and ask them if these improvements are disability-specific or holistic. For instance:

- Providing wheelchairs to children who need them (disability-specific)
- Ensuring that there are sign language interpreters in classrooms with deaf children (disability-specific)
- Setting up school feeding programmes in schools (holistic)
- Ensuring all schools have the necessary classroom furniture (holistic)
- Ensuring all teachers have access to good quality continuous professional development (holistic)

Afterwards, ask the participants to identify their own examples of disability-specific and holistic-improvements. When they provide them, write them down on flipchart paper.

Emphasise to participants that both disability-specific and holistic interventions are necessary for promoting inclusive education for children with disabilities. This is a twin-track approach. The twin-track approach not only promotes inclusive schools, but **inclusive societies** – as inclusive education promotes social inclusion outside the school.

Distribute **Handout 2** to participants and discuss.

At the end of the module, distribute **Handout 1** to participants. This is a valuable handout as it summarises what is meant by inclusive education.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants can define inclusive education.

- ✓ Participants can identify some of the key features of inclusive schools.
- ✓ Participants recognise that inclusive education is only possible through disability-specific interventions (targeting children with disabilities in particular) and holistic interventions (targeting all children in schools, including children with disabilities).

Extension activity: ideas for collaborative learning/self-study

The facilitator asks the participants to go away and, working in twos and threes, identify a) ways in which their classrooms are inclusive and b) ways in which their classrooms can be made more inclusive. The participants will then report back at the next module.

Handout 1: Defining inclusive education

“Inclusive education means the presence, full participation and achievement of all learners in the general education system. It is directed to the full development of human potential, sense of dignity and self-worth. Inclusive education is every child’s right and should be free, compulsory, good quality and available in local communities.”

Adapted from Article 24, UN Convention on the Rights of Persons with Disabilities and UNESCO Guidelines for Inclusion.

‘Participation’ means all children should be able to participate actively in classroom activities.

‘Achievement’ means that all children make good progress and achieve their potential.

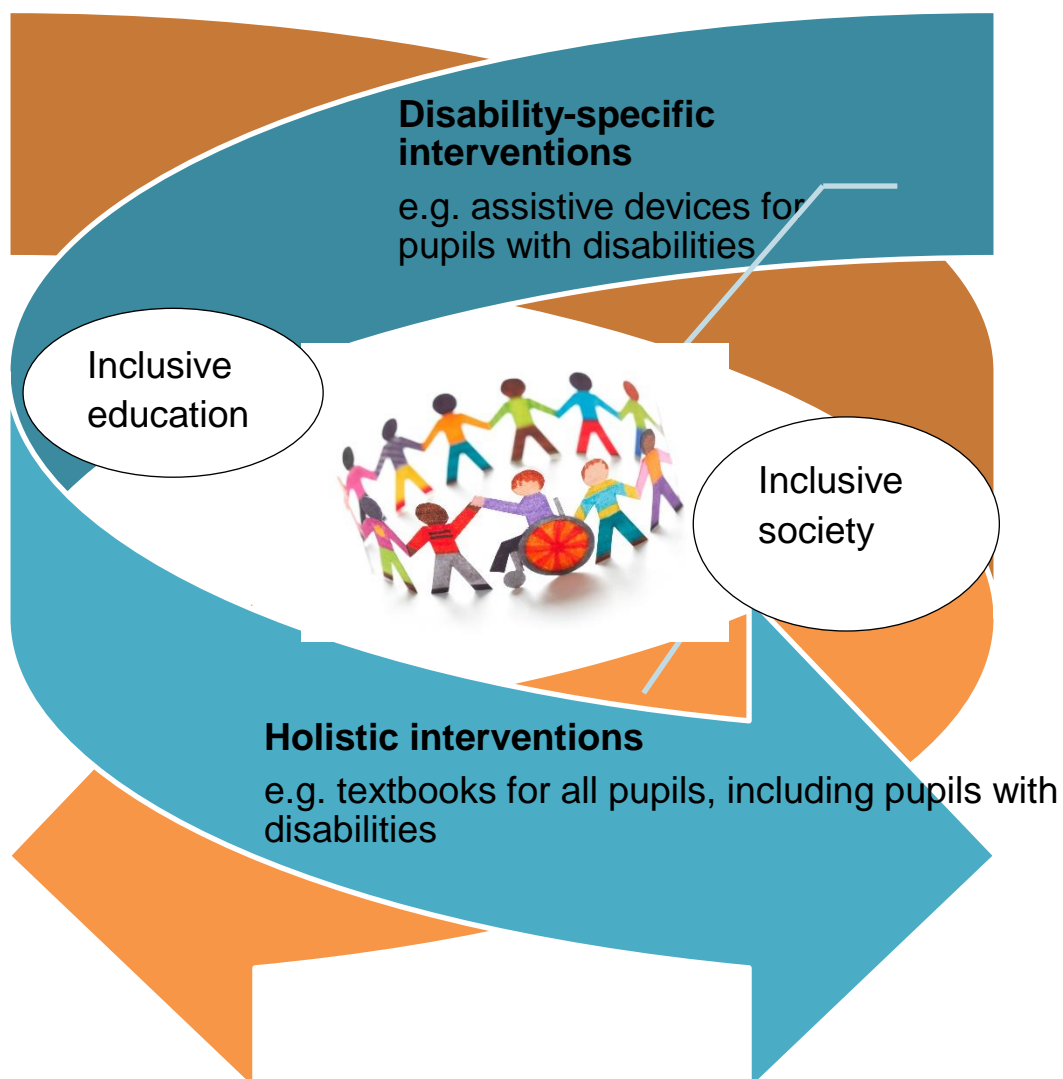
As much as possible, all children – including children with disabilities – should attend their local neighbourhood schools and learn alongside other children.

Inclusive education involves providing children with disabilities with good quality education. It also involves providing a good quality education for other pupils who are struggling in school or at present out of school. These children may not speak the same language as the one spoken in the classroom, or may be at risk of dropping out because they are sick, hungry, living on the streets, married early, or not achieving well. Inclusive education also focuses on ensuring that girls, as well as boys, receive good quality education (see box below).

Gender responsive approaches to inclusive education

Inclusive education is always gender sensitive, aiming for the equal participation of girls and boys in learning. Teachers should think about whether they are providing opportunities for both boys and girls to participate actively in learning activities inside and outside the classroom.

Handout 2: The twin track approach to inclusive education



Facilitator's Note: True and false statements about inclusive education

1. All children have the right to an education. Answer: **True**. Under international law, all children have the right to education.
2. Children with disabilities can succeed in mainstream schools. Answer: **True**. If the right support is in place, children with disabilities can succeed in mainstream schools.
3. Children with disabilities are safer at home, without going to school. Answer: **False**. Children with disabilities will be safe in school if head teachers and other staff make sure they are protected.
4. Girls don't need education. They are only going to get married off early anyway. Answer: **False**. Girls have the same rights as boys to an education. All children have the potential to do well in school.
5. Children with disabilities sometimes need additional support from the teacher. Answer: **True**. Some children with disabilities require additional support. For instance, blind children require additional tuition in order to learn how to read and write braille. However, many children with disabilities do not require any additional support.
6. Children with disabilities require extra equipment in order to succeed in school. Answer: **True and False**. Some children with disabilities require extra-equipment. For instance, blind children may benefit from having access to braille reading materials and braille writing equipment. However, most children with disabilities do not require any additional equipment.
7. It is good to have different groups of children in a school (e.g. children with disabilities, children who speak different languages, children from different backgrounds). Answer: **True**. It is good for children to meet children from other backgrounds and learn from them. It makes schools more interesting places.
8. Street children don't need an education because they are working already anyway. Answer: **False**. All children have the right to education, including street children. Education can help them lift themselves out of poverty and enjoy a better quality of life.
9. Inclusive education means more work for teachers. Answer: **True and false**. This is probably true in the short term. However, it becomes easier over time as teachers gain new skills and put them into practice.
10. Inclusive education is always expensive. Answer: **False**. Inclusive education is not always expensive. In this course, you will learn of cost-effective ways of promoting inclusive education in your schools.

2. Child rights⁶

 **1 hour 30 minutes (2 hours with optional activity)**

Module objectives

By the end of this module participants will:

1. Understand the basic principles of UNCRC and its key articles.
2. Identify the educational rights of children with disabilities, as stated in UNCRPD.
3. Be aware of global commitments to inclusive education.

Resources

- Laptop/projector screen
- Flipchart paper
- Marker pens
- Handouts and Learning Resources

Information to share with participants during this module

See **Handouts 1 and 2** and **Module Notes**.

Activity 1: Brainstorm rights of children 15 minutes

The purpose of this activity is to identify children's rights.

In plenary, the facilitator asks the participants to call out as many child rights as they can, e.g. every child has the right to a name; every child has the right to play. The facilitator should capture this information on a flipchart.

Activity 2: Video – rights of children 15 minutes

The facilitator should show a short video about children's rights. Show video (5 minutes).

BMZ video <https://www.youtube.com/watch?v=mJggYdw3l0k>

⁶ Sources for this module include: Save the Children, 2017. *Foundational Skills for Teachers*. Save the Children: London. UNICEF Rwanda / MINEDUC / Handicap International, 2009. *Teacher Training Manual 1: Introduction to Special and Inclusive Education*. UNICEF: Rwanda.

After they have watched the video, ask them to identify any rights mentioned in the video that they have not been written on the flipchart paper. Also allow time for participants to raise any issues that are concerning them.

Activity 3: UNCRC Sort Card Activity 🕒 30 minutes

The facilitator should divide participants into groups of 4-6.

Issue each group a pack of the 39 Articles from United Nations Convention on the Rights of the Child (UNCRC) (see **Handout 1**.) Also give each group a set of the 4 headings – SURVIVAL, PROTECTION, PARTICIPATION and DEVELOPMENT (see **Learning Resource 1**).

In plenary, tell the participants that they need to put each card under the most appropriate headings. For instance, Article 34 (“You have the right to be protected from sexual abuse”) belongs under the heading PROTECTION. Tell the participants that if they wish they can put a card under more than one heading. For instance, the Article 28 (“You have a right to education”) can be put under the headings PARTICIPATION and DEVELOPMENT. You need to stress to participants that there is often no one ‘right’ answer to these questions. Give the participants 15 minutes to group the cards.

As the participants are grouping the cards under the different headings, walk around, providing any necessary explanation and support.

When the participants have finished the task, ask one group to come to the front and say what cards they have placed under the different headings. The other groups may have different ideas about which cards should be placed under the headings – provide these groups with opportunities to present their own ideas.

Explain to the participants that the exercise has shown how children’s rights have developed. To begin with child rights focused on **survival and protection**, but child rights campaigners realised this was not enough – **participation and development** were also important.

Optional Activity: Draw the right! 🕒 30 minutes

The facilitator should make sure participants have their copy of **Handout 1**, United Nations Convention on the Rights of the Child (UNCRC). **In plenary**, show participants **Learning Resource 1**. This shows a mother with her daughter. Ask participants which of the rights from UNCRC the child is enjoying. The answer is Articles 9 and 10 – both of which establish the right for a child to be with their parents. Divide participants into pairs and ask them to draw pictures of children enjoying their rights. For instance, participants might draw a picture of an adult listening to a child. This picture will be illustrating Article 12 – the right of children to be heard. Alternatively, participants might draw a picture of a child being attended by

a doctor or a nurse. This picture will be illustrating Article 24 – the right of children to receive health services. Once the participants have drawn the pictures, they can come to the front of the room and show their pictures to the other participants who can identify what rights are being illustrated. This activity will be very useful for familiarising participants with UNCRC.

Activity 4: The rights of children with disabilities 🕒 30 minutes

The facilitator should distribute **Handout 2** to participants and read it through in plenary.

Discuss with participants the extent to which children with disabilities in their country (both girls and boys) have access to their education rights as specified by the United Convention on the Rights of Persons with Disabilities (UNCRPD).

Specifically,

- Do children with disabilities in their country receive good quality education provision which develops their full potential?
- Are these children provided with the opportunity to study in mainstream schools, alongside non-disabled children?
- Are they able to access both primary and secondary education?
- When they go to school, do they benefit from ‘reasonable accommodation’ – for instance, are schools physically accessible for wheelchair-users, and are children with disabilities provided with necessary assistive technology?
- Do they receive ‘individualised support’ in class – for instance, if they require one-to-one support from classroom assistants, do they receive it?
- Do they have full access to necessary forms of communication – for instance, are blind students provided with the opportunity to learn braille and deaf children provided with the opportunity to learn sign language?

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants understand the basic principles of the UNCRC and its key articles.
- ✓ Participants can identify the educational rights of children with disabilities, as outlined in Article 24 of UNCRPD.
- ✓ Participants are aware of global commitments to inclusive education.

Extension activity: ideas for collaborative learning/self-study

1. Participants can go away and find out more about key global agreements on the rights of children with disabilities – e.g. United Nations Convention on the Rights of Children (1989), United Nations Convention on the Rights of People with Disabilities (2006) and the Sustainable Development Goals – 2030 Agenda for Sustainable Development (2015). They can then report back to the other participants. Participants should do the same for key policies and laws signed by their national governments.
2. Working in groups, participants can identify the key barriers preventing children – particularly children with disabilities – accessing good quality education in their country. They can then identify strategies for overcoming these barriers. They should then present their findings to the other participants.

Handout 1: A version of the Convention on the Rights of the Child (1989) written especially for children⁷

 <p>Article 1 Everyone under 18 has all these rights.</p>	<p>Article 2 You have the right to be protected against discrimination. No one can treat you badly because of your colour or religion, if you speak another language, have a disability, are rich or poor.</p>	<p>Article 5 All adults should always do what is best for you.</p>	<p>Article 6 You have the right to life.</p>
<p>Article 7 You have a right to a name and a nationality.</p>	<p>Article 8 You have the right to an identity.</p>	<p>Article 9 You have the right to live with your parents unless it is bad for you. You have the right to live with a family who cares for you.</p>	<p>Article 10 If you and your parents are living in separate countries, you have the right to get back together and live in the same place.</p>
<p>Article 11 You should not be kidnapped.</p>	<p>Article 12 You have the right to an opinion and for it to be heard.</p>	<p>Article 13 You have the right to find out things and say what you think, through making art, speaking and writing.</p>	<p>Article 14 You have the right to think what you like and follow any religion, with your parents' guidance.</p>

⁷ Keeping Children Safe Coalition, 2017. *Training for Child Protection*. KCSC: London. Downloaded from: <https://www.keepingchildrensafe.org.uk/sites/default/files/KCSTool3%20-%20English.pdf>

<p>Article 15</p> <p>You have the right to be with friends and join or set up clubs, unless this breaks the rights of others.</p>	<p>Article 16</p> <p>You have the right to a private life. For instance, you can keep a diary that others are not allowed to see.</p>	<p>Article 17</p> <p>You have the right to collect information from all around the world. You also have the right to be protected from information that may harm you</p>	<p>Article 18</p> <p>You have the right to be brought up by your parents, if this is possible.</p>
<p>Article 19</p> <p>You have the right to be protected from being hurt or badly treated.</p>	<p>Article 20</p> <p>You have the right to special protection and help if you can't live with your parents.</p>	<p>Article 21</p> <p>You have the right to the best care for you if you are adopted or fostered or living in care.</p>	<p>Article 22</p> <p>You have the right to special protection and help if you are a refugee.</p>
<p>Article 23</p> <p>If you are disabled, you have the right to care and education to help you develop and lead a full life.</p>	<p>Article 24</p> <p>You have the right to the best health possible and to medical care and to information that will help you to stay well.</p>	<p>Article 25</p> <p>If you live in care or in other situations away from home, you have the right to have these living arrangements looked at regularly to see if they are the most appropriate.</p>	<p>Article 26</p> <p>You have the right to help from the government if you are poor or in need.</p>

<p>Article 27</p> <p>You have the right to a good enough standard of living. This means you should have food, clothes and a place to live.</p>	<p>Article 28</p> <p>You have a right to education.</p>	<p>Article 29</p> <p>You have a right to education which develops you and your personality as much as possible.</p>	<p>Article 30</p> <p>If you come from a minority group, you have the right to enjoy your own culture, practise your own religion, and use your own language.</p>
<p>Article 31</p> <p>You have the right to play and relax by doing things like sports, music and drama.</p>	<p>Article 32</p> <p>You have a right to protection from work that is bad for your health or your education.</p>	<p>Article 33</p> <p>You have the right to be protected from dangerous drugs.</p>	<p>Article 34</p> <p>You have the right to be protected from sexual abuse.</p>
<p>Article 36</p> <p>You have the right to protection from any kind of exploitation (being taken advantage of).</p>	<p>Article 37</p> <p>You have the right not to be punished in a cruel or hurtful way.</p>	<p>Article 39</p> <p>You have the right to help if you've been hurt, neglected or badly treated.</p>	

Handout 2: Rights of Children with Disabilities

United Nations Convention on the Rights of People with Disabilities (2006) is the key agreement in this field.

UNCRPD says people with disabilities have the same rights as their non-disabled peers – for instance, the right to good quality health services, the right to work and employment, the right to be protected from all types of abuse. It also establishes the right of people with disabilities to any support necessary for their participation in a full range of social activities.

As of April 2018, the governments of 160 different countries have signed the Convention.

Article 24 of UNCRPD focuses on education. It states children with disabilities have the right to:

- Good quality education provision which develops their full potential.
- Be taught in mainstream schools, alongside non-disabled children.
- Receive both primary and secondary education.
- ‘Reasonable accommodation’ – in other words, education provision that meets their particular needs – for instance, schools need to be accessible for wheelchair-users, and some children will require particular types of assistive technology.
- ‘Individualised support’ – for instance, some children with disabilities will require one-to-one support from classroom assistants.
- Full access to necessary forms of communication – for instance, blind children should have the opportunity to learn braille, and deaf children should have the opportunity to learn sign language.

UNCRPD also says Ministries of Education are responsible for making sure these rights are met.

Another key agreement is the Sustainable Development Goals – 2030 Agenda for Sustainable Development.

In September 2015, 193 UN members unanimously adopted a new sustainable development agenda.⁸ The commitments, called the Sustainable Development Goals (SDGs), include Goal 4 (SDG 4) to ensure “inclusive and equitable quality education and promote lifelong learning opportunities for all.”⁹

⁸ <http://www.un.org/sustainabledevelopment/blog/2015/09/historic-new-sustainable-development-agenda-unanimously-adopted-by-193-un-members/>

⁹ <http://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-4-quality-education.html>

For the first time, children with disabilities are included in a set of global goals to make sure that they are not 'left behind.'

Target 4.5 of SDG4 says girls and boys with disabilities should have equal access to education; Target 4.a says they should learn in safe and supportive environments; and Target 4.2 says they should access good quality early childhood development. Financing for SDG4 has been agreed under the Addis Ababa Action Agreement (2015).¹⁰ Education 2030, an action plan that aims to make the goals achievable, commits all countries to focusing on learners with disabilities. The plan declares that “no education target should be considered met unless met for all.”¹¹

The above commitments mean more and more children with disabilities will have the chance to go to school. It is therefore essential that teachers have the capacity to include these children.

SDG 4. Target 4.5.

By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations.

SDG 4. Target 4.a.

Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all.

Gender responsive approaches to child rights

All children have the right to education, whether they are girls or boys. Special measures may need to be taken to remove the barriers preventing girls from receiving good quality education. What are the barriers that are preventing girls from going to school in your country, particularly girls with disabilities, and how can these barriers be removed?

You can find out more on the following websites:

- a) United Nations Convention on the Rights of the Child

<https://www.unicef.org.uk/what-we-do/un-convention-child-rights/>

- b) United Nations Convention on the Rights of Persons with Disabilities

<https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

- c) Sustainable Development Goals - 2030 Agenda for Sustainable Development

<http://www.un.org/sustainabledevelopment/sustainable-development-goals/>

¹⁰ <http://www.un.org/esa/ffd/ffd3/press-release/countries-reach-historic-agreement.html>

¹¹ <http://en.unesco.org/education2030-sdg4> accessed 1 February 2017

Learning Resource 1: Headings for UNCRC Articles (print one copy per group)



SURVIVAL	PROTECTION
PARTICIPATION	DEVELOPMENT

Learning Resource 2: Draw the Right!



A photograph showing a young girl in the arms of her mother.

3. Barriers to education

 1 hour 15 minutes

Module objectives

By the end of this module participants will be able to:

1. Recognise that certain groups of children, including children with disabilities, often experience educational exclusion and marginalisation.
2. Recognise that the problem is not the children, but the system itself.
3. Identify the barriers faced by excluded/marginalised children within the education system.
4. Identify ways that schools and teachers can overcome these barriers.

Resources

- Flipchart paper
- Marker pens
- Post-it notes
- Prepared flipcharts
- Handouts and Learning Resources

Information to share with participants during this module

We have talked about the rights of children, including those with disabilities. However, those rights are not always realized. In this module we will focus on the barriers stopping children realising their rights to education.

Certain groups of children often experience educational exclusion – they are not in school. Alternatively, they can experience educational marginalisation – they are in school, but struggling to keep up with the other children.

Children are excluded from education/ marginalised in education by three types of barrier.

These barriers can be grouped as follows:

1. **Attitudinal** – negative attitudes
 2. **Institutional** – lack of necessary support in schools (e.g. lack of equipment in schools, lack of good quality training, school fees which stop poorly-trained teachers, lack of good quality teaching) due to lack of investment in education systems (e.g. in teacher training) and lack of effective policies.
-

3. **Environmental** – inaccessible buildings and long/difficult journeys to and from school, combined with poor quality/expensive transport systems.

When those barriers are removed, all children benefit, not just children with disabilities. Bringing down the barriers is a gradual process and doesn't happen all at once. This training is part of that process.

Gender responsive approaches

Are there any barriers preventing girls in particular going to/succeeding in school? For instance, girls might be unwilling to go to school because they are particularly likely to be bullied or teased in school. Even if they go to school, these girls may perform badly because of bullying and teasing. Are there also any barriers preventing boys in particular going to/succeeding in school?

Activity 1: The child is not the problem... 🕒 60 minutes

The purpose of this activity is to identify the various barriers to education for excluded/marginalised children.

In plenary, invite participants to identify the kinds of children who are educationally marginalised/excluded. Sample answers might include: orphans, children living with HIV, street children, nomadic children, refugees, children with disabilities, girls, and children from ethnic minorities. Write these up on a flipchart (10 minutes).

Split the participants into small groups and ask each group to consider one of these groups of excluded/marginalised children. The participants should think about what is stopping these children from enrolling, attending, participating and achieving in school. Ask participants to write their ideas on sticky notes and put these on a flipchart (20 minutes). Select two or three of these groups to present their feedback to the others (up to 15 minutes).

Can the barriers faced by children with special needs be grouped into types? Ask the participants to group their sticky notes onto four separate flipcharts marked:

- **Attitudinal** – culture, stigma and discrimination
- **Institutional** – lack of necessary support in schools (e.g. lack of equipment, poorly-trained teachers, lack of good quality teaching) due to lack of investment in education systems and lack of effective policies
- **Environmental** – inaccessible buildings and long/difficult distances to schools, combined with poor quality/expensive transport systems
- **Other** – i.e. everything else

For instance,

'People don't think girls can succeed in school' should be grouped under attitudinal.

'Lack of specialist equipment for children with disabilities' should be grouped under Institutional.

'Lack of ramps in schools' should be grouped under environmental.

Distribute **Handout 1** to participants.

Activity 2: Exclusion versus inclusion 🕒 15 minutes

Present **Handout 2** to participants – Exclusion versus Inclusion.

The first diagram illustrates how a traditional education system views children who are different in some way. The child is viewed as the problem, which leads us to try to create solutions to change the child, to try to cure him/her, or in some way make him/her fit into the existing system.

The second diagram illustrates an alternative view. Here the individual child is not the problem. The education system is the problem because it is not flexible and innovative enough to cope with different sorts of children.

Note that the barriers listed are not exhaustive and are for illustration purposes only.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants recognise that certain groups of children, including children with disabilities, often experience educational exclusion and marginalisation.
- ✓ Participants recognise that the problem is not the children, but the system itself.
- ✓ Participants identify the barriers faced by excluded/marginalised children within the education system.
- ✓ Participants identify ways that schools and teachers can overcome these barriers.

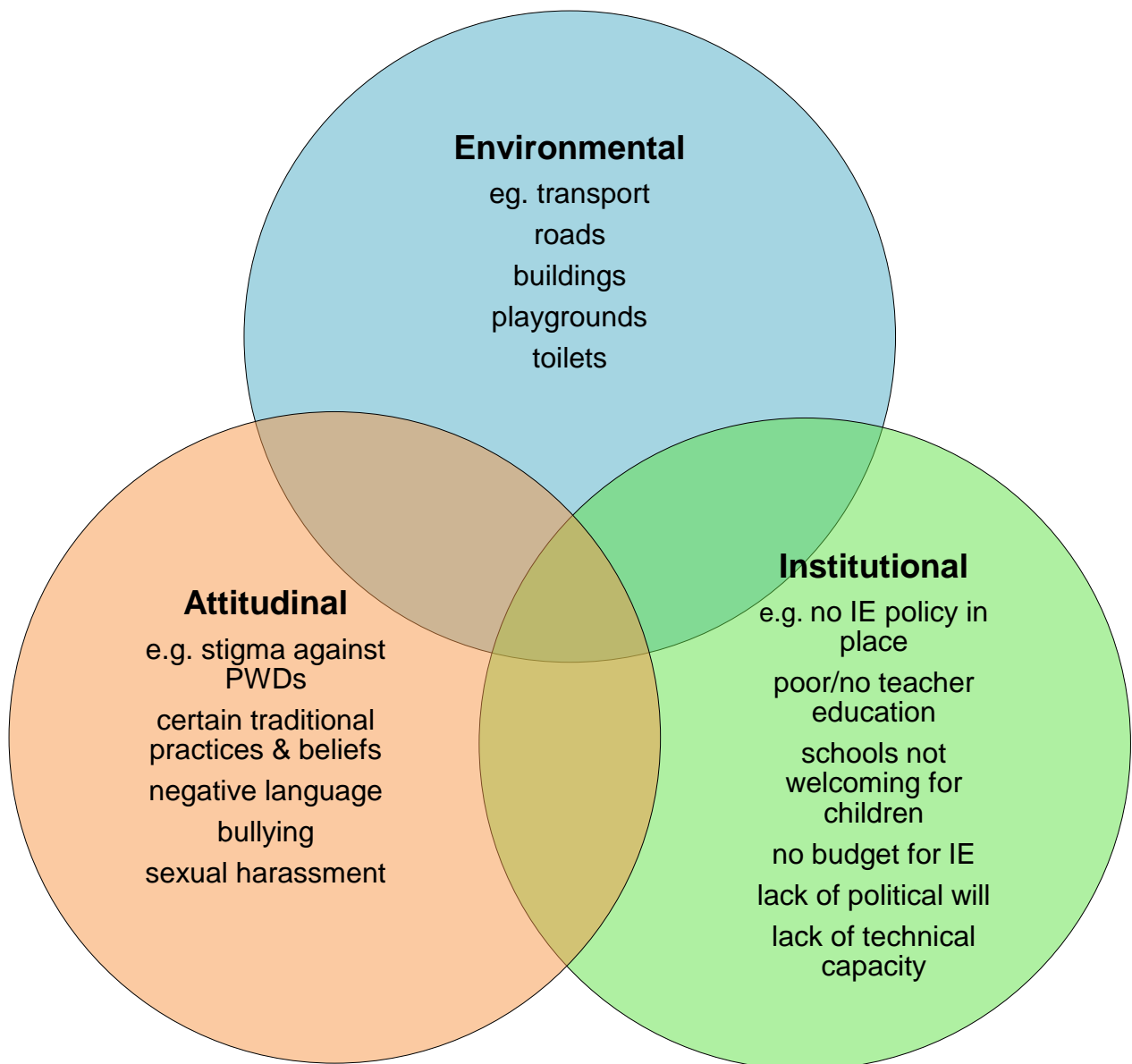
Extension activities: ideas for collaborative learning/self-study

1. Conduct surveys in your own schools to identify institutional, attitudinal and environmental barriers to inclusion
2. Keep a journal in which you identify the barriers to inclusion in your school, the actions taken to address these, and what you have learned from the experience.
3. Form a regular problem-solving and discussion group with your peers. Meet monthly to discuss particular difficulties you are facing and identify solutions to these problems.

Ideas for ongoing support and supervision

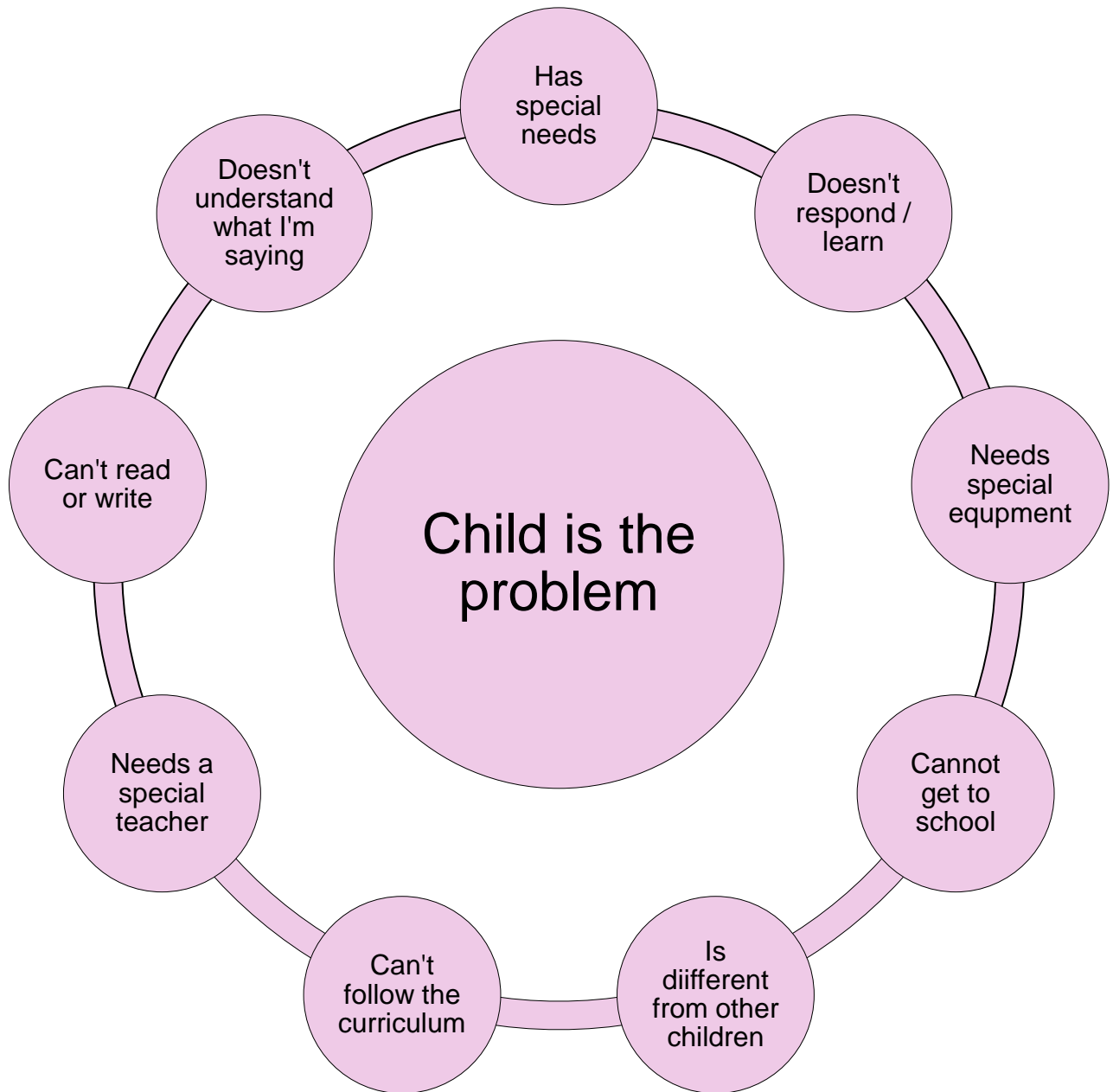
The facilitator can follow up with the teacher in the classroom to discuss the kinds of barriers that exist in their school and to develop an action plan for overcoming these barriers.

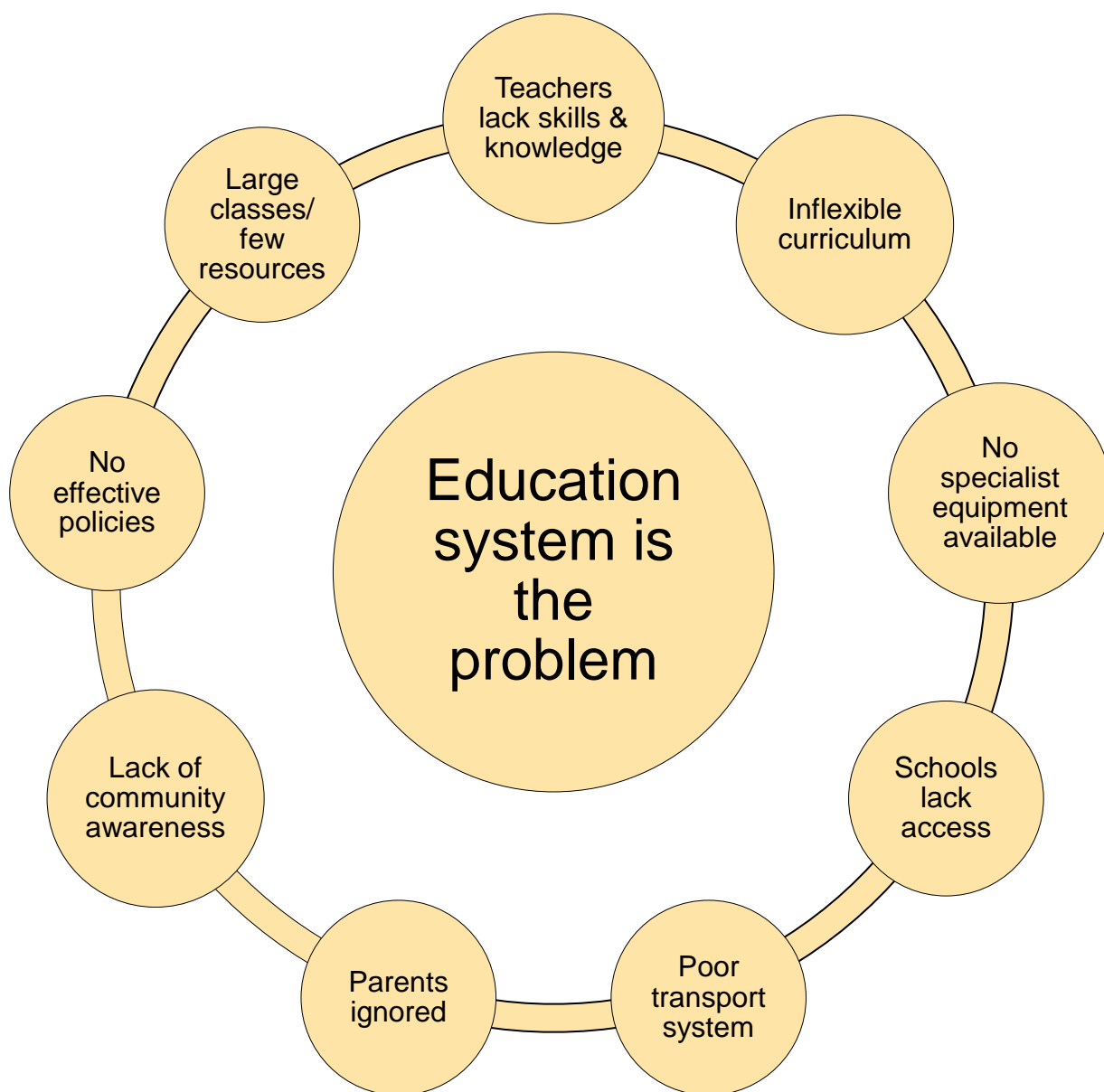
Handout 1: Barriers to inclusion



What other factors can you add?

Handout 2: Exclusion versus inclusion





4. What is disability?¹²

 1 hour

Module objectives

By the end of this module participants will be able to:

1. Understand that it is not always easy to identify disability.
2. Understand the different models of disability.
3. Understand the barriers faced by children with disabilities.
4. Identify ways in which these barriers can be removed.

Resources

- Flipchart paper
- Marker pens
- Film/laptop/screen for film
- Handouts

Information to share with participants during this module

See **Module Notes** and **Handouts 1 and 2**.

Activity 1: Who is disabled? 1 20 minutes

Split participants into small groups and ask each group to read through the case studies in **Handout 1**. When they have done this, ask them who they think is disabled. Discuss in plenary. Listen to the ideas from the groups.

It is not easy to say who is disabled. All the people have impairments, but only in case study 3 (Amina), has this badly affected her life. Her problem is not her scarred face but people's attitudes towards her.

¹² Sources for this module include: Handicap International, 2011. *Teacher Training in Inclusive Education: Facilitators Manual*. Handicap International: Lyon/Brussels. UNICEF Rwanda, MINEDUC, Handicap International, 2009. *Teacher Training Manual 1: Introduction to Special and Inclusive Education*. UNICEF: New York.

When you look closely at people it is not so easy to label some as having disabilities and some as not having disabilities. Everyone is different. Everyone can do some things better than others. We are all individuals.

Activity 2: Presentation – Different models of disability 🕒 20 minutes

In plenary, distribute **Handout 2** to participants. Explain to participants that there are two different models of disability:

- The medical/charity model
- The social model

The medical model sees the disabled person's impairment or health condition as 'the problem'. The focus is therefore on 'fixing' or 'curing' the individual.

The social model of disability recognizes that impairments and conditions can cause real problems, but says that disability is largely caused by the way society is organised, rather than by a person's impairment or condition. It looks at ways of removing barriers that make life difficult for people with disabilities.

Provide examples to explain the differences between the two models. For instance, you can say:

"If I am deaf and communicate through sign language, I will be disabled if people around me do not use sign language. I will not be able to communicate with them and they will not be able to communicate with me. However, if other people learn sign language and use sign language, I will not be disabled. The barrier will have been removed."

And you can also say:

"If I have difficulty seeing and require glasses to see properly, I will be disabled if I am not given a pair of glasses. However, if I am given a pair of glasses, I will be able to see properly. The barrier will have been removed."

However, it is important that the participants recognise that some people with disabilities face many barriers. For instance, if someone cannot walk, they not only require a wheelchair. Buildings will need to be made accessible for them. Pathways will also need to be made smooth and flat. Even if they have a wheelchair, they may still face problems. For instance, public transport will need to be made accessible for wheelchair users. However, even when there are many barriers that need to be removed, we can still make a start by removing as many barriers as possible.

Activity 3: Listening to the voices of children with disabilities 🕒 20 minutes

Show the following short film:

Show film: <https://www.youtube.com/watch?v=FjhF-pdIJ8M>

As they are watching the film, ask the participants to consider:

What are the barriers faced by the children with disabilities in the film?

How can these barriers be removed?

Allow time for reflection and Q&A.

Gender responsive approaches to disability

Men and women, girls and boys, can experience disability differently. Teachers need to be sensitive to this. For example, girls with disabilities can be particularly vulnerable to physical abuse. As a teacher, you need to make sure that these children do not experience this abuse and these children are provided with the support and encouragement that will enable them to realize their potential.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants understand that it is not always easy to identify disability.
- ✓ Participants understand the different models of disability.
- ✓ Participants understand the barriers faced by children with disabilities.
- ✓ Participants identify ways in which these barriers can be removed.

Extension activities: ideas for collaborative learning/self-study

Invite local people with disabilities or disabled people's organisations to visit your school and talk about their experience and the barriers they have faced in their lives. If they have attended school, ask them to talk about these experiences.

Ideas for ongoing support and supervision

The facilitator can follow up with the teachers in the classroom to reflect on how their perceptions of disability have changed. Ask the teachers if they have recognised any disabilities among their pupils that they hadn't acknowledged before and what steps they have taken to remove the barriers to their learning.

Handout 1: Who is disabled? Case studies

1. Sarah was born with an extra finger. It doesn't stop her from doing anything. She can write as easily as other children. Sometimes others try to tease her about her extra finger, but she ignores them.
2. Charles is not very clever. He didn't develop intellectually like other children, but he is very strong. He left school after only one year. He wasn't learning much. Instead he helped his family on the farm. He is an excellent farmer. He is so strong that he can work much harder than many people can. He is also very clever at making things. He makes beautiful, strong fish traps. People from villages all around come to buy his fish traps.
3. When Amina was small she fell into the fire and her face was badly burned. She was scarred for life. At school she was the brightest pupil in her class. She passed the Grade 12 examination three years ago. However she hasn't got a job. She has tried many times but when employers see her face they don't want her to work for them. One person told her she would frighten the customers. Nowadays she is very sad. She doesn't believe she will ever get a job and she is sure no one will marry her because she is so ugly.
4. Kamana is ten years old. He has something wrong with his eyes so he has to wear glasses. When he wears his glasses he can see as well as everybody else.

Handout 2: The medical and social models of disability

Medical model of disability

The medical model says people are disabled because they have impairments or conditions which prevent them participating in society.

Difficulty seeing

Difficulty moving

Difficulty hearing



People with disabilities can't participate fully in society.



Difficulty understanding

Difficulty communicating

Social model of disability

The social model recognises impairments and conditions can pose real difficulties. However, external barriers are the main reason why people with disabilities can't participate fully in society.

Inaccessible buildings

Shortage of trained personnel

Lack of assistive technology



People with disabilities don't participate fully in society.



Inflexible systems & practices

Negative social attitudes & practices

5. Reflecting on inclusive education

 **1 hour**

Module objectives

By the end of this module, participants will be able to:

1. Identify the advantages of inclusive education.
2. Identify the ways their schools are already inclusive and where changes can be made.

Resources

- Flipchart paper
- Marker pens
- Ball
- Post-it notes
- Handouts

Information to share with participants during this module

This is a short, interactive module designed for participants to reflect on what they have learned so far and to consider ways of making their schools and classrooms more inclusive.

Gender responsive approaches to disability

During this module remind participants that it's important to think about the different barriers faced by boys and girls with disabilities and ways of overcoming these barriers.

Activity 1: Ball activity 30 minutes

The purpose of this activity is to recap and reinforce participants' learning about inclusive education so far.

If possible stand in a circle. Explain to participants that we are going to throw the ball around to each other. When someone has the ball, they will need to share a new idea with others. (There may be some participants in the group who find catching a

ball difficult or impossible. If there are such participants, the balls should be placed in their hands.)

For the first round, ask participants to identify some problems or **challenges** around inclusive education (IE).

Sample answers might include: children with intellectual impairments are considered too difficult to teach; the community doesn't support inclusive education; we have many steps in our school and therefore can't enrol children with wheelchairs.

Give participants the space and freedom to express doubts and fears.

Now move on to the second round. Ask each participant to think of some **benefits** of inclusive education.

Sample answers might include: inclusive schools build inclusive societies; IE encourages parents to get involved in their children's education; teaching improves as result of IE; children realise their rights, etc.

Each of these ideas and reasons should be recorded on 'post-its' by the facilitator. The post-it notes should then be put on the wall.

Activity 2: What we are already doing 🕒 20 minutes

The purpose of this activity is to encourage participants to think about what they are already doing to make their schools and classrooms more inclusive.

Explain that it is likely that the participants in this room are already taking action to make their classroom or school more inclusive. For example, the teachers could have set up Girls' Clubs or could be providing additional tuition for children who are finding learning difficult.

Think-pair-share. Invite participants to turn to the person next to them and talk about some of the actions they and/or their colleagues are already doing in their school to make sure they include more children. Ask them to write down at least 3 activities. After a few minutes, ask them to think of 3 things they would like to do now to make their school more inclusive. Invite 4 or 5 pairs to share their lists.

Tell participants that in the upcoming modules of the course we will be looking at concrete ways to improve teaching and learning to make it more inclusive.

Activity 3: Teacher competencies for inclusion 🕒 10 minutes

Distribute Handout 1. Tell participants that this diagram identifies some of the skills of inclusive education. In plenary, discuss it briefly, and ask if there are any important skills not included in the diagram.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

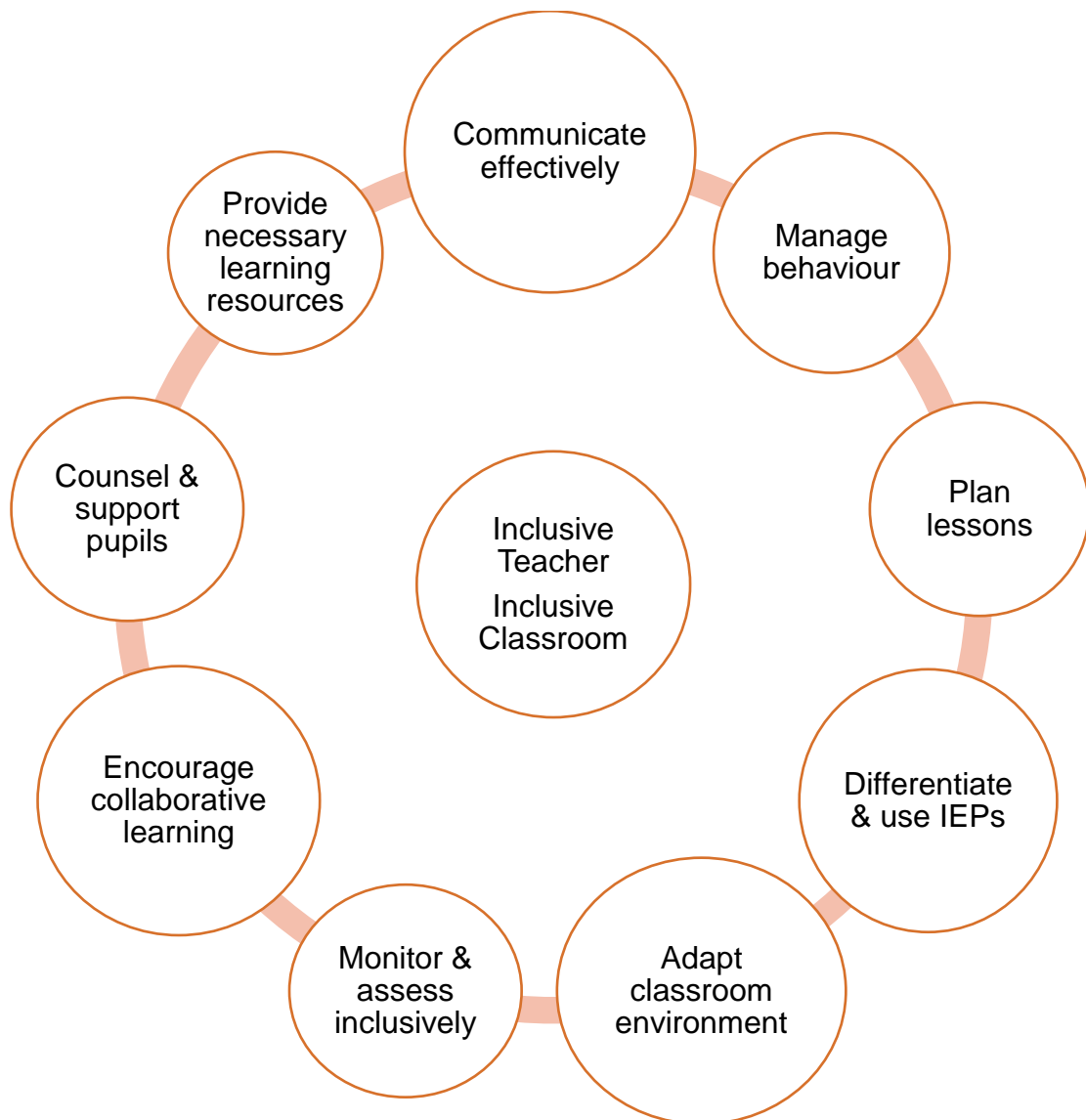
Indicators of achievement

- ✓ Participants identify the advantages of inclusion.
- ✓ Participants identify the ways their schools are inclusive and ways in which they can become more inclusive.

Extension Activities: ideas for collaborative learning/self-study

The facilitator can encourage participants to keep adding to their lists of actions they'd like to take. They can prioritise these into the action plan they will create at the end of the course.


Handout 1: Core teacher competencies for inclusive classrooms¹³



¹³ Adapted from: UNCRPD Committee, 2016. *General Comment 4*. UNCRPD: New York. UNESCO, 2001. *Understanding and Responding to Children's Needs in the Inclusive Classroom*. UNESCO: Paris.

Part 2. Including children with disabilities and difficulties

6. Including children with visual impairments¹⁴

 **1 hour 50 minutes (3 hours including optional activities)**

Module objectives

By the end of this module participants will:

1. Know some key facts about visual impairment.
2. Be able to identify pupils who are having difficulties with seeing and know they must refer these pupils to health services.
3. Be aware of ways they can include children with visual impairments (children with low vision and blind children) in their classes.

Resources

- Flipchart paper
- Marker pens
- Challenge cards
- Handouts
- Laptop/screen/projector

Information to share with participants during this module

See **Handouts 1, 2 and 3** and **Module notes**.

Activity 1: Understanding visual impairment 40 minutes

Ask the participants to talk about their own levels of seeing. This will help them to better understand visual impairment. How many have perfect sight? How many experience difficulties with seeing and perhaps needs glasses? Among those who have difficulties seeing, how many are short-sighted (in other words, have no problems seeing things close to their eyes, but have problems seeing things further away)? And how many are long-sighted (they can see things further away, but

¹⁴ Sources for this module include: Le Fanu, G., 2000. *Inclusive Education for Children with Visual Impairments*. Helen Keller International: Bangladesh. Niemann, S., Jacob, N., 2000. *Helping Children who are Blind*. The Hesperian Foundation: Berkeley, California. Sightsavers India, 2017. *Teaching Children with Visual impairments in Inclusive Classrooms*. Sightsavers India: Delhi.

struggle to see things close to their eyes)? How many have had problems with seeing all their lives? How many have developed problems with seeing only in adulthood?

Distribute **Handout 1** to participants. Go through the handout with participants, answering any questions they may raise.

Ask the contestants to put the handouts to one side and divide them into teams for a quiz based on the handout.

Below are some quiz questions you could ask:

1. Are blind children never able to see anything? Answer: No. Most blind children have some sight – for instance, some light perception.
2. What is the alternative term for children with low vision? Answer: children who are partially-sighted.
3. What is the difference between a congenital and acquired eye condition? Answer: Children are born with congenital eye conditions. Acquired eye conditions are developed by children later in life.
4. What is near vision? Answer: Near vision is the ability to see things close to our eyes.
5. What is photophobia? Answer: Photophobia is a high degree of sensitivity to bright light.
6. What does central vision allow us to do? Answer: Central vision allows us to see what is right in front of our eyes.
7. What is peripheral vision? Answer: Peripheral vision is the ability to see what is to either side of us. Peripheral vision enables us to see 'out of the corners of our eyes'.
8. What is the lack of peripheral vision sometimes called? Answer: Tunnel vision.
9. What is nystagmus? Answer: Nystagmus is an eye condition that causes eye to twitch from side to side or up and down.
10. If a child is multiply-disabled what does it mean? Answer: It means that a child has more than one impairment. For instance, a child may have a severe difficulty with seeing **and** a severe difficulty with hearing.

Activity 2: Fadzie – A girl who is visually impaired 🕒 20 minutes (Optional activity)

Show the video about Fadzie, a young girl with a visual impairment:

<http://www.vision2020uk.org.uk/blind-children-uk-releases-videos-to-raise-awareness-of-the-support-needed-by-children-and-young-people-with-vision-impairment/>

After the video, ask the participants:

1. What condition does Fadzie have? Answer: Juvenile glaucoma.
2. Is her visual impairment congenital or acquired? Answer: Acquired.
3. When did she lose most of her sight? Answer: When she was nine.

4. When she is travelling outside, what assistive device (helpful piece of equipment) helps her to get from one place to another, and what does it help her to do? Answer: A white cane. It enables her to identify what is in front of her and avoid it.
5. How well is she doing in school? Answer: Very well. She was top of her year in Mathematics.
6. What skills does she demonstrate during the course of the video? Answer: Orientation and mobility skills (i.e. skills that enable her to travel from one place to another); cooking skills; ironing skills; folding skills; skills handling money.
7. Does Fadzie feel positive or negative about herself? Answer: Very positive.
8. How does her mother feel about Fadzie? Answer: Very happy and proud.

Activity 3: Supporting children with visual impairments in your classroom 🕒 50 minutes

Divide participants into two groups.

The first group should consider the following scenario. “A child with low vision is enrolled in your school. What challenges might the child face? How would you make sure the child is successfully included in your school?”

The second group should consider the following scenario. “A blind child is enrolled in your school. What challenges might the child face? How would you make sure the child is successfully included in your school?”

Give each group 20 minutes to discuss the situation. Then ask the groups to present their ‘challenges’ and ‘solutions’ to the other group.

After this, distribute **Handout 2** to participants – Top tips for teaching children with visual impairments. Read it through with the teachers and discuss it.

End by showing participants this short four minute video which describes how Sightsavers-supported schools in Senegal are including children with visual impairments:

<https://www.sightsavers.org/programmes/inclusive-education-senegal/>

Activity 4: Braille, a reading and writing system for blind children 🕒 30 minutes (Optional activity)

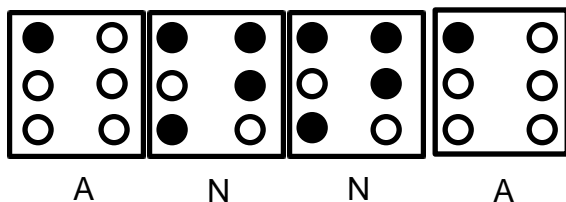
Explain that braille is the reading and writing system used by many blind children and also children with very little near vision.

Explain that braille consists of raised dots on the surface of page. Each sequence of dots represents a particular letter (or number or punctuation mark or word). There

are between 1 and 6 dots for every letter. These dots can be arranged in different ways. Blind children read the dots with the pads of their fingers.

Distribute **Handout 3** (The English Braille Alphabet) to pupils. Ask them to write their names by drawing squares on paper and using pen/s and pencils to draw sequences of braille dots representing their names.

For instance, the name ANNA is written:



Ask the teachers to write their names in braille in the same way.



Mbathio, a blind pupil, reading braille at a primary school in Rufisque, Senegal. The project is supported by Irish Aid. © Sightsavers/Peter Nicholls

Activity 5: Assisting children with visual impairments with orientation and mobility 🕒 40 minutes (Optional activity)

Download the Sightsavers poster showing ways in which sighted people can assist children with visual impairments with their orientation and mobility:

<https://www.sightsavers.org/wp-content/uploads/2018/05/Assisting-children-with-visual-impairments-poster.pdf>

Distribute the poster to participants, and discuss it with participants. **In pairs**, participants can then practise the various orientation and mobility techniques in the handout, with one participant playing the role of a sighted guide and another participant playing the role of a person with visual impairments. In plenary, participants can then demonstrate techniques for assisting children with visual impairments with their orientation and mobility.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ The participants know some key facts about visual impairment
- ✓ The participants are able to identify pupils who are having difficulties with seeing and know they must refer these pupils to health services
- ✓ The participants will be aware of ways in which they can include children with visual impairments (children with low vision and blind children) in their classes

Extension activities: ideas for collaborative learning/self-study

1. Participants can find out more about particular aspects of the education of children with visual impairments – e.g. orientation and mobility, teaching and learning of braille, low vision – and report back to the other participants.
2. Participants can organise a training on including children with visual impairments for the other teachers at their schools.
3. Participants can identify a visual impairment specialist in their community (for instance, an itinerant teacher or community eye health worker). They can then invite him/her into your school to talk about children with visual impairment.

Ideas for ongoing support and supervision

The facilitator can assist a participant to identify a child with a visual impairment who is not going to school. Then, working closely with the child, the child's parents, and members of the school community, the facilitator assist the participant to include the child in their class. S/he can provide ongoing monitoring and support for the participant.

Handout 1: Understanding visual impairment

- Children with visual impairments (CWVI) can be **blind**...or they can have **low vision**.
- Most blind children have some sight – some will perceive light and some will see more than this.
- Children with low vision have a significant amount of useful sight. However, they see much less than fully-sighted children. These children are sometimes called '**partially sighted**'.
- Children with low vision can have different eye conditions. These eye conditions can have different effects on their seeing.
- Some eye conditions are **congenital**. Children are born with them...
- Some eye conditions are **acquired** – i.e. children develop them later in life.
- Some eye conditions are **progressive**. This means a child's sight gets worse over time.
- Some eye conditions are not progressive. This means a child's sight will stay the same.
- Some CWVI have sight loss in one eye...Others have sight loss in both eyes.
- Even if children have sight loss in both eyes, one eye may still see better than the other eye.
- Some eye conditions affect **near vision**. Near vision is the ability to see things close to. For instance, pupils use their near vision to read books.
- Some eye conditions affect **distance vision**. Distance vision is the ability to see things further away. For instance, pupils use their distance vision to read the blackboard.
- Some eye conditions can affect near vision AND distance vision.
- Some eye conditions cause **colour blindness**. People cannot see all or some colours.
- Some eye conditions cause **night blindness**. People find it particularly hard to see after sunset.
- Some eye conditions cause **photophobia**...Children with photophobia find bright lights painful. Outside, they often need to wear dark glasses.
- Some eye conditions reduce **central vision**. Without central vision, we cannot see what is right in front of our eyes, unless we turn our heads to one side.
- Some eye conditions reduce **peripheral vision**. Without peripheral vision, we cannot see to one side, But we can see what is right in front of us.
- Lack of peripheral vision is sometimes called **tunnel vision** because it is like looking through a tunnel.
- Some eye conditions cause interrupted or patchy vision.
- Some eye conditions cause **nystagmus** or 'twitchy eye'. The eyes twitch from side to side or up and down. People with nystagmus find it hard to focus on things. To focus is to see clearly and steadily.
- Some children with visual impairments are **multiply-disabled**. For instance, they may also have a physical impairment or a significantly problem with hearing.

Handout 2: Top tips for teaching children with visual impairments (blind children and children with low vision)

General

- Remember that children with visual impairments (CWVI) are the same as other children. They just see less. As much as possible, treat them the same as other children, although you will also need to respond to their specific needs. This advice applies to all children with disabilities.
- CWVI will be happy and successful in school if they are treated with respect and consideration. Do everything you can to make sure this happens. Again, this advice applies to all children with disabilities.
- Find out as much as possible about the child's eye condition and its effects. This will help you to assist the child more effectively. Eye health professionals – such as community eye health workers – will be able to advise you, as will specialist teachers of CWVI.
- Regularly communicate with the child and the child's family. Good communication is the key to effective teaching and learning.

Orientation & mobility¹⁵

- CWVI may find it difficult travel to and from school. Can travel be made easier for them? For instance, could they travel with a sighted guide? Or could the community pay their bus fares?
- CWVI need to travel easily and safely around school. Think of ways school grounds and buildings can be made easier to negotiate for them. Make your classroom as uncluttered as possible. For instance, insist bags are stowed away and chairs are pushed under desks.
- Children with visual impairments (blind children and children with low vision) will benefit from orientation and mobility training (see **Activity 5**). O&M training will help them get more easily and safely from one place to another. Is there a local O&M specialist who can provide training and advice?
- Remember that toilets need to be clean, accessible and easy to use for CWVI.
- To find out more about helping children with visual impairments, you can download the poster that Sightsavers has specially prepared on the subject:

<https://www.sightsavers.org/wp-content/uploads/2018/05/Assisting-children-with-visual-impairments-poster.pdf>

Multi-sensory learning

- CWVI particularly rely on their sense of hearing in order to learn. They need to be able to hear what is being said in the classroom, particularly by the teacher. Try

¹⁵ Orientation is about knowing where you are and where you want to get to. Mobility is actually getting there. Children with visual impairments, particularly blind children, need to be taught these skills in a systematic way.

to make sure your classroom is a 'non-noisy' environment. In fact, all the children in your class will benefit from this.

- CWVI also rely on their sense of touch in order to learn. Can you bring tactile aids into the classroom? For instance, plants, objects and textiles. The other children will also benefit from these tactile aids.
- Remember children with low vision have a significant amount of sight. Many blind children also have some residual vision. Encourage CWVI to make the best use of their sight. For instance, if you are showing the class a picture in a book, give the child with low vision the opportunity to hold the book so he/she can see the picture right in front of his/her eyes.
- CWVI may not be able to read what you have written on the board. When you write on the board, you should therefore tell the class what you have written on the board. Other children in your class will benefit if you adopt this strategy.

Resourcing

- Children with low vision often benefit from optical aids such as glasses – sometimes for reading print, sometimes for seeing things further away. Do everything you can to make sure these children have these aids
- Children with low vision may benefit from reading materials in large print. They may also benefit from writing with thick tipped pens so they can read their own handwriting. It may be easier for them to write on wide-lined paper
- Blind children should be given the opportunity to read and write braille (see Handout 3). For this they will need braille writing equipment (Perkins Brailers/ braille writing slates/frames and styluses) and reading materials in braille.
- Seek advice and assistance from relevant agencies/individuals. These could include: itinerant teachers; specialist teachers of CWVI; eye health services; blind people's organisations; and NGOs such as Sightsavers.

Strategies

- CWVI find it particularly hard to read large quantities of text. This is because children with low vision may struggle to see text and blind children have to read through touch. Sometimes, you will therefore need to make things easier for them. For instance, someone can read for them. Or they can be given less to read than other pupils. Or reading materials can be recorded for them to listen to.
- CWVI may also find writing a demanding activity. Children with low vision may struggle to read their own handwriting, and blind children will struggle if asked to use to use braille writing frames for long periods of time. Again, praise them for their progress and effort. Also think about ways things can be made easier for them. For instance, could someone do some of the reading for them? Or could they record a piece of work rather than write it?
- As much as possible, children with visual impairments should take part in the same learning activities as the other children. Adapt learning activities so they are

accessible as possible for CWVI (see previous page). Focus on what CWVI can do, not what they find it difficult or impossible to do.

- Make sure there is sufficient lighting in your classroom so children with low vision can see as well as possible. You also have to make sure these children do not face bright lights, as many of these children are 'photophobic'.
- Set up buddy systems in your school. This is when a group of children volunteer to be 'buddies' with the child with visual impairments (see **Module 24**).
- Organise peer-learning in your classroom (again, see **Module 24**). Fully-sighted children will be able to help CWVI with certain tasks. In return, CWVI will be able to help fully-sighted children with certain tasks. For instance, CWVI may be very good at maths or spelling or writing stories.
- Remember CWVI, like other children with disabilities (CWD), may experience bullying and teasing from the other children. Constantly monitor what is going on in your classroom to make sure this is not happening. Encourage the other pupils to treat CWVI, and other CWD, with respect and consideration.

Remember. Children with visual impairments can do anything other children can do, given early diagnosis and the right support from the start.

Handout 3: Braille Alphabets - The English Braille Alphabet

BRAILLE Alphabet

A	B	C	D	E	F	G	H	I
J	K	L	M	N	O	P	Q	R
S	T	U	V	W	X	Y	Z	
.	,	?	!	'	-	CAPITAL	#	0
1	2	3	4	5	6	7	8	9

7. Including deaf children¹⁶

 **3 hours (3 hours 45 minutes with optional activity)**

Module objectives

By the end of this module participants will:

1. Be able to identify the challenges faced by deaf pupils with different levels of hearing loss.
2. Be able to identify ways in which teachers can help deaf pupils overcome these challenges.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/screen/projector

Information to share with participants during this module

- **Handout 1:** Understanding deafness
- **Handout 2:** Top tips for communicating with deaf children
- **Handout 3:** American Finger Spelling Alphabet
- **Handout 4:** Some useful sign language signs

Activity 1: Understanding hearing loss 30 minutes

In plenary, distribute **Handout 1** to participants. Read through and discuss. You can ask some quiz questions to test participants understanding.

1. What are the four levels of hearing loss? Answer (in ascending order of severity): mild; moderate; severe; and profound.
2. What is the difference between these different levels of hearing loss? Answer:
 - i. Deaf children with mild hearing loss find it difficult to hear quiet speech or distinguish sounds when there is background noise.

¹⁶ Sources for this module include: Deaf Child Worldwide, 2017. *Deaf Awareness Fact Sheet*. DCW: London. Deaf Child Worldwide, 2017. *Family Friendly: Working with Deaf Children and Their Communities Worldwide*. DCW: London. Deaf Child Worldwide, 2017. *Guidelines for Teaching Sign Language*. DCW: London. World Health Organization, 2012. *Community-Based Rehabilitation: Promoting Ear and Health Care through CBR*. WHO: Washington. World Health Organization, 2016. *Childhood Hearing Loss: Strategies for Prevention and Care*. WHO: Washington.

- ii. Deaf children with moderate hearing loss find it difficult to hear conversations, especially when there is background noise.
 - iii. Deaf children with severe hearing loss cannot hear normal conversations. They may also struggle to understand speech which has been amplified – i.e. made louder.
 - iv. Some deaf children with profound hearing loss have no hearing, but most have some hearing. These children will have difficulty hearing/understanding even amplified speech.
3. What are the three main parts of the ear? Answer: outer; middle; inner.
 4. What causes conductive hearing loss? Answer: A blockage in the middle ear that prevents sound passing through the ear.
 5. What causes sensori-neural hearing loss? Answer: A problem in the inner ear affecting either the cochlea or the auditory nerve.
 6. Identify the different ways in which deaf people communicate with others.
Answer: speech; national or local sign language; finger-spelling; written language.

Activity 2: Understanding the impact of deafness on language and learning 🕒 60 minutes

Activity 2a: The impact of deafness on language development

Read this passage to the group:

Deaf pupils cover the whole range of ability. Deafness is not itself a learning disability and deaf pupils can achieve the same as other pupils if they receive the right support. However, as most teaching and learning involves listening and speaking, deaf children can face a lot of challenges from an early age.

In particular, childhood deafness has a major impact on learning spoken language as this usually develops naturally, through the sense of hearing and vision working together from a very early age.

However, deaf children are not all the same, and the impact of deafness of any individual child will vary and will be influenced by a number of factors.

After you have read the passage, ask the participants (working in pairs) to make a list of those variables which they think might influence the language development of a deaf child.

Answers should include:

- The level of deafness
- The type of deafness

- The age at which the child becomes deaf
- The age at which deafness was detected and then managed
- The level of support from parents and their communication with the child
- The quality of professional support the child receives
- The cognitive ability of the child
- The personal characteristics of the child (e.g. their determination)
- The effectiveness of hearing aids and how often they are worn
- The support provided by teachers
- The attitudes and behaviour of other children

Then remind the whole group that spoken language is a two way process involving both receptive skills (i.e. understanding what others are say) and expressive skills (i.e. communicating to others).

Ask the participants if they think both receptive and expressive skills will be affected by deafness. (The answer is yes.)

Ask them if these difficulties will affect the child's confidence and social skills. If so, how might they be affected?

Activity 2b: The impact of deafness on access to learning

Now read this passage to the group:

The impact of deafness on communication and language development in a classroom can mean a deaf child finds it difficult to:

- a) Understand what people are saying and therefore what is happening around them
- b) Think things through and solve problems
- c) Understand and express what they are feeling and manage their emotions.

Ask participants, working in pairs, "What challenges will the deaf child face in school?"

After 5 minutes, get feedback and make a combined list.

Participants should not only identify the difficulties that deaf pupils can face with learning, but the difficulties they can face making friends and socialising with others.

In plenary, ask the participants to consider how a deaf child will feel in school if they do not receive the right support. Answers can include: feeling isolated, unhappy, lonely, insecure, frustrated, angry, puzzled, confused, upset, etc.

Finish by telling participants: “We have looked at the impact of deafness on language and learning. In the next activity we will look at how to remove these barriers and make the curriculum accessible for deaf children in the classroom.”

Activity 3: Effective teaching and learning for deaf children 🕒 60 minutes

Deaf pupils are likely to require additional support if they are to make the same progress as other pupils of similar age and ability. Adaptations and strategies will need to be put in place that minimise the impact of their hearing loss, develop their learning skills, provide access to the curriculum and encourage learning.

Activity 3a. Show participants a short video – Tips for teaching children with mild hearing loss 🕒 2.45 minutes. Explain that although the video is about children with mild hearing loss, the film is relevant for all children with hearing loss.

<https://www.youtube.com/watch?v=iyIb7TDn2Tk>

After you have shown the video discuss their ‘top tips’ for teaching deaf pupils with mild hearing loss:

1. Reduce background noise.

Ask participants “Why do these pupils need to be taught in classrooms where there is as little background noise as possible?”

Then ask the participants to identify ways they can reduce background noise in the classroom.

2. Make sure these children can read your lips.

Ask participants “Why is this important?”

Then ask the participants, “What does this mean in terms of: a) the position of the teacher in the classroom and b) in terms of the seating position in the classroom for these pupils?”

Answer: All the children should be seated in the classroom where they can clearly see the teachers, including the deaf pupils who should also be seated close to the teacher.

3. Get the attention of these children (before speaking to them)

Ask the participants: “Why is this important?”

Answer: So the children hear the first words spoken by the teacher and therefore clearly understand what the teacher is saying.

4. Ensure these children have plenty of breaks.

Ask the participants: “Why is this important?”

Answer: It is very important that these children do not have to listen for long periods of time. This is because listening for long periods of time can be stressful and tiring for them. They need to be provided with breaks from listening. For instance, after

listening to the teacher for five minutes, they could then be given opportunities to read or write or draw.

5. Other teaching tips.

Ask the participants to identify other teaching ‘tips’ for including deaf children in the classroom. These tips can include:

- Making sure key information is written on the blackboard
- Providing supplementary notes
- Using visual aids
- When addressing the class, speaking in short and simple sentences
- Speaking clearly
- Providing one-to-one support for these children
- Encouraging peer learning in their classrooms (in which children support one another’s learning).

Activity 3b.

Show participants a short Australian film on deafness: Understanding deafness 🕒
2.45 minutes

https://www.youtube.com/watch?v=l_EmsguJMic

After the film, discuss the key points of the film:

- Pupils with severe or profound hearing loss will hear much less than other pupils.
- Sign language is “a series of movements through your hands that mean different words”.
- Ask participants if they know any sign language and, if they do, ask them to demonstrate their sign language and identify the different words they are signing.
- Deafness can be congenital (people are born with the condition) or acquired (people develop it later in life).
- Hearing aids are used by some deaf people as it enables them to increase their hearing.
- Some deaf people have cochlear implants. A cochlear implant is an electronic device that is used to stimulate the auditory nerve fibres of an individual who is deaf. They are increasingly available in high income countries, but rarely available in low income countries.
- Hearing pupils can help deaf pupils inside and outside the classroom.
 - For instance, in the video, Ben (the fully hearing boy) helped his friend Jerry (the deaf boy) by relaying what the teacher had just said and writing down what the teacher had just said.

Ask participants if they can identify any other ways in which hearing pupils can help deaf pupils, both inside and outside the classroom.

Activity 4: Top tips for teaching deaf children 🕒 30 minutes

Distribute **Handout 2** to participants. Read through the handout with participants and discuss any concerns/observations.

Activity 5 (Optional activity) 🕒 45 minutes

Deaf people with different levels of hearing loss often use sign language as a means of communication.

Handout 3 shows the finger spelling alphabet for American Sign Language (ASL). Distribute this handout to participants.

Activity 5a: Ask the participants to sit in a circle and give them copies of the handout. With them, practise signing the various letters.

The participants should then work in pairs, with one signing particular words while the other tries to identify the words that are being signed. They should then reverse roles.

Handout 4 shows some useful signs. Distribute this handout to participants.

Activity 5b: Get the group to practise each of the signs on the sheet and then repeat the activity above using signs rather than finger spelling.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants can identify the challenges faced by deaf pupils with different degrees of hearing loss.
- ✓ Participants can identify ways in which they can help these children overcome these challenges.

Extension activities: ideas for collaborative learning/self-study

1. In order to increase their knowledge, participants can download additional materials on the education of deaf children. These materials include:

Deaf Child Worldwide (2017) Deaf Awareness Fact Sheet. Downloaded from:
[file:///C:/Users/glefanu/Downloads/DCW_Fact_Sheet_\(October_2015\)_-low_res.pdf](file:///C:/Users/glefanu/Downloads/DCW_Fact_Sheet_(October_2015)_-low_res.pdf)

Deaf Child Worldwide (2017) Family Friendly: Working with deaf children and their communities worldwide. Downloaded from:
[file:///C:/Users/glefanu/Downloads/Family_Friendly_Complete%20\(3\).pdf](file:///C:/Users/glefanu/Downloads/Family_Friendly_Complete%20(3).pdf)

Deaf Child Worldwide (2017) Guidelines for Teaching Sign Language. Downloaded from: http://www.deafchildworldwide.info/publications_and_resources/

World Health Organization (2012) Community-Based Rehabilitation: Promoting ear and health care through CBR. Downloaded from:

<http://www.who.int/pbd/deafness/news/CBREarHearingCare.pdf>

World Health Organization (2016) Childhood Hearing Loss: Strategies for prevention and care. Downloaded from:

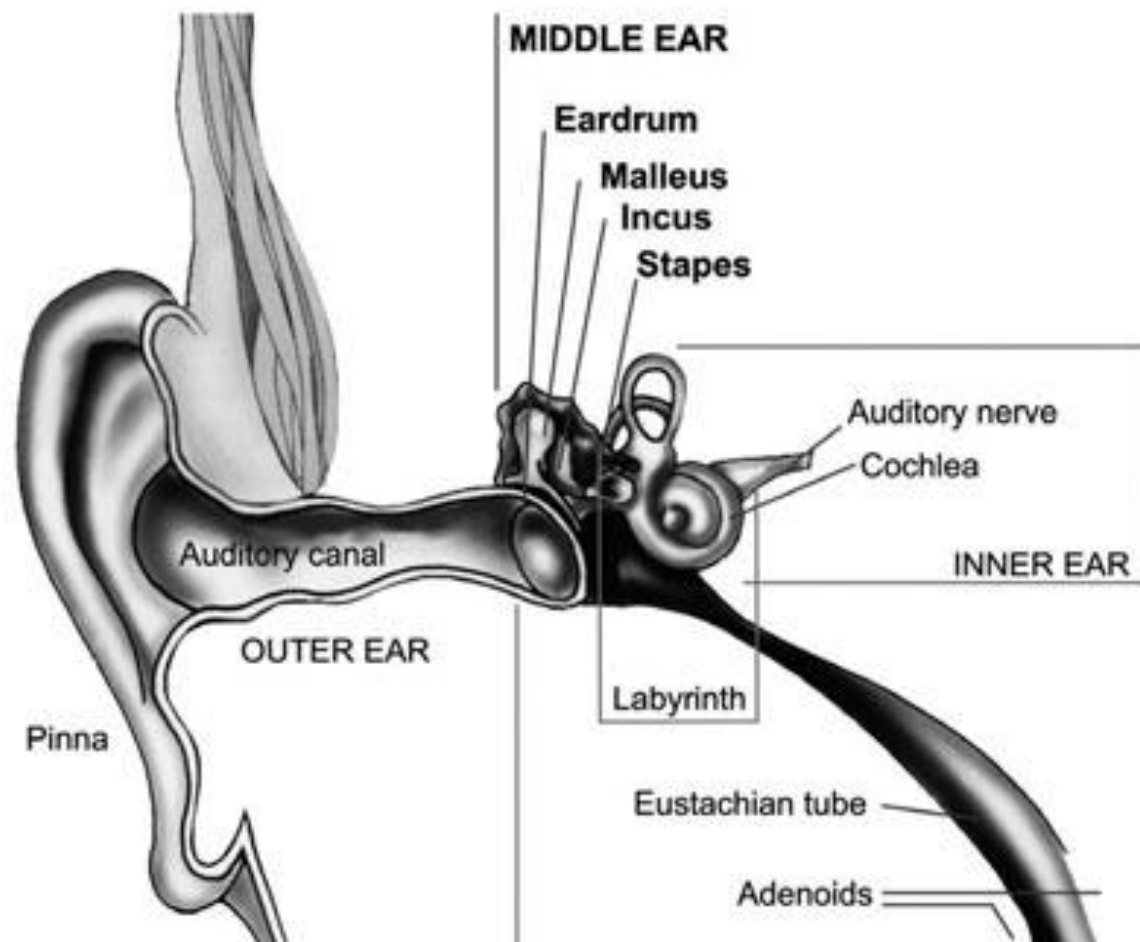
http://apps.who.int/iris/bitstream/10665/204632/1/9789241510325_eng.pdf

2. If participants teach deaf children, they can put the recommendations in this module into practice and report back on their experiences.
3. Participants can ensure pupils in their schools/classes are screened for hearing loss. They can invite ear health (audiological) personnel to carry out these screenings. Participants can then provide these pupils with the necessary support.
4. Participants can invite experts into their schools to talk about the education of deaf children – for instance, audiologists and specialist teachers of the deaf.

Ideas for ongoing support and supervision

Provided the participants have had appropriate training, the facilitator can assist participants to include deaf children in their schools. Participants can report back to the rest of the group on challenges and achievements.

Handout 1: Understanding deafness¹⁷



The diagram above shows the various parts of the ear.

a) How does normal hearing work?

The three parts of the ear anatomy are the outer ear, the middle ear and the inner ear.

- The outer ear consists of the pinna, ear canal and eardrum.
- The middle ear consists of the ossicles (i.e. the malleus, incus, staples) and the ear drum.
- The inner ear contains the cochlea and the auditory (hearing) nerve.

Sound waves enter the ear canal and make the ear drum vibrate. This action moves the tiny chain of bones (ossicles – malleus, incus, staples) in the middle ear. The last bone in this chain ‘knocks on’ the membrane window of the cochlea and makes the fluid in the cochlea move.

The following links describe how the ear works:

¹⁷ This material has been adapted from: Deaf Child Worldwide, 2017. *Deaf Awareness Factsheet*. DCW: London. The factsheet can be downloaded from: http://www.deafchildworldwide.info/publications_and_resources/

https://www.youtube.com/watch?v=0NJ_EAQjR3c (with subtitles)

<https://www.youtube.com/watch?v=r-c5GpoD8wI> (without subtitles)

b) Hearing problems

Hearing problems are different for each individual. No deaf child is the same. There are four levels of hearing loss.

- i. Deaf children with mild hearing loss find it difficult to hear soft speech or distinguish sounds when there is background noise.
- ii. Deaf children with moderate hearing loss find it difficult to hear conversation, especially when there is background noise.
- iii. Deaf children with severe hearing loss cannot hear normal conversations. They may also struggle to hear speech which has been amplified (i.e. made louder).
- iv. Some deaf children with profound hearing loss have no hearing at all, but most of these children hear something. Children with profound hearing loss will find it difficult or impossible to understand even amplified speech.

Listen to these simulations of a hearing loss:

<https://www.youtube.com/watch?v=ar1Dq-M2ok4>

<https://www.youtube.com/watch?v=PbBZjT7nuoA>

There are two main types of hearing loss: conductive and sensori-neural.

Conductive hearing loss is when sound cannot pass through the ear due to a blockage in the middle ear.

Sensori-neural hearing loss is when there is a problem in the inner ear.

c) Causes of deafness

Children can be born deaf. This can be due to:

- Genetic factors
- Illness
- Complications during pregnancy/birth.

Alternatively, children can become deaf during birth or later in life. This can be caused by:

- Diseases such as meningitis, rubella, measles and mumps
- Untreated 'glue ear'
- Certain drugs used to treat other infections
- An injury to the head/exposure to loud noise

d) Communication methods for deaf children

Depending on the level of deafness and other factors which influence the development and understanding of spoken language, deaf children can use various communication methods. These include:

- Speech
- Sign language (national or locally developed – see **Handout 5**)
- Finger spelling (see **Handout 4**)
- Gestures and facial expression
- Written language

Handout 2: Top tips for teaching deaf children

Remember! These tips will help all the children in your class!

- Get the child's attention before you start talking to them.
- Do not cover your mouth when speaking.
- Make it clear to the child what you are talking about. When you start talking about something else, make this clear to the child.
- Reduce background noise in the classroom as much as possible. If there is background noise, it will be even harder for the child to hear you. Make sure you face the child and keep eye contact as much as possible.
- Speak clearly and (where appropriate) use facial expression to communicate meaning.
- Do not stand with your back to the window – this can create a shadow on your face and make lip-reading difficult. Stand with your face exposed to the light.
- Use visual clues/aids whenever possible.
- Use your normal rhythm of speech (it is **not** helpful to mouth words slowly).
- It is important that people speak one at a time during conversations – otherwise, the deaf child will become confused.
- Ask a child how they prefer to communicate. For instance, are they happier using sign language? Regularly talk to the child to find out their problems and identify solutions to these problems.
- Regularly communicate with the child's family. You can then work together to support the children.
- Write important information on the blackboard. If necessary also provide supplementary notes for the deaf children in your class.
- Find out what local services are available for deaf children. Is there a hearing clinic? Are there teachers of the deaf? These people can help you to include the deaf child in your class.
- If the deaf child in your class communicates through sign language, make sure he/she has plenty of opportunity to demonstrate and develop his/her sign language skills. It would be helpful if you and the other pupils in the class can learn some sign language and use it when you can.

Handout 3: The finger spelling alphabet for American Sign Language (ASL)



Handout 4: Sign language – some useful signs



The poster above shows a few basic signs in British Sign language. More information and signs can be found at these websites:

<https://www.british-sign.co.uk/bsl-greetings-signs-british-sign-language/>

http://www.deafchildworldwide.info/publications_and_resources/index.html

8. Including children with physical disabilities¹⁸

 1 hour 30 minutes

Module objectives

By the end of this module participants will:

1. Be able to identify the challenges faced by pupils with physical disabilities.
2. Be able to identify ways in which teachers can overcome these challenges.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/screen/projector

Information to share with participants during this module

See Handouts 1 and 2.

Activity 1: 30 minutes

In plenary, read through and discuss **Handout 1** with participants. Encourage participants to discuss the challenges faced by people with physical disabilities in their communities, including children in their schools.

If time allows, you can show and discuss these two short videos (each 4-5 minutes long) on physical disabilities. The first discusses the different types of Cerebral Palsy and the second discusses treatment for children with clubfoot.

<https://www.youtube.com/watch?v=cOfUGUNxEqU>

<http://video.nationalgeographic.com/video/short-film-showcase/for-children-with-clubfoot-treatment-can-be-life-changing>

¹⁸ Sources for this module include: Fox M., 2003. *Including Children 3-11 with Physical Disabilities*. London: David Fulton Publishers. Ministry of Education, New Zealand, 2015. *Physical Disabilities: A Resource for Educators*. Ministry of Education: Auckland.

Activity 2: ⌚ 30 minutes

In plenary, read through **Handout 2** with participants. Encourage participants to discuss the challenges faced by children with physical disabilities in their schools.

Activity 3: ⌚ 30 minutes

In this activity you will discuss three case studies:

1. Solange is twelve. She cannot use her lower limbs (legs). She uses a wheelchair to travel from one place to another. She has full use of her arms and upper torso. She experiences no other difficulties. How would you include Solange in your school?
2. Yannick is fourteen and has mild cerebral palsy. He finds walking tiring which means he is sometimes late for school or tired when he arrives. His balance, strength and fine motor skills can be problematic. He finds it stressful and difficult to write for long periods of time. He also cannot carry out small, detailed tasks as easily as the other children – such as turning the pages of a book. How would you include him in your school?
3. Enjeck is eight and loves music, dance and reading. She has a short stature (she is 0.65 metres tall). She becomes tired easily and is vulnerable to being knocked over in busy areas of the school. Enjeck finds it difficult to manipulate small objects and use tools. However, she's an excellent problem solver. How would you include Enjeck in your school?

Divide participants into 3 groups. Give each group a case study and 20 minutes to discuss the case study. At the end of the 20 minutes, organise a plenary module in which each group presents their ideas to the rest of the participants.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants can identify the challenges faced by pupils with physical disabilities.
- ✓ Participants can identify ways in which teachers can overcome these challenges

Extension activities: ideas for collaborative learning/self-study

1. Ask participants, working in pairs, to identify classroom activities (for instance, specific types of sporting or craft activity) which could be potentially challenging for pupils with physical disabilities in their classes. Participants should identify ways in which these activities can be adapted for children with physical disabilities. They should then report back to the other participants.

2. Participants can identify physiotherapists, occupational therapists and other health professionals in their communities. They can then invite these health professionals to give talks at their schools about supporting children with physical disabilities.

Ideas for ongoing support and supervision

The facilitator can assist participants to include children with physical disabilities in their schools. Participants should report back to the other participants on any challenges they have faced and how they have overcome these challenges.

Handout 1: Children with physical disabilities

Some physical disabilities are relatively 'mild' and have little or no impact on the ability of children to participate in everyday life.

However, some physical disabilities can cause considerable difficulties for the child – although these difficulties will be significantly reduced if the child is provided with good quality support.

Physical disabilities can affect different parts of the body:

- Monoplegia is when one limb is affected
- Hemiplegia means one side of the body is affected
- Diplegia is when two arms or two legs are affected
- Quadriplegia means all four limbs (and usually the whole body) is affected.

Children with more severe physical disabilities can find it challenging to:

- Safely move around classrooms and the wider school environment
- Grasp or use certain learning tools and materials, particularly writing tools
- Take part in certain school and classroom activities – for instance, craft and sports
- Carry out certain self-care tasks such as using the toilet, eating or changing clothes
- Children can be born with physical disabilities.

Alternatively children can become disabled following an illness (such as polio) or from being injured (for instance, during a car accident or from falling from a tree).

Some physical disabilities are the result of children being born with certain conditions. Two of these conditions are discussed below:

Cerebral palsy

Cerebral palsy is a condition which is present from birth and means that the brain has difficulties controlling bodily movements.

Children with cerebral palsy may also have difficulties controlling the muscles in their mouth. This means they may have difficulties with speech.

Some children have 'mild' cerebral palsy. These children experience few difficulties with moving. Other children with more severe forms of cerebral palsy will experience greater difficulties.

There is no 'cure' for cerebral palsy.

Cerebral palsy is a 'static' condition. This means children should not lose any of their skills while they are in school. However, if they experience increasing difficulties, you should refer them to medical services immediately.

It has been estimated by the World Health Organization that 1 in 300 children in Africa has cerebral palsy.

To find out more about the condition, please watch this video on different types of cerebral palsy (Cerebral Palsy Alliance) (4.23):

<https://www.youtube.com/watch?v=cOfUGUNxEqU>

Clubfoot

Clubfoot is a condition that twists the foot inwards, making it difficult or impossible to walk. It can affect one or both feet. The photo below shows the feet of a baby with this condition.



Children are born with clubfoot. It is important that clubfoot is diagnosed soon after birth and children receive the right treatment as soon as possible. With the right treatment, the child should have a nearly normal foot. He or she will be able to run and play without pain and wear normal shoes.

Around the world, it is estimated that 150,000-200,000 babies with clubfoot are born every year. Approximately 80% of these are in developing countries.

To find out more about treatment for children with clubfoot, it is recommended you watch the following video (5.19):

<http://video.nationalgeographic.com/video/short-film-showcase/for-children-with-clubfoot-treatment-can-be-life-changing>

Supporting children with physical disabilities

Children with physical disabilities can benefit from various types of support from local health services:

- Some children with physical disabilities can benefit from assistive devices such as crutches, walking frames and wheelchairs.
- Some children with physical disabilities can benefit from physiotherapy – physiotherapists are health professionals who use physical methods such as massage and exercise to help people.
- Some children with physical disabilities can benefit from occupational therapy – occupational therapists are health professionals who help people acquire the skills to carry out important daily tasks.
- Some children with physical disabilities can benefit from various types of treatment, including, sometimes, surgery.

Handout 2 discusses how you can support children with physical disabilities in the classroom situation.

Handout 2: Top tips for teaching children with physical disabilities

- Be flexible! Remember every child and every situation is different!
- Find out as much as possible about the child's physical disability and how it affects the child. Share this knowledge with your colleagues
- Encourage open communication. Talk to the child and the child's family regularly.
- Some children require assistive devices – e.g. crutches, wheelchairs, walking frames. Make sure they have these devices.
- Is your classroom furniture (chairs/desks) suitable for the child? If not, it will need to be adapted or changed.
- If the child has difficulty travelling to and from schools, work out ways you and others can work together to improve this situation.
- Is the child able to travel easily and safely round your school? Accompany the child around the school and you will get a better idea of the problems the child faces.
- Can the child access/use toilets and hand-washing facilities? If not, what can you and your colleagues do to improve this situation?
- Are there wheelchair ramps in your school? If not, they should be installed.
- Make your classroom as uncluttered as possible. Make sure chairs are pushed under desks and bags stowed away. Corridors and pathways must also be clear.
- If the child has difficulties holding a pen/pencil/ crayon, wrapping fabric around it may help the child. Alternatively, the child may benefit from a thicker writing instrument.
- Felt tips and marker pens may be easier to use for those children with physical disabilities who find it hard to make marks on paper.
- If the child finds it difficult to complete writing tasks, give them more time, shorten the task, or find someone else to write for the child. Alternatively can the child record his/her work on a mobile phone or some other device?
- If the child finds it difficult to take part in a classroom activity, adapt the activity or replace that activity with another activity. Alternatively, ensure other children help the child to take part in the activity.
- Can the timetable be changed so it is easier for the child to travel between classes?
- When speaking to someone in a wheelchair for a long period, kneel or crouch in front of them. This will avoid them having to look up which can be tiring and painful for them.
- Working with the child and the child's caregivers, find out how personal issues can be managed (like going to the toilet).
- Advocate for the child. Otherwise the child will probably not get the necessary services /support/ equipment.

9. Including children with intellectual disability¹⁹

 **2 hours**

Module objectives

By the end of this module participants will:

1. Know some key facts about intellectual disability.
2. Understand that there are many reasons why children have problems with learning – intellectual disability is only one possible reason. Teachers must therefore not assume that a struggling pupil has an intellectual disability.
3. Be able to identify ways in which teachers can support children with intellectual disability in the classroom.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/screen/projector

Information to share with participants during this module

See **Handouts 1 and 2** and **Module Notes**.

Introduction

The facilitator should explain to participants that in this module participants will be discussing:

1. What is intellectual disability
2. The challenges involved in identifying children with intellectual disabilities
3. Four case studies in order to decide the nature of the children's problems and what can be done to help them

¹⁹ Sources for this module include: Foreman, P., 2009. *Education of Pupils with an Intellectual Disability: Research and Practice*. Information Age Publishing, Inc.: Charlotte, North Carolina.

4. 'Top tips' for including children with intellectual disability in their classes ('top tips' which will also benefit other children)

Activity 1: What is intellectual disability? 🕒 30 minutes

Watch and discuss the video produced by Bethesda Lutheran Communities. This short video (2.12 minutes long) is useful as it summarises some of the key facts about intellectual disability.

https://www.youtube.com/watch?v=V_mTP9WLdcl

Distribute **Handout 1** and read it through with the group. Participants can be encouraged to think of pupils they have met or taught who showed signs of having an intellectual disability. Participants can make notes on their copy of the handout.

Activity 2: Identifying children with intellectual disability 🕒 50 minutes

Put the participants into groups. Distribute **Handout 2a** which consists of case-studies of five pupils. Read through Handout 2a with the participants. Then put them into groups and ask them:

- a) To identify which of the pupils in the case-studies has intellectual disabilities
- b) If the answer is NO, to suggest what other reasons there could be for the child's learning problems.

After 10 minutes, ask the participants to provide their answers in plenary. Then distribute **Handout 2b**. Read through the handout with the participants. Afterwards, emphasise to participants:

Although the pupils are all having difficulties, not all of them may have an intellectual disability.

There are many different reasons why pupils under-perform in class. If a child is struggling in class, it may have little or nothing to do with the intelligence-level of the child.

Ask the participants to identify the different reasons why children can under-perform in class and write these reasons on flip-chart paper so the participants can see these reasons. These reasons should include:

- The child has a communication difficulty (see **Module 13**)
- The child has a visual impairment (see **Module 6**)
- The child has a hearing impairment (see **Module 7**)
- The child is shy or lacking in confidence
- The child is malnourished
- The child is unwell
- The child is depressed or worried
- The child is frightened of the teacher/dislikes the teacher

- The child is being taught badly, so fails to achieve his/her potential
- The child is not familiar with the language used for classroom communication (see **Module 19**)
- The child is being mistreated at home
- The child is being bullied by the other pupils (see **Module 28**)
- The child is being physically or sexually abused (see **Module 27**)

Activity 3: Supporting pupils struggling in class 🕒 20 minutes

It is important the facilitator emphasise that classroom teachers can do a lot to help identify the needs of pupils who are struggling and then to help children to perform better in class.

Get students to return to their groups and refer them to **Handout 2a**. Ask each group to make a list of the actions a teacher could take to help each of the four pupils. After five minutes get the groups to share their answers in a plenary, writing the answers on a flipchart so all can see.

Suggestions could include:

1. **Solange**. Contact her mother to see what help could be provided to help her and the family at this difficult time. This could include gifts of clothes, food or other essentials to help ensure the six children have enough to eat and places to sleep. Is there anything her friends at school could do to encourage and support Solange?
2. **Hervé** is a bright student who is underachieving, possibly because of deafness or a communication difficulty. You should arrange for his hearing to be checked by an ear health professional. If available, contact a Teacher of the Deaf (TOD) to seek support for his learning and to see if hearing aids might be necessary. The TOD can also advise on seating position and classroom management. If his hearing is normal, then ask a speech therapist to assess his communication and offer advice on classroom management.
3. **Clémentine** is another bright student who would appear to have a visual impairment. She should be referred to an eye health specialist so her sight can be assessed. If possible, she should also be referred to a specialist teacher of the visually impaired who can advise on levels and types of classroom support.
4. **Fabrice**. Teacher should contact the parents to talk about his poor progress and see if you can identify any reasons for it. Together you may be able to come up with suggestions to help him in class, and it may be possible to identify pupils in the class who would be willing to work alongside him and give him help and confidence. Are there any other classroom helpers who could work with him, or perhaps a parent who would be willing to act as a teacher's assistant and give him extra support? If possible, his intellectual ability should be assessed by a qualified professional. He could then be given a more appropriate programme of work at an easier level.

Activity 4: Top tips for supporting children with intellectual disability 🕒 20 minutes

Distribute, then read through and discuss, **Handout 3** with participants.

Encourage participants to make notes on this handout to help them remember them so they can put them into practice in their own classrooms.

It is important to emphasise to participants that these 'top tips' will benefit all the children in their classes, not just children with intellectual disability.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

By the end of this module,

- ✓ Participants know some key facts about intellectual disability
- ✓ Participants will understand that there are many reasons why children have problems with learning – intellectual disability is only one reason. Teachers must therefore not assume that a struggling pupil has an intellectual disability.
- ✓ Participants can identify ways in which teachers can support children with intellectual disability in the classroom.

Extension activities: ideas for collaborative learning/self-study

Consider what it is that makes a good teacher.

- Ask the participants to identify their favourite teachers and think of the ways in which these teachers helped them to succeed in class. (Remember to tell them not to use the teacher's actual names.)
- Ask people to volunteer their answers in a plenary. Try to make it a humorous session with laughter. This will make it enjoyable and reinforce the positive message.
- Now ask the participants to think of about their worst teachers and the negative impact these teachers had on their academic performance.
- Ask people to volunteer their answers in a plenary. Use humour again if possible.
- Tell them that this shows the really important role that good teachers can play in helping students to be happy and successful in school.
- By contrast, bad teachers can have the opposite effect.

Ideas for ongoing support and supervision

The facilitator can assist participants to include children with intellectual disability in their schools. Participants should report back to the other participants on any challenges they have faced and how they have overcome these challenges.

Handout 1: Key facts about intellectual disability

What is intellectual disability?

People with intellectual disability face two types of difficulty.

First, they have significantly lower levels of intellectual functioning than average. For instance, they may find it difficult to understand simple ideas or to make sense of relatively straightforward events.

Second, they have significant difficulties with 'adaptive functioning' – in other words, they find it hard to handle certain commonly-occurring, real life situations. For instance, they may have difficulties with:

Reading, writing, telling the time, following rules etc.

Looking after themselves (e.g. to wash, dress and/or feed themselves)

Communicating with others (expressing themselves and understanding what others are saying)

An intellectual disability can be mild, moderate or severe.

What are the causes of intellectual disability?

Intellectual disability can have pre-natal, peri-natal and post-natal causes. In other words, intellectual disability can develop before birth, during birth or after birth.

Examples of pre-natal causes of intellectual disability are genetic conditions (e.g. Down Syndrome or Fragile X Syndrome) or the child developing a problem in the womb (e.g. because the mother is malnourished).

Examples of peri-natal causes of intellectual disability are prematurity (a child is born very early) or poor medical services for the mother and child around the time of birth.

Examples of post-natal causes of intellectual disability are malnutrition (affecting a child's development), a health problem, or an injury (e.g. a child being injured in an accident).

Although these are some of the causes of intellectual disability, the cause in the majority of cases is unknown.

How is intellectual disability assessed?

The most common way of assessing intellectual functioning is through an IQ test. This measures the intellectual quotient (IQ) of the child. The average score is 100 and any child with a score of 70 or lower would generally be regarded as having an intellectual disability.

However, assessing intellectual disability is a difficult and controversial process and should only be carried out by people who have had appropriate training in the use of IQ tests. Just asking the child a few questions is not an ethical or effective way of

assessing intellectual disability. Anyone undertaking an assessment needs to be aware:

- Children often underperform in assessments – for instance, if they are worried, frightened, confused, tired and/or hungry – and therefore it is wrong to put too much faith in a few test results.
- Assessments need to be culturally and contextually appropriate – for instance, assessment tests developed for West African countries will need to be different from those developed for European countries. Tests also need to be delivered in local languages and in ways that do not distress or embarrass the child.
- There is no point carrying out an assessment if the child and the child's family will not receive a package of support once the child has been assessed as having an intellectual disability. You will be simply labelling a child as intellectually disabled, something likely to be distressing both for the child and the child's family.
- Assessing a child and then failing to provide the appropriate support would be considered unethical, although demonstrating needs can be important in arguing for the provision of increased and suitable resources.

Handout 1a: Which of these pupils has an intellectual disability? Case-studies.

1. **Solange** is 12 years old. Her academic work is very poor. You find out that that her father has recently died and her mother is struggling to make ends meet. Solange has five other brothers and sisters, all younger than her, which makes things difficult for the family. Solange looks very tired and malnourished. She quite often misses school as she has to stay at home and care for her siblings.
2. **Hervé** is 12 years old. He seems to find it really difficult to understand what people are saying. When you speak to the class, he either looks puzzled or bored. He also has a very limited vocabulary and finds it very hard to express himself both orally and on paper. However, he is very good at solving mathematics problems – one of the best in the class – and draws beautifully. He can be very badly-behaved in lessons and sometimes runs out of the classroom.
3. **Clémentine** is 10 year old. She sits at the back of the classroom with a group of friends. She is a very pleasant and polite pupil. She has a large vocabulary and contributes well to class discussions. However she finds reading very hard. She holds the book very close to her nose and reads very slowly. Her handwriting is very large and untidy. She appears quite clumsy and moves slowly and hesitantly around the school. She also appears unable to read what you have written on the board unless she stands right in front of the board.
4. **Fabrice** is 8 years old. He is very quiet and sits on his own in the classroom. He does little or no work. You have tried to provide him with one-to-one help, but this is very difficult because you have a large class of pupils. Although he comes to school every day, you can't see any point in him continuing in school as he doesn't seem to be making any progress.

Handout 2b: Which of these pupils has an intellectual disability? Answers.

There is no evidence that any of the children has an intellectual disability ...

1. There is no evidence that Solange has an intellectual disability. Her difficult home conditions are affecting her academic performance.
2. There is no evidence that Hervé has an intellectual disability. He is a talented pupil. However, given his difficulties, it is possible he has a hearing difficulty. You need to ensure his hearing is tested by an ear health professional. Alternatively, he may have a communication difficulty of some sort.
3. There is no evidence that Clémentine has an intellectual disability. In fact, she appears to be an intelligent and articulate pupil. However, all the signs indicate that Clémentine has a visual impairment.
4. It is possible that Fabrice has an intellectual disability though there may be other reasons why he is performing badly in class and more assessment is needed.

Handout 3: Top tips for teaching children with intellectual disability

- **Believe in the child.** Every child has enormous potential. You just need to find the key for unlocking that potential.
- **Treat the child with respect.** Children will blossom if they feel respected and liked.
- **Plan learning.** Organise your learning for the year, the term, the week, the day. If you do that you will know what you are doing and why.
- **Segment learning.** Don't try to teach the child everything all at once. Introduce new topics gradually, one step at a time.
- **Move from the known to unknown.** For instance, if you want to teach about the natural world, build on the child's existing knowledge and experience.
- **Make learning sequential.** For instance, don't ask the child to add two digit numbers when they haven't yet learned to add one digit numbers!
- **Allow the child to learn through experience** – through touching, through seeing, through hearing and through doing.
- **Reinforce learning.** Don't just teach something new and move on. Provide children with plenty of opportunities to practise new skills.
- **Scaffold learning.** Provide the learner with the necessary support, but slowly take away this support as the child becomes more skilled and confident. This will encourage the child to become an independent learner.
- **Don't 'squeeze' the curriculum.** Don't just focus on the '3Rs' (reading, writing and arithmetic). Give the child the opportunity to study a full range of subjects. Otherwise the child will become bored and frustrated.
- **Monitor the child's learning.** Make sure you know what the child knows and what the child still finds difficult. You can then target these weaknesses.
- **Praise the child.** But only when the child has made a special effort. When children are praised all the time, praise loses its meaning.
- **Communicate effectively.** What are the most effective ways you can communicate with the child? See **Modules 15, 18 & 19** for some ideas.
- **Encourage child-to-child learning.** This will take a burden from your shoulders and also teach the children useful social skills. See **Module 24** for some ideas.
- **Provide one-to-one support for the child.** If you are too busy to provide this support in class, can you provide this after a lesson? (But don't stop children enjoying their breaks!)
- **Seek out sources of support.** Are there expert teachers in your school who can help? Or could you visit a special school for children with intellectual disabilities for advice?
- **Work with the child's parents.** The child's parents can provide you with valuable information. They can also reinforce what you are doing in the school. Together you can help the child.

10. Including children with certain conditions

 **2 hours**

Module objectives

By the end of this module participants will:

1. Know some key facts about certain conditions – albinism, epilepsy and sickle cell anaemia.
2. Be aware of the ways these conditions can impact on children’s educational functioning.
3. Be able to identify ways in which they can support children with these conditions.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/screen/projector

Information to share with participants during this module

See Handouts 1, 2 and 3.

Activity 1: Albinism 50 minutes

Show Xakhubasa: The White Pride (24.02), a video about the challenges and triumphs of people with albinism living in South Africa:

<https://www.youtube.com/watch?v=aalwwdjhEno>

Discuss the challenges that people with albinism faced in the film and the ways they overcame these challenges. Ask them ‘To what extent do children with albinism in our country face the same challenges as the people with albinism in the film, and what can we do to support them?’

Distribute **Handout 1** with participants and read through and discuss.

Activity 2: Epilepsy 🕒 30 minutes

Show the video Epilepsy in schools: how to deal with a tonic clonic seizure (Epilepsy in Action) (2.29):

<https://www.youtube.com/watch?v=olArThAgUd8>

Distribute **Handout 2** to participants and read through and discuss. Working in pairs, participants can practise gently moving one another into the recovery position as shown in the handout.

Activity 3: Sickle cell anaemia 🕒 30 minutes

Show: How Pamela copes with sickle cell anaemia (2.24):

<http://www.nhs.uk/video/pages/PamelaGyebiAbabio.aspx>

Show the film and discuss the responses of Pamela and her parents to the condition. Did the condition stop Pamela succeeding in school? Did the condition stop the parents being proud of Pamela? Distribute **Handout 3** to participants and read through and discuss. Ask the participants to identify any children in their classes who are sometimes absent from school because of medical conditions such as sickle cell anaemia. Ask them to describe the ways they help these children.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

By the end of this module,

- ✓ Participants know some key facts about certain conditions – albinism, epilepsy and sickle cell anaemia.
- ✓ Participants are aware of the ways these conditions can impact on children's educational functioning.
- ✓ Participants are able to identify ways in which they can support children with these conditions.

Extension activities: ideas for collaborative learning/self-study

Ask participants to do research into other conditions that can affect the performance of children in the classroom. Ask them to report back their findings at the next module.

Ideas for ongoing support and supervision

The facilitator can assist participants to include children with various conditions in their schools. Participants should report back to the other participants on any challenges they have faced and how they have overcome these challenges.

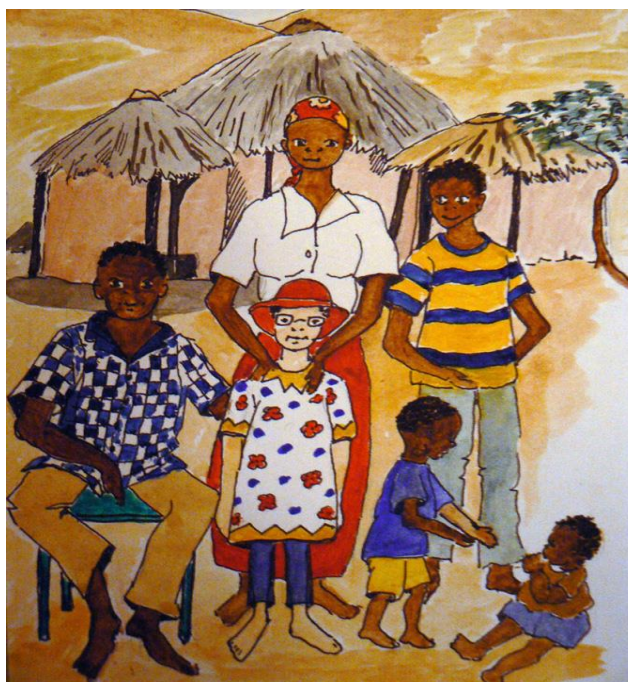
Handout 1: Children with albinism²⁰

Albinism is an inherited condition resulting in lack of black pigment in the hair, skin and eyes, making children with albinism look very different from their black-skinned peers.

Usually children with albinism are born to parents with typical black pigmentation. Sometimes only one child in a family has albinism and sometimes there are more.

The picture on the left shows Mena, a girl with albinism, with her family. As you can see, she is the only one of four siblings with albinism. Mena is wearing a wide brimmed hat as protection from the sun.

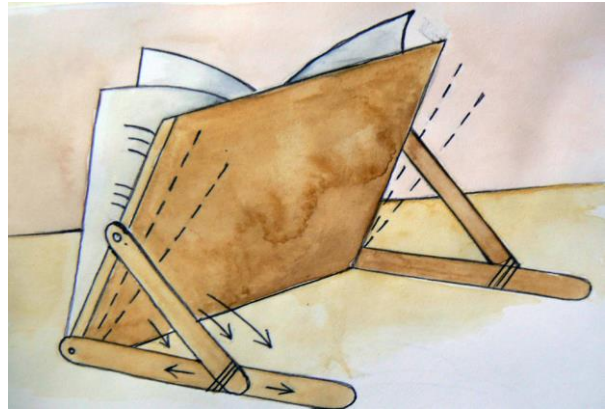
Albinism is inherited. It is not contagious, it cannot be 'caught' by others. Albinism is always associated with poor eye sight from birth. Children with albinism have low vision and are very sensitive to bright light. You can help them the children with albinism in your class by:



- Making sure that the child is assessed by an eye health professional and provided with appropriate follow-up support, including a pair of glasses to help them see better.
- Observing the child and talking to the child so you better understand the problems the child is facing and can respond appropriately.
- When they are outside, making sure they wear hats with wide brims, long sleeved shirts with collars, and sunglasses to protect them from bright light.
- Allowing them to continue to wear their hats when in the classroom.
- Making sure they have glasses which will help them to see better.
- Recognising that it will take them longer to complete reading and writing tasks than other children.
- Providing them with large print material if this is possible.
- Providing them with handheld magnifiers so they can see regular-sized print more easily, and helping and encouraging them to use these magnifiers.

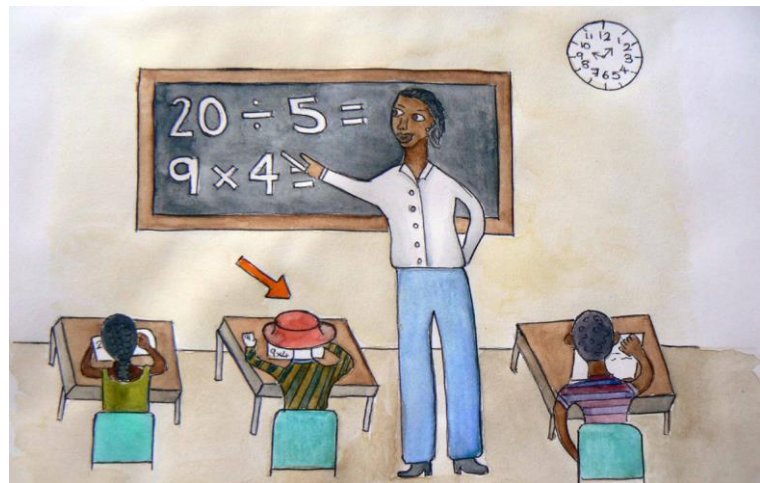
²⁰ The ideas and illustrations in this handout are taken from: Lund, P., Massah, B., Lynch, P., 2012. *Albinism in Malawi: Information for Parents*. The Albino Association of Malawi: Malawi.

- Providing them with reading stands which will make it easier for them to see regular print (see picture on the right of a reading stand).



- Making sure they receive the right medical treatment if their skin is blistered or sore because of exposure to bright light.
- Making sure they seek the shade and avoid the sun whenever possible, especially in the middle of the day.
- Making sure they are not exposed to bright light in the classroom, but also making sure they have sufficient light to see.

- Writing in big, bold clear letters on the blackboard and allow the child to sit near the front of the classroom so you can provide help easily and the child can see the board (as shown in the picture on the right).



- Treating the child with respect and kindness.
- Breaking down the barriers between the child with albinism and the other children – for instance, by establishing buddy systems and by making sure the other pupils understand that the child with albinism is just the same as them. The picture below shows a boy with albinism playing football with his friend.



Handout 2: Children with epilepsy²¹

Some children have epilepsy.

Epilepsy may occur on its own or with other conditions. Children with epilepsy may:

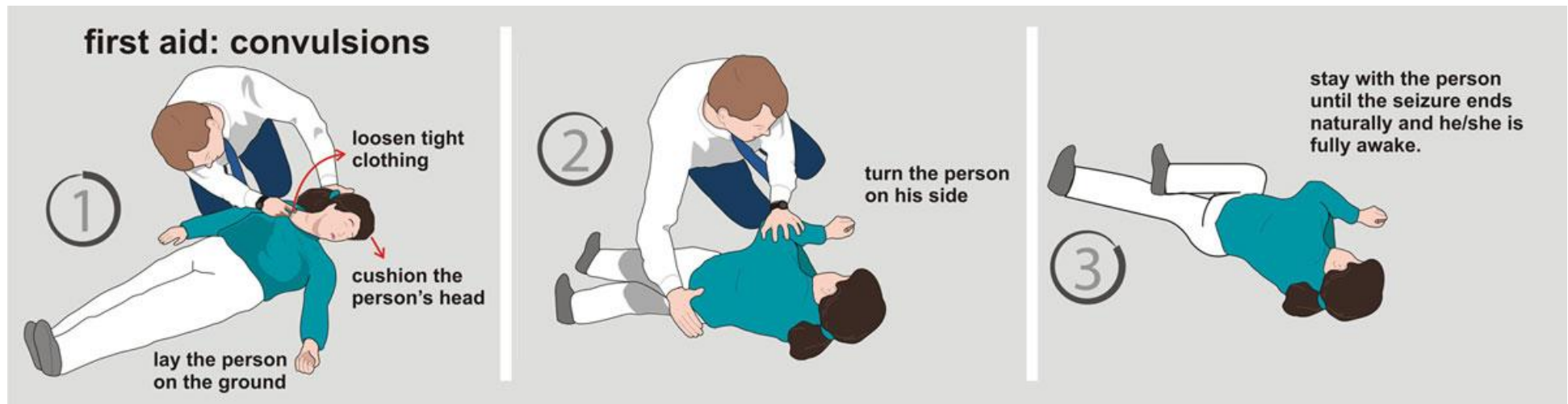
- Suddenly fall over for no reason and have jerky, uncontrolled movements.
- Suddenly lose consciousness or be unaware of their surroundings.
- Have spasms and/or jerky movements of arms, legs, or the whole body.

Epilepsy can be successfully controlled if children have access to the right medication, but if you see a child having a seizure:

Do:

- Protect them from injury (remove harmful objects which are near them)
- Cushion their head (for instance, by placing a pillow, cushion or rolled-up piece of clothing under it)
- Time how long the jerking lasts
- Aid breathing by gently placing them in the recovery position (**see picture on next page**) once the jerking has stopped
- Be calmly reassuring
- Stay with them until they are fully recovered

²¹ These ideas in this handout are taken from a British website: www.epilepsy.org.uk/info/firstaid



Don't:

Restrain their movements

- Put anything in their mouth
- Try to move them unless they are in danger
- Give them anything to eat or drink until they are fully recovered
- Attempt to bring them round
- If the seizure lasts for more than five minutes, you need to get the child to a doctor or get a doctor to the child.

Handout 3: Children with sickle cell anaemia²²

Sickle cell anaemia is a lifelong genetic condition that affects the blood and makes it hard for oxygen to travel around the body. Children with sickle cell anaemia may have difficulty breathing and they may experience shortness of breath and tiredness. Most children with sickle cell anaemia have few symptoms and lead normal lives most of the time. However, in some cases children may have painful episodes called 'sickle cell crises', which can be very severe and can last up to a week. These children may be absent from school for days or even weeks, and this can badly affect their progress. They may also experience other problems such as delayed growth and lung problems.

There are some easy things you can do to help children who are experiencing school absences through injury or regular illness. You should:

- Make sure they are having the right medical support
- Allow them to take rest breaks in class when they need them.
- Make sure they take plenty of fluids – so allow them to keep a bottle of water on their desks
- Allow them go to the toilet whenever they want, as they may need to urinate frequently
- Visit them at home and give them schoolwork to do at home
- Work with their parents to support the child
- Encourage their class mates to make daily visits to their homes and talk about what they have they have learned in school
- Encourage classmates to lend them the notes they have taken in class so they can read and copy them
- Make them feel very welcome when they come back to school.

There may be other children in your class who for various reasons are out of school for extended periods of time. These children will also benefit from you being understanding, keeping in touch with them, and encouraging their school mates to visit them at home.

²² The material in this handout is adapted from: McCall, S., McCall, J., 2017. *The Inclusion Champions' Handbook*. Sightsavers: Haywards Health, UK.

11. Including children with specific learning difficulties²³

 1 hour 30 minutes

Module objectives

By the end of this module participants will:

1. Understand the term specific learning difficulties (sometimes called 'dyslexia').
2. Be aware of the problems faced by children with specific learning difficulties.
3. Be aware of some strategies for supporting children with specific learning difficulties in the classroom.
4. Appreciate the importance of teachers breaking 'the failure cycle' sometimes experienced by pupils.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/screen/projector

Information to share with participants during this module

Pupils with specific learning difficulties (SpLD) are:

- i. Of average or above average intelligence.
- ii. Have difficulties with at least one of the three – reading, spelling and mathematics
- iii. Have organisational problems: e.g. problems following directions, being punctual, behaving appropriately in social situations, organising possessions, carrying out a series of tasks

²³ Sources for this module include: Dockrell, J., McShane, J., 1992. *Children and Young People with Specific Learning Disabilities*. UNESCO: Paris. Prior, M., 1996. *Understanding Specific Learning Difficulties*. Psychology Press, Ltd.: Hove.

The word 'dyslexia' is sometimes used to describe children with specific learning difficulties, but dyslexia is not such a good term as specific learning difficulties as dyslexia only refers to difficulties with reading.

It is not clear what causes specific learning disabilities. It is possible that they are the result of various factors, including genetic factors.

Activity 1: Introducing specific learning difficulties (SpLD) 🕒 60 minutes

In plenary, explain the term 'specific learning difficulties' (see information above). Ask participants if they can think of any pupils in their classes who have this problem.

Show the participants the video: Dyslexia Explained: What's it like being dyslexic? (🕒 7.15 minutes)

<https://www.youtube.com/watch?v=IEpBujdee8M>

After watching the video, ask the participants to identify the problems faced by Tom, the boy in the video. These problems include:

- Tom finds reading difficult
- Tom finds writing difficult
- Tom finds mathematics difficult – he get numbers back to front
- Tom's teacher, Mr. Treadwell, is very unsympathetic and does not help Tom. Mr. Treadwell does not understand that Tom has specific learning difficulties.
- Tom's mum was also unsympathetic, as she too didn't realise that Tom has specific learning difficulties.

It is very important that participants recognise that the major problem faced by Tom were not internal (i.e. his specific learning difficulties) but external (i.e. the attitudes and behaviour of others).

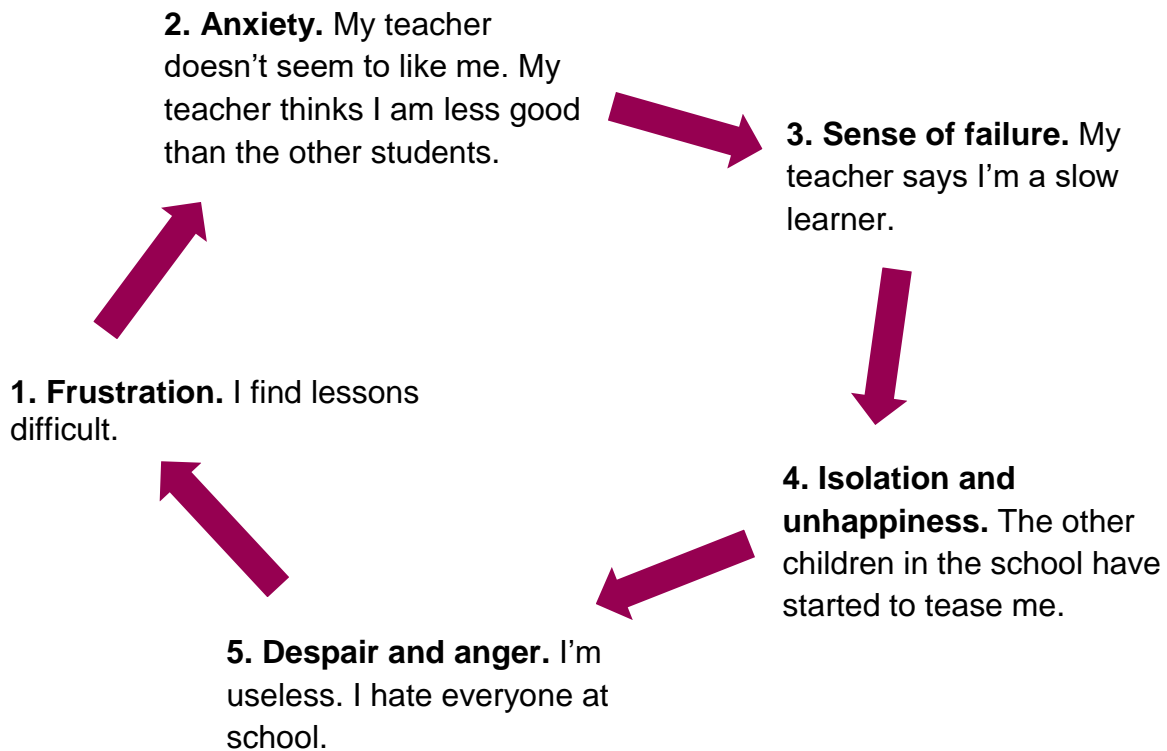
Then you should ask the participants, how Tom's situation improved:

- Tom was assessed and it was discovered he had specific learning difficulties
- Tom was provided with extra support and extra lessons
- The teacher no longer asked Tom to read in class
- The teacher no longer expected Tom to write long pieces of work
- The teacher provided Tom with notes, including details of any homework

You need to stress that participants that it may be difficult or impossible for them to identify anyone in their countries who can assess children for specific learning difficulties. However, the participants are likely to have children with specific learning difficulties in their classes, and participants therefore a) need to recognise that these children exist, and b) support them appropriately. Emphasise the importance of

teachers being supportive and encouraging in order to break the 'failure cycle' (see textbox below).

The Failure Cycle



Activity 2: Supporting children with specific learning difficulties (SpLD) in the classroom 🕒 30 minutes

In plenary, distribute **Handout 1** to participants. Discuss the handout with participants. Ask the participants to identify any other ways in which they can support children with specific learning difficulties in their classrooms.

Indicators of achievement

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

- ✓ Participants understand what is meant by the term specific learning difficulties (sometimes called 'dyslexia').
- ✓ Participants are aware of the problems faced by children with specific learning difficulties.
- ✓ Participants are aware of some strategies for supporting children with specific learning difficulties in the classroom.

- ✓ Participants appreciate the importance of teachers breaking 'the failure cycle' sometimes experienced by pupils.

Extension activities: ideas for collaborative learning/self-study

Participants can carry out an internet search in order to find out more about teaching and learning for children with specific learning difficulties/dyslexia. They can then report back to the rest of the group.

Ideas for ongoing support and supervision

Participants can identify children in their classrooms who are experiencing particularly severe difficulties with reading, writing and/or mathematics. The facilitator can help them to develop, implement and monitor/revise programmes of support for these children. The participants can report back to the rest of the group on the challenges they faced supporting these children and the ways they overcame these challenges.

Handout 1: Top tips for teaching children with SpLD

In general...

- Be understanding: recognise that children with SpLD face problems with certain areas of learning.
- Be appreciative: recognise that children with SpLD also have their own special talents
- Be sensitive: treat these children with respect.
- Be encouraging: praise them for hard work and achievements.
- Be realistic: don't ask them to do the impossible.
- Be supportive: provide the additional support they require.
- Provide remediation through 'precision teaching':
 - Identify the specific problems faced by the pupil.
 - Identify a programme of interventions.
 - Plan the programme step by step.
 - Monitor the success of the intervention.
 - Adapt the programme as necessary.

Encourage children to support each other's learning (see **Module 24**)

Help these children with their organisation – e.g. make sure they store their books and equipment in the same place every day so they know where they are.

If a pupil has reading difficulties...

- Don't ask them to read in front of others.
- Don't expect them to read large amounts of text, especially in short periods of time.
- Find someone else who can sometimes do some of the reading for the pupil with SpLD – for instance, another pupil...
- But make sure pupils with SpLD regularly practise their reading skills. Otherwise these skills will waste away.

If the pupil has writing difficulties...

- Don't expect them to write a lot, especially in short periods of time
- Provide the pupils with ongoing support for writing tasks. Explain the task clearly and check the pupil understands.
- Think of alternatives to written tasks – for instance, can the pupils make oral presentations or put their work on tape?
- But make sure pupils with SpLD regularly practise their writing skills. Otherwise these skills will waste away.

If the pupil has maths difficulties...

- Build upon what the pupil already knows.
- Teach new skills systematically, in an organised way.
- Try to relate mathematics to the real world.
- Regularly check for understanding.

12. Including children with emotional and behavioural difficulties²⁴

 1 hour 10 minutes

Module objectives

By the end of this module participants will:

1. Understand the term 'emotional and behavioural difficulties'.
2. Be aware of some ways they can support pupils with emotional and behavioural difficulties in the classroom situation.

Resources

- Flipchart paper
- Marker pens
- Handouts

Information to share with participants during this module

Children with emotional and behavioural difficulties are usually children who are very unhappy, often because of something frightening and unsettling that has happened in their home or community. Sometimes these frightening and unsettling events have happened a long time ago (i.e. in early childhood). Emotional and behavioural difficulties can also be caused by teasing and bullying experienced by these children at school.

As a result of their emotional problems, these children will sometimes 'withdraw into their shells'. For instance, they may sit at the back of the class, saying nothing, or sit on their own at break-times. They may also cut themselves or otherwise 'self-harm'.

Alternatively, these children can 'lash out', either verbally (e.g. through swearing and shouting) or physically (e.g. through damaging/throwing objects or hitting others).

²⁴ Sources for this module include: Hunt, N., Marshall, K., 2002. *Exceptional Children and Youth* (3rd edn). Houghton Mifflin Company: Boston. Long, R., Fogell, J., 1999. *Supporting Pupils with Emotional Difficulties: Creating a Caring Environment for All*. David Fulton Publishers Limited: London. Thacker, J., Strudwick, D., Babbedge, E., 2002. *Educating Children with Emotional and Behavioural Difficulties: Inclusive Practice in Mainstream Schools*. RoutledgeFalmer: London.

As you can see from the above, disturbed emotions result in disturbed behaviour. If teachers and other adults respond harshly to this behaviour or just ignore it, there is a danger that these the children will become even more emotionally disturbed and their behaviour will further deteriorate.

These children not only have a problem with learning in school, but also a problem making and maintaining relationships.

As teachers, you can help pupils with emotional and behavioural difficulties to gradually overcome their problems.

Activity 1: Defining emotional and behavioural difficulties 🕒 30 minutes

In plenary, define emotional and behavioural difficulties and identify the causes of emotional and behavioural difficulties (using the information above). Ask the participants to identify any children in their schools who exhibit the signs of emotional and behavioural difficulties.

Activity 2: Supporting children with emotional and behavioural difficulties 🕒 40 minutes

In plenary, distribute **Handout 1** to participants. This identifies ways in which teachers can support children with emotional and behavioural difficulties in their classrooms. Ask the participants to identify additional strategies for supporting children and write these down on flipchart paper.

Discuss with participants issues relating to supporting girls with emotional and behavioural difficulties (see textbox below).

Issues related to classroom and behaviour management are discussed in more detail in **Training Module 23**.

Gender responsive approaches for girls with emotional and behavioural difficulties

Research shows that teachers are more likely to identify boys with emotional and behavioural difficulties in their classrooms, and then more likely to do something to help these pupils. This is because boys are more like to engage in loud, aggressive behaviour seen as disruptive and threatening by the teachers. By contrast, girls are more likely to withdraw into themselves (although this is not always the case). Think about the the various factors that are particularly likely to lead girls to developing emotional and behavioural difficulties (e.g. parents not valuing girls; sexual abuse; pressure on girls to marry early). Then think of ways in which teachers can support girls with emotional and behavioural difficulties.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants will understand what is meant by the term emotional and behavioural difficulties.
- ✓ Participants will be aware of some ways of they can support pupils with emotional and behavioural difficulties in the classroom situation.

Extension activities: ideas for collaborative learning/self-study

Participants can carry out an internet search in order to find out more about supporting children with specific learning difficulties/dyslexia. They can then report back to the rest of the group.

Ideas for ongoing support and supervision

Participants can identify children in their classrooms who appear to be have emotional and behavioural difficulties. The facilitator can help them to develop, implement and monitor/revise programmes of support for these children. The participants can report back to the rest of the group on the challenges they faced supporting these children and the ways they overcame these challenges.

Handout 1: Top tips for including children with emotional and behavioural difficulties²⁵

- **Communicate:** communicate with pupils and their families
- **Understand:** Be aware of the needs of these pupils and the challenges they face
- **Encourage:** attach as much importance to effort as to achievement
- **Care:** appreciate children's heartfelt desire for success and recognition
- **Expect:** have high but realistic expectations
- **Respect:** value pupils for their qualities, skills and strengths
- **Challenge:** set challenging tasks for pupils
- **Be creative:** ensure your lessons are as stimulating and varied as possible
- **Plan and organise:** make sure activities are carefully planned and work is marked as soon as possible. Pupils should be regularly assessed.
- **Manage:** effective classroom management reduces misbehaviour and encourages learning
- **Consult:** other teachers at your school will have valuable skills and knowledge
- **Commit:** demonstrate commitment to the welfare of pupils

²⁵ The ideas in this handout are taken from: Long, R., Fogell, J., 1999. *Supporting Pupils with Emotional Difficulties: Creating a Caring Environment for All*. David Fulton Publishers Limited: London.

13. Including children with communication difficulties²⁶

 1 hour 30 minutes

Module objectives

By the end of this module participants will:

1. Be aware of three main types of communication difficulty and the reasons why some children experience communication difficulties.
2. Know how they can support children with communication difficulties, including children who stutter.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen

Information to share with participants during this module

See **Handouts 1 and 2**.

Activity 1: Understanding communication difficulties 50 minutes

In plenary, distribute **Handout 1** to participants. Read it through with participants, addressing any issues raised by them. Ask the participants to identify any children in their classes who have communication difficulties and the forms these difficulties take.

Distribute **Handout 2** to participants. Read it through with participants, addressing any issues raised by the participants. Ask participants to identify any other strategies they have used to support children with communication difficulties in their classes.

²⁶ Sources for this module include: Accardo, P., Whitman, B., 1996. *Dictionary of Developmental Disabilities Terminology*. MacLennan and Petty: Sydney. Frost, R., et al, 2002. *Special Education Reference Manual* (Draft 1). AusAID: Papua New Guinea. Hunt, N., Marshall, K., 2002. *Exceptional Children and Youth* (3rd edn.). Houghton Mifflin: Boston.

Tell participants that **Module 15** identifies ways in which they can communicate effectively with certain groups of children – children with visual impairment, deaf children and children with hearing loss, and children with intellectual disability. Also tell participants that **Module 18** discusses effective classroom communication. The participants will therefore have plenty of opportunities to learn more about supporting children with communication difficulties in their classrooms.

Activity 2: Stuttering 🕒 40 minutes

Stuttering is an expressive communication difficulty that affects many children, usually for short periods of time. It is far more common among boys than girls. Tell participants.

Stuttering occurs when children cannot help repeating parts of words or cannot say parts of words. It also occurs when children ‘get stuck’ saying part of a word.

Ask participants if any of them stuttered when they were children, or if any of them still stuttered. Encourage them to talk about their experiences. What problems did they experience? What happened to the problem?

Show the participants a video produced by the Stuttering Foundation:

Stuttering for kids, by kids (🕒 11.46 minutes)

<https://www.youtube.com/watch?v=Po-WMo8vXRY>

Afterwards, ask the participants to identify the ways other people (teachers and children) should not behave towards children who stutter, and also ask them to identify the ways that other people should behave towards children who stutter.

Distribute **Handout 3** to participants – this identifies the ‘do’s’ and ‘don’ts’ of supporting pupils who stutter.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement 🕒

- ✓ Participants will be able to identify the three main types of communication difficulty and understand why some children experience communication difficulties.
- ✓ Participants will know how they can support pupils with communication difficulties, including children who stutter.

Extension activities: ideas for collaborative learning/self-study

If there is a speech therapist living nearby, you can ask him/her to talk to participants about ways in which they can help pupils with communication difficulties.

Ideas for ongoing support and supervision

The facilitator can assist participants to support students with communication difficulties in their classrooms. Working together, the facilitator and participants can identify strategies for helping these children and monitoring the effectiveness of these strategies.

Handout 1: Understanding communication difficulties

Communication difficulties can be caused by a variety of factors. For instance, they can be caused:

- By another problem, such as intellectual disability, physical disability (e.g. cerebral palsy, cleft lip or palate), deafness or hearing loss, or an emotional or behavioural difficulty.
- Because their mother-tongue is not used for classroom communication
- Because they lack confidence, are tired or hungry or frightened of the teacher

There are three main types of communication difficulty:

1. **Expressive problems.** Expressive problems occur when children struggle to express themselves orally in words. Children may find the following difficult or impossible: putting words in the right order; finding the right word; speaking grammatically; or speaking in sentences (instead, they may use only one or two words). Children may also have problems with the physical act of speaking. For instance, they may not be able to physically produce certain sounds or words or they may stutter (see **Handout 3**). They may also speak too softly or too loudly or speak in a dull, expressionless tone of voice.
2. **Receptive problems.** Receptive problems occur when children cannot understand what others are saying. These problems are often hard to identify, but they can seriously affect children's learning. Children with receptive problems struggle to understand words and combinations of words (e.g. sentences).
3. **Interaction problems.** Interaction problems occur where children have problems talking with others. This is often because they have expressive and/or receptive problems – i.e. they struggle to put their thoughts into words and/or struggle to understand what other people are saying. It may also be because they lack conversation skills. For instance, they may have the following problems: taking turns when speaking; looking people in the eye when speaking; knowing what should and should not be said in certain social situations; and beginning and ending conversations.

It is important to note that some children may have one or more of the above problems – indeed, some will have expressive, receptive and interaction problems.

Communication difficulties not only affect children's learning, but their capacity to form relationships with others. They can also badly damage a child's self-esteem. Consequently, it is very important that teachers assist these children.

Handout 2: Top tips for including children with communication difficulties

For children with expressive problems...

- Don't speak for the child. Wait until the child has finished speaking, and don't finish sentences for them.
- Allow the child sufficient time to ask and answer questions.
- Don't force the child to speak in front of the rest of the class, but gently encourage the child to participate in class discussions.
- When appropriate, ask simple, short questions that require short answers or just a nod or shake of the head.
- If you don't understand what the child is saying, don't pretend that you do.
- Provide structured opportunities for pupils to communicate in class.
- Make sure they understand tasks, and don't make tasks over-complicated.

For children with receptive problems...

- Organise your thoughts before speaking. Otherwise you will confuse the child.
- Speak clearly and concisely to the child. Use simple, straightforward language.
- Where possible/appropriate, use visual aids to make yourself clear.
- Consider alternative communication methods – e.g. drawing, writing or pointing at pictures and signs.
- If you think you have not been understood, don't just keep repeating the sentence. Instead, rephrase the sentence so your meaning is clearer.
- Observe the child's facial expressions and body language. This will help you to know how much the child is understanding.
- Proceed from the known to the unknown. Focus on things the child understands.
- Use the child's mother-tongue whenever possible/appropriate.
- Never assume a child with communication difficulties cannot understand you.
- Don't expect the child to listen for long periods of time – i.e. any longer than a few minutes.
- Minimise unnecessary explanation. At times, a child will learn better through observing and copying what others are doing.

For children with interaction problems...

- Model good communication practice. Set an example for your pupils to follow.
- Encourage all your children to model good communication practice – e.g. to speak clearly, to listen carefully, not to interrupt.
- Organise group discussions – the child with communication difficulties will benefit from interacting with fluent communicators in your class.
- Make sure all your pupils are aware of the key elements of good communication in terms of speaking and listening.

Handout 3: 'Do's' and 'Don'ts' for children who stutter²⁷

DON'T

- Exaggerate the severity of the problem
- Assume the child will inevitably stop stuttering
- Assume the child is stuttering to get attention
- Ridicule the child
- Allow others to ridicule the child
- Interrupt the child
- Tell the child to slow down or think before speaking
- React with alarm
- Force the child to speak in front of the rest of the class
- Assume that a child who stutters has difficulties with learning
- Tell children who stutter (or their families) that they have 'communication disorders'
- Think that you can teach the child to speak without stuttering

DO

- ✓ Put the 'problem' in its proper 'perspective: it is only a problem if other people make it a problem
- ✓ Try to create a relaxed learning environment
- ✓ Discuss teasing with the child and the child's class (you don't have to mention that one of the children in the class stutters)
- ✓ Talk to the child
- ✓ Talk to the family members and reassure them

²⁷ Source: Hunt, N., Marshall, K., 2002. *Exceptional Children and Youth* (3rd edn.). Houghton Mifflin Company: Boston.

14. Assistive technology for children with disabilities²⁸

 1 hour

Module objectives

By the end of this module participants will:

1. Know what is meant by assistive technology.
2. Be able to identify some of the types of technology required by children with disabilities.
3. Know that assistive technology for children with disabilities should be appropriate, available, affordable, adaptable and acceptable.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen

Information to share with participants during this module

Assistive technology is the umbrella term used to describe the different types of equipment and resources which enable children with disabilities to participate more fully in a range of activities – in the home, the school and the community. This technology can range from very simple devices to very sophisticated pieces of information technology.

Assistive technology should be:

- **Appropriate:** The technology must meet children's real needs, given the environments in which they look
- **Available:** Technology, and the assistance which will enable children to make best use of this technology, should be locally available

²⁸ The material for this module is taken from: WHO/UNICEF, 2015. *Assistive Technology for Children with Disabilities: Creating Opportunities for Education, Inclusion and Participation*. WHO: Geneva. Downloaded from: <https://www.unicef.org/disabilities/files/Assistive-Tech-Web.pdf>

- **Affordable:** Everyone who needs this technology should be able to have it. Many people will not be able to have this technology unless it is free of charge or subsidised.
- **Adaptable:** The technology should be adapted to meet children's needs. When children 'grow out' of this technology, they should be provided with new technology when they need it.
- **Acceptable:** Children with disabilities and their families must be satisfied with this technology.

It is important to stress that children not only need the right assistive technology, but also the training and on-going support to make best use of this technology.

Activity 1: Introducing assistive technology 🕒 40 minutes

In plenary, ask the participants to identify the types of equipment and resources used by the children in their classroom – e.g. pencils, paper, textbooks, chairs and desks. List the different types of equipment and resources on flipchart paper. Explain that some children with disabilities require additional equipment and resources. This is called assistive technology. Provide two or three examples of assistive technology to facilitate the group's understanding. Stress that this assistive technology must be appropriate, available, affordable, adaptable and acceptable.

Show the participants a short video, IRIS: Assistive Technology, on assistive technology (🕒 2.45 minutes): https://iris.peabody.vanderbilt.edu/training/module/at/cresource/q01/at_01/

After the video, ask participants which of these types of assistive technology they can see pupils with disabilities using in their classrooms.

Distribute **Handout 1** to the participants and read through and discuss.

Activity 2: Different types of assistive technology 🕒 20 minutes

Distribute Handout 2 to participants. Ask the participants to identify any types of equipment missing from the list. Answer any questions the participants may have.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

By the end of this module,

- ✓ Participants know what is meant by assistive technology.

- ✓ Participants are be able to identify some of the types of technology required by children with disabilities.
- ✓ Participants know that assistive technology for children with disabilities should be appropriate, available, affordable, adaptable and acceptable. In addition, children with disabilities should be provided with the training and on-going support that will enable them to make best use of this technology.

Extension activities: ideas for collaborative learning/self-study

Participants can bring a piece of technology to the next training and explain a) how a child with a disability is using this technology in the classroom and b) how they are helping children to make best use of this technology.

Ideas for ongoing support and supervision

The facilitator can assist participants to identify the assistive technology needs of children with disabilities in their classrooms and then ensure these children receive the right equipment and are able to use it effectively. The participants can then report back to the rest of the group on their experiences.

Handout 1: Examples of assistive technology can assist children attain their rights

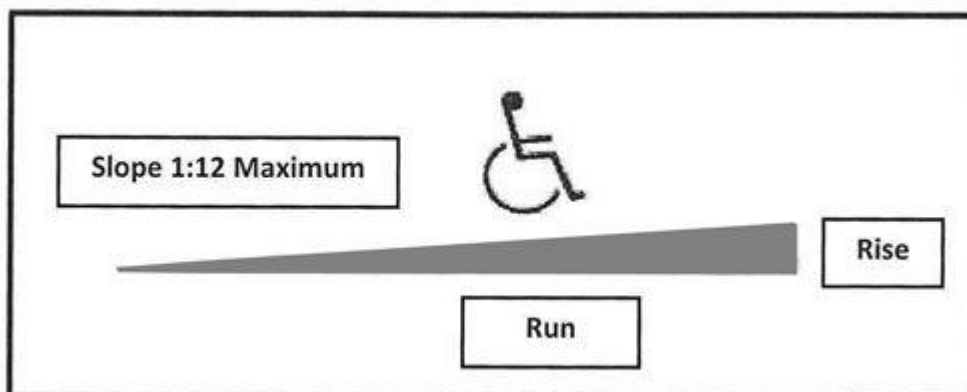
A black, thick-tipped pen can enable children with low vision to read their own handwriting.

A pair of glasses or an optical low vision device (such as a stand-held or hand-held magnifier) can assist a child to read print and understand a diagram. See the picture on the left of a selection of low vision devices.



A Perkins Braille (see picture on the right) can enable a blind child to write a letter in braille quickly and easily to a friend.

Ramps and handlebars can help children to access health facilities – but the ramp must slope gently as shown in the picture below.



A pressure relief cushion in a wheelchair can protect a child with paralysis from pressure sores and associated fatal infections.

A hearing aid can enable a child with a hearing loss to contribute more fully in lessons.



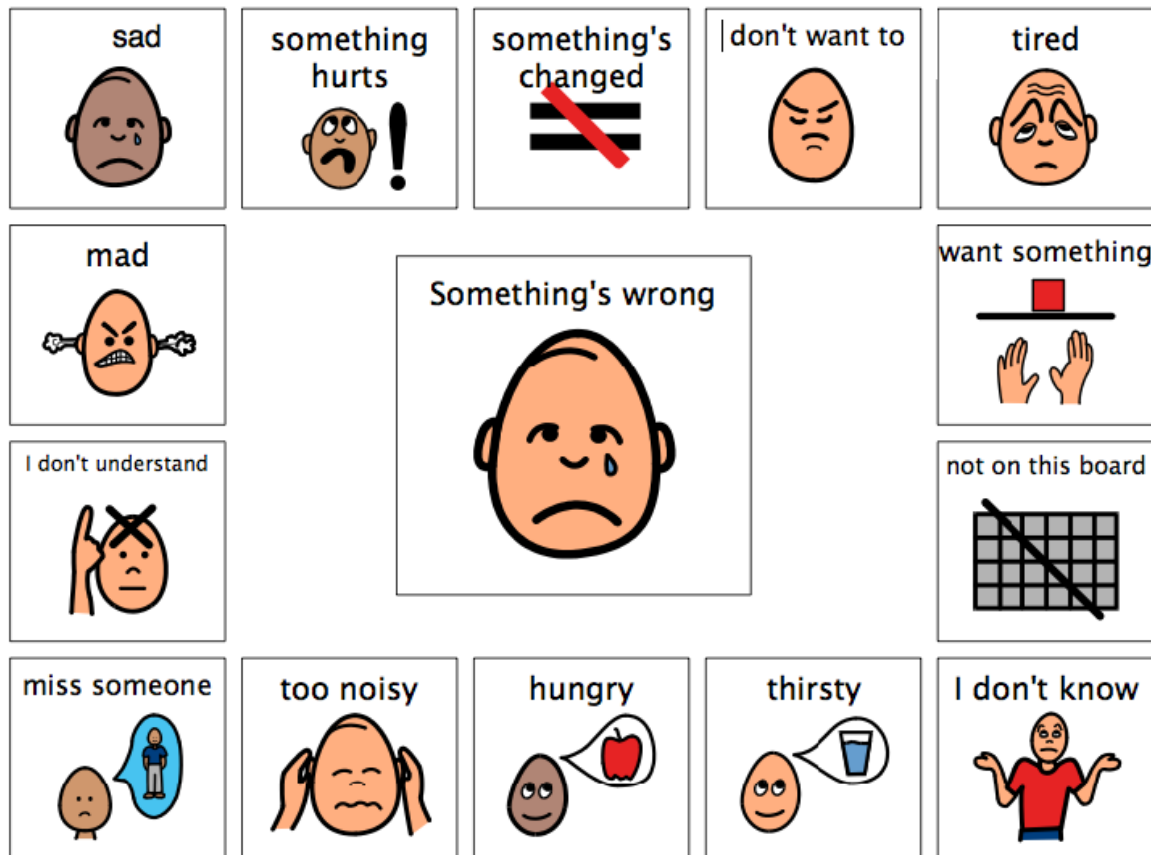
Parallel walking bars (see picture on the left) can help children with physical disabilities to develop balance and strength.

An alternative way of showing time – such a talking watch – can help a child with intellectual disability to meet with friends on time.

A lightweight walking frame (see picture on the right) can enable a child to join a family or a cultural event.



Using a communication board (see picture below), a child with severe communication difficulties can show she is hungry or thirsty.



Handout 2: Illustrative examples of assistive technology

Category	Product examples
Mobility	Walking stick, crutch, walking frame, manual and powered wheelchair, tricycle.
	Artificial leg or hand, leg or hand splint, clubfoot brace
	Corner chair, supportive seat, standing frame
	Adapted cutlery and cooking utensils, dressing stick, shower seat, toilet seat, toilet frame, feeding robot
Vision	Eyeglasses, magnifier, magnifying software for computer
	White cane, GPS navigation device
	Perkins Brailers, braille writing frames/slates, styluses, screen reader for computer, talking book player, audio recorder and player
	Braille chess, balls that make sounds
	Thick tipped pen, wide-lined paper, large print text, adjustable reading desk, optical low vision devices (hand-held and stand-held devices, monocular), raised diagrams
Hearing	Headphone, hearing aid
	Amplified telephone, hearing loop
Communication	Communication cards with texts, communication board with letters, symbols or pictures
	Electronic recording devices with recorded or synthetic speech
Cognition (thinking)	Task lists, picture schedule and calendar, picture based instructions
	Timer, manual or automatic reminder, smartphone with adapted task list, schedules, calendars, audio recorder
	Adapted toys and games

15. Communicating with children with disabilities²⁹

 **1 hour 20 minutes**

Module objective

By the end of this module, participants will be aware of ways in which they can communicate effectively with particular groups of children- namely, children with visual impairments, deaf children/children with hearing loss, and children with intellectual impairments.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen

Information to share with participants during this module

Communication is central to teaching and learning. It is also a two way process. If you cannot communicate effectively with your pupils, your pupils will not only fail to learn, but feel anxious, isolated and vulnerable. Conversely, if your pupils are unable to communicate with you, they will experience similarly negative emotions.

Information about appropriate communication approaches for children with certain disabilities and difficulties can be found in **Handouts 1-4** of this training module. A later training module (**Module 18**) discusses classroom communication in general.

Activity 1: 60 minutes

In plenary, ask the participants to explain why communication is so important for teaching and learning. Explain that particular communication approaches are appropriate for children with particularly disabilities/difficulties. These are described in **Handouts 1-4**. Divide participants into four groups. Give the first group **Handout One**, give the second group **Handout Two**, give the third group **Handout Three**, and give the fourth group **Handout Four**. Ask each group to study their handout and

²⁹ The material for this module has been adapted from: Plan International, 2016. *Guidelines for Consulting with Children with Disabilities*. Plan International: London.

to prepare two short, two minute role-plays – one demonstrating a teacher communicating poorly with a pupil with a type of difficulty/disability and the other demonstrating a teacher communicating effectively. Give each group 15 minutes to prepare their role-plays. Within each group, one participant can be the teacher, another participant the child, and the other participants can advise and assist. Each group should then perform their role plays **in plenary** with the rest of the participants observing. While still in plenary, you should discuss the role-plays. In what ways was the teacher’s communication poor in the first role-play? In what ways was the teacher’s communication effective in the second role-play?

Activity 2: 🕒 20 minutes

Tell participants that there are children with communication difficulties who find following classroom rules particularly difficult. For instance, they may find it hard to sit still while listening. Show the participants the video below:

https://www.youtube.com/watch?v=ITMLzXzgB_s

After the video, elicit responses and comments from the participants. Ask them what they could do in their classrooms if they had such children in their class. Suggest that it may be necessary to establish different rules and routines for these learners. Note that it is important that other learners know that they are not getting preferential or ‘special’ treatment, but that they have different needs which must be accommodated.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants will be aware of ways in which they can communicate effectively with particular groups of children – namely, children with visual impairments, deaf children, and children with hearing loss and children with intellectual disability.

Extension activities: ideas for collaborative learning/self-study

1. Participants can learn basic sign language and practise this sign language with one another and with deaf pupils.
2. Participants can provide training back in their schools for their fellow teachers on effective communication strategies for children with disabilities and difficulties.

Ideas for ongoing support and supervision

The facilitator can observe the participants communicating with pupils with difficulties/disabilities. Together, they can identify the strengths and weaknesses of the communication methods used by the participants and identify ways in which they can be improved. The participants can practise employ these revised communication methods in the classroom situation, again observed by the facilitator.

Handout 1: Top tips for communicating with children with visual impairments

- When you approach a child who is blind, remember to identify yourself clearly and tell them who else is present.
- Use the children's names to get their attention.
- Always face the child when talking with them.
- Keep background noise to a minimum. Speak clearly and calmly.
- Provide any background information they need to know – information they may not be able to pick up because of their visual impairment.
- Tell them when you are leaving or moving away – do not leave the child talking to an empty space.
- In a group setting, say the name of each person you are addressing.
- Make sure the children can hear what others are saying – ask them if they can hear okay and check for understanding.
- In the classroom situation, provide key information for children with visual impairment in braille/large print (as appropriate).
- When writing on the blackboard, read out what you are writing on the blackboard and, after you have finished writing, read it out again.
- Children with visual impairments may not be able to see you. You will therefore sometimes need to put your feelings into your voice.
- Don't put your hand in front of your mouth when speaking.
- Give children with visual impairments the opportunity to express their own views...
- And listen and respond to what they are saying. Talk with them, not at them.
- Provide real life experiences in order to develop their understanding of the world around them...
- For instance, a child will better understand a flowering plant if they explore the plant through touch and smell.
- Don't overwhelm the child with information, and provide time for the child to absorb this information...
- But never underestimate the capacity of the child to absorb new information.

Handout 2: Top tips for communicating with deaf children

- Get the attention of the child before speaking, using cues – e.g. through making eye contact, making a signal.
- Face the child at all times when speaking and maintain eye contact. Check for understanding. Keep background noise to a minimum.
- Make sure there is enough light for them to see you and you to see them, but minimise glare...
- Remember that they may lip-read to better understand what you are saying. They will therefore need to see your lip movements.
- In the classroom, the child should sit close enough to follow what you are saying...
- But they shouldn't sit right in front of you, as they will have to look up to see you – and this will be uncomfortable for them and actually make lip-reading more difficult.
- Use different means of communication as appropriate: e.g. gestures, body language, facial expression.
- Speak normally: do not shout or whisper.
- If you think you have not been understood, don't just keep repeating the same sentence...
- Instead, think of ways of rephrasing the sentence or find alternative ways of conveying what you are saying (e.g. through writing).
- Use objects, pictures and diagrams to help make your meaning clear.
- Speak clearly, using simple language. Don't mumble or cover your mouth when speaking.
- Don't expect the child to listen for long periods of time. Give the child regular breaks from listening.
- If the child is a sign language user, you should communicate with the child through sign language...
- If the child needs to learn sign language, the child needs to be provided with opportunities to do so.
- Teach your whole class sign language so the other pupils can communicate with the deaf children, and vice-versa.
- You should also learn sign language and/or employ a sign language interpreter to communicate with sign language users in your classroom.
- If the child will benefit from using a hearing aid or another amplification device, ensure the child has the device, the device is well-maintained, and the necessary back-up support is provided.

Handout 3: Top tips for communicating with children with intellectual impairments

- Speak clearly and concisely to the child.
- Be prepared to explain more than once if necessary.
- Use the child's mother tongue whenever possible.
- Organise your thoughts before speaking. Otherwise you will express yourself in a confusing way.
- Give the child sufficient time to answer. Don't put words into their mouths.
- Provide positive reinforcement. In particular, use praise when appropriate.
- Use pictures and other visual aids to clarify what you are saying.
- Where appropriate, provide the child with alternative communication methods – e.g. drawing, pointing at pictures.
- Don't expect the child to listen for long periods of time.
- Observe the child's facial expressions and body language. This will help you to know how much the child is understanding.
- Check for understanding. For instance, ask the child to carry out practical activities which will demonstrate understanding.
- Proceed from the known to the unknown. As much as possible, relate new concepts to the experiences of the child.
- Treat the child respectfully in front of their peers. Listen to them attentively. Model good practice.
- Never underestimate the intelligence of the child. The child may understand far more than you imagine.
- When appropriate, ask questions that require short answers or just a nod or shake of the head.
- Minimise unnecessary explanation. At times, a child will learn best through observing and copying what others are doing.
- If you develop a good relationship with the child, it will be far easier to communicate with the child, as the child will respect and trust you.

This advice is applicable to all teacher-pupil communication, not just communication with children with intellectual impairments.

16. Making schools accessible for children with disabilities³⁰

 1 hour 30 minutes

Module objectives

By the end of this module participants will:

1. Be aware of the key elements of the principle of accessibility: **Reach – Enter – Circulate – Use**.
2. Be aware of some of the problems that children with disabilities face when accessing schools.
3. Have identified some principles for ensuring children with disabilities have greater access to schools.
4. Recognise that if schools are made more accessible for children with disabilities, it will benefit the other children as well.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen

Information to share with participants during this module

The UN Convention on the Rights of Persons with Disabilities says all children with disabilities have a right to attend accessible schools.

What are accessible schools?

These are schools that follow the **RECU Principle**: **Reach – Enter – Circulate – Use**.

- i. They are schools that children can reach – in other words, schools they can travel to and from easily and safely.

³⁰ This module is based on: Handicap International, 2009. *How to Design and Promote an Environment Accessible to All*. Handicap International: Lyon.

- ii. They are schools that children can enter – in other words schools they can access easily and safely.
- iii. They are schools in which children can circulate – in other words, schools they can travel round easily and safely.
- iv. These are schools which children can use – in other words, schools where they can function successfully.

Unfortunately, schools are often not fully accessible for children with disabilities. This is because they have not designed with the needs of these children in mind.

If schools are made more accessible for children with disabilities, all the children in the school will benefit. For instance:

- If rubbish and litter is cleared from the school playground, it will not only make it easier for children with seeing/mobility problems to play, but improve the life of the whole school community.
- If classrooms are made less noisy, it will not only benefit children who find hearing difficulty and children who heavily rely on their sense of hearing (for instance, blind children), but also all children who need to listen in class.

Activity 1: Accessibility case studies 🕒 60 minutes

Explain the RECU principle to the participants (see previous section).

In plenary, distribute **Handout 1** to participants. This handout consists of three case studies, each discussing a particular problem preventing children with disabilities from accessing education. Read through the handout with participants, checking for understanding.

Working in groups, participants should identify ways of solving the problems described in the case-studies. You need to stress that participants must come up with simple, cost-effective, practical solutions to the problems.

In plenary, ask the participants to present their solutions. Encourage the participants to discuss the feasibility and the practicality of the various proposed solutions.

Activity 2: Accessibility checklist 🕒 30 minutes

In plenary, distribute **Handout 2** to participants. Handout 2 is an accessibility checklist developed by an international development organisation called Handicap International. This checklist can be used to assess the accessibility of schools for children with disabilities. Read through Handout 2, explaining any problematic terminology.

Divide participants **into small groups** (2, 3 or 4 per group). If possible, try to make sure teachers from the same school are working together. Ask participants to go

through the checklist, assessing the accessibility of their schools and identifying ways of making their schools more accessible.

At the end of the activity, it is important that you discuss gender responsive approaches for promoting access. Girls with disabilities are likely to experience particular problems accessing education. Ask participants to identify these problems and ways of overcoming these problems. The text box below identifies some of the issues which need to be considered.

Gender responsive approaches for improving access

Girls are likely to face particular problems with access. Their parents may be reluctant to send them to school in the first place because they are concerned for their safety. Sometimes these concerns are fully-justified. How can the journeys of girls with disabilities to school be made as safe and easy as possible? Girls are also likely to be particularly concerned if they cannot access latrines or if latrines are unhygienic, difficult to use and lacking in privacy. How can schools improve this situation? If there is bullying and teasing in schools or teachers are unsympathetic – even abusive, girls will be discouraged from going to school. Again, how can you improve this situation?

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants are aware of the key elements of the principle of accessibility: **Reach – Enter – Circulate – Use.**
- ✓ Participants are aware of some of the problems that children with disabilities face when accessing schools.
- ✓ Participants have identified some principles for ensuring children with disabilities have greater access to schools.
- ✓ Participants recognise that if schools are made more accessible for children with disabilities, it will benefit the other children as well.

Extension activities: ideas for collaborative learning/self-study

Participants can train a group of pupils (pupils with disabilities and non-disabled pupils) to carry out an accessibility audit in their schools. Working with their pupils, they can identify ways in which their schools can be made more accessible.

Ideas for ongoing support and supervision

Participants can return to their schools and use the Handicap International checklist to assess the accessibility of their schools. Assisted by the facilitator, they can identify ways in which their schools can be made more accessible, particularly for children with disabilities.

The pictures below shows the inside and outside of an accessible school-toilet in Tanzania.



Handout 2: Barriers to accessibility and strategies for promoting accessibility

Read the three case-studies below and identify ways in which the difficulties faced by the children can be overcome. Your solutions need to be simple, practical, appropriate and cost-effective.

- 1. Travelling to school.** Malicka is blind. Her parents are very worried about her travelling to and from school. Although Malicka lives only a hundred metres from school, the ground is very rough. She also has to cross a busy road. Landry has a physical disability. He walks with great difficulty and uses crutches. Unlike Malicka, Landry lives two kilometres from school, next to a main road. It is far too far for him to walk to school. Even if he use a wheelchair and someone pushed him, it would be too far and also dangerous.
- 2. Accessing school facilities.** Max is a wheelchair user. Unfortunately, his school lacks physical accessibility. There are several steps at the front of the school buildings. In order to access the school buildings, Max has to be carried up the steps – something he finds shameful and embarrassing. Some of the classrooms also have doors which are too narrow for his wheelchair. Again, he has to be carried into the classroom. When he enters the classroom, the classrooms are so small and cramped that it is difficult for him to manoeuvre his wheelchair. He also does not have a desk of a suitable height where he can study. He cannot use the school toilet as the toilet door is too narrow and there is no room for his wheelchair in the toilet. Again, he has to be lifted into the toilet.
- 3. Learning in school.** Maella is hard of hearing. She therefore needs to listen very carefully to what the teacher is saying. Unfortunately there is so much noise in class that she cannot hear the teacher. This is because there is not a proper partition between her classroom and the classroom next door. As she is hard of hearing, she also need to lip-read to help her understand what the teacher is saying. Unfortunately, her classroom is very dark – the windows are very small and there is no electric light. This means she cannot lip-read as she cannot see the lips of her teacher. Didier has low vision and is in the same class as Maella. As Didier cannot see the blackboard, even when he is wearing glasses, he needs to hear what the teacher is saying. Unfortunately, the classroom is so noisy that this is impossible. Didier also needs to make best use of his existing sight. Unfortunately, he cannot do this because the classroom is so dark and gloomy.

Handout 2: Accessibility Checklist³¹



CHECKLIST FOR ASSESSING PHYSICAL ACCESSIBILITY

RAMPS	YES	NO	COMMENTS / EXPLANATIONS
Is the floor of the school building the same level as the outside?			
Does the school building have any ramps?			
If the school has ramps, can all class blocks be accessed?			
If the school has ramps, can the administration room/block be accessed?			
Is the ramp wide enough (at least 5 feet)?			
Is the ramp not too steep?			
Does the ramp have a hard, smooth non-slip surface?			
Does the ramp have handrails on each side?			
Is there a level surface at top and bottom of ramp, where a wheel chair can turn?			

³¹ This accessibility checklist has been designed by Handicap International who have kindly given permission for us to use it in this training-pack.

STAIRS	YES	NO	COMMENTS / EXPLANATIONS
Does the school building have any stairs?			
Are the steps level and slipfree?			
Are the step levels not too high (max 6" / half feet)?			
Does the stairs have handrails on each side?			
CLASSROOMS	YES	NO	COMMENTS / EXPLANATIONS
Are the class room doors wide enough for a wheel chair to enter (at least 3 feet)?			
Are the doors light and easily opened?			
Are door frames a contrasting color to the wall?			
Are there handrails along the corridors?			
Are the floors of the classrooms smooth and firm?			
Is there a desk and chair suitable for those who cannot sit on a regular school bench?			
Is there enough light in the room (natural or electrical)?			

Is the classroom used by 1 class or is the classroom shared with other classes?			
Are the classrooms divided by permanent walls preventing noise from other classes?			
Is the blackboard clear and visible? Is it cleaned and washed regularly to ensure good contrast?			
TOILETS & WATER	YES	NO	COMMENTS /EXPLANATION
Is the toilet accessible with a ramp?			
Are the toilet doors wide enough for a wheel chair to enter (at least 3 feet)?			
Is there room to turn for a person with a wheelchair (5 feet x 5 feet)?			
Are there separate boys and girls toilets?			
Is there access to clean drinking water?			
Can the water source be accessed by a person in a wheelchair?			
Are there handrails along the wall?			

RECOMMENDATIONS

RECOMMENDATION ON RAMPS

RECOMMENDATION ON STAIRS

RECOMMENDATION ON CLASSROOMS

RECOMMENDATION ON TOILETS & WATER

17. Identifying children with disabilities

 1 hour 30 minutes

Module objectives

By the end of this module participants will:

1. Be aware of some simple ways in which they can identify four groups of children in their classrooms: children who are having trouble seeing (including children with visual impairments); children who are having trouble hearing (including deaf children); children with physical disabilities; and children with intellectual impairments.
2. Be aware of the importance of making sure these children receive the good quality assessments and (where necessary) follow-up services – including assistive technology.
3. Be aware of the importance of providing others forms of support for these children.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen

Information to share with participants during this module

See:

Handout 1: Checklist for identifying children who are having trouble seeing

Handout 2: Checklist for identifying pupils who are having difficulty hearing

Handout 3: Checklist for identifying pupils with physical disabilities

Handout 4: Checklist for identifying pupils with intellectual disability

Activity 1: Identifying children with disabilities 60 minutes

In plenary, distribute **Handouts 1-4** to the participants. Read through and discuss the handouts with the participants. Check for understanding by reading out three short three case studies and asking them to identify the disability/difficulty that the child appears to be experiencing:

1. Malicka lacks fine motor skills. She finds it hard to hold her pencil or turn the pages of her books. She also walks slowly, with a limp. **Answer:** Malicka may have a physical disability.
2. Eseck turns his head to read what is written on the board. He reads very slowly with his face close to the book. **Answer:** It appears Eseck has a difficulty with seeing.
3. Poupina says very little and finds it very hard to understand what others are saying. She has a much smaller vocabulary than other children in her class. **Answer:** Poupina may have a difficulty with hearing, although there may be other reasons why she is experiencing problems. For instance, she may have a communication difficulty – see **Module 13**.

It is particularly important that you stress that teachers:

- a) Identify any children who may have disabilities/difficulties in their classes.
- b) Never assume that a child has a disability just because he/she is experiencing difficulties.
- c) Ensure that the child is referred to relevant health services and receives the best possible assessment and follow-up support, including any necessary assistive technology – see **Module 14**.

Activity 2: Identification is not enough 🕒 30 minutes

In plenary, distribute **Handout 5** to the participants. Read through the case study with participants and ask them to discuss the different ways in which Mrs. Diop helped Sheera. It is important that the participants are aware that Mrs. Diop helped Sheera in many different ways. Mrs. Diop didn't simply refer Sheera for a hearing test. In particular, Mrs. Diop:

- Made sure Sheera had a hearing aid
- Used gestures to explain concepts to Sheera
- Wrote instructions on the board
- Identified what Sheera knew and what she didn't know in order to meet her educational needs
- Focused on Sheera's strengths to overcome her weaknesses
- Paired Sheera with another pupil in her class, so the other pupil could help Sheera
- Spent time with Sheera every lunchtime to check that Sheera had understood what was taught in the morning

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants are aware of some simple ways in which they can identify four groups of children in their classrooms: children who are having trouble seeing

(including children with visual impairments); children who are having trouble hearing (including deaf children); children with physical disabilities; and children with intellectual impairments.

- ✓ Participants are aware of the importance of making sure these children receive good quality assessments and (where necessary) follow-up services – including assistive technology.
- ✓ Participants are aware of the importance of providing others forms of support for these children.

Extension activities: ideas for collaborative learning/self-study

Participants analyse what services are aware in locally and nationally for providing good quality assessments and follow up services (including assistive technology) for children with disabilities. They can share this information with other participants, so participants know where to go when they identify children with disabilities in their classes.

Ideas for ongoing support and supervision

The facilitator can assist participants to identify children with disabilities and refer them to local health services for assessment.

Handout 1: Checklist for identifying children who are having trouble seeing³²

Children often have no idea that they have a problem with seeing. Or they may be too embarrassed to mention this problem to others. It is therefore vital that you, as a teacher, keep a look-out for any pupils who are experiencing this difficulty.

This checklist will help you to identify any pupils in your class who may be having a difficulty with seeing.³³ If a child shows any of the signs listed below, they should be referred to a health professional immediately. This professional could be a community health worker trained in eye health who can provide an initial diagnosis and refer the child to an eye health specialist if necessary. Alternatively, this professional could be an eye health specialist such as an ophthalmologist or optometrist.

These children may only have a temporary problem which can easily be resolved. Alternatively, the child may just require a pair of customised pair of glasses in order to see properly. Alternatively the child may have a more significant problem – i.e. the child may be blind or have low vision.

Whatever the problem, it is vital that you make sure that the child is seen by a health professional as soon as possible. You also need to make sure the child receives necessary treatment/assistive devices. Otherwise a temporary problem can become a permanent visual impairment. This is your responsibility as a teacher.

³² Information for this handout is taken from the following websites:

https://www.babycenter.com/0_red-flags-signs-that-your-child-may-have-a-vision-problem_1439873.bc; <http://www.allaboutvision.com/parents/slideshow-warning-signs.htm>

³³ If a child demonstrates one or more of the signs in the checklist, it may indicate that the child is having trouble seeing. Even if it does not, it may show the child has some other problem – hence the importance of referring the child to a qualified health professional.

Checklist for identifying students with seeing difficulties		✓	✗
1.	Does the pupil hold objects close to their eyes when looking at them?		
2.	When reading, does the child hold the text near their eyes?		
3.	Does the child blink more than other children?		
4.	Does the child squint – i.e. partly close their eyes in order to see properly, or have eyes that look in different directions?		
5.	Do the child turn their head to one side to see better – for instance, in order to look at the blackboard?		
6.	Does the child rub their eyes a lot?		
7.	Does the child close one eye in order to see better?		
8.	Does the child avoid close, near-vision activities such as writing, reading and colouring?		
9.	Does the child often lose their place when reading or use a finger to guide their eyes when reading?		
10.	Is the child sensitive to bright light?		
11.	Does the child complain of headaches, tired eyes, or itchy eyes?		
12.	Has the child recently started to get poor grades?		
13.	Does the child move around the classroom and playground uncertainly, perhaps tripping over objects or bumping into things?		
14.	Is the child unable to find small objects which they have dropped?		
15.	Is the appearance of the eyes unusual in any way? For instance, Are the eyes red? Are the eyes very watery? Do the eyes blink a lot? Do the eyes flicker up and down or from side to side? Do the eyes have white spots? Are the eyes cloudy? Do the eyes have a fixed gaze? Are the eyes turned outwards or inwards?		

Handout 2: Checklist for identifying pupils who are having difficulty hearing³⁴

Children often have no idea that they have a problem with hearing. Or they may be too embarrassed to mention this problem to others. It is therefore vital that you, as a teacher, identify any pupil in your class who is experiencing any difficulties.

This checklist will help you to identify these pupils.³⁵ If a child shows any of the signs listed below, they should be referred to a health professional immediately. This professional could be a community health worker trained in ear health who can provide an initial diagnosis and refer the child if necessary to an audiologist or some other specialist.

The child may have an ear condition which can be swiftly remedied through simple treatment or which will get better without any treatment. For instance, the child may have an ear infection due to bacteria from a cold or sore throat. Or the child may have a more significant, long-term difficulty with hearing and therefore require various types of support, adapted teaching and learning programmes, and perhaps amplification devices (such as hearing aids).

Whatever the problem, it is vital that you make sure that the child is seen by a health professional as soon as possible. You also need to make sure the child receives necessary treatment/assistive devices. Otherwise a temporary problem can become a permanent hearing loss. This is your responsibility as a teacher.

³⁴ The information in this handout was obtained from the following websites: <http://www.hear-it.org/10-signs-that-your-child-may-have-a-hearing-loss>; <http://www.healthyhearing.com/help/hearing-loss/children>

³⁵ If a child demonstrates one or more of the signs in the checklist, it may indicate that the child is having trouble hearing. Even the child does not have trouble hearing, it may be a sign the child has some other problem – hence the importance of referring the child to a qualified health professional.

Checklist for identifying students with hearing difficulties		✓	✗
1.	Does the child have difficulties understanding what others are saying?		
2.	Does the child speak differently from other children of the same age?		
3.	Does the child speak more loudly or more softly than the other children?		
4.	Does the child misunderstand questions?		
5.	Has the child recently started to get poor grades?		
6.	Does the child have difficulty speaking or difficulty using language?		
7.	Is the child uninterested in what is being said in the classroom, seems to day dream?		
8.	Does the child have difficulties hearing when there is background noise?		
9.	Is the child unable to tell where noises have come from?		
10.	Does the child carefully watch others in order to learn what to do?		
11.	Does the child complain of ear-pains, ear-aches or noises?		
12.	Does the child say 'what' or 'huh' several times a day?		
13.	Does the child watch a speaker's face intently? (Often children's hearing loss is not noticed because they are very successful lip-readers.)		
14.	Is the child misbehaving to cover the fact that he/she cannot do the work?		

Handout 3: Checklist for identifying pupils with physical disabilities³⁶

Children may be too embarrassed to mention that they have a physical difficulty to others. It is therefore vital that you, as a teacher, identify any pupil in your class who is experiencing any difficulties.

This checklist will help you to identify these pupils.³⁷ It looks at four areas of functioning: mobility; head control; sitting; and using hands. If a child shows any difficulties with any of these areas of physical functioning, they should be referred to a health professional immediately. This professional could be a community health worker who can provide an initial diagnosis and refer the child if necessary to someone with more specialist expertise.

It is possible that the child has a temporary or a minor problem which will either resolve itself or can be sorted out relatively easily. However, it is also possible that the child may have a serious problem and requires surgery, physiotherapy and/or some sort of mobility aid.

Whatever the problem, it is vital that you make sure that the child is seen by a health professional as soon as possible. Otherwise a minor/temporary difficulty can become a permanent problem. This is your responsibility as a teacher.

³⁶ This checklist has been adapted from: Fox, M., 2003. *Including Children 3-11 with Physical Disabilities: Practical Guidance for Mainstream Schools*. David Fulton Publishers Ltd: London.

³⁷ If a child demonstrates one or more of the signs in the checklist, it is likely the child has some sort of physical difficulty. Even if the child does not, it may be a sign that the child has some other problem – hence the importance of referring the child to a qualified health professional.

Checklist for identifying students with physical disability	✓	✗
Areas of physical difficulty		
1. Mobility		
a) Can walk but not easily or freely		
b) Can walk but with great difficulty		
c) Cannot walk independently		
2. Head control		
a) Finds this difficult – but can hold head up for extended periods of time		
b) Finds this difficult – can only hold head up for very short periods of time		
c) No obvious head control		
3. Sitting		
a) Can sit unsupported but is not secure or stable		
b) Cannot be left sitting unless supported		
c) Finds it difficult to maintain a sitting position, even with support		
4. Using hands		
a) Some difficulties using one or both hands, but can use hands for some complex tasks – e.g. to dress him/herself, to feed him/herself		
b) Cannot use both hands except for simple tasks – e.g. for reaching and grasping		
c) Cannot use hands for reaching and grasping		

Handout 4: Checklist for identifying pupils with intellectual disability³⁸

This checklist will help you to identify pupils who may have an intellectual disability. If a child shows any of the signs listed below, they should be referred to a health professional immediately. This professional could be a community health worker who can provide an initial diagnosis and can (if necessary) refer the child to a health professional with specialist expertise in intellectual impairment.

It is very important to stress that a child may display some of the signs listed below but not have an intellectual disability. There may be other reasons why the child is facing difficulties, as discussed in **Module 9**.

Whatever the problem, it is important that you treat the child with respect and consideration at all times. In particular, you must not make negative comments about the child, especially in front of the child and the child's classmates. This is your responsibility as a teacher.

³⁸ Adapted from: <http://www.millcreekofmagee.com/disorders/intellectual-disability/signs-causes-symptoms>

Checklist for identifying students with intellectual disability		✓	✗
1.	Is the child learning and developing more slowly than other children the same age?		
2.	Is the child rolling over, sitting up, crawling, or walking much later than other children the same age?		
3.	Does the child experience difficulty communicating or socializing with others?		
4.	Does the child find talking particularly difficult – for instance, does the child speak in simple short sentences or hardly talk at all?		
5.	Does the child have great difficulty remembering things?		
6.	Is the child's behaviour in school problematic? In particular, does the child appear not to understand that bad behaviour has negative consequences?		
7.	Does the child struggle to solve simple problems?		
8.	Is the child having trouble learning at school and falling behind the other pupils?		
9.	Does the child find it hard to carry out simple, everyday tasks, such as getting dressed or using the toilet without help?		
10.	Does the child not join in games with the other children?		

Handout 5: Case study³⁹

Sheera lives in Cameroon. She is 12 years old.

Sheera started going to school when she was six years old. Sadly, she didn't make much progress and struggled in class. However, it wasn't her fault. She was experiencing difficulties because she had difficulty hearing and therefore struggled to hear what people were saying in class. Unfortunately, no one at school realized she had this problem, so nobody did anything to help her.

When she was 11 years old, a new teacher called Mrs. Diop came to the school. Mrs. Diop had learned about disabilities when she trained as a teacher, and she quickly realised that Sheera had a problem.

Mrs. Diop asked a local NGO for help. The NGO paid for Sheera to see a doctor who found that Sheera had difficulty with hearing across all the speech sounds. This meant that speech sounded much quieter to Sheera than the other children. Sheera had been reading people's lips to help her to understand what was being said. When she could not see the person's lips she was unable to know what was being said. The doctor prescribed a hearing aid and this helped Sheera's hearing a great deal by making sounds louder.

A hearing aid does not correct the hearing. It simply amplifies (makes louder) all the sounds. Sheera liked her hearing aid but found it difficult to wear all the time at first. It was important that Sheera got used to using the hearing aid in school and she was shown how to care for the hearing aid and how to manage it.

Unfortunately Sheera's school was next to a busy road and the classroom was very noisy. Sheera found this difficult because her hearing aid also made the traffic noise louder too.

To help her, Mrs. Diop made sure Sheera sat near the front of the class so Sheera could hear more clearly. Whenever the children had to work in groups she found a quieter area for Sheera's group to work in. Mrs. Diop spoke to the children in the class about Sheera's hearing aid and explained why she needed it. She told them how it made sounds louder, and that this could be difficult for Sheera. After this talk the classroom was much quieter and the door and windows were closed to quieten the noise from the road.

The children made sure that they faced Sheera when speaking to her and checked that she had understood what was said. In order to help Sheera to understand the content of the lesson Mrs. Diop used a lot of gestures when explaining things and wrote instructions and new vocabulary on the board. She found that all of the children in class found this helpful, and not only Sheera.

Mrs. Diop also realised that the first years spent in school had been rather a waste of time in Sheera's case. She therefore took time to find out just what Sheera had learned and what she had not understood or had missed. She then focused on Sheera's strong points and used them to overcome her weak points.

Mrs. Diop asked one of the girls in class to sit next to Sheera and support her. They became good friends and the girl really enjoyed helping Sheera.

³⁹ This case study is adapted from Module 6 of EENET's training guide. This can be downloaded from: http://www.eenet.org.uk/resources/docs/cambodia_module6.pdf

Mrs Diop made sure that Sheera had understood what had been said and knew what to do. Every lunchtime Mrs. Diop spent a few minutes with Sheera and they would go and sit under the tree far away from the noisy road. Mrs Diop asked Sheera if there was anything that she had not understood or needed help with.

Sheera has made a lot of progress since her hearing aid was provided, and Mrs Diop has adapted her teaching style to help Sheera to access the curriculum.

Part 3. Core competencies for inclusive classrooms

18. Classroom communication⁴⁰

 1 hour (1 hour 40 minutes with additional activity)

Module objectives

By the end of this module participants will be able to:

1. Identify the key features of their classroom communication styles.
2. Identify ways they can communicate more effectively in the classroom situation.

Resources

- Flipchart paper
- Marker pens
- Handouts

Information to share with participants during this module

Necessary information to be shared with participants is contained in Handout 1.

Activity 1: Teacher communication 20 minutes

The purpose of this activity is to consider the ways in which teachers communicate in classrooms.

In plenary, ask participants to identify the various ways that teachers communicate in the classroom. Participants should not only discuss verbal communication but non-verbal communication – for instance, the use of gestures, facial expressions and pictures/diagrams to communicate information. Write these up on the flipchart.

Now ask participants to **reflect individually** on their own communication style. Ask them to write down at least five ways they communicate in the classroom. Do they have any particular gestures or ways of speaking that they use all the time? In plenary ask a few participants to feedback. While they are feeding back, ask them if their communication styles are inclusive – i.e. do they communicate effectively with all their pupils?

⁴⁰ Module adapted from UNESCO, 2001. *Understanding and Responding to Children's Needs in the Inclusive Classroom*. Paris: UNESCO.

Activity 2: Inclusive classroom communication 🕒 40 minutes

Split participants into **groups** of 4-6. Ask each group to divide a sheet of flipchart paper into two columns. Firstly, ask each group to consider how our communication styles as teachers can create barriers for children with disabilities. For instance, teachers could use language that some children do not understand; teachers could speak too quietly for children to hear; or teachers could fail to write key information on the blackboard. Each group should write these ideas in the left-hand column of the flipchart paper. Secondly, ask them to consider how teachers could remove these barriers. For instance, teachers could use simpler, clearer language, or use the pupils' mother tongue to explain tricky concepts – see **Module 19**. After 20 minutes, ask 2 -3 groups to provide feedback in plenary. Distribute and discuss **Handout 1**.

Additional activity: in small groups, ask participants to role-play a classroom situation with a teacher who is not communicating inclusively. Then ask them to discuss the ways that the teacher could be more inclusive in their communication style. Then invite the group to flip the scenario and role-play a more inclusive teacher communicating with their class.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants can identify some of the key features of their classroom communication styles.
- ✓ Participants can identify ways they can communicate more effectively in the classroom situation.

Extension activities: ideas for collaborative learning/self-study

Participants can use their mobile phones to record themselves as they are teaching so that they get a clearer understanding of their communication styles. Alternatively, they can team up with another teacher in order to observe one another's classes and make observations. Ask them to identify at least three ways in which their communication styles can be made more inclusive.

Ideas for ongoing support and supervision

The facilitator can observe teachers in the classroom to observe their communication styles and identify ways in which these styles can become more accessible and inclusive.

Handout 1: Communicating clearly and inclusively

Communication is central to teaching. Teachers need to communicate with children, and children need to communicate with the teacher and with each other. It is important that teachers develop their communication skills so that they are able to connect with all of the children in their classroom.

Communication involves the sending and receiving of messages. The message could be:

- An instruction: Write your name on the page.
- A question: What day comes after Monday?
- A statement: That rabbit is brown and white.
- An opinion: You did that very well.

Teachers talk quite a lot. Some of the talking is meant to manage and direct the children's behaviour. Some of the talking is to provide new information or to explain a fact or an idea. At other times, the talking is used to test learning.

However, talking isn't the only way that we communicate. We can also use pictures; signs and other visual stimuli; touch; physical activity; other sounds and actions (e.g. music, singing, acting); gestures (pointing, miming); facial expressions; and writing.

Teachers need to communicate very clearly when teaching. They also need to consider how they can adapt their communication styles so all their pupils can understand them.

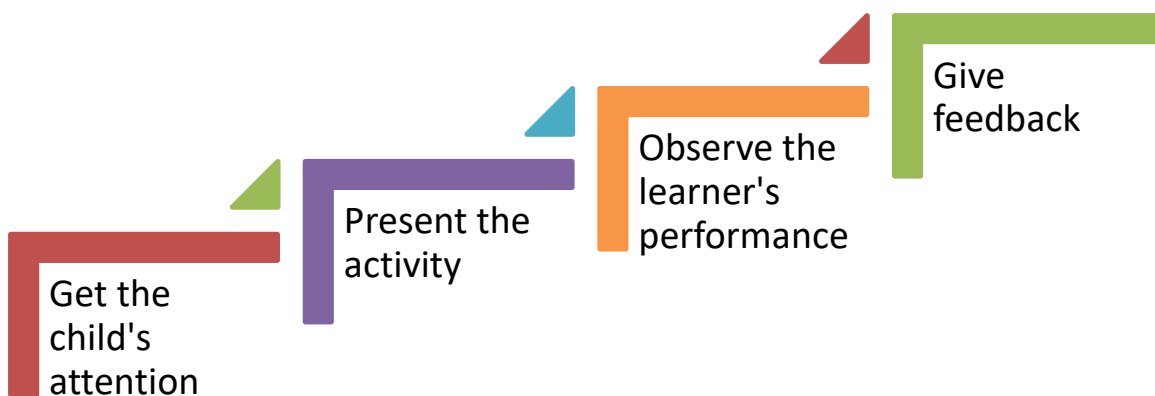
All learners are different. For instance, some learn best by seeing, and others by hearing or doing. A good teacher always communicates information and ideas in various ways and then assesses their pupils in order to check that they have understood information/ideas.

Teachers should:

- Be clearly seen by all their pupils – they should therefore stand rather than sit at their desks
- Talk clearly and project their voices
- Keep their words simple and their sentences short
- Alert pupils to important messages – for instance, through saying “listen carefully”
- Make eye contact with them if this is culturally appropriate
- Repeat important messages
- Use gestures and facial expressions alongside language to get their meaning across
- Check that their pupils have understood what has been communicated

- Encourage the pupils to indicate if they are puzzled/confused by raising their hands and asking you to repeat/clarify what you have just said.
- ‘Code switch’ – for instance, if teachers are expected to use English in the classroom, they should also use local languages to make their meaning clear.
- Learn sign language if you have a deaf child in your class who communicates through sign language – see **Module 7**.
- Enhance your verbal communication with pictures, drawings and writing.

Use a 4-step process when teaching new skills (see below). Make sure your communication is clear and inclusive throughout each of these steps.⁴¹



Gender responsive approaches to communication

Good classroom communication isn't just about teachers communicating to learners. Learners must also be able to communicate freely too. Teachers need to ensure both boys and girls feel free to communicate in their classrooms. You can do this by creating a warm and supportive atmosphere in your classroom. You can also do this through providing the right sorts of communication opportunities for your pupils. For instance, some girls may be unhappy about standing at the front of the classroom in order to communicate to their classmates. (This will be true of some boys as well.) However, they may be happier delivering a presentation with a group of friends.

⁴¹ Adapted from UNESCO, 2001. *Understanding and Responding to Children's Needs in the Inclusive Classroom*. UNESCO: Paris.

19. Mother-tongue education⁴²

 1 hour 20 minutes

Module objectives

By the end of this module participants will:

1. Be aware of the benefits of mother-tongue education.
2. Have identified some of the barriers to mother-tongue education and some strategies for overcoming these barriers.

Resources

- Flipchart paper
- Marker pens
- Handouts

Information to share with participants during this module

Mother-tongue education

Mother-tongue education refers to any form of schooling that makes use of the language or languages that children are most familiar with. This is usually the language that children speak at home with their family. This language is often called the 'mother-tongue'. It is also called the 'first language' or the 'primary language'.

Mother-tongue education is not about stopping a child learning a second 'official' language (e.g. English, French, Portuguese, Swahili) but preparing them to do so more effectively. Developing the capacity of children to use their first language (i.e. their mother-tongue) will develop their capacity to learn a new language. Once children are able to read and write fluently in their first language, they can then progress to learning a new language.

Research has shown that effective mother-tongue education leads to:

- Better results
- Lower drop-out rates for pupils
- Greater participation of children in school activities

⁴² The material for this module is taken from the Mother-Tongue Instruction website of Center for Education Innovations: <http://www.earlylearningtoolkit.org/content/mother-tongue-instruction>

- Higher fluency rates of children in both first language and second/official languages
- Greater involvement of parents in their children's learning and in school activities
- Pupils and the entire community maintaining links with their language and cultural identity

However, in order to promote mother-tongue education, there is a need to:

Develop high quality learning materials in the primary language

Engage parents and the community (to support mother-tongue instruction)

Advocate for mother-tongue education

All the above points are covered in the video **How Mother-Tongue Instruction Works** (see below).

Activity 1: Mother-tongue education 🕒 1 hour 20 minutes

In plenary, briefly define mother-tongue education, using the notes on the previous page. Then ask the participants:

To identify the different mother-tongues spoken by the pupils in their classrooms

To identify why, when and how often they communicate through their pupils' mother-tongues

Show the participants the video How Mother-Tongue Instruction Works (🕒 4.01 minutes).

<https://www.youtube.com/watch?v=gVLb9WuQwmk>

Discuss the main messages of the video (see previous page). If some participants oppose mother-tongue instruction, they should be given the opportunity to express their views.

Divide the participants **into small groups** to discuss the main barriers to mother-tongue education in their schools and communities (e.g. lack of teaching and learning materials in the first language; a belief that mother-tongue education will stop children learning new languages; a belief that second languages such as France and English are more important than first languages). Once, participants have identified barriers, they should identify strategies for overcoming these barriers.

In plenary, the participants should report back to the others. The facilitator should write each of the barriers on flipchart paper and list strategies for overcoming them underneath. As the facilitator, you should allow the participants to speak freely and frankly about this important subject (mother-tongue education). You should recognise that participants may have different views and should not seek to close down discussion.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants are aware of the benefits of mother-tongue education
- ✓ Participants have identified some of the barriers to mother-tongue education and some obstacles for overcoming these barriers.

Extension Activities: ideas for collaborative learning/self-study

1. Participants can develop their own teaching and learning materials in their pupils' mother-tongues and share them with the rest of the group.
2. Participants can go back to their schools and discuss issues related to mother-tongue instruction with their fellow teachers. They can report back on progress made/issues raised at the next training.



Jenneh, a blind girl studying at a primary school in Bo, Sierra Leone, enthusiastically raising her hand to answer a question. The project is supported by the European Union. © Sightsavers/Peter Caton

20. Individual Education Plans (IEPs)

 1 hours 30 minutes

Module objectives

By the end of this module participants will be able to:

1. Understand the purpose of an IEP.
2. Complete an IEP.

Resources

- Flipchart paper
- Marker pens
- Handouts

Information to share with participants during this module

The key information can be found in **Handout 4**.

Activity 1: Introducing IEPs 30 minutes

The purpose of this activity is to introduce Individual Education Plans to participants.

Plenary. Distribute **Handout 1** to participants. Explain the key components of IEPs to participants and the ways in which IEPs can be useful to teachers, learners and parents.

Distribute **Handout 2** – a completed IEP for a girl call Lucee – to participants. In groups, ask them to discuss the IEP. Allow 10-15 minutes for the groups to do this. When they are ready, ask the following:

- Is the IEP clear?
- Are the goals appropriate?
- If they had a girl like Lucee in the class, would they be able to complete an IEP like this?

Point out to participants that IEPs should be regularly reviewed (at least once a quarter). This provides the opportunity for changes to be made to the IEP. Tell participants that the IEP should be drawn up and agreed during a meeting of the

teacher with the learner, their parents/caregivers and any itinerant or referent teacher.

Activity 2: Writing an IEP 1 🕒 60 minutes

The purpose of this activity is to practise writing an IEP.

Pair work. Divide participants into pairs and distribute **Handout 3**. Ask participants to read the case study and prepare their own IEP (using Handout 1) for one of the learners in the case-study. They can use Lucee's IEP as a guide.

Monitor participants throughout the activity and provide help when needed. Remind participants that teaching and learning strategies can be as simple as wrapping tape round a pencil so a child can hold it more securely.

When they have completed their IEPs, ask each pair to exchange IEPs with another pair. Participants can then discuss the strengths and weaknesses of each IEP.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants understand the purpose of IEPs.
- ✓ Participants are able to write an IEP with confidence.

Extension activities: ideas for collaborative learning/self-study

1. Participants should return to the school and prepare IEPs for those children in their classes who need IEPs. If they are already using IEPs, participants can review these IEPs in the light of what they have learned in this module.
2. Participants from the same school can support each other to develop and implement IEPs.

Ideas for ongoing support and supervision

The facilitator can follow up with the teacher in the classroom to ensure that they are actively using IEPs. IEPs should be regularly reviewed (at least once a term).

Handout 1: Individual Education Plan – template

INDIVIDUAL EDUCATION PLAN		
Name of student:	Description of difficulties faced by the child:	
Age:		
Class level:		
IEP start date (dd/mm/yyyy):		
IEP review date (dd/mm/yyyy):		
Name of class teacher:		
Additional equipment/resources required by child (if any):		
Goals	Plan of action	
1.	1.	
2.	2.	
3.	3.	
	4.	
	5.	
	6.	
EVALUATION		
Were the goals achieved? (✓ or X)		
Goal 1	Goal 2	Goal 3
Comment of teacher:		
Comment of parents/guardians:		
Comment of child:		

Handout 2: Individual Education Plan (IEP) – completed

INDIVIDUAL EDUCATION PLAN	
Name of student: Lucee Ballanta	Description of difficulties faced by the child: Lucee cannot walk well or hold her pencil well. She finds writing very difficult. It is difficult to understand what she says. Other children do not play with her. She often does not participate in class. She may have cerebral palsy.
Age: 7	
Class level: Grade 1	
IEP start date (dd/mm/yyyy): 15/09/2017	
IEP review date (dd/mm/yyyy): 15/12/2017	
Name of class teacher: Foday Tarawalie	
Additional equipment/resources required by child (if any): Pencil with tape wrapped round it.	
Goals 1. Lucee will be more included in class. 2. Lucee will hold her pencil. 3.	Plan of action 1. Teacher will talk to the child and tell them to be kind to her. 2. Teacher will ask the class if there are any students who want to be Lucee's friends. 3. Two students who have volunteered to be Lucee's friends will help her in class. 4. Teacher will wrap some tape around Lucee's pencil to make it easier to hold. 5. Teacher will simplify tasks, concentrating on individual letters. 6. Lucee will sit at the front of the class alongside her helpers. 7. Teacher will give Lucee lots of encouragement.

EVALUATION

Were the goals achieved? (✓ or X)

Goal 1

✓

Goal 2

✓

Goal 3

Comment of teacher: Lucee is much happier and making good progress. She has made some good friends and now finds writing much easier. She can write all the letters of the alphabet. She can also read the letters. Next term, I want her to start reading and writing words.

Comment of parents/guardians: We are so happy about Lucee. She used to cry before going to school. Now she really looks forward to going to school. She is working very hard. Big thanks to the teacher.

Comment of child: I like school. I have good friends. I can write. I play with the other children.

Handout 3: Case studies

1. Ali is 10 years old. He does not learn like the other children. He cannot write well. He can write a few letters and complete very simple mathematics problems. During class, Ali gets up and wanders around the room. He will only sit down for a few minutes at a time. When asked to write, he wanders about the most. The other pupils often tease Ali and call him 'stupid'. Sometimes Ali wets himself. Then he goes home for the rest of the day.
 - How can Ali learn better at school?
 - What can Ali's parents do to help?
 - How can the other pupils help Ali?
2. Stephanie has not developed like other children. She cannot walk well. She finds it difficult to hold things, like a pencil. When she speaks it is difficult to understand what she says. However, Stephanie can understand what other people say to her. She is 7 years old and started school last year, but she is still in Grade 1. She can recognize letters. She tries to write but becomes frustrated. During play-time she stays in class. Often she seems to stop listening in class and lays her head down on her desk.
 - How can Stephanie be more included in class?
 - Are there any tools available to help Stephanie write?
 - How can the teacher and other pupils help Stephanie to communicate?
3. Cedric is 9 years old and in Grade 2. He had polio when he was two years old; as a result, one of his legs is shorter than the other. Cedric uses a crutch to get around. He sits in the middle of the row at the back in school. It is difficult for him to get in and out. At play-time he stays in the classroom. Cedric is very clever. He usually finishes his work before the others. He says he is bored in school.
 - How can Cedric be included in playtime?
 - How can Cedric's parents be involved?
 - How can the teacher make sure that learning is made more enjoyable for Cedric and other children?

Handout 4: Individual Education Plans

An Individual Education Plan (IEP) is a systematic way to plan and implement an educational support programme for a pupil. It is drawn up by the teacher in consultation with the child and the child's parents.

An IEP includes:

Key information about the learner

Description of the difficulties faced by the learner and areas to be developed

Learning goals for each semester in key areas (e.g. literacy, numeracy, communication skills)

A plan for helping the child

The teacher's overall evaluation of the progress made by the child

The learner's comments

The parents' comments

An IEP can be a valuable tool for the inclusive teacher. This is because it makes the teacher think very carefully about a) the needs of the child and b) how he/she can help the child. It also clearly identifies how a teacher will help the child and monitor the child's progress.

Gender responsive approaches to individual education plans

When preparing an IEP for a pupil, consider the barriers to learning likely to be faced by girls with disabilities in particular (or boys with disabilities in particular). Are there particular strategies you can include in an IEP which will help girls/boys to overcome these barriers?

21. Differentiation⁴³

 **1 hour 30 minutes in total**

Module objectives

By the end of this module participants will be able to:

1. Recognise why and when differentiation is required.
2. Identify various differentiation strategies.

Resources

- Flipchart paper
- Marker pens
- Handouts

Information to share with participants during this module

The relevant information can be found in Handout 1.

Activity 1: Introduction to differentiation 30 minutes

Distribute Handout 1 to the participants, Discuss the different types of differentiation mentioned in the handout.

Ask the participants to describe the different types of differentiation they use in their classrooms. Write these on flip-chart paper.

Activity 2: Differentiation in action 20 minutes

The purpose of this activity is to practise recognising differentiation.

Plenary. Read **Facilitator's note 2** aloud. Pause at the end of each paragraph and ask the participants to identify the various types of differentiation used by the teacher.

⁴³ Source for this module include: Teachers in Crisis Contexts Working Group, 2016. *Training Pack for Primary School Teachers in Crisis Contexts. Training Session 3 - Pedagogy.* TICCWG: London.

Activity 3: Card shuffle 🕒 30 minutes

The purpose of this activity is practise differentiating a lesson or task.

Put the participants into groups of 6 people. Write a basic lesson task on the whiteboard:

Option 1: ask a participant for a task taught in their class recently;

Option 2: pre-prepare a task chosen from the curriculum used by the participants;

Option 3: use any common lesson task (e.g. classification of fruits and vegetables, drawing geometric shapes, reading a poem).

Instruct each group to shuffle and deal out the 6 cards (**Facilitator's note 1**).

According to their card each participant should suggest a way that the task could be differentiated. Re-deal the cards and repeat the activity with another lesson task.

Continue for 30 minutes.

Activity 4: Reflection 🕒 10 minutes

The purpose of this activity is to consider the emotional impacts of differentiation.

Tell participants that there is one last crucial question to consider: 'How can we differentiate lessons without damaging learner confidence and self-esteem?'

Ask participants to discuss the question in pairs.

Specimen answers:

- Praise progress
- Praise effort
- Praise positive behaviour
- Use different types of grouping
- Recognize strengths and weaknesses in different areas
- Give opportunities for success

Tell participants that this last learning point is particularly critical when working with children with impairments. Wrap up and summarise key learning objectives.

This is the **end of the module**. The facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants understand why and when differentiation is required.
- ✓ Participants are able to identify various differentiation strategies.

Extension activities: ideas for collaborative learning/self-study

1. Participants plan a differentiated lesson with a fellow teacher.

2. Participants observe the lesson of another teacher to get more ideas for differentiation.
3. Participants ask learners about different teaching approaches and how they make them feel, and discover what they enjoy the most/least. They then report back this information to the other participants.

Ideas for ongoing support and supervision

The facilitator can review a lesson in which the teachers have provided planned and spontaneous differentiation and discuss the lesson together with the teacher.



Children with disabilities will sometimes benefit from one-to-one assistance. This photo shows a teacher in Sierra Leone helping a pupil with hearing loss to complete a writing exercise. The project is being supported by the European Union. © Sightsavers/Michael Duff

Handout 1: Differentiation

Differentiation happens when teachers use different approaches in order to meet the needs of children with different interests, needs and capacities in their classrooms.

A differentiated lesson can be contrasted with a 'single delivery' lesson in which the same content is taught in the same way to all learners.

Differentiation can be 'planned' – i.e. planned before the lesson – or 'spontaneous' – i.e. an unplanned response to a particular occurrence in a lesson (for instance, a pupil struggles with a task and the teacher then responds).

Individual Education Plans (see **Module 20**) can assist teachers to adopt differentiated approaches.

Differentiation is applied to two different aspects of teaching:

1. **Content** – what is taught
2. **Process** – how the content is taught

You can differentiate for individual pupils or for groups of pupils in your class.

In terms of **content**, you can focus on the following:

- Simplification/complication. You can make the lesson content simpler or more complicated according to the needs, interests and capacities of pupils – for instance, some pupils can be given more complex mathematical sums to solve than other pupils.
- Content-variation. You can vary the content of lessons so pupils have the chance to study subjects of interest and relevance to them – for instance, in an agriculture lesson, pupils who are interested in raising chickens can study poultry-raising while pupils who are interested in breeding rabbits can study this area of animal husbandry.

In terms of **process**, you can focus on the following:

- Communication. You can communicate in different ways with different learners– for instance, you can use simpler or more complicated language when communicating with certain pupils, or you can use sign language when communicating with deaf learners.
- Presentation. You can present information in different formats – for instance, information can be presented in the form of pictures or diagrams for pupils who have difficulty with reading, or you can give pupils with low vision reading materials in large print.
- Task-selection. You can give the pupils different tasks – for instance, some pupils are given an exercise in which they add single digit figures while other pupils are given an exercise in which they add double digit figures.

- Time-allocation. You can give the pupils different amounts of time to complete tasks – for instance, children with visual impairments are likely to need more time to complete reading and writing tasks than others.
- Individualised support. You can provide certain pupils with more assistance than others – for instance, if there is a group of pupils who find punctuation particularly difficult, you can work intensely with them while the other pupils work on their own.
- Feedback. You can provide different kinds of feedback to pupils – for instance, some pupils may need extra praise and encouragement. Some pupils may also need guidance and counselling.
- Placement. You can place pupils in different parts of the classroom – for instance, pupils with low vision may benefit from sitting close to the board (but these pupils must also be seated next to other pupils, or else they will feel isolated in the classroom).
- Grouping. You can group your pupils – for instance, some pupils who are struggling with a particular activity may benefit from sitting next to another pupil who can help them with this activity.

Differentiation is one of the strategies that can most benefit learners with disabilities. However, as teachers, you need to differentiate sensitively and thoughtfully. Otherwise some pupils may feel embarrassed or distressed about being treated differently from other pupils.

Teachers should only employ differentiation if they think it will benefit the learners. Teachers should not differentiate for the sake of differentiation. Teachers should also only carry out differentiation when they have the time and resources to carry out differentiation effectively.

Gender responsive differentiation

Girls may feel unhappy and uncomfortable if they are the only girl in a group. Make sure there is at least one other girl in their group. Sometimes girls may also enjoy working in girl-only groups, away from the boys in the class. When teaching, you also need to make sure that you are covering subjects and setting tasks which are interesting for girls as well as boys. It is important that teachers treat both boys and girls with respect and consideration at all times. This is only possible if teachers are respectful towards both girls and boys.

Facilitator's note 1: Differentiation in action

The teacher begins her geography lesson about the weather. To start the lesson the learners must work with a partner to name as many types of weather as they can. Then the teacher writes some keywords on the board. She asks the learners to match up the types of weather to the names of the season and to write these in their notebooks. Some of her learners struggle with reading and writing so she draws pictures of the different types of weather to help them. She also sets a challenge task - for those learners who finish quickly. They must add adjectives to describe the type of weather in each season.

While the learners work the teacher moves around the classroom. She knows that several learners struggle with their writing so she makes sure she walks by them and encourages their efforts, and she praises the learners who have moved on to the challenge task.

The teacher then divides the learners into their groups. For this activity they are in carefully selected mixed ability groups so that the learners can support and challenge each other. Each group is assigned a season. In their groups they make a concept map to show all of the different activities that you would do in a particular season. Each group then presents its work.

The last task of the day is to answer the question: Which is your favourite type of weather and why? The teacher gives the learners a choice – they can either answer this question by writing or by drawing a picture with annotations. At the end of the lesson she collects the work to assess them and to give feedback.

Facilitator's note 2: Card shuffle

Learner with a physical disability	Learner very talented in numeracy and literacy
Learner with a visual impairment	Learner with an intellectual disability
Learner who finds concentrating particularly difficult	Learner from a different language background

22. Inclusive lesson planning⁴⁴

 1 hour 20 minutes

Module objectives

By the end of this module participants will:

1. Be able to identify the key features of inclusive lessons.
2. Have demonstrated the ability they can plan inclusive lessons.

Resources

- Flipchart paper
- Prepared flipchart sheets with questions written on them
- Marker pens
- Handouts

Information to share with participants during this module

All information to be shared with participants can be found in the **Module Notes** and **Handouts 1 and 2**.

Activity 1: Guidelines for planning an inclusive lesson 20 minutes

In plenary, begin by giving the participants a definition of a lesson:

A lesson is an organised set of activities designed to achieve particular learning objectives.

Ask the participants if they are happy with this definition. Encourage them to produce their own definitions and encourage debate and discussion.

⁴⁴ Sources for this module include: Save the Children, 2017. *Foundational Skills for Teachers*. Save the Children: London. Teachers in Crisis Contexts Working Group, 2016. *Training Pack for Primary School Teachers in Crisis Contexts. Training Session 4: Curriculum and planning*. TICCWG: London. Available at: www.ineesite.org/en/training-pack-for-primary-school-teachers-in-crisis-contexts

Give the participants **Handout 1 – Checklist for planning an inclusive lesson**. Go through the checklist with the participants. Ask them if they are happy with the checklist or if anything needs to be changed/added.

Activity 2: Planning an inclusive lesson 🕒 60 minutes

In plenary, tell the participants they are going to practise planning an inclusive lesson.

Put them **into groups of 3-4** and give them the official lesson-planning template that is used in their country/school. Ask each group to plan a lesson on a topic from the national curriculum of their own choosing. Give each group 30 minutes to plan the lesson, writing key details of the planned lesson on the lesson-planning template.

In plenary, ask each group to make presentations on their planned lessons. (This shouldn't involve them reading out their lessons plans! Their presentations need to be as lively and interesting as possible.) After each presentation, the other participants can assess the planned lessons, using the checklist in **Handout 1**. What are the strengths of the planned lessons, and can the lessons be made even more inclusive? In particular, ask the participants to assess the extent to which the planned lessons take into account the needs of learners with disabilities and other students who may face barriers to learning.

This is the **end of the module**. The facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Teacher can identify the key features of inclusive lessons.
- ✓ Teachers have demonstrated the ability to plan inclusive lessons

Extension activities: ideas for collaborative learning/self-study

1. Teachers can observe one another's lessons in order to assess their inclusiveness.
2. Teachers can jointly plan inclusive lessons.

Ideas for coaching and supervision

1. The facilitator can develop an inclusive lesson plan with a teacher, or review an existing lesson plan.
2. Follow-up workshops can be organised to develop teachers' lesson planning skills.

Handout 1: Checklist for planning an effective lesson⁴⁵

At the start, I will...

- Relate the topics of the lesson to previous learning and/or the students' own lives in order to make the topic understandable and relevant
- Make the learning objectives clear

As the lesson progresses, I will...

- Use strategies to actively involve students in the learning process
- Use a variety of good quality teaching aids and learning materials to illustrate concepts and processes
- Ensure the lesson flows easily and logically (from the simple to the complex)
- Ensure that students are learning material that is meaningful and new
- Provide many opportunities for students to attempt the task and receive feedback
- Review and build-on related material

At the end, I plan to...

- Assess what students have learned in the lesson
- Summarise the lesson (referring back to the intended learning objectives)
- Connect the lesson to real life and/or the next lesson
- Suggest or provide opportunities for practice (homework, reading assignment, simulations etc.)

At all stages, I plan to...

- Ensure the lesson is accessible and relevant for all the students in my class, including students with disabilities
- Provide any necessary assistance for any students who are struggling to understand the topic/complete the set tasks

Gender responsive lesson planning

It is important that your lessons are gender responsive. In other words, your lessons should be relevant, interesting and accessible for both the girls and boys in your class. For instance, learning materials should present girls and women, as well as boys and men, in a positive light. Activities should also be as enjoyable for girls and boys. Think of a topic you have to teach in school. How can you teach that topic in the most gender-responsive way possible?

⁴⁵ The above checklist is adapted from a checklist developed by British Columbia Institute of Technology. See: British Columbia Institute for Technology, 2018. *Preparing Lesson Plans*: BCIT: Burnaby, Canada. Available at: https://www.bcit.ca/files/ltc/pdf/ja_lessonplans.pdf

23. Classroom and behaviour management ⁴⁶

 **2 hours in total**

Module objectives

By the end of this module participants will:

1. Know the difference between proactive and reactive classroom management.
2. Be able to identify approaches for proactive and reactive classroom management.
3. Know ways in which they can organise their classrooms in order to promote learning for all.

Resources

- Flipchart paper
- Prepared flipchart sheets with questions written on them
- Marker pens
- Handouts

Information to share with participants during this module

Classroom management is not only about discipline. It refers to the variety of skills and techniques teachers use to create a positive environment for learning. This keeps learners attentive, on-task (focused on a learning activity), and productive.

There are two sides to classroom management:

- **Proactive classroom management**
- **Reactive classroom management**

Proactive classroom management is when you create the conditions in your classroom that promote good behaviour among learners. Reactive classroom

⁴⁶ Sources for this module include: UNESCO, 2001. *Understanding and Responding to Children's Needs in the Inclusive Classroom*. UNESCO: Paris. UNICEF Rwanda, 2009. *Introduction to Special and Inclusive Education. Teacher Training Manual 1*. UNICEF: Kigali. MINEDUC, Handicap International, Teachers in Crisis Contexts Working Group, 2016. *Training Pack for Primary School Teachers in Crisis Contexts. Training Session 3 - Pedagogy*. TiCCWG: London.

management is when you respond to poor behaviour in order to ensure learners get 'back on track'. Obviously, proactive classroom management is essential as it prevents poor behaviour occurring in the first place.

There are five key principles for proactive classroom management:

1. **Have clear expectations.** Make it clear what you will accept and not accept in terms of classroom behaviour.
2. **Establish daily routines.** These create a sense of stability, structure and security.
3. **Engage learners.** If pupils are motivated and interested, they will learn more effectively.
4. **Positively reinforce.** Positive reinforcement recognises and encourages good behaviour
5. **Strengthen social networks.** Create a caring classroom environment. This will ensure that pupils feel happy and 'cared for'.

See **Handout 1** for more information.

Gender responsive classroom management

Always ensure girls and boys are given equal opportunities to participate in activities and routines. Try to avoid reinforcing gender stereotypes (e.g. girls cleaning up; boys doing heavy lifting). Think about what might prevent both sexes participating equally and remove any barriers. A 'barrier' might be a social attitude that prevents girls and boys working together. Try to create an environment where teamwork between boys and girls is actively encouraged.

Activity 1: Applying the five principles 🕒 30 minutes

Distribute **Handout 1** to participants. This lists the principles and practices of proactive classroom management. Read through Handout 1 with participants. Ask them if there are any practices they would like to add to the list. Write the additional practices on a piece of flipchart paper divided into five columns (see below).

Have clear expectations	Establish daily routines	Engage learners	Positively reinforce	Strengthening social networks
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•

Activity 2: Reactive classroom management 🕒 45 minutes

Even when teachers practise proactive behaviour management in their classrooms, some pupils will sometimes misbehave. In these cases, the teachers will need to engage in reactive classroom management – i.e. manage bad behaviour effectively.

Distribute **Handout 2** to the participants ('Do's and Don'ts of Reactive Classroom Management').

Divide the participants into groups of three, four or five. In each group, one participant will play the part of a misbehaving pupil, the second participant will play the part of the teacher dealing with the misbehaviour, and the other participant/s will observe. Ask the participants to prepare two short role-plays (no longer than one or two minutes each). In the first role-play, the teacher responds inappropriately to the pupil's misbehaviour. In the second role-play, the teacher responds appropriately to the pupil's misbehaviour. Ask each group to perform their role-plays in front of the others. After each pair has performed, the other participants should identify what was good and bad in terms of the teachers' classroom management.

Activity 3: Classroom environment 🕒 45 minutes

The purpose of this activity is to consider the importance of classroom environments for learning, particularly for children with disabilities and/or special educational needs.

Group work: ask participants to think about their classroom environments. Ask if there are any problems. Get participants to discuss in small groups some of the challenges they have in their classrooms – e.g. crowded conditions, leaking roofs, lack of desks and chairs. Circulate around the group to identify ways in which their classroom environments are unsatisfactory, particularly children with disabilities and/or specific educational needs. Make sure participants are writing down some of the key issues on a flipchart. After 10 minutes ask participants if they are any ways they can improve their classroom environments. Allow another 10 minutes for this.

In plenary, explain to participants that sometimes it can be hard to identify ways in which classroom layouts can be made more inclusive. However, offer some tips and ideas on what they could do by referring to **Handout 3**. Read through this as a group and make comments – invite participants to read out a bullet point each.

This is the **end of the module**. The facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants know the difference between proactive and reactive classroom management.
- ✓ Participants can identify approaches for proactive and reactive classroom management.
- ✓ Participants know ways they can organise their classrooms to promote learning for all.

Extension activities: ideas for collaborative learning/self-study

1. Participants can re-read Handout 1: Principles and practices of proactive classroom management.
2. Participants can keep a record of the approaches they have employed to promote proactive and reactive classroom management. Which approaches have been particularly effective/less effective and why?

Ideas for ongoing support and supervision

The facilitator can:

1. Follow up with the teachers to observe their classroom management
2. Identify with the teachers what is working well and what is working less well
3. Identify with them ways in which their classroom management can be improved

Handout 1: Principles and practices of proactive classroom management

HAVE CLEAR EXPECTATIONS

- Make a list of class rules with your learners
- Provide clear instructions when setting tasks
- Check learners understand these instructions

ESTABLISH DAILY ROUTINES

Examples of routines and procedures:

- Starting class
- Ending class
- Passing out books in class
- Asking questions in class
- Grouping learners

ENGAGE PUPILS

- Address learners by their first names
- Consider learners' abilities and interests when planning lessons
- Be aware of:
 - Learners' backgrounds (particularly if they have experienced trauma)
 - Learners' disabilities and specific educational needs
 - Learners' cultural and linguistic differences
 - Organise activities which allow learners to work in groups

Make classroom activities enjoyable

STRENGTHEN SOCIAL SUPPORT NETWORKS

- Establish Buddy Schemes (see **Module 24**)
- Organise child-to-child learning activities in your lessons
- Establish all-age Girls Clubs where girls (supervised by a female teacher) can discuss subjects of importance to them
- Provide guidance and counselling for vulnerable children

POSITIVELY REINFORCE

- Give learners consistent and positive feedback
- Have a seating chart.
- Make sure that learners are comfortable and work well with the learners they are sitting next to.
- Display pupils' work on the wall.
- State your expectations clearly and make sure these expectations are consistent
- Praise good behaviour
- When you set a task, patrol the classroom to check the pupils are fully involved in the task

Handout 2: Do's and Don't's of Reactive Behaviour Management

DO:	DON'T:
<ul style="list-style-type: none">• 'Catch' bad behaviour before it happens (for instance, patrolling the class and keeping an eye on the learners)• Keep calm• Speak clearly and concisely to the child• Behave respectfully towards the child• Be fair and consistent when issuing sanctions• Disapprove of the behaviour, not the child• Ignore minor misdemeanours• Praise and reward good behaviour• Keep responses clear and concise• Avoid corporal punishment completely•••	<ul style="list-style-type: none">• Allow difficult situations to develop• Lose control of the situation• Lose your temper• Raise your voice unnecessarily• Be sarcastic• Make offensive remarks about the child and the child's background• Use bad language• Punish the child if the child makes a mistake• Become over-excited about small matters• Ignore good behaviour• Make threats or promises you can't keep• Tear up a child's work• Hit a child••••

Handout 3: Classroom environment

Classroom environments can help or hinder a child's learning. Sometimes there is not much teachers can do to change them. However, here are some ideas:

1. Make sure children who need extra support sit close to the teacher and the board. This can be very important for children with hearing, seeing and learning difficulties. However, these children must not sit on their own as otherwise they will feel segregated from the others. They must also sit alongside their non-disabled classmates.
2. Try to make sure there are sufficient levels of lighting in your classroom. This is beneficial for all children, but particularly children with low vision. However, children with low vision – particularly children with albinism – should not directly face bright light as this will not only be uncomfortable for them, but actually make it harder for them to see. Deaf children also require good levels of classroom lighting, as these children are particularly reliant on their sense of sight when learning.
3. Noise levels need to be kept to manageable levels in your classroom. This is particularly important for children with visual impairments as they are particularly reliant on their sense of hearing for learning. Quiet classrooms will also benefit children with hearing loss, as otherwise these children will struggle to hear what others are saying.
4. Ensure that learners with disabilities always have access to necessary chairs and desks, especially as sitting on the floor may be difficult or even impossible for them.
5. Try to arrange the room so that children can move about freely, especially if the children have seeing or mobility problems. In particular, make sure that a child who uses a wheelchair or crutches can move easily around the classroom.
6. Try to make sure that children have enough space for their books and equipment. Try to make sure they have enough desk-space to read and write easily.
7. If you want the children to work in groups, but you cannot move the desks, then get the row in front to turn around to face the row behind.
8. If you have the space, try to set aside an area of the classroom where you can work with certain children individually or in small groups.
9. Have a box that contains some storybooks or simple games that children can use when they have completed their work ahead of others.
10. Put up pictures, posters, drawings and examples of children's work on the walls. Make sure they are displayed at the children's eye level rather than high up on the walls. You can also add different textures for touching to help children with visual problems.
11. Some learning is better done outside the classroom. For example, lessons about plants and animals could be done in the school grounds.
12. Bring in a mat to make a quiet reading corner.

13. Whenever possible, use real objects to help the children understand. Make sure you allow the children to handle and touch these objects. This is very important for children with seeing and learning difficulties.
14. Keep the classroom clean. Make sure all the children, including children with disabilities, help keep the classroom neat and tidy.

24. Encouraging children to work together

 **1 hour 50 minutes in total**

Module objectives

By the end of this module, participants will:

1. Recognise that social interaction between children with disabilities and other children should be encouraged.
2. Know about buddy systems.
3. Be aware of ways in which children can support each other's learning.
4. Be aware of different types of learning activity and learning assignment.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Facilitator's notes

Information to share with participants during this module

The relevant information can be found in **Handouts 1, 2, 3, 4** and **Module Notes**.

Activity 1: The benefits of social interaction 30 minutes

The purpose of this activity is to increase participants' awareness that children develop important capacities through socially interacting with each other. Through developing these capacities, children will function more effectively in social situations.

Explain that social interaction can be difficult for many children – in particular, non-disabled children may be reluctant to interact with children with disabilities, and vice-versa. Teachers therefore need to encourage social interaction between children with disabilities and their peers.

Distribute **Handout 1** to participants.

Look at the table. This table lists the seven capacities that children develop through interacting with one another and then describes what these capacities are. Ask participants to work with a partner to rank the capacities in order of importance (Most Important – Score 1, Second Most Important – Score 2, Third Most Important – Score 3...Least Important – Score 7).

In plenary, record the number of votes each statement receives.

How highly were the different capacities ranked?

Why were some capacities ranked higher than others?

(Please note that there is no 'correct' ranking – the activity is intended to help teachers to understand that social interaction assists children to develop certain capacities.)

Activity 2: Buddy systems 🕒 20 minutes

Distribute **Handout 2** to participants.

Ask one participant to read the worksheet aloud. Do participants think that this strategy would work in their classrooms? (Encourage participants to accept that they are not only responsible for teaching children, but for making sure they are happy in school.)

Activity 3: Collaborative learning and peer tutoring 🕒 30 minutes

Distribute **Handout 3** to participants. **In plenary**, read through the handout.

Ask participants for any questions and comments. Then ask participants to describe their own experiences of organising collaborative learning and peer tutoring in their classrooms. What steps did they take to make sure that these types of learning were successful?

Ask the participants to identify the possible 'pros' and 'cons' of peer learning. List these on flip chart paper.

Some possible advantages are:

- It makes life easier for the teacher because the teachers does not have to provide so much individualised support for pupils experiencing difficulties.
- It develops the social skills of pupils.
- It strengthens friendships between pupils.
- It encourages pupils to care for one another.
- Pupils experiencing difficulties with learning will receive one-to-one assistance for long periods of time.

Some possible disadvantages:

- It can be noisy.

- It can take more time than teacher-led learning.
- Unless well-managed, there is a danger that one child will do all the work for the other child.
- If children are expected to work with one another for long period of times, these child may become bored and frustrated.
- Unless properly supervised, children may spend their time chatting and playing rather than working.

You need to stress to participants that peer tutoring is appropriate in some situations and not appropriate in other situations. Sometimes pupils need to work on their own. Sometimes teacher-led learning is necessary. You also need to stress that peer tutoring needs to be well-organised to be successful.

Activity 4: Presenting work in different ways 🕒 20 minutes

Collaborative learning and peer tutoring are effective strategies when used well. However, when organising peer tutoring and collaborative learning, we need to make sure pupils are not asked to do the same type of activity all the time. Otherwise the pupils will become bored. They will also not develop a range of skills. The pupils therefore needed to be provided with opportunities to participate in different types of learning activity. They also need to be given different types of learning assignment.

Distribute **Handout 4** to participants. Read through it with them. **Table 1** identifies different types of activities that can be organised in the classroom, and **Table 2** identifies different types of assignments that can be given to pupils. Read through the lists with participants and ask them if they can identify more examples of activities and assignments.

Plenary 🕒 10 minutes

Remind participants that we have talked about the importance of social interaction and friendships for developing the capacities of skills in children. Where children are finding it difficult to interact, we can organise situations to help them.

Children are a useful resource in the classroom. They already have knowledge and skills that can be utilised to support one another. Strategies such as collaborative learning and peer tutoring can have a positive impact on all children, including children with disabilities.

This is the **end of the module**. The facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants recognise that social interaction between children with disabilities and other children should be encouraged.
- ✓ Participants know about buddy systems.
- ✓ Participants are aware of ways in which children can support each other's learning.
- ✓ Participants are aware of different types of learning activity and learning assignment.

Extension activities: ideas for collaborative learning/self-study

1. Participants think about ways in which social barriers can be broken down between girls with disabilities (in particular) and other pupils in schools. For instance, would it be useful for 'Girls Clubs' to be set up in which girls could engage in 'girls-only' activities, supervised by female member/s of staff?
2. Using the ideas in Handout 4, participants write some demonstration lesson plans to share with their colleagues and fellow participants.

Ideas for ongoing support and supervision

Supported by the facilitator, participants meet with their Senior Management Teams/ School Management Committees to discuss ways in which playtimes can be made more enjoyable and inclusive for children with disabilities. What strategies can be adopted to ensure that children with disabilities have more opportunities to talk and play with non-disabled pupils?



Children playing with blocks at a Community-based Childcare Centre in Chisomo, Malawi. The project is supported by Comic Relief. © Sightsavers/Adriane Ohanesian

Handout 1: The benefits of social interaction

It can be difficult for children to form friendships, yet when we look back at our own time in school, our friendships are usually very important. Friendships and positive social interaction increase our well-being and help us to develop important capacities. However, research shows that there is sometimes a lack of social interaction between children with disabilities and their non-disabled peers in schools.⁴⁷ As teachers, we need to understand the importance of social interaction and create space for children to develop necessary social capacities.

This is a list of a few of the capacities that children develop through interacting with their peers. Rank them from MOST IMPORTANT (Score 1) to LEAST IMPORTANT (Score 7).

Capacities	Definition	Ranking
Assertiveness	Children are not afraid to say what they are thinking, but at the same time are sensitive to other people's feelings.	
Communication	Children communicate effectively with one another.	
Coping	Children learn to cope with disappointment and frustration.	
Empathy	Children understand what people are feeling and become sensitive to those feelings.	
Flexibility	Children become more willing to change their behaviour when this is necessary and appropriate.	
Prediction	Children are able to predict how other people will behave in different situations.	
Self-discipline	Children learn to wait for what they want. They understand that they will not always get things instantly.	

⁴⁷ Luttrop, A. & Granlund, M., 2010. *Interaction - it depends - a comparative study of interaction in preschools between children with intellectual disability and children with typical development*. Scandinavian Journal of Disability Research, 12(3), 151-154.

Handout 2: Buddy Systems

Some children find it difficult to make friends. As a result, they are often very unhappy. Children with disabilities in particular can sometimes find it hard to make friends. This may be because they have not had many opportunities in the past to play with other children. It also because non-disabled children are not very friendly towards them – perhaps because they not used to being with children with disabilities.

As a teacher, you can set up a 'buddy system'. This involves you finding pupils who are willing to be friends (or 'buddies') with another pupil – perhaps a child with a disability, or perhaps another child in your class who lacks friends.

You can either identify children in your class who you think will be good 'buddies' for children with disabilities or you can ask for volunteers. Encourage these buddies to talk to and make friends with the other child. Encourage them to help the other child, but only when this is necessary – for instance, the other child may not yet know classroom routines or may not be able to find their way to certain places.

It is important that 'buddies' do not think they have to spend all of their time with their new friend. They are like a helper who checks that their fellow pupil is okay. The buddy should be trained to do the following if they notice that the other child is having problems:

- Encourage the child to talk to the teacher or an adult that they trust
- Accompany the other child when the child speaks to an adult
- Talk to a trusted adult on behalf of their buddy.

While some children with disabilities may find it hard to make friends at first, they are likely to soon make new friends and develop more self-confidence if you set up a buddy system.

Remember also that many children with disabilities will have no trouble making friends. In fact, these children will be excellent buddies for other children who lack friends and are experiencing problems.

Handout 3: Collaborative learning and peer tutoring

As well as encouraging children to interact with another, we can also encourage children to work together. This enable them to share skills and knowledge. It also further strengthens friendships between children.

Collaborative learning

Collaborative learning happens when children complete a task together, with everyone contributing. Children can work in pairs or they can work in small groups.

Collaborative learning is valuable because it provides children with the opportunity to:

- Practise and apply skills.
- Discuss what they are doing, and therefore develop their oral communication skills.
- Be a valued member of a group. The final task is a whole group product and reflects the input of each individual.
- Feel supported by their peers.
- Share in the success of the whole group.

However, when you organise collaborative learning, it is very important that everyone understands what is expected of them. It is also important that you establish some ground rules for collaborative learning – for instance, pupils should listen carefully to one another and treat one another with respect.

Peer tutoring

Peer tutoring is widely used in classrooms. It is not a system for getting a ‘clever’ child to do the work of another child. Instead, it is about getting one child to assist a child through sharing skills and knowledge. Sometimes a child with a disability will benefit from help from another child. Sometimes a child with a disability will be able to help another child. For instance, the child with a disability may be very good at reading, writing or mathematics.

Some common types of peer tutoring are:

- Reciprocal Peer Tutoring: Children take it in turn to be the tutor or the tutee. They change roles in one lesson or over a series of lessons/activities.
- Cross-age Peer Tutoring: Older pupils tutor younger pupils. A child with a disability might act as a tutor for a younger child.
- Random Pairs: Children are selected randomly to work with another child.
- Paired Task: The teacher sets a task that two children work together to complete.
- Same-age Peer Tutoring: Children of the same age, often in the same class support each other.

Identifying tutors and tutees

- The choice of tutor or tutee will depend on the task that is to be completed.
- The teacher should identify the learning objective and then decide which type of peer tutoring is most appropriate.
- Everyone in the class can take on the role of tutor/tutee at different times.
- It is useful to find children who work well together, but teachers should also encourage children of different abilities, gender, race, socio-economic groups to work together. However, teachers need to be sensitive – if it is not culturally appropriate to place children of different sexes together, then don't do it.

Preparing tutors

It is possible to establish formal peer tutoring systems and to train tutors. It is also possible to take a less formal approach and use the strategy to address particular learning.

Whatever you do, some basic rules need to be followed:

- Any help provided by the tutor for the tutee should be confidential. The tutor must not discuss it with other pupils in the class.
- Tutors should listen to the tutee, use respectful language, and provide feedback in a sensitive way
- Tutors should be taught how to encourage the tutee.
- Tutors should be taught to 'scaffold' learning for the tutee. For instance:
 - The tutor demonstrates a skill
 - The tutee completes a task with assistance from the tutor.
 - As the tutee develops skills and confidence, the tutee works more and more independently, with the tutor only occasionally providing assistance.
- Tutors should remember that they are not the teacher, but should work under the guidance of the teacher.

Handout 4: Setting different types of learning activity/assignment

When children are working with a partner or in a small group, it is useful to think about how they are going to achieve the learning objective that the teacher has set. Copying notes from the chalkboard is not usually the best way to help children learn. By setting different types of learning activity we can make learning more interesting for pupils. We can also help them to develop a broader range of skills. Below is a table listing some different types of learning activities you can organise in your classrooms.

TABLE 1: LEARNING ACTIVITIES

- Complete an unfinished chart, diagram, table or timeline
- Conduct an interview
- Make a diagram
- Devise a quiz
- Devise a worksheet
- Devise questions to given answers
- Explain something to a parent/friend and then test for understanding
- Fill in missing words
- Give a commentary
- Make a model
- Match word with definitions
- Put on an exhibition
- Predict what will happen if...
- Learn all you can about a topic and allow the class to ask you questions about it
- Sequence mixed up information
- Set and mark a test for the teacher
- Set and work mark for a friend
- Spot the deliberate mistakes made by the teacher
- Write an explanation

TABLE 2: LEARNING ASSIGNMENTS

- | | |
|---|--|
| <ul style="list-style-type: none">• Dance• Diagrams• Essay• Exhibition• Flowchart• Games• Illustrated booklet• Interview• Lead/contribute to a discussion or debate• Lecture | <ul style="list-style-type: none">• Mime• Model• Newspaper article• Poem• Posters, wallcharts or pictures• Project• Puppets• Radio show• Role play• Seminar• Songs |
|---|--|

25. Inclusive assessment⁴⁸

 1 hour 15 minutes in total

Module objectives

By the end of this module participants will be able to:

1. Identify the differences between formative and summative assessment.
2. Identify ways in which they can use formative and summative assessment in their classrooms, particularly to support children facing barriers to learning.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Facilitator's notes

Information to share with participants during this module

The relevant information can be found in **Handouts 1 and 2**.

Activity 1: Introducing formative and summative assessment 15 minutes

Distribute **Handout 1** to participants.

Read through Handout 1 with participants, checking for understanding and if necessary explaining any difficult concepts.

Activity 2: Identifying formative assessment strategies 30 minutes

The purpose of this activity is to identify commonly used formative assessment strategies and prepare for using them.

⁴⁸ Sources for this module include: UNESCO, 2001. *Understanding and Responding to Children's Needs in the Inclusive Classroom*. UNESCO: Paris. Teachers in Crisis Contexts Working Group, 2016. *Training Pack for Primary School Teachers in Crisis Contexts. Training Session 3 - Pedagogy*. TiCCWG: London.

Read out the description of a lesson in the **Facilitator's note**. Pause at the end of each paragraph in order to ask participants to identify examples of formative assessment.

Distribute **Handout 2** to participants and ask them a) to tick the strategies that they think would work in their classroom and b) to put a question mark against any strategies about which they have concerns. **In plenary**, discuss the strategies and identify what is good and bad about them. What other formative strategies do participants use in their classes?

Activity 3: Identifying summative assessment strategies 🕒 30 minutes

Divide the participants into groups of 4 or 5. Ask the participants to imagine they are setting an end-of-term test and want to make the test as inclusive as possible for the children with disabilities/ special educational needs in their classrooms. In particular ask the participants how they would make the tests as inclusive as possible for the following learners:

- a) A pupil with a physical impairment who finds it difficult to write, particularly for long periods of time
- b) A pupil with low vision who finds reading difficult, even if s/he is given large print
- c) A blind pupil who reads and write braille
- d) A deaf pupil who only communicates through sign language
- e) A learner who finds learning particularly difficult and struggles with written communication

This is the **end of the module**. The facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Teachers can identify the differences between formative and summative assessment.
- ✓ Teachers can identify ways in which they can use formative and summative assessment in their classrooms, particularly to support children facing barriers to learning.

Ongoing support and supervision

The facilitator can support participants to use new formative assessment strategies in their classrooms.

Handout 1: Formative and summative assessment

Formative assessment

- a) Formative assessment is an activity that the teacher carries out at all the time.
- b) It is carried out during lessons.
- c) It provides teachers with a continuous flow of information about their pupils' interests, capacities and rates of progress.
- d) Teachers should respond swiftly to this information – for instance, if a teacher sees a pupil is struggling to carry out an activity, the teacher should provide him/her with the necessary assistance as soon as possible

Examples of formative assessment:

- The teacher patrols the classroom observing the pupils at work
- The teachers asks questions in class
- The teacher organises an end-of-lesson quiz

Summative assessment

- a) Summative assessment is a 'one-off' activity, carried out only a few times every term.
- b) It is carried out after a series of lessons (for instance, after a topic has been taught or termly or half-termly).
- c) It tells teachers what pupils have learned over an extended period of time.
- d) Information from summative assessments should inform extended termly/ half-termly teaching and learning programmes.

Examples of summative assessment are:

- School tests and exams
- Large-scale assignments
- National examinations and assessments

When carrying out formative assessment, reasonable accommodation should be made for learners with disabilities and/or special educational needs. This can involve:

- Changing the format of tests and examinations – for instance, putting material in large print for children with visual impairments or in braille for blind children
- Allowing learners more time to complete assessments
- Providing a scribe for children who find writing difficult or providing a reader for children who find reading difficult

- Spacing tests out over time to give pupils time to prepare/recover
- Testing pupils' ability to carry out practical activities (for instance, dancing, acting, singing, carrying out science experiments) as well as their ability to sit tests involving reading and writing
- Allowing pupils to submit a portfolio of their 'best' work gathered throughout the term/year, rather than only assessing them through timed tests and examinations
- Assessing pupils on their project work (carried out either individually or in groups with other pupils)
- Broadening the range of subjects on which you are assessing pupils in order to give every pupil 'a chance to shine' – for instance, assessing pupils on their artistic abilities, their acting skills, their agricultural skills, and their craft and design skills

Gender responsive assessment

Think about the girls and boys in your classes. Do girls perform better if they are assessed in certain ways? Do boys perform better if they are assessed in other ways? For instance, do girls tend to perform better if they are provided with plenty of time to complete assignments, and do boys tend to prefer timed tests? If this is the case, you need to make sure that you employ a variety of assessment methods so both girls and boys have the chance to excel.

Handout 2: Formative assessment methods

It is important to use different formative assessment methods as these provide you with more and better information about your pupils.

Below is a list for you to consider. However, please bear in mind that ideas may need to be adapted for learners with disabilities/ special educational needs in your classroom.

Non-verbal/non-written cues

Thumbs Up/Thumbs Down. Learners will give a thumbs up for yes or a thumbs down for no. Learners can also give a thumbs up for being ready to move on or a thumbs down for not being ready. The only drawback is some learners are not good judges of readiness.

Fist to Five. Learners indicate their confidence level with material being presented by displaying a number from zero (fist) to five. The teacher can re-teach learners who are at a 1 or 2, while those at a 4 or 5 can receive a more challenging problem to complete.

Partner/group work

Tell your Partner/Check your Partner. The teacher asks learners to tell their partner the answer or explain the new material. In order for this to be effective, partners should be assigned numbers or letters to take turns. This can work well with buddy systems and learners who are already used to working together.

Think-Pair-Share. The teacher asks learners a question. They think of their answers individually for several minutes then discuss their answers with a partner. After several more minutes ask partners to share what they talked about with the whole class. This is useful for difficult questions.

Small Group Discussion. Give small groups of 4-6 learners questions to discuss. Walk around the room and monitor the learners' discussions to check for understanding. Once learners have finished you can ask one learner from each group to explain to the class what they talked about in their group.

Whiparound. Whiparounds can be used to provide examples, give "I agree" or "I disagree" statements, or list key points. The teacher points at/calls on different learners in quick succession and they have to give an immediate answer. Point to/call on as many learners as possible. Time these in order to minimize off-task behaviour.

Written

Got/Need. Learners create a mini chart with two columns in which they list what they have “got” (i.e. completely understood) and what they still “need” (i.e. don’t yet completely understand). This is great for longer lessons.

Summaries. Learners write short summaries of what they have learned. These summaries should be very short – for instance, only 20 words long.

False Statement – Prove Me Wrong! The teacher makes a false statement about a topic they have studied. Learners then have to correct the teachers. For instance, the teacher may say the world is square. The learners then correct the teacher by saying the world is round.

Poems/Songs/Stories/Drawings. Learners produce poems/ songs/ stories/ drawings (whichever they prefer) about a topic they are studying in class. This allows students to be creative while checking for understanding. It also appeals to different learning styles.

Exit Tickets. At the end of a lesson, the teacher can ask learners a few questions about the lesson. They can write their answers on a sheet of paper and hand it to the teacher as they leave the classroom. This is a great way to get instant feedback about what learners learned in the lesson. The teacher can then ensure the following lesson addresses any gaps in learners’ understanding.

Quick Write. This can be a great way to start or conclude class. The teacher gives learners 5-10 minutes to scribble down all of their ideas about a particular topic. Please remember that some learners with disabilities will need to work with a friend to carry out this activity.

Gallery Walk. Learners produce a graphic representation of what they have learned and put these representations up on the walls. Learners can then view these graphics by walking around the classroom. As they walk around the classroom, they can write questions or comments on the graphics.

Verbal

Presentation. Giving learners the opportunity to make presentations or give speeches is a good way to check their understanding of topics.

Debate. The teacher gives learners the opportunity to demonstrate their knowledge by asking them to debate a particularly motion.

Role-play/Skits. The teacher gives learners the chance to create a role play or act out a play based on what they have learned.

Class Quiz. The teacher gives the class a short quiz to see what they have learned and to reinforce learning. This is more enjoyable if the learners are divided into mixed ability groups.

Facilitator's note: Formative assessment in action

Read the description of a lesson to the participants and ask them to identify any examples of formative assessment. (A number has been inserted after every example.)

A language teacher begins her lesson by asking her learners to reflect on their last lesson by listing the key features of a story. As they make their lists she moves around the room to identify if any learners are struggling (1). She then asks on the learners to identify the features one by one until all the features have been identified (2).

The teacher then reads another story to the learners. She asks learners to explain the main idea and supporting details to the person sitting next to them (3). She then asks one or two learners to explain these ideas to the whole class to check for understanding (4). The teacher instructs her learners to work individually to read the story again and answer the questions written on the board (5).

After that the teacher divides the class into small groups. Each group needs to present what they see as the main idea of the story on a poster (6). While learners discuss and prepare the poster in small groups, the teacher walks around and observes them (7). She identifies several groups of learners who are having difficulty understanding the concepts in the story.

Later, one learner from each group presents his/her group's answers (8).

Near the end of the lesson the teacher asks the learners to look at the different groups' answers about the main idea of the story. She invites them to select the one they think is the best answer. They must then write down why they made this choice. She asks learners to write the best answers on an 'exit ticket' – a piece of paper which the learners give to the teacher when they leave the classroom (9).

Adapted from Wylie, E.C., 2008. *Formative assessment: Examples of practice*. Washington, D.C.: Council of Chief State School Officers.

26. Counselling⁴⁹

 **1 hour 45 minutes**

Module objectives

By the end of this module participants will be able to:

1. Explain why counselling is important for children, particularly children with disabilities.
2. Identify the goals of counselling and the five stages of counselling.
3. Identify the do's and don't of counselling.


Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen to show video
- Diagram showing the five stages of counselling

Information to share with participants during this module

Information to be shared with participants can be found in **Handouts 1, 2 and 3**.

Activity 1 – Why do children need counselling? 30 minutes (including video)

The facilitator should show a short video, *Silent Suffering in West Africa*, produced by Plan International ( 2.56 minutes):

<https://www.youtube.com/watch?v=HhIU5lbLtPY>

Afterwards, the facilitator should ask the participants to reflect on the video and share their feelings on the story of the young women in the film.

⁴⁹ The material in this section is taken from: Africa Network for Children Orphaned and at Risk, 2006. *Basic Skills for Counselling Children: Facilitator's Manual*. Hope Worldwide South Africa: Randpark Ridge. This can be downloaded from: http://ovcsupport.org/wp-content/uploads/Documents/Basic_Skills_for_Counselling_Children_Facilitators_Manual_1.pdf

In plenary, ask participants to identify the various reasons why children with disabilities in their classes might be experiencing distress, and thus need counselling. You should then write these problems on flipchart paper for all to see.

The reasons ideas might include:

- Teasing and bullying from other children
- Difficulties travelling to and from school
- Lack of parental support
- Pressure to marry early
- Difficulties understanding what teachers are saying in class
- Difficulty keeping up academically with the other children
- Lack of access to assistive technology (see **Module 14**)
- Unhappiness about being excluded from certain activities
- Anxieties about their future

Explain to participants that effective counselling can help these children to cope with these problems and sometimes even overcome them.

Activity 2 – What is counselling 🕒 **30 minutes**

The facilitator should write this definition on flip chart paper (or display it on the projector):

Counselling is a process which helps children to help themselves, recognise their strengths, and identify the resources available to help them overcome problems and make healthy decisions.

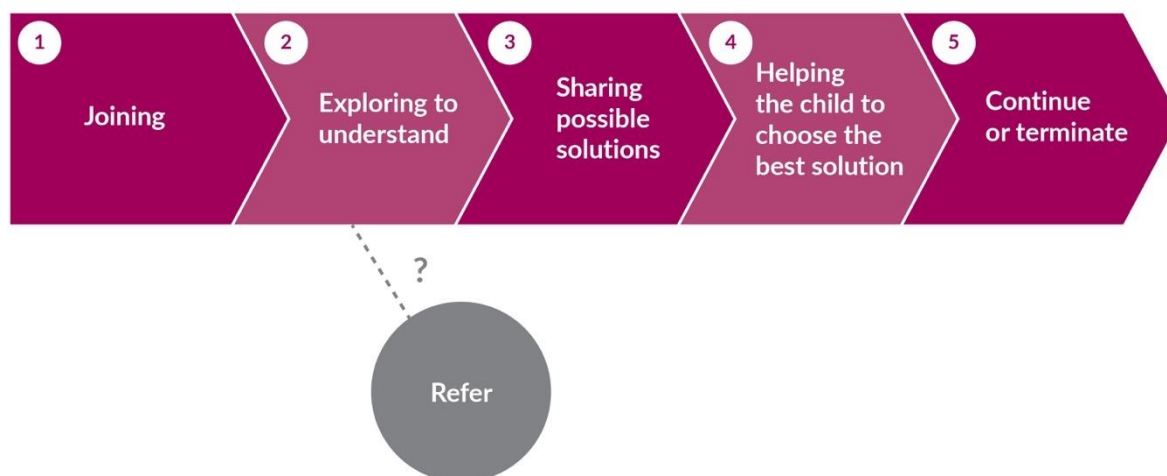
The facilitator should then ask participants what they think this means in their own words. (Keep the discussion short and respectfully correct any misunderstandings.)

Explain that the goals of counselling are:

- a) To help children solve a problem and develop problem-solving skills
- b) To help children through an emotionally difficult time by building resilience and teaching coping skills
- c) To help the child to develop skills to live positively with their current situation and, where possible, change this situation

The facilitator should then distribute **Handout 1** to participants. This identifies what counselling is and what counselling is not. **In plenary**, read through the handout and discuss. Provide participants with opportunities to express their own views and, if they wish, challenge the statements in the handout.

Display to participant the diagram showing the five stages of counselling (this can be written on flipchart paper or displayed on the projector):



Distribute **Handout 2** to participants. **In plenary**, read it through with participants and discuss.

Activity 3 – Practising counselling skills 🕒 45 minutes

In plenary, the facilitator should explain to participants that they will be provided with opportunities to develop their counselling skills. Divide participants into **groups of three**. One participant will take the role of the child, one participant will take the role of counsellor, and the third participant will be an observer. Provide the participants with **Handout 3** which consists of three case-studies, each describing the problems of a child who needs counselling. Ask each group of participants to select one case-study and improvise a counselling session. Tell them they have 20 minutes to carry out their improvisation. While the participants are improvising, the facilitators should walk round, observing the improvisations and where necessary providing assistance.

After 20 minutes, bring all the participants together in plenary. If they have not yet finished their improvisations, tell them not to worry – counselling sessions can sometimes take longer than 20 minutes (although sessions should generally not be longer than an hour – otherwise participants become tired and lose concentration).

Ask selected participants to discuss their experiences of providing/receiving counselling. What was difficult? What was easy? What worked well? What was less effective? What would they do different next time?

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants are able to explain why counselling is so important for children, particularly children with disabilities.

- ✓ Participants are able to identify the goals of counselling and the five stages of counselling.
- ✓ Participants are able to identify the 'do's' and 'don't's' of counselling.

Extension activities: ideas for collaborative learning/self-study

Participants can consult experienced counsellors in their schools in order to find out more about counselling. They can also download from the internet:

Africa Network for Children Orphaned and at Risk, 2006. *Basic Skills for Counselling Children: Facilitator's Manual*. Hope Worldwide South Africa: Randpark Ridge.

Downloadable from: http://ovcsupport.org/wp-content/uploads/Documents/Basic_Skills_for_Counselling_Children_Facilitators_Manual_1.pdf

Participants can then report back to the rest of the group.

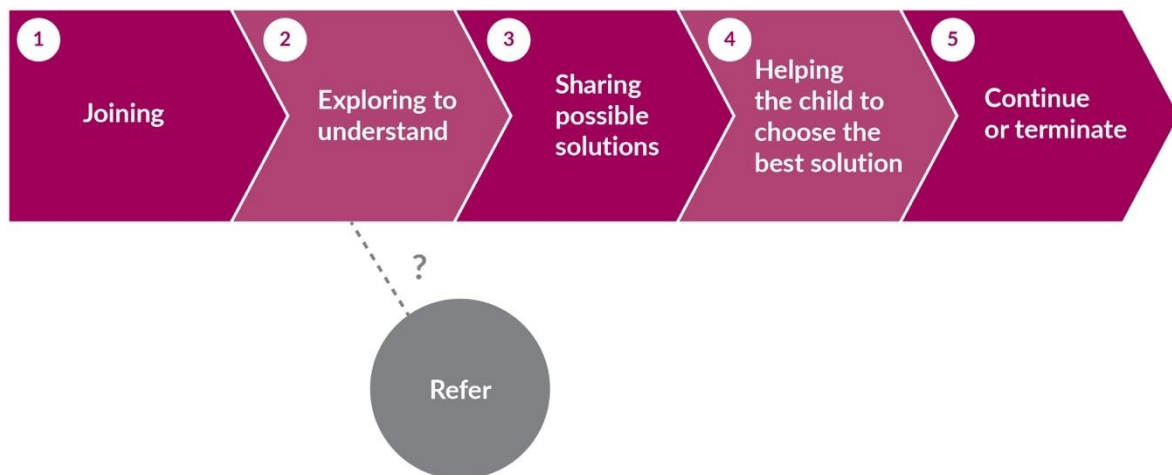
Ideas for ongoing support and supervision

The facilitator can support the participants to carry out counselling in their schools with children with disabilities or other children. Participants can report back to the rest of the group on their experiences.

Handout 1: The ‘do’s’ and ‘don’t’s’ of counselling

Counselling is...	Because...
Establishing relationships with children that are helpful	We want to help, not harm, children
Helping children tell their story	It is good for children to speak about their circumstances and feelings
Listening to children with all your attention	It is difficult to speak or trust someone who does not listen well or is distracted
Giving children correct and appropriate information	We don’t want to give children false hope or harmful information
Helping children make informed decisions	It is good for children to understand their options
Helping children to recognise and build on their strengths	It is important children develop the capacities to deal with difficult situations
Helping children develop a positive attitude towards life	It is helpful for children to see the good in life
Having conversations with a purpose	It is important that counselling focuses on the actual problems of children
Counselling is not...	Because...
Judging children	Judging children does not develop trust or allow them to get the help they need
Interrogating children	If you interrogate children, children will become reluctant to tell their story
Blaming children	Blaming children produces shame and does not allow them to get the help they need
Making promises you cannot keep	This develops mistrust in children
Making decisions for children	This does not help children to learn decision-making skills
Preaching, lecturing or arguing with children	This does not allow children the freedom to make their own decisions
Becoming the child’s best friend	This makes the child over-dependent on the counsellor

Handout 2: The five stages of counselling



1. Joining

This involves introducing the child and obtaining some basic information about the child (name, age etc.). You need to tell the child that you are there to listen to them and support them. You also need to explain to the child the five stages of counselling that will be followed during the counselling session. You also need to assure the children that what they say in the session will be kept confidential – unless the child is in danger or involved in illegal activity, in which case you will have to refer the child to the proper authorities.

2. Exploring to understand

This involves getting an understanding of the problems faced by the child. It involves you listening to the child, encouraging the child to be forthcoming, and providing questions and prompts to get a better understanding of the child's problem. If it becomes clear that the child is experiencing a severe or complex problem, you should refer the child to someone else who is better placed to help the child.

3. Sharing possible solutions

Ask the child to identify possible solutions. Acknowledge the solutions the child provides and encourage the child. Where necessary, you should help the child to identify some alternative solutions.

4. Helping the child to choose the solution that is right for them

Ask the child to consider the advantages and disadvantages of each possible solution. Once a solution has been identified, ask the child:

How are you going to make the solution happen?
Who can help you to bring about these changes?

What could be a barrier to solving the problem, and how will you deal with this barrier?

5. Continue or terminate

With the child, review what you have covered so far. You and the child now need to decide if the counselling should continue or end. You should only recommend ending the counselling if you think the child will be able to manage without any more counselling. Even if you and the child decide no more counselling is necessary, it is important that you tell the child you will always be available to provide further counselling if necessary.

Gender responsive approaches to counselling

Girls should always receive counselling from female teachers or, if there are no female teachers in your school, respected and trusted female community-members.

Are certain approaches to counselling likely to be particularly effective for girls? Are certain counselling approaches likely to be effective for boys? Or are the counselling approaches discussed in this module likely to be effective for both boys and girls?



Mafoune with her teacher Mrs Boro at a primary school in Bamako, Mali. The project is supported by USAID.
© Sightsavers/Javier Acabal

Handout 3: Counselling case-studies

1. Joaddan is thirteen years old and in her final year of primary school. She has difficulty hearing and uses a hearing aid. She wants to go secondary school to continue her studies. However, she is worried that the teachers at her new school will not understand her difficulty and therefore will be unable to address her educational needs. She is also worried because she will not know many of the children in the new school and will therefore need to make new friends. She is particularly worried that the other children may not want to make friends with her because she uses a hearing aid.
2. Enjeck is eight years old and loves music, dance and reading. She has a short stature (she is 0.65 metres tall). She becomes tired easily and is vulnerable to being knocked over in busy areas of the school. Enjeck finds it difficult to manipulate small objects and use tools. She is upset because some children in her class have been teasing her because of her physical disability. As a result of this teasing, she is starting to feel inferior to the other children. She is also concerned that her class teacher has done nothing to stop the teasing.
3. Frederick is twelve years old and is blind. His father has left home so he lives with his mother and three siblings. He is upset because his uncle has moved into her house. He is an alcoholic who comes home drunk every night. He makes fun of Frederick's disability. He has also told Frederick that it is his fault they don't have more money. He has threatened to remove Frederick from school and make Frederick beg on the streets to support his addiction to alcohol.

27. Child Safeguarding⁵⁰

 2 hours

Module objectives

By the end of this module participants will be able to:

1. Define child safeguarding.
2. Identify the various types of abuse.
3. Identify the reasons why children with disabilities are particularly vulnerable to various types of abuse.
4. Identify ways of strengthening child safeguarding strategies in schools.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen to show video

Information to share with participants during this module

This information can be found in **Handout 1**, **Handout 2** and the **Module Notes**.

Activity 1 – What is child safeguarding? 30 minutes

Distribute **Handout 1** to participants. Read it through with the participants, checking for understanding.

You should emphasise the various types of abuse are inter-related. For instance, physical abuse is also emotional abuse as it causes great emotional damage.

Ask the participants to identify any examples of abuse which can occur in schools, homes and communities. Emphasise that these should include examples of abuse carried out by children on other children as well as examples of abuse inflicted on children by adults. Write these down on flipchart paper, grouping them according to

⁵⁰ Sources for this module include: Keeping Children Safe Coalition, 2017. *Training for Child Protection*. KCSC: London. UNICEF, 2006. *Child Protection Information Sheet: What is Child Protection?* UNICEF: New York. Family for Every Child, 2017. *Schools that Care: A Review of Linkages between Children's Education and Care*. FfEC: London.

type of abuse (see the partly-completed chart below).⁵¹ Remember that some of these examples may belong under two or more headings.

Different types of child abuse				
Physical	Sexual	Emotional	Neglect and negligent treatment	Sexual and commercial exploitation
<ul style="list-style-type: none"> • Teacher hits child • • • 	<ul style="list-style-type: none"> • Parent inappropriately touches child • • 	<ul style="list-style-type: none"> • Children tease classmate • • 	<ul style="list-style-type: none"> • Child is underfed • • 	<ul style="list-style-type: none"> • Child in work, not at school • •

Activity 2 – Children with disabilities and safeguarding 🕒 30 minutes (including video)

Children with disabilities are particularly vulnerable to various types of abuse.

Ask participants why this is the case. Write up these ideas on flipchart paper. Below are some possible reasons:

- Children with disabilities may be especially likely to be teased or bullied because they are perceived as ‘different’ from other children.
- Children with disabilities may be less physically strong than other children and therefore seen as ‘easy prey’.
- Children with disabilities – for instance, deaf children and children with communication difficulties – may find it harder to inform responsible adults that they are being abused.
- Negative social attitudes towards people with disabilities encourage abuse.
- Children with visual impairments may be unable to identify the individual/s who has abused them and therefore be unable to report them to the relevant authorities.

Video – stopping the abuse of children with disabilities

Show the video ‘Fairnsquare: Making the world better for kids with disabilities’:

<https://www.youtube.com/watch?v=nlzMD1Kj6kE>

⁵¹ If you are concerned that participants will either be unable to provide examples of abuse or reluctant to provide these examples, you can write your own examples. You can read out your examples to participants and ask the participants to put them under the correct headings.

At the end of the video, ask the participants to identify:

- The five ways in which the child was abused in the film – for instance, at the start of the film, the parents behaved unpleasantly towards the child with disabilities.
- The five ways in which the situation improved – for instance, the parents behaved more respectfully and lovingly towards the child with disabilities.

Activity 3 – Strengthening child safeguarding arrangements in schools 🕒 45 minutes

Put the participants into three groups. Tell the participants they are going to identify ways in which child abuse, particularly the abuse of children with disabilities, can be prevented in the schools in which they teach. Each group should discuss one of the following subjects below, making notes of their ideas.

Below are the subjects for discussion:

1. Strategies for preventing bullying/teasing of pupils by pupils
2. Strategies for making sure teachers and other school staff treat children with respect and consideration
3. Strategies for making sure children are well-fed/well-clothed and for making sure school buildings (including latrines) are hygienic and safe

Working in groups, participants should be given 20 minutes to identify strategies. They should then report back to the other groups **in plenary**.

Discussion of key points raised 🕒 15 minutes

Allow for Q& A afterwards. The facilitator should tell the participants that when they go back to their schools it is vital that they put what they have learned in this training module into practice – in other words, they should do everything they can to prevent child abuse in the schools in which they work.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants can define child safeguarding
- ✓ Participants identify the various types of abuse
- ✓ Participants identify why children with disabilities are particularly vulnerable to various types of abuse.
- ✓ Participants identify ways of strengthening child safeguarding in schools.

Ideas for ongoing support and supervision

Working with other staff and pupils from their schools, participants can use the safeguarding checklist⁵² which has been developed by Sightsavers to assess child safeguarding arrangements in their schools. In the light of these findings, participants develop and implement a plan of action to improve the situation

Handout 1: Child safeguarding

Child safeguarding is about protecting children who are participating in any activity from harm or abuse.

Child safeguarding can involve prevention – in other words creating an environment in which children are free from abuse.

Child safeguarding can also involve responding to a reported example of child abuse.

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

There are five types of child abuse:

- **Physical abuse:** when a child experiences physical harm as a result of the actions, or the failure to act, of an adult or a fellow child
- **Sexual abuse:** any involvement of a child in any sexual activity by an adult or another child
- **Emotional abuse:** acts which cause the child distress and therefore harm the child's social, emotional and physical development
- **Neglect and negligent treatment:** when someone in a position of responsibility (e.g. a parent, a carer or teacher) fails to act and therefore causes the child to experience suffering
- **Sexual and commercial exploitation:** when someone uses a child for sexual satisfaction, someone else's sexual satisfaction and/or for personal gain

Gender responsive approaches to child safeguarding

Are girl pupils (or boy pupils) particularly vulnerable to certain types of abuse? If so, a) how can this abuse be prevented, and b) if the abuse happens, how can it be promptly reported and effectively dealt with?

⁵² The checklist developed by Sightsavers has not been included in this training pack. However, it is available on request from the organisation. Sightsavers has also developed a code of conduct, a school safeguarding policy, and various training modules for use in schools. These too are available on request from the organization.

28. Combatting bullying⁵³

🕒 1 hour in total (🕒 1 hour 40 minutes with optional activity)

Module objectives

By the end of this module participants will be able to:

1. Define bullying.
2. Identify why children with disabilities are sometimes victims of bullying.
3. Identify strategies for combatting bullying in their schools.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen to show video

Information to share with participants during this module

See **Handout 1**, **Handout 2** and **Handout 3**.

Activities

Activity 1: Understanding bullying 🕒 30 minutes

In plenary, read through and discuss **Handout 1** with participants. Ask the participants to describe the types of bullying that happen in their schools and the reasons why they think this bullying happens. Ask the participants to identify any groups of children who are particularly vulnerable to being bullied (e.g. children from

⁵³ This module is based on: Pepler, D., Craig, W., 2014. *Bullying Prevention and Intervention in the School Environment: Factsheets and Tools*. PREVNET: Toronto. Downloaded from: http://www.prevnet.ca/sites/prevnet.ca/files/prevnet_facts_and_tools_for_schools.pdf. UNESCO, 2017. *School Violence and Bullying: Global Status Report*. UNESCO: Paris. Downloaded from: <http://unesdoc.unesco.org/images/0024/002469/246970e.pdf>. US Department of Health and Human Services, 2018. *Stop Bullying Now*. HRSA: Washington. Downloaded from: <http://www.wrightslaw.com/info/best.practices.bullying.pdf>. Volpe *et al*, 2017. *Bullying at School: Recommendations for Teachers and Parents*. University of Delaware: Newark. Downloaded from: <https://www.education.udel.edu/wp-content/uploads/2013/01/Bullying.pdf>.

minority ethnic groups, children who are quiet and withdrawn, children who are in some way different from other children).

Show a short video about a deaf child being bullied at a high school in the United States.

Silent: Anti-bullying film (🕒 4.59)

<https://www.bark.us/blog/5-best-anti-bullying-videos-on-youtube-for-tweens-and-teens/>

After the film, ask the participants why the film was called 'Silent'. Answer: The film was called this a) because the victim – as a deaf person – did not communicate through spoken language, and b) because of the silence of those pupils who witnessed the bullying but did not say anything.

Activity 2: Dealing with bullying 🕒 30 minutes

In plenary, distribute and discuss **Handout 2**. Ask participants to comment on the advice provided in the handout. Ask the participants to identify any other useful strategies for combatting bullying.

Optional activity: Managing a bullying situation 🕒 40 minutes

Before this activity, select three participants to prepare a role-play on bullying. One participant should be the bully, another the child who is bullied, and the third should be a teacher who comes across the bullying and deals with the bullying situation. The role-play should be no more than 5-10 minutes long. You should only select participants who are happy and comfortable performing a role-play in front of others. You also need to give them plenty of time to prepare their role-play.⁵⁴

At the start of this activity, ask the three participants to perform their role-play in front of the others. After they have performed it, ask the other participants **in plenary** how well the teacher dealt with the situation. Ask the participants if they would have handled the situation any differently.

Afterwards (again **in plenary**) distribute **Handout 3** which identifies what teachers should do if they encounter one child bullying another child. Ask them to comment on the advice provided and to identify any additional/alternative strategies that teachers can use.

This is the **end of the module**. The facilitator should now check whether the training module objectives have been achieved.

⁵⁴ If you want to, you could get another three participants to prepare a second role-play. They could show their role-play after the first role-play. If you do this, the other participants will be able to compare and contrast the two role-plays, and this could stimulate some interesting discussion among the participants about the different strategies used by the teachers in the role-plays. The first role-play could involve physical abuse, and the second role-play verbal abuse.

Indicators of achievement

- ✓ Participants can define bullying.
- ✓ Participants can identify why children with disabilities are sometimes victims of bullying.
- ✓ Participants can identify strategies for combatting bullying in their schools.

Extension activities: ideas for collaborative learning/self-study

1. Participants can download materials about bullying and make a presentation to the other participants on the causes of bullying and ways of preventing it.
2. Participants can put into practice some of the ideas in this module in order to combat bullying in their schools.

Ideas for ongoing support and supervision

The facilitator can work with participants to help them combat bullying in their schools – for instance, through helping them to carry out a survey of bullying in their schools, to form an anti-bullying committee, to develop an anti-bullying policy, and then carry out other necessary actions. The participants can then report back to the other participants on the success of these initiatives.



Bineta and Fatou, best friends, at a primary school in Dakar, Senegal. The project is supported by Irish Aid.
© Sightsavers/Peter Nicholls

Handout 1: Understanding bullying

According to UNESCO (2017), it is estimated that 246 million children and adolescents experience bullying in some form every year.

Bullying is deliberate, aggressive and hurtful behaviour towards another person. It is directed towards another person who is particularly vulnerable in some way.

Bullying can be physical. If physical, it can include hitting, pushing, slapping and tripping. Ignoring other pupils so they feel socially isolated is a form of physical bullying.

It can also be verbal. If verbal, it can include name-calling, mocking, insults, threats and other unpleasant comments.

Bullying can be carried out face-to-face. But it is increasing carried out a distance. For instance, pupils can use their mobile phones or computers to send unpleasant messages to other pupils.

Bullying can be obvious and direct, but it can also be subtle and indirect. For instance, pupils can deliberately socially isolate other pupils, causing these pupils great unhappiness.

Bullying often has long-term effects on physical and mental health. Many adults continue to suffer as a result of the bullying they have experienced in school.

Children with disabilities are particularly vulnerable to bullying.

- Some pupils may have unthinkingly absorbed negative social and cultural attitudes about disability from their parents and other adults.
- Children with disabilities may be picked on for looking different from other pupils or behaving differently.
- Children with disabilities may not as physically strong or self-confident as other pupils and therefore may be seen as 'easy targets' by bullies.
- Children with disabilities may find it difficult or impossible to tell others they have been bullied. For instance, deaf children will find communication difficult if their teachers/carers do not know sign language. In addition, children with intellectual impairments may find it hard to put their thoughts into words. Even when these children communicate their concerns, they may not be taken seriously by some adults.

As teachers, it is therefore very important that you take the necessary steps to combat bullying in your schools.

Handout 2: Top tips for combatting bullying

- Be aware that bullying can take many forms and is not always obvious.
- Keep a look out for the most vulnerable pupils at the school, i.e. those most likely to be bullied.
- Assess bullying at your school – e.g. carry out a survey among your pupils to find out where bullying happens, what forms it takes, and which pupils are most likely to be bullied.
- As a teacher, model best behaviour. Serve as an example for the whole school community...
- But don't just focus on setting a good example. Focus on making the whole school a 'bullying-free' environment.
- Form a school committee to coordinate the school's anti-bullying activities.
- Develop a school anti-bullying policy and draw up clear school rules for dealing with bullying.
- Make sure all the pupils know what is acceptable and unacceptable in terms of their behaviour.
- All staff should intervene consistently and appropriately in bullying situations.
- Increase adult supervision in places where bullying is most likely to occur...
- Remember. Pupils should be supervised inside and outside the classroom at all times.
- Make sure parents as well as staff are involved in bullying-prevention.
- Inform parents a) if their children are involved in bullying, and b) if their children are being bullied.
- Spend time in class discussing the subject. Educate pupils on bullying issues, and give them the opportunity to discuss these issues.
- Encourage your pupils to care for one another. Encourage pupils who witness bullying to speak out and report it.
- Ensure counselling is available for children experiencing bullying (see **Module 26**)...
- And remember that children involved in bullying may also require counselling.
- Anti-bullying activities need to continue over time.
- You and your colleagues must be continually vigilant as bullying can occur anywhere, anytime.

Handout 3: Intervening in a bullying situation⁵⁵

If you see one pupil bullying another pupil, it has been recommended that the teacher should:

1. Intervene first by separating the victim and the bully (if physical bullying is happening).
2. Whether the bullying is physical or verbal, identify what has happened and explain why it is wrong to both pupils.
3. Discuss the next step with the victim and ask what they think should be done. If a child is in danger, you must act even if the child doesn't want you to do anything. Reassure the victim that all possible steps will be taken to prevent this bullying happening again.
4. Make it clear to both pupils that the victim is not to blame. Emphasise that bullying is not acceptable.
5. Spend some time talking firmly but calmly to the child who has been bullying. Ask the child to describe what s/he did. Ask him/her to explain why his/her behaviour was wrong. Ask the child to describe how s/he will behave in the future.
6. Appropriately discipline the child who has been bullying. However, you must NOT use corporal punishment to discipline the child.
7. Spend some time talking calmly and reassuringly to the victim. Ask the child if s/he has any remaining concerns. Tell the child again that you and your colleagues are committed to combatting bullying in the school. Instruct the child to report bullying immediately to a teacher if it ever happens again. You may also provide the pupil with some sensible advice which you think will reduce the likelihood of the pupil being bullied in the future.

As a teacher, what do you think of these recommendations? What else (if anything) would you do to help the victim and to prevent bullying happening again?

⁵⁵ Volpe *et al*, 2017. *Bullying at School: Recommendations for Teachers and Parents*. University of Delaware: Newark. Downloaded from: <https://www.education.udel.edu/wp-content/uploads/2013/01/Bullying.pdf>.

Part 4. Working together: partnerships for inclusion

29. Child-to-child strategies⁵⁶

 1 hour 15 minutes in total

Module objectives

By the end of this module participants will be able to:

1. Define the Child-to-child methodology.
2. Identify some ways in which they might be able to use it in their schools.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen to show video
- Flipchart with the six steps written on it

Information to share with participants during this module

Relevant information can be found in **Handouts 1 & 2** and the **Module Notes**.

Activity 1: The child-to-child methodology – an inclusive process 10 minutes

The purpose of this activity is to introduce the child-to-child methodology to participants.

In plenary, explain briefly what the child-to-child methodology is.

The child-to-child methodology aims to help children to develop the skills, knowledge and self-confidence to help other children in their schools and communities.

Tell the participants that the case study that they are going to discuss describes how children used the child-to-child methodology to address issues of inclusion.

⁵⁶ The source for this module is: Able Child Africa/Uganda Society for Disabled Children, 2016. *Promoting Inclusive Education in Uganda: A Child-to-Child Approach* (2nd edn). ACF/USDC: Kampala.

Introduction to the case study - Introduction 🕒 20 minutes

Read out the following introduction to the case study to the participants:

Gabrielle was looking out onto the compound. She had brought water from the bore hole and was waiting for her mother to light the fire so that she could start to cook food for her family. Her brother, Alexander, would be home from school soon and he would be hungry.

Gabrielle loved to hear the stories that her brother told her about school, but she could not hear well and could only see if she held things very close to her eyes. Her mother said that she could not go to school. Her mother said that Gabrielle would not be able to see the chalk board or hear the teacher. She would be better staying at home where she was safe.

Gabrielle had a secret wish. She wanted to go to school to learn to read and write. Even though she was only seven years old she could cook and help her mother around the house and in the field. She always remembered what was needed at the market and looked after her small sister Grace every day.

In plenary write two lists on flip charts 'What Gabrielle Can Do' and 'Barriers to Gabriel attending school'. Briefly summarise Gabrielle's strengths and the challenges that she faces in attending school.

Sequencing the case study 🕒 30 minutes

The purpose of this activity is for participants to understand the six steps of the child-to-child methodology

Before this activity, you need to write the six steps of the child-to-child methodology on a piece of flipchart paper to show to participants. You also need to cut out the various sections of the case study in **Handout 1**.

At the start of the activity, explain to participants that the child-to-child methodology has six steps.

Show participants the flip chart on which you have written the six steps.

Step 1: Identifying the issue

Step 2: Finding out more about it

Step 3: Planning action

Step 4: Taking action

Step 5: Evaluating the action

Step 6: Doing it better⁵⁷

Give participants the various cut-out sections of the case study (from **Handout 1**). Make sure that these sections are not in the right order when you give them to participants. Ask them to put the various sections of the case study in the right order according to the child-to-child methodology (i.e. the first section must represent Step 1, the second section must represent Step 2 etc., etc.)

After the participants have put the pieces of paper in the right order, read out what happened at the end of the case-study:

Gabrielle's parents watched the play but were still unsure about allowing her to attend school. Alexander promised that he would look after her. The teacher suggested that she go to the clinic to see if there was anything that might help her vision or hearing. She was given a magnifier and this helped her to see letters and words. Her hearing was very poor, but the teachers realised that her family used different hand signs and gestures to help her to understand and they started to use these. They helped her to find a friend in class who would make sure that she knew what she was doing with her work.

Plenary 🕒 15 minutes

In plenary, read through **Handout 2**. This describes the child-to-child methodology in depth.

Discuss the methodology with participants. What are the advantages and disadvantages of the methodology? Is it something they think they will be able to use in their schools?

This is the **end of the module**. The facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants can define the child-to-child methodology.
- ✓ Participants identify some ways they in which they might be able to use the methodology in their schools.

⁵⁷ In other words, doing the same action again, only more effectively,

Extension activities: ideas for collaborative learning/self-study

Participants can find out more about the child-to-child methodology and how they can use it in their schools. Relevant information can be downloaded from:

<http://www.childtochild.org.uk>



Classmates at primary school in Bamako, Mali. The project is supported by USAID. © Sightsavers/Javier Acebal

Handout 1: Case Study - Sequencing Activity

Cut the various sections of the case-study. The sections below are in the right order. Make sure they are not in the right order when you give them to participants.



Alexander was studying a subject called 'Child-to-Child' in school. Child-to-child is about children helping other children in their communities. During the lesson, Alexander told the teacher that he had a sister, Gabrielle, who did not go to school because she could not see or hear well.

The teacher said Gabrielle had a right to go to school, just like other children.

Alexander and his classmates wanted to help Gabrielle to go to school. They also wanted to find out why some children in their community did not go to school.

To find out more, Alexander and his classmates realised that they would have to talk to different people. Their teacher helped them to design a questionnaire asking parents how many children were in their family, how many did not go to school, why they did not go to school, and whether there were ways that children might go to school.

They practised asking the questions to their friends and teachers. When they went into the villages they found out many interesting things. Some children did not go to school because it was too far for them to travel, some did not have enough money for books, and some did not go because their parents thought that lessons would be too difficult for them and they were safer at home.

Back at school, the children collected all the information together. The children decided they would concentrate on one thing – how to help parents and the community understand that children with disabilities should go to school. They developed an Action Plan and decided that they would put on a play to show what they had discovered. They decided to write the play and practise it.

When they were ready, the children performed the play at School Assembly, in three different villages and to the School Management Committee. It showed that schools could make children with disabilities feel welcome in their classes. Teachers could think about where the children might sit and what else they might need to help them learn. The teachers could also advise parents about ways of helping children with disabilities – for instance, the parents could refer the child to a clinic or hospital for assessment.

The play was very good. The children realised that people enjoyed their acting and had started to talk about this inclusion.

The children also realised that this was only the start of their work. They needed to find out what had happened because of their play and what they might be able to do next.

Handout 2: The Child-to-child methodology

Step 1: Identifying the issue

The children under the teacher's supervision identify an issue that is important to their lives. For example, one issue may be that too many children with disabilities are not in school.

Step 2: Finding out more about it

With the help of the teacher the children find out more about the problem, using active research methods. For example, they can conduct a survey in their community or village to find out how many children do not go to school. They can also develop a questionnaire to take this further and then find out why these children are not attending school and what children with disabilities would need in order to access school.

At the end of the activity they will have a better understanding of the problem previously identified. For example, they might find out that some children with disabilities don't go to school because they live too far, they do not have the money for the books or uniform, or because the parents are worried that they will be teased at school.

Step 3: Planning action

The children, with teacher help, will share the results of what they found out and discuss them together. They will then develop an action plan to address the problem and engage with the community. For example, they might decide to hold a debate in the school about teasing children with disabilities and why it should stop. Or they may want to put on a puppet show or a play to sensitize the school and the community about that particular issue.

Step 4: Taking action

Under the supervision of trusted adults (such as teachers or parents), children go into the school or the community and implement their plan.

Step 5: Evaluating the action

After taking the action, children come back together to think about what they did and how it went. Did it work? Is there something else they could do? How could they do it better?

Step 6: Doing it better

Based on their evaluation, children find ways of keeping the action going or improving it.

29. Parents and communities as partners⁵⁸

 1 hour 30 minutes in total

Module objectives

By the end of this module participants will be able to:

1. Identify the key groups of community stakeholders which can promote inclusive education for children with disabilities.
2. Explain why partnerships between teacher and parents are particularly valuable for children with disabilities, and identify the forms these partnerships can take.
3. Identify ways in which education and health services can work together.

Resources

- Flipchart paper
- Marker pens
- Handouts
- Laptop/projector/screen to show video

Activity 1: Setting the scene 20 minutes

Distribute **Handout 1** to participants. The diagram in Handout 1 has been adapted from a diagram developed by Inclusive Education Western Cape, a disability-focused organisation in South Africa. The diagram says there are five building blocks for inclusive education – education services; infrastructure and resources; health and social services; families of children with disabilities; and community members.

Ask participants:

1. If any important building blocks been left out of the diagram

⁵⁸ Sources for this module: UNESCO, 2006. *Embracing Diversity: Toolkit for Creating Inclusive Learning-friendly Environments. Specialized Booklet 2: Practical tips for teaching large classes.* UNESCO: Bangkok. Mariga, L., McConkey, R., Myezwa, H., 2014. *Inclusive Education in Low Income Countries. Resource Book for Teacher Educators, Parent Trainers and Community Development Workers.* Atlas Alliance and Disability Innovations Africa: Cape Town.

2. Which building blocks are the most important, or are they all equally important?
3. Why various sets of stakeholders (e.g. teachers, parents, health professionals) don't always work together effectively to promote inclusive education for children with disabilities, and what can be done to improve this situation

Activity 2: Working with parents 🕒 40 minutes

Watch the film Parent Involvement Matters! This can be accessed on:

<https://www.youtube.com/watch?v=nOhZ6U5yaXA>

With feedback from the participants, list all the advantages of teachers and parents working closely together in order to promote inclusive education for children with disabilities. Their ideas should include the following:

- **Information exchange.** Parents pass on important information to teachers and vice-versa.
- **Strategy development.** Teachers and parents jointly develop strategies for promoting inclusive education.
- **Reinforcement.** Teachers and parents adopt the same approaches work together to ensure children acquire skills and knowledge.
- **Motivation.** Children feel support and encouragement from both teachers and community members, and therefore feel more motivated. Parents feel more motivated because they recognise teachers value the work of parents, and teachers feel more motivated because they recognise parents value their work.
- **Task-sharing.** Teachers alone are not responsible for the education of children with disabilities. Parents alone are not responsible for the education of children with disabilities.
- **Consistency.** Children are receiving the same messages from teachers and parents. Children are not receiving 'mixed messages' which might confuse them.

Ask the participants to identify the ways in which they work with parents to support the education of children. List these ideas on flipchart paper.

When this is finished, distribute **Handout 2** to participants so participants can compare their ideas with the ideas in the handout.

Gender responsive approaches to partnering with parents

When developing partnerships with parents of children with disabilities, it is sometimes more difficult to involve fathers in these partnerships and sometimes more difficult to involve mothers in these partnerships. Why is this, and what strategies can you employ to overcome this problem?

Activity 3: Linking schools with health services 🕒 30 minutes

Distribute **Handout 3** to participants. Read through the handout with participants, discussing the different ways in which health services can be linked to education services. Ask participants to identify what is happening in their communities in terms of the integration of health and education services. Ask them to identify ways in which this integration can be strengthened.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Teachers identify the key groups of community stakeholders which can promote inclusive education for children with disabilities.
- ✓ Teachers explain why partnerships between teacher-parents are particularly valuable for children with disabilities, and identify the forms these partnerships can take.
- ✓ Teachers identify ways in which education and health services can work together.

Extension activities: ideas for collaborative learning/self-study

1. Action research. Participants identify the barriers which are preventing them from forming meaningful partnerships with parents of children with disabilities. Participants then take steps to overcome these barriers, recording a) any progress made, b) the reasons for progress, and c) any continuing barriers to progress.
2. Action research. Participants identify the barriers which are preventing their schools working effectively with local health services. Participants then take steps to overcome these barriers, recording a) any progress made, b) the reasons for progress, and c) any continuing barriers to progress.

Ideas for ongoing support and supervision

The facilitator can supervise and support the above action research.

Handout 1: Building Blocks for Inclusive Education

Education Systems

Committed teachers, classroom assistants and volunteers
Head teachers providing dynamic leadership
Supportive school governors and parents
Inspectors, itinerant teachers, teacher-trainers etc.

Infrastructure and Resources

Wheelchairs, standing frames, hearing aids, crutches etc.
See Module 14.
Accessible buildings – ramps, railings etc. **See Module 16.**
Systems enabling children with disabilities to travel easily and safely to and from school

Family

Parents, siblings, extended family
Working in partnership with other service providers
Able to access information, resources and services
Involved in all aspects of a child's development

Community

Friends and neighbours, religious groups, community organisations, disabled people's organisations, volunteers
Accepting, supporting and caring for people with disabilities
Taking an active interest in the well-being and education of children with disabilities
Providing human and financial resources

Health and Social Services

Doctors, nurses, rehabilitation workers, therapists, social workers etc.
Early identification and intervention
Ongoing treatment and provision of assistive devices
Home-based support for children with disabilities and their families

Handout 2: Partnering with parents

1 = Already do; 2 = Intend to do; 3 = Won't do

Ways in which teachers can collaborate with parents	1	2	3
1. Organise teacher-parent meetings at flexible times to help parents to attend			
2. Sensitise parents on the key role they can play in supporting the learning of girls and boys with disabilities			
3. Create a positive, collaborative relationship with parents			
4. Invite parents to attend your lessons and even support these lessons			
5. Work closely with parents to develop, implement and review Individual Education Plans (IEPs)			
6. Share homework schedules with parents and encourage them to help their children with homework			
7. Organise 'open days' where parents can visit the school and observe their children in class			
8. Phone/text parents when you have concerns, and ask them to phone/text you			
9. Meet parents once a term to discuss progress			
10. Hold additional meetings when necessary to discuss emerging issues			
11. Visit the child and the child's parents in the home			
12. Develop individual education plans (IEPs) with the child's parents			
13. Organise 'award ceremonies' for children and invite their parents			
14. Be available at the end of school days when parents pick up children			
15. Invite parents to help with after-school clubs, including sports clubs			
16. Connect with parents through the Parent-Teachers Association (PTA) or School Management Committee (SMC)			
17. Ensure parents of children with disabilities are represented on PTAs/ SMCs			
18. Invite parents of children with disabilities to attend relevant training courses organised for teachers			

Ways in which teachers can collaborate with parents	1	2	3
19. Write reports on children's progress at the end of every term			
20. Meet parents of children with disabilities, along with their children, to discuss these reports			
21. Invite parents with various types of expertise to lead lessons or talk at assembly			

Handout 3: Partnering with health services

Schools should develop links with primary eye health services and disability specialists. Eye health staff/disability specialist can contribute through:

- **Community education.** Educating the community on the causes and prevention of disabilities.
- **Early detection.** Early detection of disabilities and devising early intervention programmes for children to follow.
- **Child development.** Formulating stimulation programmes for children with particular impairments and working with parents and preschool educators on their implementation.
- **Teacher training.** Participating in teacher training courses – for example, training teachers on screening tests for impairments and giving advice on managing particular disabilities within the classroom and the school.
- **IEP development.** Contributing to the development, implementation and review of Individual Education Plans that address the challenges faced by children with disabilities.
- **Technical assistance.** Advising families and teachers on the aids and appliances that can be used to overcome/reduce the child's difficulties – for example, advising on mobility or low vision aids.
- **Resourcing.** Advising on the use, maintenance and storage of the above aids and appliances.

Are there any other services which these stakeholders can provide?

30. Action planning for inclusion: individual and school plans⁵⁹

 **2 hours 30 minutes**

Module objectives

By the end of this module participants will be able to:

1. Draw-up individual plans of action to promote inclusive education in their classrooms.
2. Work with others to draw-up school-wide action plans to promote inclusive education.

Resources

- Flipchart paper
- Marker pens
- Handouts

Information to share with participants during this module

This module brings together knowledge and skills learnt in previous modules to help participants prepare individual and school action plans to promote inclusive education for children with disabilities.

Gender responsive approaches to action planning

When preparing your school and individual action plans, you need to make sure these plans benefit both girls and boys. Are there some specific strategies you need to include which will benefit girls? Is the same true for boys?

⁵⁹ Module source: Handicap International, 2011. *Teacher Training in Inclusive Education: Facilitators Manual*. HI: Lyon.

Activity 1: Individual planning 🕒 1 hour

The purpose of this activity is to prepare an individual action plan for the next two months.

In plenary, introduce the theme of this module. (5 minutes)

Tell participants that they are going to work on their own on the next task. Ask participants to think about the ways that they teach and then think about the changes they could make to their teaching to help those in their classrooms with disabilities/specific educational needs. Remind participants that they should consider gender issues when thinking about these changes (see textbox above). Participants should then write down these changes. (10 minutes)

Now ask each participant to put these changes into an order of priority, starting with the most important. They don't need to rewrite the changes, but simply need to number them (with 1 being 'most important'). (5 minutes)

Distribute **Handout 1: Individual Action Plan**. Ask participants to complete their Individual Action Plans, identifying a maximum of five key changes they are going to make over the next two months. Ask them to identify indicators of success. One of these indicators should be positive feedback from the pupils with disabilities in their classes. Monitor the participants as they fill in the template, answering questions and assisting those who are struggling. (30 minutes)

Organise a plenary module in which participants can share their ideas with others and collectively discuss these ideas. (10 minutes)

Point out to participants that individual action plans should become a regular part of their teaching practice. Also point out that individual action plans should be reviewed every two months.

Activity 2: School action plans 🕒 1 hour 30 minutes

The purpose of this activity is to prepare a school action plan.

When designing school action plans, participants should work with colleagues from the same school or from neighbouring schools. If all the participants are from the same school, then this activity can be done in plenary or carried out by staff from different departments.

Tell participants that, having written individual action plans, they are now going to prepare school action plans. Ask participants to identify the kinds of changes necessary at their schools for these schools to become more inclusive. Carry out this activity **in plenary** to generate some initial ideas. Sample answers might include: playgrounds and infrastructure are made more accessible for children with disabilities; parents of children with disabilities are actively involved in SMCs and PTAs; teachers ensure children with disabilities are provided with regularly-updated

IEPs; teachers collaborate to organise regular in-service training in inclusive education, etc.

Working in groups, participants should now identify necessary changes in their schools (no more than five). Now ask participants to prioritise these changes and list them in order of importance on the school action plan template. Distribute **Handout 2: School action plan**. Once participants have done this, ask them to fill in the rest of the template. Monitor the groups closely so you can deal with their questions and concerns.

Invite each group to present their action plan and invite comments and questions in plenary.

This is the last module of the course. It is recommended that a final ‘fun’ activity is carried out so the course ends on a positive, upbeat note.

This is the **end of the module** and the facilitator should now check whether the training module objectives have been achieved.

Indicators of achievement

- ✓ Participants can draw-up individual plans of action to promote inclusive education in their classrooms
- ✓ Participants can work with others to draw-up school-wide action plans to promote inclusive education

Extension activities: ideas for collaborative learning/self-study

1. Participants should ensure that action plans are reviewed and revised every term.
2. Participants can peer-review the action plans and meet regularly to review progress.

Ideas for ongoing support and supervision

The facilitator follows up with the teachers in their classrooms and schools to help them to implement their actions plans in their classrooms and schools.

Handout 1: Individual Action Plan template

Individual action plan	
Aim: To make teaching and learning more inclusive in my classroom	
Name:	
Start Date:	End date: (2 month timeframe)
I will make the following changes to my teaching to make sure all learners are included (choose up to 5 changes and ensure these are specific).	How will I know that these changes are successful (indicators of success)?
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
How will I involve children in the monitoring process?	
Signed:	

Handout 2: School action plan template

School action plan	
Aim: To make teaching and learning more inclusive in our school	
Name of school:	
Group members:	
Start date:	End date: (2 month timeframe)
We will make the following changes to our school to make sure all learners are included (choose up to 5 changes and ensure these are specific).	How will we know that these changes are successful (indicators of success)?
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
How will we involve children in the monitoring process	
Other stakeholders to be involved and informed	
How will we help each other to make changes?	
Signed:	

Conclusion

In many parts of the world, children with disabilities, particularly girls with disabilities, still don't go to school. Even if they go, they may learn little and be bullied or just ignored by the other children.

This training pack is designed to help teachers acquire the knowledge and skills to improve this situation.

We recognise that teachers often face various challenges that make it difficult for them to include children with disabilities in their schools. For instance, they may teach large classes and have few resources. Teachers may also have to deal with the negative attitudes of certain colleagues or some community members. Even the parents of children with disabilities may sometimes be reluctant to send their children to school because they fear their children will struggle to keep up with others.

However, the evidence also shows that hard-working, knowledgeable and creative teachers can have a significant impact in even the most challenging circumstances. We hope that, having participated in this training, you will now be able to make this difference.