

FUNCTIONAL ASSESSMENT: ENHANCING ACCESS TO QUALITY SERVICES FOR EVERY CHILD AND YOUTH

Kenya Institute of Special Education.

The 3rd KISE National Conference on Special Needs Education, 24th – 25th November 2021, Nairobi, Kenya.

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ABSTRACT

This report summarises keynote speeches, presentations and findings of research papers, key discussions, recommendations, conclusions and parallel parents' workshops of the 3rd National Conference on Special needs Education held in Nairobi, Kenya, between 24th and 25th, November 2021.

The conference was organised by the Kenya Institute of Special Education (KISE) in collaboration with the Ministry of Education, Science and Technology, with support from UNICEF and other key stakeholders.

INTRODUCTION

The Third National Conference on Special Needs Education followed two previous successful conferences on inclusivity held in 2016 and 2018. The conference was unique in that it was held under the cloud of the Covid-19 pandemic, exposing participants and resource persons to virtual participation, the new normal. Thousands of participants followed online and also some presentations were done virtually.

The developed themes and sub-themes were well executed by the resource persons who were carefully selected to ensure that the conference addressed the inclusive issues professionally and with ultimate commitment.

From the various presentations, it emerged that although Kenya had put a lot of efforts in addressing education for all, when it came to persons with disabilities, a lot still remained to be done. There was concern by participants and resource persons that although the government had established EARCs, some lacked the right personnel or they were too far from some of the population, hence there was late assessment and interventions. Early intervention allows the child to be placed in the right institution and therefore attain their full potential. This is an area that still requires improvement.

The best practice to early identification is the use of a multidisciplinary team that comprises of physiotherapists, occupational therapists, psychologists, nutritionists, social workers, SNE educators with specializations to cater for various disabilities, the medical practitioners with specialization in different and relevant fields among others.

The other concern was lack of data on persons with disabilities. There is little that can be done without data. Data was needed to inform policy and enable the government better planning of resources and interventions. KISE picked data as its priority area and offered to give direction as far as data for persons with disabilities was concerned.

One of the other key issues that emerged from the conference was the involvement of parents and caregivers especially during assessment. It was agreed that since they lived with the

children, they understood them better and therefore involving them during assessment enhanced the exercise. The parents were urged to stop hiding the children with disabilities but instead bring them out for assessment to allow early interventions and better social interactions.

And although enrolment to school for learners with disabilities had improved, there was concern that a big number dropped out of school and some of those that completed had no certification to allow them participate in the job market. More therefore needs to be done to ensure learners with special needs are retained in schools and transit to TVETs and universities to take advantage of the government's commitment to education for all children as stipulated in the Basic Education Act and the Bill of Rights.

The government, through the new CBC curriculum, had adequately addressed the special needs learners but of concern was lack of skilled teachers to handle the learners in an inclusive setting. There is a need therefore to train more teachers to handle special needs children to enable them remain in class and learn effectively.

The government's commitment to the promotion of education for all children especially those with special needs and disabilities is clearly demonstrated in the allocation of resources where learners with special needs are allocated additional capitation to ensure that they are not left behind because of their disabilities. Parents and caregivers therefore should be encouraged to enrol the learners with disabilities in schools to take advantage of the provision and eventually ensure the learners are involved in nation building.

Conference Objectives

- Revitalize the practice of Functional Assessment (FA) while leveraging on technology;
- Enhance access to quality education services for every child and youth with special needs and disability in Kenya;
- Appreciate the need for Functional Assessment for purposes of transition in the education sector for learners and trainees with special needs and disabilities;
- Advocate and enhance schools, TVETs and universities to be responsive to the mission of nurturing every learner's potential to access quality, equitable and inclusive education services;
- Advance the processes and practices of institutions of learning in ensuring services are mainstreamed; and
- Advocate for the role of EARCs in early identification and intervention for children and youth.

Conference Outcomes

- Enhanced structures for greater uptake of Functional Assessment services;
- Identification of gaps currently existing in and/between Functional Assessment and placement;
- Technology;
- Data;
- Enhance policy and operational coherence between all education stakeholders, development partners, donors and NGOs;
- Increased advocacy and lobbying for enhances Functional Assessment services in the country;
- Link to national education reform process in order to strengthen Functional Assessment; and
- Enhanced placement for out of school children.

PLENARY SESSION 1

Opening Ceremony

In his opening remarks, the KISE Director, said as an institute they were grateful to all the partners and stakeholders, especially UNICEF (a key partner) and the thousands following online.

He also thanked the media for giving opportunity to speakers throughout the preceding week to highlight the conference issues over various discussions, giving the institute an opportunity to tell the world that KISE is ready to pay the price to make Kenya, and the world get solutions to various issues concerning special needs.

He thanked the taskforce team on CBC saying they had done a good job in giving special needs a whole chapter in the history of the country, a sign of a desire coming from the committee that KISE needs one direction. But the most worrying issue coming from the report, he noted, was lack of reliable data on special needs.

“KISE has decided to do everything possible to establish a data centre so that any person who wants information on special needs can walk to the institute and get anything concerning disability”

He encouraged the stakeholders and delegates to speak for the disability adding that one should not be judged on the basis of disability.

A representative said,

“The tragic situation of disability is people see disability before they see the person , “We want to see the potential in every individual and we’ve seen from history that those who are disabled have done great jobs in this world.”

The presenter challenged the stakeholders and delegates to come up with solutions after the two-day conference.

“We know we have a challenge in identifying assessment tools in all disability. We can decide from today, that from this conference we are able to move forward and develop assessment tools in all forms of disability. It’s possible, it’s doable, KISE is prepared, we have workshops, we are able to provide direction in terms of production of assistive devices, we can do research, and therefore we are calling on all the stakeholders in special needs to sit down with KISE and give direction.”

One of the pathways in CBC, he noted, was art and sports and KISE will engage the stakeholders to ensure that they establish a disability foot in the field so that those with disabilities can also access sports and arts.

Last October, with the sponsorship from UNICEF, KISE trained 231 CSOs drawn from across the country. In January this year, UNICEF provided direction and KISE trained thousands of teachers online on disability.

“We want to encourage the parents to bring the children out for assessment. The government has done a great job at KISE. Some of the parents at the conference are KISE’s clients at the assessment centre,”

The presenter encouraged every parent with a child with disability to bring them out for assessment so that their potential can be determined and get assisted.

The presenter said KISE had discovered that the legal requirement in all tenders is 30% for women, youth and persons with disability. However this has not been happening because a lot of people with disability are not aware of the tenders.

“We’ve started training persons with disability on entrepreneurship so that we can prepare them to form companies and apply for documents so that when tenders are floated, they can take their position to enjoy this facility that the government has provided for them.”

The presenter said nobody should be discriminated because of their disability adding, “When you have weddings invite them, when you have burials invite them and also graduations.”

The KISE Council Chairman, said what people do without knowing is transforming the world. He said the Third KISE National Conference was like no other because it was the first time it was being hosted at KISE.

He noted the first conference was hosted at KSMS, the second at the USIU and now KISE had grown to host the event at its conference centre.

“The dream is to build this into a state-of-the-art destination. Whatever coin you bring here, it contributes to a good course. Our institute’s vision is an inclusive Kenyan society. We are committed to promoting inclusion,”

He emphasized KISE’s commitment.

The presenter said the national assessment centre was special because every intervention commences with early identification, assessment or rehabilitation, services offered by the centre. “This facility, magnificent as it looks, was funded fully by the government of Kenya through the Treasury and other government organs,” The presenter explained, adding that the facility was now fully operational.

The presenter said KISE was known for teacher training but the institute was doing much more than building capacity. “Assessment is our second mandate and many others. The other one that’s very close to our heart is development and production of assistive technologies and learning materials. We are going to revamp our workshops to produce quality devices that can go to all our schools and promote inclusive schools everywhere.”

The presenter said the other mandate was research and pointed out that the Third National Conference was within that mandate. “We are mandated to conduct research in special needs education and package that to advise and inform policy.”

The presenter noted the conference offered to bring together evidence that was emerging from the field and producing reports that contributed to making decisions. “Emerging trends in assessment shows it has a long way to go for us to reach and achieve the standards that we need. Our coverage is far too little, he said, narrating how he had done a research in Kwale recently that returned surprising results.

“We had developed this little tool, a letter “E” that is of the size and is supposed to be read by a sighted person from a distance of 6 metres. The tool was developed by an ophthalmologist. All we need was a laminated card of the tool (the letter E) and a string to measure the distance and all you needed was to go with it in the villages and have the child stand on one side and

you stand on the other and ask them to close one eye and you move the letter “E” round and ask them where the lengths of the letter are facing, whether down or up,” he explained about the tool.

The presenter said the research took them to classrooms across the country and identified that 3.7 % of children in the classrooms had an identified low vision. “Which means when we say children are not learning, many times we may blame it to learning disabilities but we may be very wrong,” the presenter cautioned. He said early screening was something that could be done quite simply and the educationists could even pass a policy like the one on providing a birth certificate while enrolling for Grade One that you’re screened for vision and hearing. “If we determine that the child has low vision or hearing problems, we can schedule for intervention at the earliest possible and the journey begins there because most of what happens is that some children sit at the back of the class and can’t read or hear and that’s how the learning doesn’t happen.”

The presenter hoped there would be a lot of cross-pollination with the evidence coming from the rich programme and many papers to be presented at the conference. “We hope these conversations will inform key decisions so that we all contribute to better learning for all our children across the country.”

The Director of Special Needs Education, Ministry of Education, in his remarks, emphasized that assessment is where it all starts. Without identifying the need of the situation, the system will not be conscious of specific educational interventions or placement that the learner will require.

However once that is gotten right, the right support, services and intervention will be placed. He said both KISE and the Directorate of the Special Needs Education were working on the area of gifted and talented children to address the issue of assessment or identification of that population of learners who may not be getting the best support or intervention.

A representative from UNICEF stressed the need for every child to have an education regardless of their status or disability. Unfortunately, the world is far from achieving this and more so children with disability. Millions of these children continue to be left behind despite the UN universal ratification on the convention on the right of the child that calls for action in recognition of the right of persons with disability and the clear mandate set by the sustainable development goals.

A recent UNICEF report estimates to nearly 240 million children with disability in the world. Among them 25% are less likely to attend early childhood education, 50% less likely to read, 42% to have foundational reading and numeracy skills, 49% to have never attended school, 47% to be out of primary school, 33% to be out of lower secondary school and 27% more likely to be out of upper secondary school.

From the above, it's clear that children with disability are still excluded from education. In Kenya, the prevalence rate of children with special needs and disability aged between 3 and 21 years is estimated at 11% according to KISE report. Male represents 51% and female 49%. A significant no of these children are enrolled in school. However there is a high dropout rate. There is significant progress and effort to promote and facilitate access to education for children with disability in Kenya.

The ratification of the convention on the right of persons with disability on May 28th, the policy for learners and trainees with disability, the establishment of the assessment and resource centre at KISE as well as the capitation grant for special needs education are some of the key milestones. Despite all these progress, we must increase the effort to ensure every child with disability has access to appropriate learning, the presenter surmised.

The keynote speaker, said he was humbled by the comments made about his contributions to empower many people. "We're here to talk about processes and systemic arrangements that can allow us to identify the individuals we deal with when we are propelling them through an educational journey," he added.

"We always ask ourselves, why do people go to school? Why do people learn? Why do we have to gather people together and somebody stands in front of them to impart some information and knowledge?" he posed.

This goes back to the time of human existence, he told participants and cited one major educational system – practiced in Germany where learning involves apprenticeship and mentoring process.

He said in order for the person called the "Master" to determine the learning route that the people coming to learn under him/her will take, that person undertakes an assessment to determine what ingredients each one of the learners will need to build until he/she reaches to a point where the "Master" is satisfied. That process involves two levels: the "Master" identifying that which is required, you start being called the "Journey Man", a process of a to assess your preparedness to take the journey. Some of you who jump into *matatus* (Kenyan means of public transport), *boda bodas* (motorcycles also used for transport) you need to prepare yourself with fare and perhaps even the clothing so that you can deal with the situation that is gruesome and sometimes too demanding," he noted.

When you become a "Journey Man", he observed, you're told the ingredients you will be collecting as you travel and those ingredients build your portfolio. You put the portfolio together until the end of the journey.

“When you think you’ve gathered enough into the portfolio then you return with your bag back to the “Master” so that he/she can interrogate and evaluate the ingredients that you have collected in the course of your journey.

“After satisfying himself that the ingredients you have gathered into your portfolio are adequate to allow you undertake activities similar to those he has been undertaking then you’ll be certified. You’re given a certificate for having completed the journey and when all these are evaluated again, you’re told you’re now a Master. And when you’re a Master, you also start mentoring others. And the process is the same,” he explained.

The process of mentoring, he told the delegates, will still go back and start the journey of collecting the ingredients and putting them into the portfolio and providing the certification that this individual has completed the journey and therefore can be called a Master.

“We have been having an educational process that sometimes undermines the ability and opportunities of all people to enjoy the learning process. That’s why inclusivity is the way to go,” Prof. Chacha noted.

The purpose of the conference, he said, was to talk about regulations, guidelines and standards. “All these are meant to ensure that the education we give is quality education.”

Giving an analogy of a building, he pointed out that some of the delegates own houses, others are aspiring to build their own houses and others live in houses owned by others. But a house is a house, he said.

“We sometime don’t ask, ‘how long did it take the owner of this house to build such a magnificent structure which now shelters me? We also don’t ask, ‘how much did it cost to build this house?’ All these are things that we encounter in the learning process,” he noted.

He said the ultimate goal should be to finish and acquire the skills that are functional and can make a livelihood better. “At the end of the day, our ultimate objective is that each individual who goes through an educational system should get out with some skills and knowledge that is functional and can allow him/her to earn a living and participate in the economic development and wellbeing of the society and the country,” he emphasized.

The presenter said as a country Kenya has been leading in a number of ways, e.g. the establishment of KISE was a milestone achieved in the region for a specific purpose after recognising that it wasn’t going to be right for an educational system to be built and developed in the country which leaves other people outside that system. And that the special needs individuals with challenges, those challenges should not be condemning the individuals to death and oblivion.

“The purpose of the conference is to ensure that we’re developing the tools that will allow us to do assessment, focus on individuals but at the same time create the human resource capacity that KISE together with aligned institutions that can be used to determine and focus our educational system to assure and ensure that nobody is left outside the educational system,” he added.

“We should be able to focus on this also in relation with CBC. The CBC is intended to allow our educationists to determine the pathways through which the learners can still achieve the highest level of education without necessarily condemning them to the old systemic arrangement where they have an exam that determines you as a failure and me as somebody who has passed,” he said. Saying that it was important to ask ourselves what functional assessment meant, he attempted at his own definition.

“Functional assessment is that which allows us to see the kind of children we have who are aspiring to enter our educational system and at that level determine what competences and knowledge they already possess. And if there are any challenges, what challenges they are encountering and how this educational process should create mitigating arrangements that will ensure that an individual is attended and supported to acquire the education formally as the others who might not be having the challenges.

“People with special needs are human beings. They are our sons, daughters and relatives. It’s therefore important for us to say if we are to cherish and be proud of our educational system, then it should not leave anybody behind.”

The presenter challenged KISE to undertake a baseline study throughout the country to unravel the situation on the ground as far as special education issues are concerned. “We need to engage with chiefs, sub-chiefs to find the people with special needs because some of them are hidden in people’s homes across the country because of shame and feeling of guilty.

“As we move forward, let us create an opportunity to work on the functional assessment tools that will help us determine the various learning challenges,” he said, adding that some of the challenges are faced by people whom we classify as normal.

The Chief Guest, Permanent Secretary State Department for the Implementation of Curriculum Reforms stressed about the journey the keynote speaker alluded to, pointing out that for some it can be a lengthy one and for persons with disability can also be quite bumpy.

“It doesn’t matter, what you are, what your background is, where you’re coming from, what is important is that someone can see you and see a spark in you and help you to light a fire. It’s so important for educators to look for that spark,” Prof Fatuma said.

She narrated how she left school at the Junior Secondary because her father wanted her to train as a secretary but her mother said because she loved books she could train as a teacher.

“It was sad for my head teacher because I was a bright student and even the district education officer called my father, but he affirmed that I had to leave school and join the workforce,” she reminisced.

And by the time she was 17, she was already teaching and some of her students were her age mates. She spent her free time teaching them music and playing netball with them.

But one teacher asked her, ‘How old are you?’ and she said she was 18. And she asked, ‘do you know how much you can do with your life?’ “I had no idea because at the time there were many suitors. Had my older colleague not asked me that question and followed me all the way to my home and urged my mother to allow me to continue learning, I wouldn’t have moved on to enrol for further studies,” she narrated.

She remembers in one of her research works on outcomes of education and poverty where she would ask them to look for young people aged 18-25 and gather them in the town hall. But the presenter would remind her that as researchers they should be the ones going to where the targets are and not vice versa. That brought awareness to her that she didn’t have though she was trained all the way to PhD in one of the top universities in the world. And even some of the colleagues in the research team would see visually impaired smoking and marvel at the sight. But the presenter would say, “My friends, these are human beings like yourselves it is only that they’re challenged.”

“When I see the kind of passion from KISE director, I know all is well. Where there is no passion, nothing happens. You can be an intellectual of the highest level but if you don’t have the passion to drive your ideas, those ideas remain just ideas,” she noted.

On children who are gifted and talented, she said the teachers needed to be capacitated to identify the talents to help them nurture the talents to give them a pathway to achieve their potential.

She said it was not a mistake that the taskforce on CBC had made a whole chapter focus on special needs that entails learning with various disabilities and giftedness. “That chapter was refined by the Chairman KISE because as I went through it, I discovered data was inconsistent, the content wasn’t as sharp as expected, and so the chair was co-opted in the taskforce to streamline this chapter, she told participants.

“I would like to underscore the role of research using evidence to inform our actions. If we make reforms in education that are not informed by research evidence, then we shall keep on going back and forth. Mr X will come in with his ideas saying let’s go this way, Ms Y will come up with hers, saying remove this and the cycle will continue,” she warned.

“Research is key and when we hear misinformation especially on the CBC and the reforms involved, I wish to reassure you that the reforms you see in education today were addressed in the Vision 2030 in 2008. 8-4-4 was interrogated at the time and Kenyans spoke and the report

is documented in a report by KICD. Thereafter KICD did a needs assessment and Kenyans aired their views on the kind of changes they wanted in their education system and this report was also published, she explained about the CBC process.

She said a vision had one carrier and the others support. The vision of a nation is carried by the head of state and is held accountable. The government has taken these changes seriously and in 2010 the Ministry of Education established the first taskforce in education chaired by the late Prof Douglas Odhiambo and produced its report in 2012. The taskforce benefitted greatly from that history of interrogation of 8-4-4 and needs assessment and made recommendations. The taskforce looked at the structure, lessening the primary years where they are learning basic skills and increasing the secondary years where learners explore areas that will lead to various pathways based on abilities, interests and potentials.

They recommended on continuous assessment to help build a profile of a learner who is abled or with disabilities or have other challenges, throughout their schooling period to eventually have something they can present for consideration as opposed to a one off high stake examination that will capture a candidate at Class 8 after being in school for 8 years at KCPE for 3 days and may be that is when possibly the learner is unwell or there are other issues in the family affecting the candidate. “You’re captured at that moment and your fate is decided as success or failure,” she expressed her concern.

“The CBC and the reforms therein from early childhood to university embraces and recommends continuous assessment. Assessment is a very important component of the reforms and we are recommending that this happens throughout the learning period of a child, she added. Transition is also very important, and we’re talking to universities, TVETS, and in the state department of basic education we have established a multi-agency technical committee where all the actors including KISE are represented because there is no part that can be greater than whole. If one part is weak, then the entire system is weak.

We have also established a framework for partnerships because the Ministry of Education can’t do this alone,” the presenter explained.

On reforms, she reiterated that they were well on course. “We have put our all – heart and soul – and we are passionate that what the president saw and decided that time was now, he was right.”

She alluded to the analogy on building a house adding, “If you wait until you have gathered all the materials that the QS has outlined to break ground to build your house, you’ll wait for a long time. You have to make the first steps, dig the foundation and the journey begins.

“Therefore for the first time the reforms are being done over a period of time – gradually facing out the former system of 8-4-4 and phasing in 2-6-3-3 – to allow research along the way, inform the process, adjust where necessary until the first cohorts who are in Grade 5 now transition to the tertiary in 2029.

While reading the speech the presenter thanked the delegates including those that were following virtually and the conveners of the conference. She urged the delegates to interact with one another and learn from each other. This will give us an opportunity to share best practices in functional assessment for children with special needs as we all aspire to achieve the SDG-4, she said.

The presenter said the government was committed to the promotion of education for all children especially those with special needs and disabilities. This is demonstrated in the allocation of resources where each learner with special needs is allocated an additional capitation of Ksh of 2300 over and above what other learners are allocated. Similarly at secondary school a typical learner is allocated Ksh 22244 while a learner with special needs or disability is allocated Ksh 57974 per year. The allocation is meant to ensure that no child is left behind because of their disabilities.

The commitment is further expressed by the fact that MoE has put in place a policy on special needs on inclusive education and training together with its implementation guidelines. The policy document addresses education provision for learners with special needs and disabilities.

He further stressed that the government established KISE in 1996 to provide training and other specialised services to persons with special needs and disabilities. One of the KISE's mandates is to address children with special needs and disabilities for identification, early intervention, educational placement and provision of necessary technical advice to parents and teachers. In addition, KISE also spearheads research in special needs education. He said the ministry will continue its support for KISE to maintain its unique and critical role in special needs and disability.

He underscored the importance of research adding that the ministry will continue to support research in special needs and related areas. KISE undertook a study on status of children with disability and special needs in education in Covid-19 era. "The report has clear recommendations on how we can continue providing education to learners with special needs during such unprecedented challenging periods. This demonstrates that the institution has capacity to spearhead research which will continue to guide and inform policy,"

He said there were challenges in regard to special needs and disability data in the country and said MoE would support the establishment of a data centre to enhance the availability of accurate and reliable data. Saying this was critical for planning and resource allocation, he urged the KISE Council to ensure the envisaged special needs data centre was established.

KISE runs a functional assessment centre often used as a reference point by EARC field officers as well as other interested parties. The centre offers assessment and therapy services to children. The unique centre is expected to revolutionise assessment of children with special

needs and disabilities and promote inclusive educational practices. The centre is equipped by the government with modern equipment for assessment and rehabilitation. The centre will also serve as a referral facility for functional assessment for the entire country.

In 2018, KISE organised a conference on inclusive education. The 2021 conference will build on the achievements of the 2018 conference. The conference is another milestone in ensuring that the functional assessment is improved in the country,”

He hoped the conference would come up with recommendations on functional assessments to ensure that no child is left behind in education. He said we must all strive to realise KISE’s vision of an inclusive society in which every child with special needs and disabilities accesses quality education and achieves full potential.

The presenter said the government had undertaken curriculum reform in the last few years and thanked KISE for working closely with the MoE, KICD, KNEC and other stakeholders in development, implementation and evaluation of CBC for special needs education learners.

KISE is a member of multi-agency technical committee for implementation of curriculum reforms. The institute has also established an institutional working group on curriculum reforms. “This is a commendable move to ensure that the reforms are at the centre of all activities of KISE. I encourage KISE to lead in the guidance for CBC in SNE including children who are gifted and talented,” he concluded.

PARALLEL SESSION 1: PRESENTATIONS AND PARENTS WORKSHOP

Panel 1: Assessment Tools, Materials and Equipment; Resourcing for Functional Assessment; Technology and Functional Assessment

There were three presentations followed by short discussions.

In the paper “**Using the Gilliam Autism Rating for Screening Autism Spectrum Disorder in Children**” the presenters based on research done in three of their projects the two pediatric occupational therapists said teachers and therapists have historically been using checklists to know the likelihood of Autism and the level at which the child is to determine the support needed for a particular child.

Our research question was: Does the use of standardized tool by teachers and therapists to diagnose children with autism spectrum disorder change the well-being of the child?

The tool they used, Gilliam Autism Rating (3rd Edition) GARs-3, is a norm-referenced screening instrument used to identify persons who have Autism Spectrum Disorder and has been in use for the last 25 years. There are three levels of Autism – level 1, level 2 and level 3.

The GARS-3 assessment tool has examiner's manual, response form and the instructional objective for individuals who have autism. So when you get the GARS-3 you'll get a guiding manual for you as the specialist and also give you a checklist, score sheet, the IEP, so apart from the assessment tool giving the levels, it will also help the special needs teachers to look at the IEPs of the children and also help them to formulate the IEPs around different categories and different challenges of Autism Spectrum Disorder.

Therefore the GARS-3 tool can be used to identify individuals with Autism, assessing serious behavioural problems, documenting behavioural progress, targeting goals for IEPs, so it's a good tool for teachers and parents to follow the IEPs for the children and it's also good for collecting data for research.

From the research, there were different statistics that can help the government, institutions in planning how to help people with Autism Spectrum Disorder. From the assessment tool we had the red flag for Autism. It's limited to particular red flags so that as parents answer the questions they are able to look at the child individually and also know where the problem is. Is it social?, Is it speech?, Is it communication?, Is it their emotional response to people? Or is it their behavioural areas? So it has restricted or repetitive behavior as one of the components. It has deficit in social behavior so the parent is able to assess the behavior in social area inappropriate response to social behavior and difficulty in understanding social interaction and communication. Out of all these items in the assessment tool, you are able to get each and every characteristic of that particular child and at what level.

For the administration of the assessment tool, the researchers worked with teachers and parents. The administration involved selecting a rater, in this case an occupational therapist, to work with teachers and parents because they know the children better and are able to tell their characteristics.

In the study the researchers shared the forms with the parents and the teachers and administered it to a structured interview format. The examiner explained the form in details to the raters and were present throughout the exercise for any questions or clarifications. Since the researchers worked in low income areas, sometimes the parents needed more elaboration especially when it comes to standardized test. They will not understand the language used. Most of the standardized test is borrowed from outside Kenya and the parents need elaboration.

The objective of the study was to identify children exhibiting red flags of Autism Spectrum Disorder, administering the GARS-3, scoring the GARS-3 and formulating instructional objectives.

Therefore after scoring and knowing the level of the child's Autism Spectrum Disorder, also have the parent or the teacher make specific objectives for the child so that they may continue developing or improving in specific areas.

The researchers were also able share the results with the teachers and tips on how to work best with individual children in a classroom setting. They also shared the findings and information on various levels to the caregivers through a full day workshop. After scoring down all the forms, the researchers sat down with parents and educated them on the different levels that are given in standardised test so that they are able to understand, 'if my child is at level two, what does it mean, or level one or three?' And what support do they need and how can they improve the different skills at home?

For the research design and methodology, it was more of a qualitative and quantitative study. "We had to help the parents understand apart from the tool giving us numbers of how many children have level 2 Autism or how many female or male children have Autism, we were also able to elaborate to the parents, giving us our qualitative study."

The researchers worked with 25 children from the three projects for their sampling. The research method was filling out summary of the response forms. The raters were teachers and parents. The examiners were able to finish up the scoring and explain.

"For quantitative, we used the data to examine the relationship between the red flags of autism and the likelihood of autism which was a correlational design for research," they explained.

For qualitative, it was through one on one sessions with the parents during filling and even after the scoring to help them understand their child.

The method of sampling was purposive, not all children in the project were included in the study, meaning we couldn't include a child for instance with cerebral palsy but focused only on children with autism. The sampled children from three to seventeen years returned positive indicators of the red flag.

In terms of levels, Level 1 child requires support to navigate non-autistic world. 'How do I reduce the noise in my environment? How do I say hello?' They may have social skills challenges. A child in Level 1 can even attend class but may have behavioural problems. In level 2 they need help in handling everyday challenges, so they require substantial support.

Interpretation

- All participants' scores in the study indicated the probability/likelihood of ASD.
- Level 2 was the most common (72%).

- There was a higher number of boys (68%) than girls (32%).
- Majority of the participants were verbal (76%), and the minority was non-verbal (24%).

Conclusion

- GARS-3 as an instrument of assessment meets a need in the assessment of Autism Spectrum Disorder
- The findings can be used to facilitate quality services, inclusive education and nurture the learner's potential
- Stakeholders in the various institutions can know the level of resources required
- Caregivers can contribute to the intervention once they are fully aware of their child's abilities
- Early intervention is required so that as the children grow the support required is less
- Limitations of the study: filling out the forms was time-consuming for the raters, and children below 3 years did not qualify to participate.
- The test is costly, Ksh 45,000
- A lot of time was used to come up with common language.

Way forward

Further research is recommended to determine how/whether the research changed lives of the participants.

Questions/Answers/Comments

Question: Were the verbal participants able to answer the questions or is it the caregivers who answered the questions?

Answer: Where the child was in school, the teachers filled in the forms while those at home, the parent filled the form.

Question: When carrying out research, did you consider social-cultural scenario. Did you customize the tool to have a “Kenyan tool” so that the results you get are Kenyan?

Answer: Had a sit down with teachers to come up with a common language and aspects that relate to the Kenyan scenario. Most of the forms were filled by teachers and we had to go through each question with them to adapt them to the Kenyan context. If the tool has some foreign aspects, the administrator of the tool needs to adjust it to fit the local context.

Question: In functional assessment, cost is a big barrier and most of the tools are not accessible at the lower levels so people prefer to set them up in urban areas where people can pay. What are you doing to ensure this tool is available and accessible?

Answer: As an organization, we are open to partnerships and see how we can help you assess. The Ksh 45,000 is the cost of the entire test but we don't charge each child this amount. With the tool, you have room to test several children, hence can be cost effective for an institutional set up.

The presentation “**Barriers Hindering Learners with Dyslexia from Accessing Quality Education**”

Dyslexia was first defined as “word” blindness. The word dyslexia was widely used in the 20th Century and the learners with the condition were given prescriptions and their memory boosted so that they could remember the words they had read. Dyslexia has several definitions. Some define it because of its causes, others its characteristics, others because of the difficulties or expected outcomes. Up to now, the world has not agreed on the proper definition of dyslexia. The presenter's definition of dyslexia, she says, is trying to identify the strength of the learner and boost that strength to acquire the maximum potential of the learner. As the learners are assessed, the assessor should identify the strengths that the learners have.

Trends of Dyslexia in Kenya

In Kenya, dyslexia is mainly addressed in private schools where the British or USA curriculums are followed. Majority of the public schools on the other hand do not address dyslexia in details.

How can one know they have dyslexia?

A learner with dyslexia has difficulties in handwriting because of cerebellum which may also lead to challenges in note taking. The learner also experiences difficulties in phonology, verbal memory and verbal processing speed. There are also co-occurring characteristics for instance, disorganization, not tying shoe laces or not tying well.

Teachers should make a programme on how to promote self-esteem of all learners such that when they are going to school, they run to school and when they are going home they drag themselves.

Persons with dyslexia work better with the right side of the brain. They are the dancers, soccer players or gymnastics. They have strength in these areas.

Assessment

There should be proper assessment for learners with dyslexia. The government should provide adequate specialists in the EARCs and proper assessment tools for dyslexia.

Continuity

Background information is provided by the parent. Majority of the parents of children with dyslexia will not identify the condition until the learners get to school and start writing. So the learners end up going for assessment late. However a parent can pick some of the dyslexia characteristics early when they find their child is somehow disorganized, not following instructions, somehow destructive, then they should seek EARCs support for assessment.

Findings

The research was about convenience sampling and did some interviews with special needs teachers, assessors at EARCs. Some teachers had not even heard of the word dyslexia before. On how many learners transit to secondary school, 88% of the teachers sampled did not know how many learners transit to secondary because in the first place they were not aware of the condition.

Although inclusion is favoured, we need schools that learners with dyslexia can be placed, where there are professionals who are trained to handle the learners. A curriculum to specifically address dyslexia was not found.

Also provision of adequate resources for functional assessment and resource centres as well as educational placement options and sensitization, and creating awareness of dyslexia.

Conclusion

- Parents may not find ways of assisting learners with dyslexia in functional assessment due to ignorance
- Teachers may not refer the learners for functional assessment because majority of them have not been trained on how to identify learners with dyslexia.

- Learners or children with dyslexia may not get required functional assessment due to lack of adequate and valid assessment tools.

Questions/Answers/comments

Question: One of the challenges we have with specific learning disabilities like dyslexia is that a lot of times learners don't fit in the mainstream schools and a lot of them drop out of school because they are beaten by teachers for not performing academically and performance is one of the key things even when they are good in games, so KISE should consider training the teachers to pick specific learning disabilities and offer support. We should also ask ourselves why these learners are in Community Centre for Learners instead of being accommodated in mainstream schools.

Comment: A representative from KISE said that KISE was in the process of working on a curriculum for children with specific learning difficulties and was looking at remediation, and IEP, videolised education programme for the learners, so that they don't have to be moved from regular schools but instead teachers are trained on learning disabilities to accommodate the learners. Over the last 10 years KISE has trained many teachers on learning disabilities and taken them through IEPs and remediation.

Comment: The founder Dyslexia Organisation in Kenya and a parent with a son with dyslexia: Would like KISE and the MoE to help with data for persons with dyslexia because we rely on data. Data indicates that one out of five children has dyslexia, therefore the population is too high to fit in one institution. So teachers in the mainstream schools should be trained to support learners with dyslexia because data shows 20% of children in schools have dyslexia. Learners with dyslexia are persons with average or beyond average IQ. This means the person with dyslexia is intelligent but only having difficulties in reading, writing and spelling, so the learner has no difficulties in learning because they are very good in soccer, dancing and many other areas.

The presentation “**Profiling Deaf Learners’ Language Development**”

Introduction

In their virtual presentation, the presenters said in 2018 Deaf Child Worldwide and VSO Kenya carried out a research in three schools for the deaf in Kenya aimed at identifying how the attitudes, skills and preparedness of pre-primary teachers in special needs education sector influenced the approach to address the learning needs of deaf children. Deaf children do not have mental challenges. They can learn like any other child. The biggest barrier between them and achieving academic excellence is communication.

In the study, the researchers wanted to find out what exactly does the communication barrier bring in the education of deaf learners.

Deaf Child Worldwide is the leading international charity for deaf children and a recognised global voice on childhood deafness.

The need of the study

- 90% of deaf children are born to hearing parents
- These children's main source of sign language is from schools for the deaf, not at home
- Exposure to rich language before age of 4 years is critical
- Curriculum doesn't factor in language development
- Teachers lack tools to profile language development.

The research covered pre-schools in three schools, two in Kwale and one in Nandi counties. In each school the researchers spent two weeks.

Research Overview

Identification of the problem-

- Wealth of experience and reports from the partners we support across Africa and Asia indicate that deaf children do not perform well in formal education and this limits their ability for retention and transition.
- The research then sought to understand if language and communication skills barriers were the cause for low learning outcomes for deaf learners by using the LPP 2 tool (Language Proficiency Profile) which profiles the deaf learners' language and skills competence, while revealing areas of individual development and improvement for each learner.

Scope

- Focused on early years of formal education which goes up to grade 3 in Kenya
- The research targeted three schools – Kinango, Kwale and Kapsabet schools for the Deaf

- In each school 10 deaf learners participated through their teachers profiling their language and communication competence. Learners with multiple disabilities were not eligible to participate due to research criteria
- DCW Partnered with VSO Kenya in conducting the research.

The tool is filled up by a teacher or a parent who has interacted with the deaf learner and understands the learner's language.

The Language Proficiency Profile tool

Presenting online from the UK, the presenter explained that the LLP2 tool is an information based rating scale used to profile language and communication skills. It is not designed to check vocabulary. It actually creates vocabulary in a sense, looking up the skills that you acquire in very early language development. It may use a combination of communication systems, including:

- Use – Social interactions
- Form – Conveying meaning
- Content – Self expression
- Reference – Social norms
- Cohesion – Language and learning.

The presenter said they had reviewed the tool and made it appropriate for the Kenyan context. Then selected teachers from the three schools and inducted them on the tool and its use before they profiled the learners' language and communication skills.

“It was interesting because this was the first time that any of the teachers had had the opportunity to focus specifically on the language capacity of learners,” she said adding, “When we say language, we are not talking about reading and literacy skills, not that kind of language. This is primary basic language.”

Language domains

The tool is divided into five different categories and is designed to prompt the teacher or the caregiver to answer what is the communication level of the child in five specific areas: use, reference, cohesion, content and form. These are the building blocks of any language. It doesn't

have to be the Kenya Sign Language, Kiswahili or English. Children need each of these elements to be at a certain level before they start to produce language naturally.

Findings

- Majority of deaf children started primary school without a fluent first language (signed or spoken)
- Depending on the age at which a child had entered school, delays of up to ten years (average 6 years) in the development of their first language were found
- Teachers, including teachers of the deaf, mostly lacked the confidence and skills to teach in Kenyan Sign Language (KSL) in spite of the fact that this was the preferred language of their learners
- Teachers lacked basic deaf awareness
- One sign responses by the teachers, so they do not enrich the learners in the language
- More interactions with teachers who are deaf
- Better language skills in schools with teachers who are deaf.

Call to action

- There is need to profile and monitor deaf learners' language communication ability to establish whether the learner is ready to start formal education (in Kenya the appropriate age of joining formal education is at age four).
- KISE should incorporate monitoring of language development for deaf learners into the SNE curriculum
- KICD should ensure that the curriculum enables teachers to focus on language development at the early years – up to grade 3.

Questions/Answers/Comments

Question: How easy is the tool and applicable to the regular teacher, do they require training? How can the tool be used for lesson delivery or individualised education plan for the child?

Answer: The tool is a little bit complex but we continue to simplify it with a view to coming up with something that a teacher can easily use. We asked the teachers to change and sign a little bit more for more interactions with the learners.

Question: On communication barriers between the learners with hearing impairment and their parents, does Deaf Worldwide have programmes for parents to learn elementary sign language?

Answer: We work with teachers and parents and there are interventions to support them. Parents are supported to learn elementary sign language.

Question: Does Deaf Worldwide have any programmes to create awareness through EARCs?

Answer: We work through partners to create awareness. We also work with EARC officers and clinicians for assessment and interventions.

Panel 2: Skills Development and Competency of Assessors; Assessment Approaches; Functional Assessment in the 21st Century; Rationale of Functional Assessment

There were five presentations followed by short discussions.

The presentation “Collaboration with EARCs on Inclusive ECDE: Learnings from the Inclusive Futures Programme in Homa Bay & Kakuma Refugee Camp”

In his presentation, the presenter pointed out that his presentation was based on a programme his organisation, Leonard Cheshire, was running in Homa Bay and at the Kakuma Refugee Camp. The programme was being implemented through a consortium of partners led by Sight Savers. In Kakuma, they have Humanity and Inclusion. The programme also has an aspect of home-based learning for those with several or complex complications and this is handled by Sense International. The research component is done by the Institute of Development Studies.

He said it was a pilot project aimed at developing knowledge and that for scalability and sustainability, they have partnered with the National and County governments at every stage of implementation. They have also involved the organisations of persons with disabilities at the national level for process ownership and advocacy, because they don't just want “to do for them, but do with them and if possible create capacity for them to do it for themselves in the future”.

The aim of the disability inclusion programme is to identify affordable and contextually appropriate inclusive Early Childhood Development Educational approaches for children with disabilities in selected pre-primary schools in Homa Bay and Kakuma Refugee Camp. They have prioritised early childhood development because they realised a lot was being done on inclusive education

in the primary school, secondary and even tertiary levels. However, “where the foundation of education is laid, very little has been done,” which is why they

came up with the programme that has also been infused with some best practices learnt from the implementation of inclusive ECDE.

Some of the best practices include the often-spoken fact that early identification is key because it helps identify the needs well in advance before the learning motivation has taken off. For the project, they have held several teachers training and continuous capacity building sessions for all the teachers implementing early stimulation programme for early learning at home and in schools. They are also using the individual educational strategies to plan and monitor support. They also emphasise on partnerships between parents and teachers mainly because “the first school; the first class is at home. The first teacher is the parent and you cannot do without the first teacher”.

However there are some barriers identified along the way. They are:

- Attitudinal: Such as the already known one of parents who have a negative attitude towards having their children known, and therefore they will keep them away barring early identification, barring them from attending early childhood education
- Environmental: Lack of access to the built environment, buildings and transport
- Resources: school resources — ample classrooms that require a lot of space, the learning and teaching resources, financial resources to sort mundane issues like diapers, assistive devices and wheelchairs
- Teaching practices and processes

In the project, they have developed a manual (albeit one that has not been adopted nationally and one that they will continue to review and improve to ensure that it addresses all the needs of the teachers who are supposed to handle these children). They trained teachers who are providing interventions in the schools under the programme.

Under this programme they have sensitised the school communities that includes parents, boards of management and even children. They have also identified and recruited children who are used for the survey using the child functioning module. Besides this, they have trained ECDE teachers who have also been used as agents of raising and creating community awareness and sensitisation to deal with the attitudinal barriers at school.

This forms the coordination and monitoring support structures. They also have the school-based inclusion teams to ensure sustainability and continuity of the project. They also work

with the county coordination team for ECDE and they hope that based on these structures, the project will outlive this pilot period.

In linking what they are doing with EARCs and also showing the important role they play, the presenter pointed out that during the ECDE teachers training, the EARC officers played a key role in cementing roles of assessment using the child functioning models.

The presenter further explained that it was important that they work with EARCs to sensitise teachers on assessing the children early to come up with informed interventions. The teachers expressed confidence in the support they received from EARCs, citing their understanding in the area of assessment, and the IEP development as per child assessment results upon being trained by the EARCs, who support them in curriculum implementation and interventions.

Lessons learnt include:

- Gap between assessments done during the post-natal clinic visits of a child and education /learning assessment
- Localized EARC services have little impact in the community compared to mobile EARC services taken to homes
- Parents of children with disabilities have an understanding on how to help their children in learning, which must be enhanced for successful inclusive ECDE
- ECDE teachers have a lot to learn from parents and EARC officers in dealing with children with disabilities
- Early identification of children with disabilities for inclusive education requires a collaborative approach between parents, teachers and EARCs, and provides a greater opportunity for success.

Recommendations towards strengthening the role of EARCs in inclusive ECDE include:

- Continuous capacity enhancement of EARC officers for functional assessments;
- Shifting of EARC from centralized to mobile services within the community;
- Adoption of working strategies to enhance the partnership between teachers, parents and EARC officers;

- Continuous enhancement of the “first teacher” (the parent) and the “first classroom” (the home) to play their cardinal roles in education of children with disabilities; and
- Explore ways to synchronize the post-natal medical clinic assessments with EARC assessments to enhance early identification of learning needs of young children.

Question/Answers/Comments

Questions

- After finishing your research, which categories have you classified these children? Are they in inclusive setting? And because each of them has different disabilities, how do you make sure that inclusivity works? For instance, the deaf need sign language interpreters. So is one teacher enough to take care of all these different types of disabilities?
- Are ECDE teachers trained in special needs? ECDE is under the county government, are you ensuring that the county government hires ECDE teachers for SNE, not just ECDE regular?
- EARCs are bridging the gap from your findings, are you planning to expand the programme to other parts of the country or you will stick to the area you are working in?
- What is complex disability? It was not defined in a way I could understand.

Answers

- The teachers we are working with are trained in early childhood development. The teachers we are engaging in the project are those recruited by the county. And we trained them on inclusivity as well and social needs.
- The second question is the county hiring SNE-ECDE teachers? We cannot make a ruling on the recruitment of the county. However, our guiding principles in the project are sustainability and scalability. And therefore, at the end of it, what we find working to ensure inclusivity at ECDE level is what we shall advocate for and if need be leave a policy guideline on that. On helping bridge the ignorance of parents we are working on scalability and sustainability but as a non-state organisation, we cannot legislate. However we can we can advocate for policy change.

A representative from Sense International answered

- Complex disability is what we call the neuro divergent, or the psychosocial types of disability, that which you can't look at decide that this is someone who has disability. An example is a case of cerebral palsy, whereby a learner has difficulties in maybe hearing, vision and mobility. Another example is deaf blindness. It's a type of complex disability because one is impaired in more than one area. After the children have been assessed by the EARCS and identify the type, we have a project where we work with key KISE-KICD to place learner support in 85 schools in the country,
- Supporting 300 children with complex disability to ensure they have a learner-based support.

The presentation **“Education Assessment and Resource Centres: A critical conversation of where and who the EARCs are in Kenya”**. The presenter from Sightsavers looked at the journey of the EARCs in Kenya that he traced from inception to the present, and along the way, he highlighted the key milestones in the journey, the changes and challenges therein. In his presentation, he incorporated experiences recorded from partnership work with EARCs in different parts of the country and critically explored the present status of EARCs vis a vis their functions.

He pointed out that this was a growing dialogue on the central position that functional educational assessment plays in the provision of quality and relevant inclusive education stressing that there was need to walk the talk and match words with action.

In his historical outlay, the presenter pointed out that on September 1st 1984, the government set up 17 Educational Assessment and Resource Centers (EARCs) as a national project funded by DANIDA. He noted that by 1988, the government had extended the EARCs to each of the 41 districts in Kenya at that time. In 1991-1997 EARCs workshops for assistive devices and rehabilitation aids were operationalized in all the then 8 provincial headquarters. And after the promulgation of the Constitution of Kenya 2010 more EARCs were opened in the sub-counties, having more than 200 operational EARCs by 2016.

However, he noted that the critical question in regards to this history that showed a tremendous growth of the EARCs is how efficient were/are they? He opined that this has resulted in, of course, more assessment centres, being brought nearer to the people but the question of quality service still remains.

He raised this while also being cognisant of the newer development of the establishment of the National Referral Assessment and Research Centre based at KISE. There was also the creation of 10 regional model EARCs based on the Ministry of Education's (MOE) blueprint but these he chose to describe them as “coming soon” developments.

He said although there has been progress there are still challenges that include:

misconceptions about causes of disability; most of the EARCs are poorly resourced and lack the capacity to conduct functional assessment; lack of expertise and formal structure, which hampers performance of the multidisciplinary teams; and curriculum development reviewed functional assessment tool but no training was extended to the end users on the use of the tool thus hindering its effective utilisation.

Other challenges drawn from another national documents like the National Survey of Children with Disabilities and Special Needs that he cited included inadequate transport i.e., transport for assessment officers to go into the field in order to carry out their mandate; understaffing at the assessment centres; inadequate funding, lack of appropriate tools and inadequate equipment and office space.

The presenter underscored the significance of the stated challenges by indicating that they had been identified and quoted in documents by both the government and non-government circles and practitioners in the field. He invited the delegates to interrogate them further.

He reiterated that his presentation and pointers on “where and who the EARCs are in Kenya” was meant to trigger discussion from delegates and stakeholders.

Apart from the challenges, he wanted a conversation generated on the existing legal frameworks. The framework that he cited include the Basic Education Act 2013, the Sector Policy for learners and Trainees with Disabilities (2018), the Sessional Paper No. 1 of 2019 and the National Education Sector Support Programme (NESSP) 2018-2022.

The other area that he drew the delegate’s attention to for their indulgence and conversation was on management and administration. He noted that from inception, the overall responsibility for the administration of the EARCs programme had been under the Ministry of Education, Inspectorate (later Directorate of Quality Assurance & Standards and now Education Standards and Quality Assurance Council). Today the affairs of EARCs are supervised by the Teachers Service Commission (TSC), the Directorate of Special Needs Education (DSNE) and the Education Standard and Quality Assurance Council (ESQAC).

The EARCs roles:

- Establish whether a learner requires special needs education;
- Make an educational plan for the learners;
- Follow-up & monitor the progress of a learner;
- Evaluate progress of the learner;

- Improvisation and provision of low-cost learning/teaching aids for children with special needs in education;
- Service provision for e.g., production of custom-made ear moulds; Data/record-keeping;
- Being resource centers for teachers in Special Needs Education;
- Determine the type of assistive devices and learning resources required by the learner;
- Guidance and counseling of parents and teachers of children with special needs; Giving support to children who are integrated in regular schools;
- Conducting seminars for parents, teachers and the community concerning children with special needs;
- In servicing of Teachers in SNE;
- Initiating and implementation of home-based programs; and
- Networking and liaising with stakeholders in SNE activities at sub county level.

On the other hand, the CSO-SNE roles outlined during the presentation include: Make placements and referrals to appropriate special schools/units for CWSN&D; ensure that SNE teachers comply with teaching standards prescribed by the commission; monitor the conduct and performance of SNE teachers through performance contracting, teacher appraisal and development (TAD; work with Quality Assurance and Standards officers to improve teaching and learning in special schools/units; provide support services to SNE teachers on teaching techniques and advice on establishment of special units in regular schools; Update SNE teachers on curriculum changes, pedagogy content coverage and any other emerging issues in the teaching services in SNE; advise on provision of appropriate teaching/learning materials for learners in special schools/units and integrated schools; participate in the organization and management of co-curricular activities in SNE; induct and support SNE teachers on curriculum delivery and emerging issues in special schools/units and integrated schools.

In his conclusion, he invited the delegates to converse on what he described as critical considerations. These critical reflections were:

- EARCs are recognized by law and roles emphasized by government; Assessment must be child centered;

- The role of the assessment officer does not end at the centre;
- Redefining and embracing roles and responsibilities of EARCs;
- Partnership between government and non-government actors to find sustainable, scalable EARC practices.

Questions/Answers/Comments

- The comparison between the EARCs and the CSO- SNE is that EARCs emphasise on the learner while the CSO-SNE the emphasis is more on the teacher. How will the efficiency of the teacher or the role of the learners be evaluated.
- My issue is management and administration of EARCS. We are neither here nor there. What is the way forward?

Answer

In regards to administration of EARCs, the questioner is lamenting that we are neither here nor there. Yes, it is true. But that was a situation that was unavoidable. You find that the functions of the EARCs actually fall under the Ministry of Education, but we found ourselves in a fix when TSC decided that they were going to get their teachers, because functional assessment officers were teachers. So you are given the option to either take them and absorb them in the public service, or let them remain in the TSC. So the Ministry of Education, I think due to the protocols that we had to go through, was not able to have them transfer their services immediately to the public service provision to serve under the Ministry of Education, but I plans are at an advanced stage to have the current CSO-SNE transfer their services to the Ministry.

A participant opined that instead of talking about understaffing emphasis should be on capacity. So that you train an officer adequately on a brain broad based curriculum so that even if we have only one or two in a centre, they are able to adequately assess the children that come to them. But if you have one officer who can only assess autism, and a child with visual impairment or a child with hearing impairment comes and are turned away because the officer is not trained in that area, hence we shall be doing a disservice to that child. Therefore we should address capacity not understaffing.

Answer

- If you listen to Daniel Sanoe share his experience, he proposes that instead of talking about understaffing, which has become a topic that has been overused, we should focus on training to build the capacity of the EARCs officer adequately, so that he can take care of assessment in a number of children with different disabilities.

The presentation “**Roles of Teacher Resource Centres in the development and Implementation of Functional Assessment**”

This presentation was based on a researcher paper conducted Rose Chikopela and her colleagues that included the director of the Zambia Institute of Special Education (ZISE). The study was undertaken to investigate the role of teacher resource centers in the development and implementation of functional assessment and the presentation focused on this.

The presenter started by giving the background of ZISE, which was described as the sister organisation to KISE. She pointed out that it is the second highest institute in training teachers for special education after the University of Zambia, but it is the highest in conducting assessments for persons with disabilities.

She noted that in 2016, there were 123,310 children with special education needs of which 103,218 were in primary and 20,092 in secondary respectively.

In Zambia, there are 14 provincial resource centers and 108 district resource centers to make the greater impact in the education system specifically to the children with special educational needs. The country has teachers’ resource centers in all the districts and provincial centers. These centers mainly help teachers with teaching resources but they have little or no facilities for children with special education needs.

The presenter further pointed out that although the Ministry of General Education with the help of missionaries and other non-governmental organisations had established schools for the blind and the deaf, they were not sufficient and children placed in those schools were not properly assessed. Some children were placed in the wrong places or were using wrong type of assistive devices due to unprofessional assessment and placement. It was also noted that learners with special needs don’t have support and resources to aid their learning.

The aim of the research was to investigate the roles of teacher resource centers in the development and implementation of functional assessment.

They wanted to use the findings of the study to help in the establishment of the assessment and special needs resource centers in all teacher resource centers. The roles of teacher resource centers in the development and implementation of functional assessment outlined include: professional development for teachers plays an essential role in improving the quality of education; provide regular assessment assistance for children with special needs; provide educational services and guidance for children with special needs; provide information to schools (regular schools and special schools) regarding inclusive education; provide small group instruction for students with special needs; and pull students from their regular classrooms to provide them with small group instruction in a resource room;

The cited challenges in the study findings were that there is no link between teacher resource centers dotted across the country and the schools offering specialized education. In addition, resource centers only support teachers with books and very few or no teaching aids and learning materials. It was discovered that learners with disability are not part of the aims of the establishment of the teacher resource centers at provincial and district levels.

Conclusion

It was established that teacher resource centers in the development and implementation of functional assessment were not planned in line with current trends;

- This led to the education system placing some children with disabilities in wrong schools;
- In the same context, some learners were using wrong type of assistive devices due to unprofessional prescription and placement.

The presenter noted that in view of the outcome of the study, it was recommended to the MOE that:

- Functional assessment and special needs resource centers be introduced in all teacher's resource centers; using existing infrastructure and furniture, outlined in line with current trends;
- Teachers of special education should be re-trained in conducting functional assessment, counselling and rehabilitation;
- The teachers of special education should work in resource centers to conduct, monitor and support learners in functional assessment;
- Counselling and rehabilitation of families of children with disabilities be conducted.

Question/Answers/Comments

- You talked of teacher resource centres as where functional assessment is also done. And then is the same teacher resource centre, where the learners are pulled out for support in their areas of need. I just wanted that clarification, because that makes it a little bit different from what we have in Kenya. We have assessment centres, where assessment is done. And then we have resource centres for learners mainly in some specific areas, where they're given support by teachers.
- In Zambia, what assessment do you have for children who are gifted and talented?

Answers

- We do generalise the term resource centres. So we have those resource centres where even exams will be run but due to limited infrastructure, the resource centres will also be used for assessing. A certain portion will be reserved. Then we have actual assessment centres where functional assessment is done. An example is the one we have at the Zambia Institute of Special Education, the University of Zambia, and also other few that are equipped with few resources and materials that can be used for assessment.
- In Zambia we assess children that are gifted as well as talented, using the tools available but we have a challenge of out-dated tools at the centres, we don't have the current versions. So for children with physical disabilities and fine motor skills, gross motor skills, we have some of the tools to assess but compared to what is at KISE we are indeed lagging behind in terms of proper functional assessment. We should look at the current trends, and observe how the world is moving so that we don't play catch up especially in terms of proper and valid tools for assessment.

The presentation “Piloting new Approaches to the Transition of Learners with Intellectual Disabilities from School to Adult Life”

The presenters expressed concern over lack of clear transition pathways from school to workplace/community for students with intellectual disabilities. They stated that this was a chronic systemic problem in Kenya's education system, yet greatly neglected by policy makers in the past education reforms. Teachers working in special education recognise transition of school leavers as an area of critical concern, but they are not equipped adequately with strategies to address the problem.

Faced with this problem, the presenters decided to find a solution to bridge the gap. They first developed a handbook that was informed and based on the evidence and experiences of multiple stakeholders. The evidence used was gathered over a long period of time.

The handbook's content was heavy on the principles of transition, and is learner centred, and it reflects on inclusive practices. It prepares the students and families particularly on the home visits, and for parents' school visits.

The presenter noted that a lot has been talked about home visits but little or not about parents' school visits. Parents should be part of whatever their children are being trained so that they are able to transfer the same training back at home to enhance learning.

Some of the chapters in the handbook include: Preparing Students and Families for Transition; Home Visits and Parent-to-school Visits; Skills Based Learning; and Developing an 'Individual Transition Plan' among others.

School leavers were also targeted to ensure the process doesn't end with graduation/transition. And for the school leavers, they focus on their general productiveness and income generating activities because they want them to live a dignified life, not a life to depend on others.

After developing the handbook, they then organised a three-month free training course for teachers. The presenter noted that this was important to help them internalise the handbook and also develop practical interpretations that are informed by their field experiences too. They trained over 20 teachers during the pilot stage. The teacher training was designed with practical experiences alongside having/holding focussed group discussions and simulations. Key elements of the approach include:

- Individual transition plans are devised early taking into account of functional assessment, student strengths and areas of interest;
- Teaching and the curriculum are flexible to promote engagement and practical learning relevant to the student's future life;
- Early involvement and agreement of families is essential in individual transitions;
- Schools remain involved in supporting community integration beyond graduation; and
- Individual functional assessment should be on-going as learners' progress through education.

Findings

- Teachers strongly recognise the problem of over-age students remaining (stuck) in school;
- No schools had formal transition programmes in place before the training;
- The new approaches were welcomed and embraced by head teachers and teacher colleagues;
- Improvements to teaching methods and curriculum flexibility were introduced;
- Engagement of families and home visits were made to all transitioning student's homes;
- To date 14 schools have achieved successful school leaver transitions, the remainder are in progress.

Conclusion

- Advocacy for trainees with intellectual disabilities to be given apprenticeship;
- Internship for youth with intellectual disabilities to be an affirmative action in policy;
- Home visits to be mainstreamed within the school timetable;
- Peer tutoring & skill learning to be emphasized at all levels;
- Schools will need additional funding to support transition process;
- There is need for capacity building of school managers on individualized transition planning;
- Kenya National Qualifications Authority (KNQA) should embrace learners with intellectual disabilities for early identification of talent.

The presentation “The Place of Functional Assessment in the Stage Based and Age Based Curriculum for Learners with Special Needs”

The paper focused on a multiple of issues that started with a critical look at functional assessment (FA) of learners with disabilities, the process of assessment, the actors in assessment, the role of FA in educational placement and development and designing intervention and learning programmes for learners with disabilities. Further, the presentation also expounded on the place of FA in the age based and stage-based curricula for learners with disabilities.

The presenter outlined their working definition of FA that was aligned to the World Health Organization (WHO) definition. The presenter noted that WHO defines Functional Assessment as:

“a means of determining an individual’s functioning by assessing the various domains; cognitive, socio-emotional, motor, language & communication, difficulties a child may be experiencing in executing different tasks in school in daily life, and hindrances the child experiences in participating in activities with others. This should also take into consideration factors in the environment which may constitute a barrier, or facilitate activity and participation.”

He explained that the learner will be assessed in relation to where they are and also the experiences that they are going through. If the assessor fails to consider these factors, then the right information about a particular child is missed.

According to the sector policy on education and training of learners and trainees with disabilities, intervention plan or educational programme for learners with Special Needs and Disabilities are initiated or designed based on the functional assessment report that indicates a type of sensory, developmental, physical, cognitive, or academic evaluation that helps identify the ability, level of support, supervision and resources on an individual with disability needs in order to function and cope in the community. To achieve this, assessors cannot use only one type of assessment tool, but a multiple approach and two or more parties should be used in the assessment of this particular child.

The presenter further explained that Functional Assessment also involves putting together information about the child from all sources; parent report, observation, age-anchored assessment tool in order to understand the child's functioning compared to same age peers. This information is collected as the child participates in activities and routines that are unique to the family's culture, community and values.

According to the sector Policy for Learners and Trainees with Disabilities, the recognized categories of learners and trainees with disabilities include hearing impairment (from hard of hearing to deafness), visual impairment (from low vision to blindness), deaf-blindness, physical impairment, intellectual and developmental disabilities, specific learning disabilities (dyslexia, dyscalculia, dysgraphia), cerebral palsy, speech and language difficulties, multiple disabilities, autism and albinism. The policy acknowledges other forms of special needs that are not expressly mentioned such as the gifted and talented, psychosocial disorders and chronic illness.

While interrogating the place of functional assessment in the stage based and age-based curriculum for learners with special needs, the presenter explained this by demonstrating how the Basic Education Curriculum Frame (BCEF) is structured. He said the BCEF identifies learners with special needs and groups them into:

- Those who need enriched curriculum — (the gifted and talented);
- Those that can follow regular curriculum with adaptation and intervention programmes — (visually impaired, hearing impaired, physically handicapped, mild cerebral palsy);
- Those that can follow regular curriculum with intervention programmes — (communication disorders, emotional and behavioral disorders, learning disabilities, moderate severe cerebral palsy);
- Those who require specialist, and specialized curriculum and intervention programmes — (mentally handicapped, severe autism, deaf-blindness, multiple handicaps);

- Those who require home based/hospital intervention programmes — (profound disabilities);

The presenter said BCEF recognizes the importance of functional assessment before the child is placed in the appropriate educational programme. He emphasized that this puts functional assessment as the first step in the process of designing and development of the curriculum, intervention programmes, and placement of learners with special needs and disabilities in educational settings.

To show the centrality of this, the presenter then explored the role of functional assessment and he noted that information collected is key in designing and development of early intervention strategies to support a child master a skill in multiple places with multiple people. In addition, early intervention support and services should focus on increasing the child's participation in family and community activities that are important to the family. Additionally, supports and services should aim at helping parents and other caregivers know how to find ways of helping children with disabilities learn during everyday activities.

There is need to understand a child's functioning in a dynamic and interactive way, how to improve his/her functioning, learning and participation and what might be hindering participation. Assessment should also be directed at evaluating school context: how a teacher/school could contribute better towards accommodating and teaching all children, including the ones with difficulties.

In view of this, he opined that the objective of functional assessment should be: to adequately plan and monitor a challenging educational intervention, allowing the child to develop to their full potential. This requires a mind shift and a change of practice by psychologists, doctors and others involved in assessment methods.

Assessment for learners with special needs in Kenya is carried out at the Educational Assessment and Resource Centers (EARCs) established in 1984 to ensure early identification, assessment, intervention and placement of learners and trainees with disabilities. Parents and the community are key in the process of identification. This is because they are the first contact with the child at birth and closely relate with the child during the early development processes.

The best practice to early identification is the use of a multidisciplinary team that comprises of physiotherapists, occupational therapists, psychologists, nutritionists, social workers, SNE educators with specializations to cater for various disabilities, the medical practitioners with specialization in different and relevant fields among others.

He said in the USA functional assessments are done using a five-step approach.

They include:

- the collection of information about the child from multiple sources, including school records and observations of the student by teachers and parents;
- analyzing this information to better understand the child;
- evaluating the child's physical, mental, emotional, cognitive, and academic abilities to determine where there are strengths and deficits;
- determining whether or not a child has a need; and
- recommending the best ways to address the child's need in an educational setting.

In conclusion, the presenter said there is no doubt that there is a need for assessment of learners with special needs before placement. This should be carried out by a multidisciplinary team and several methods of assessments and assessment tools should be used.

He recommended for the development of appropriate assessment tools, staff EARCs with relevant manpower to carry out assessments, a multidisciplinary approach should be used in functional assessment, during assessment information should be sought from different sources and assess learners with special needs and place them appropriately to facilitate provision of relevant intervention programmes and services.

Panel 3: 1st Plenary for Parents

Programmes, CBOs, Family Support Groups: The Action Foundation (TAF) Ideal Services at the EARC

Introducing the parents and other participants to functional assessment, A representative from Action Foundation asked them the meaning of EARC. He went on to explain that EARC is a place where parents take children for assessment for the purposes of education to be guided on where or which school a child should attend.

The presentation “Parents Empowerment for Successful Functional Assessment”

The presenter urged participants to look into parental empowerment for successful functional assessment. Aware that not all participants professed the Christian faith, she said Psalms 127:3 would still make a lot of sense to the participants. It says: “Children are a gift from the Lord, they are a reward from him...” So what does God want us to do with the children? And what family environment does he want us to raise them? In what environment do we nurture our children? She posed, adding that children are a product of nurture and nature and therefore as a family we need to determine early enough what kind of environment is best for our children.

Introduction

Children with special needs and indeed all children need our involvement in their lives, education, co-curriculum activities in and outside school, and especially as parents because there is a lot of information we can give when it comes to history about the child. Children with special needs deserve more parental support in their learning than the ordinary children.

What is parental empowerment, especially in relation to CBC? “I have heard parents say we are not empowered, we don’t know our role”.

A parent responded describing parental empowerment as equipping the parent with skills that they may use to ensure the child with special needs/disabilities live a comfortable life.

The presenter said parents should be knowledgeable, equipped with skills and attitudes to enable them support their children especially during assessment and life-long education. She said at KISE they carry out functional assessment and educational assessment.

“When we carry out functional assessment, we are able to establish the strength of the child and also their needs and challenges then we work on the challenges and eventually achieve the child’s potential,” she explained.

She said when parents and guardians are empowered it enables them to embrace their role as primary caregivers and they are able to get necessary support for their children. Therefore it’s important to engage the parents in the life-long learning of their children. Parents should also be made aware of the necessary resources they need to support their children. e.g. children with disability and depending on their nature of disability or severity may need crucial resources different from the children who are typically developing.

Parents therefore should be empowered to determine the appropriate resources that they require to support their children depending on the disability and the level of severity. When parents are engaged, they dialogue between the assessors and therapist. They become part and parcel of decision makers because they are part of that journey and know what is best for their.

They should even contribute to the environment of their children and could say stuff like, “this lighting is not good for my child or maybe we should remove the colourful hanging so that the child can be comfortable”, and the teacher will now do all what is necessary to ensure change of the child’s environment to make the child comfortable.

Empowered parents also become part of the assessment process because they know best the background of their child.

Training

What kind of information?, What documents do you have?, What has the doctor's report said?, what is the report from school?, Does the child have learning disability? This is documented in a book for assessors to pick the problem if any. The parent becomes part and parcel of that document because a teacher may call and ask about pertinent issues regarding their child and they should be in a position to give that information. The parent should be trained to know what your role as assessor is. Parents should also be involved in their child's individualized education programme.

- **Advocacy:** Parents are the voice of their children. Let people know the children need to be supported, included, noticed as people first before the disability. See all positive things about a child before you see the disability. Children have a lot of strength and the weakness can be only one: *"I only see myself as a person with disability only when I have to run, I can climb a ladder and remove cobwebs but I cannot run"*.
- **Resources:** Parents should know what their children need. The National Council for Persons with Disability (NCPWD) has assistive devices but one can only get assistance if their child is registered. Some of the children with disabilities in secondary schools can get scholarships, but only when they are registered. "I remember when I was teaching in high school and I received a call from a person working at the Kenya Commercial Bank (KCB) and he asked me to give him names of three children who were registered for sponsorship from Form 1 to Form 4, and I felt very bad because I couldn't get any, the chance just had to go because the deadline was one week and registration is not a one day process," Truphena narrated this setback urging parents to ensure that their children with disabilities are registered to enjoy the available resources.

Conclusion

The emphasis on the importance of parents in addressing children with disability gives the parent a great role in determining the destiny of their child by participating more in their life.

This involves the parent moving from being passive recipient of decision being made about their child by media, administrators or teachers to becoming part of the decision making. That's parents are in PTA, and in Kenya, there are organisations for parents of children with specific disabilities.

Questions/Answers/Comments

Question: A parent to an autistic child asked: I registered and got a card and I would like to know if there is any other card needed to access the resources which I haven't had a chance to access yet. What steps should I take or where should I go so that I access the resources.

Answer: You can download a form from the NCPWD website and fill it. You may get help.

Comment: A parent to an autistic child from Siaya, said she had a similar challenge where she had registered and given a card but. She said there was so much focus on physically challenged children and asked the forum to shift focus to mentally challenged children especially in terms of resources provision. She said she had enrolled her 13 year old son to school but removed him when it became impossible to manage him in school. I think there is something your office can do for parents with autistic children so that we can benefit as others.

Question: There are parents who have disability and also have children with disability how can they be supported?

Comment: A single mother to an autistic child says first she was in denial about the condition of her son. But when she accepted her son's condition and started going for psychiatrist's consultations at KNH and seeing a therapist at KISE, as well as following the prescribed strict diet, her son's condition had greatly improved. She encouraged parents to see the strengths of their children and not the disability. "I just want to encourage parents because our children with disabilities can do some things we can't do. If we call them autistic it means autism is coming first and if they are good in art it comes second. We should amplify their strengths."

Comment, A father of a son with autism said he was proud of his son because God had chosen him and given him the opportunity to parent his son. "I don't like using the word disabled. They are not disabled but are abled differently. Having that opportunity to raise that child is something we should give thanks for, am saying blessed because these children teach us a lot." He said he had started a support group to focus on parents. He encouraged fathers to take a greater role in taking care of their children abled differently by first showering them with love at home. He said his support group would enlist experts to help them draft a bill to push for support for children with disabilities as well as their parents.

The presenter said legislation was a major obstacle in regard to the children with special needs, adding that all their support should be anchored in law so that the agencies mandated to deliver the services can do so under certain policies. He urged the parents to take a bold step and confront these obstacles – be the voice of their children.

He supported the idea of creating the fathers' support group for children with autism and noted that it was becoming clear that although the parents of children with autism had a card, there was no much benefit for the holders. However, in other categories of disabilities the children were accessing some help. He asked the parents to challenge the government and all institutions working with children with disabilities to address the other diversities to offer support to all children including those with autism, deaf or blind.

We have also been challenged to look for information, knowledge may not be delivered to everyone so it's good to seek it to access in terms of urban and rural, and also in terms of assessment if in Nairobi you can assess KISE but what about someone from Bomet, there is gap in terms of provision. also we have adults who have disabilities and seeking to have the services not only children, even as we age some form of disability starts to come with age they can also have, they can also come and we will have plans to have EARC assessment.

A counsellor at KISE, responding to the two parents with children with autism over their concern that they had not received resource support from the government said only the four traditional disabilities had received support. The special needs that are not visible haven't been aggressively addressed and commended the parents for bringing out the issues of autism so that they can be addressed alongside others.

A mother of two children with autism asked the government to offer support to this category of disability. Saying that her two sons were too different like day and night and one could not be retained in school because he was hyperactive, she wondered whether the government can create a centre where the children can be dropped and stay for two to three days under professional care and the parent or caregiver can get a break and perhaps get a stipend. She said she used to live in Nairobi and with her first son got a lot of support from KISE but now that she lives in Machakos, there is no such facility to support her younger son. She urged the government to decentralise the KISE like services to the rural areas to support the children and parents there.

A boda boda rider echoed the voices of the other parents with children with autism and urged the government to offer some sort of support to children with autism. He said his autistic son was so hyperactive that his wife was forced to stay at home with their son, leaving him as sole breadwinner. He urged the government to offer support even if it is in form of gadgets that can keep these children busy and out of harm and destruction.

An EARC officer under the TSC in Meru County observed that all the children with disabilities had a strength in an area and urged the parents to identify that strength so that by the time they are taking the child to EARC for assessment, they can point out that strength to the officer at the centre. "You will encounter a scenario where a child has autism but the parent insists that the child should go to a mental retardation school whereas we know a child with autism is not necessarily having mental retardation, another parent will suggest their child to be taken to a school for mentally handicapped just because they don't understand the condition very well." She urged the MoE to work together with the MoH to provide medics in schools, Physiotherapists and occupational therapists to address this gap.

The County EARC Coordinator in Kakamega, said the county had two special institutions, one for the government and another one private, where parents dropped their children with disability and could run errands as the children were under care of professionals. They also

sometimes gather there and share their experiences and challenges on raising special needs children.

The EARC in Kakamega, she said, had extended support to not only to education but also in health, Psychosocial and many other interventions. Their model is structured that the EARC officers visit homes in the communities where children with disabilities are. Their model set up has seen the MoH the second an occupational therapist, Physiotherapist, Laboratory technologists and a social worker at the facility. At the centre, focus is on intervention and not the disability. Kakamega is a regional Centre supporting Busia, Vihiga and Homabay.

After assessment, the presenter explained, children are sent to school and thereafter the officers follow up by visiting the schools to assess the progress of the child. She said they had increased the scope to involve even male parents.

A representative from The Action Foundation said her organisation works with other organisations to end exclusion, discrimination and violence towards children, women and girls with disabilities in marginalized areas.

In functional assessment, she said parents should be involved in their children's lives. "We want to ensure no child is left behind we work in the best interests of the child," she said adding, "Fathers should be involved in their children's lives. Our fathers will go to work but they should ensure the child is also taken care of. Assessment is a continuous and collaborative process."

To participate in the child's live, she suggested the following interventions:

- Learning should never be confined to the classroom setting only
- Learning is a continuous process and learning in school should be complemented at home
- How much do you know about the condition that your child has? Beyond knowing the name of the condition, what do you do to support your child's learning? The parent should take time to understand their child's condition
- Poverty levels in low resource settings limit the ability of caregivers – especially fathers – to invest in the holistic development of their children. We should have fathers support groups, mothers groups are many, to share and exchange information and create awareness.
- Responsive caregiving enhances the likelihood that children will have positive and successful health, development and learning experiences.

Round Table Discussions: Policy, Practice and Innovations in Functional Assessment (FA) Theme(s): Remote and Mobile FA, Role of Media and Resourcing for Sustainable Functional Assessment

What is functional assessment?

Functional assessment may not have a definite definition. Our educational assessment at the EARCs offer services where they assess the functional abilities of the learner. The functional abilities may vary in terms of motor skills, cognition, ability to see or hear and other related areas. The EARCs do this for purposes of placement of the child in a learning environment. When they assess how well a child is able to function, they then make a decision on where to place the child and the interventions required.

Is there a policy on placement?

There is a policy for inclusive education with all the thematic areas that should be addressed including how EARCS should be applied to each learner and the information is available on the MoE website.

I have a child in KISE where they do termly assessment and before a child is placed in the school, assessment is done to determine the needs of the learner. The parents are also involved and we frequently check our children's work to look at their areas of interest and enhance that. The big shift in South Africa is the ratification of the convention on persons with disability and the recognition that the system has to change and not the child. Our assessment is not only a diagnosis of disability but also an assessment of the context in which the child is learning to see the barriers the child is experiencing. We have combined the assessment, which we do to determine the full needs of the child and the internal systems that need to be in place, with the understanding how a teacher can support the child in school. Therefore for us assessment is purely informed by the principle that teachers and the parents should be involved in the process of assessment. We allow specialists to come in to validate the first screening results. You have to understand the barriers that child is experiencing, whether learning barriers or access barriers or attitudinal barriers. At the top of the assessment is to inform how you can remove the barriers. Every school in South Africa has a team that coordinates the support of the children with the teachers in the classroom to understand how the results that come from assessment are translated into support in the classroom.

Do children in the nomadic community have access to assessment?

The nomadic community is very expansive and parents find it difficult to access the EARCs. We have to address the issue of access and perhaps do mobile outreach because the road network is also bad.

Questions/Answers/Comments

Do we have a model school or policy for the gifted and talented to help them navigate life with ease? Do we have acceleration plan for these learners?

MoE is aware of the gifted and talented children and they are one of the priority areas in the national sector strategic plan. As a result, MoE has started engaging in a policy development for gifted and talented and also accelerated learning.

The policy involves multi-sectoral team in the assessment, can the policy make use of the new technology to make information available to parents?

Covid-19 has taught us a lot on the use of ICT and if it is not already incorporated in operations, MoE will look into it.

Comment: Before any assessment is done, the parent should be involved so that we work as a team. Teacher training colleges should also include in their curriculum special needs training to support special needs learners in the classroom in the inclusive setting.

What is the ministry doing about mobile services for EARCs?

The sector policy on provision for learners and trainees with disabilities and even the policy on Standards for EARCs, there is provision for outreach programmes, where the officers should go where the children and parents are and offer services. The programmes should be multi-disciplinary.

In Nyanza region Leonard Chesire have a big education programme where they have used some effective innovation in the approach of EARCs. The project involves 3000 children and if each was to be reached by EARCs, it would take ages, so we have trained the teachers in the schools on how to do the first screening by using the child functioning model of UNICEF to get a clear understanding of exactly what are the functional mechanisms of each child, diving right at those findings into an individual education plan and the EARCs come to the schools and work with the inclusion teams to coordinate and determine if the teachers can implement IEP. However EARCs are not the only who can assist and identify the child, the teachers are equipped with the skills too in the schools under the project. The teachers are encouraged to pick up from the first screening to plan for the child in the curriculum differentiation, how to use assistive devices, have introduced assistive technology.

For children with cerebral palsy, do we have a specific school that they can go and fully be taken care of?

There are schools where children with cerebral palsy can be admitted. But MoE is now focusing on inclusive education where all children should access schools within their environment and with the support of the EARCs. We expect and encourage parents to enrol the children in the

nearest schools in their home environment and EARCs are supposed to ensure teachers in the schools are trained to support the special needs learners.

For a long time in Kenya, it was difficult for the deaf children to do an exam in Kiswahili. But then the policy changed and Kiswahili was replaced with the Kenyan Sign Language. However the at the ECD colleges Kiswahili is still tested, can this be changed up to the university level?

The Kiswahili policy has been around for over 10years and the MoE adapted it fully for primary, secondary and teacher education colleges. The current sector policy runs from ECD to university so the universities are expected to adapt the sector policy to their context in regard to the kind of learners they admit. It would be unfair for a learner who hasn't used Kiswahili in primary and secondary to be forced to do it at the college/university level.

The ministry is working towards inclusion, when formulating the policy, what are you doing to ensure everybody has access?

All that is required is advocacy. We use various forums to reach to many parents, including the media to encourage the parents to bring out the children with special needs and not hide them.

Round Table 2

Moderator: The current Parliament has just eight months away to the end of it. Do you think as parliamentarians, you've done enough in matters of special needs and persons with disabilities?

Of course, it is very difficult to achieve what we call "enough". But we have done whatever is humanly possible within our means. In terms of policy, we have had several bills because disability issues are cross cutting. We have a bill that specifically targets persons with disabilities in a bid to providing assistive devices in which we want NHIF to cover the provision of assistive devices to have localised and customised devices. We have seen a trend where a person has wrecked their crutches and have to come all the way to Nairobi, probably from Turkana, which is close to 700 kilometres away to get the device. Sadly, they may not get the right assistive devices because of their ages and time and so get what is available. So if you are tall and are given short crutches, you will walk bending and that causes more disability. And if you are supposed to get crutches and instead get a wheelchair, you become dormant and you will then end up becoming more disabled than when you got the assistive device. The bill therefore wants the NHIF to provide assistive devices in every locality and every clinic. One will only be required to go to the health centre (they will be having data for all forms of disabilities in that area) and get the type of assistive device they need. There are also other policies in which we have made sure that persons with disabilities are catered for, not necessarily from the 12th Parliament, but we have made sure that they are amended and passed. For instance, the provision of assisted cash transfer to severely disabled persons policy has

been passed but we are enhancing it to ensure that any person under the cover of cash transfer is also covered by NHIF. For those who are severely disabled, many of them may also require medical services.

We also have the AGPO access to government procurement opportunities, the policy for 30% tenders set aside for women, youth and persons with disabilities. We saw a trend in which possibility get very little, less than 0.5%. However there is now a policy direction that at least 2% must be reserved for persons with disability. Therefore as KISE continues educating persons with disabilities to open companies and apply for tenders, then we can improve from 2% going forward but it should not be below 2%.

We have also seen the representation of persons with disabilities in other spheres of life. We have the vice-chairman of the National Gender and Equality Commission, which is vetted in Parliament being a person with a disability, Dr. Chomba who is blind. We also have a commissioner in the Administrative Commission on Disability for justice, Ombudsman vice-chair, Washington Opiyo who is deaf. So we have tried to make sure that for every bill that comes to Parliament, issues of persons with disabilities are included.

Moderator: You mentioned tenders that are reserved specifically for youth, women, and persons with disabilities. And from time to time we've seen cases in the media where there are complaints that actually the real beneficiaries of these tenders are not the people in these communities. In your view, or in your opinion, what do you think can be done to ensure the tenders go to the intended beneficiaries?

Sankok: When the tenders are floated and the persons with disabilities do not have the economic muscles to participate, they “procure” services from contractors with the economic muscles but sometime the persons with disabilities end up being conned. Strangely, they use the name of the person with disability to apply for the tender but he/she is not one of the directors in that company, or an accountant but it is difficult for the government to tell that the tender is not actually yours. Other persons with disabilities have been selling the tenders instead of implementing them. When I was the chairman of the National Council of Persons with Disabilities, we set aside some money for LPO financing and when a person with disability won a tender, then the NCPWD would support the financial aspect on an agreement or some memorandum of understanding that the payment would be done through the council that would take their capital and the person with disability would benefit from the profit.

Moderator: How is KISE integrating new technology in functional assessment because now we are moving into the digital era?

To complement, we have set our standards on AGPO at 4% for persons with disability. Ours being an institute on disability, we decided to start higher than the rest.

On digitization of functional assessment, we have heard in the presentations a lot of conversations about home visits by EARC officers and the question that first comes to mind is the mobility of the tools. And if we are working with the hardcopy and certain tools, then the mobility is not as easy. The other issue that has been mentioned severally and is critical in special needs education and even disability and policy issues is data. If we continue doing assessment manually, then the process of collecting that data will remain hectic and difficult. However KISE has implemented a health information management system that is currently operational in the National Psycho Educational Assessment and Rehabilitation Centre. It's being used by our assessors and the tools are already digitised. The assessors are able to ask the questions, capture the data, as the parents and guardians respond to the questions and the information is saved. We hope the system can also be available to the rest of the EARCs.

Moderator: We'd like to hear about the challenges you face at KISE and similar institutions in terms of financing from the government?

As a country, we have had a serious journey when it comes to funding. There was a time the EARCs would receive money for their operations, then it reached a time it stopped being funded. And that is when we suffered most in our progressing functional assessment. Then at around 2016, there was a lot of discussion during the budget processes. And it was deemed critical that also the EARCs are funded.

We would like to appreciate the government. A lot has gone into funding of SNE. As an institute we have also continued to receive growing capitation and especially when the centre came to a level of completion, we have received some improvement, it may not be sufficient, especially to cover for the staffing needed at the facility, but at least something is being done. And even as we equip the centre with the state-of-the-art equipment, we should ensure there is sustainability. We are in talks with the government so that we are funded for operations and staffing for the sector. To mitigate the funding issue, we also have a programme where we are urging corporations to adopt a block at the centre to support the inputs of that block.

Moderator: Do you feel that CBC has adequately catered for the needs of children who require special education in terms of functional assessment?

Our type of education that we're just phasing out, the 8-4-4, was rigid with a lot of exams and some of the persons with disabilities found it difficult to navigate the curriculum. The CBC on the other hand has a lot of modifications to support special needs education learners. Persons with disabilities have limitations and there are some things they cannot do as a result of their disability. For instance, at the university, and having come from a pastoralist community, the best course for me was to be a veterinary doctor, but it was not possible because of the limitations that come as a result of my disability. When it comes to competency based curriculum, it is based on your competency. So CBC is a blessing to persons with disability so

that now we can rate them as per their competency. We don't write them off simply because they have failed in other exams and probably gotten an A in mathematics or music.

The presenter demonstrated with an example of a child who writes using their mouth and challenged delegates to write their names and giving them only three minutes to complete the task. The results were horrible and he scored all an "E". Saying such a child would be termed a failure yet if given more time than regular students to write the exam as well as being prepared well would help him score higher in exams, he said the CBC would address such issues and help unlock the potential of most of the children with disabilities.

I look at CBC and its approach to competency based assessment. Are we are assessing according to the expectations of the individual child? As part of the functional assessment, there is an IEP that is developed at the end. That one is individualised, meaning that a child is not going to be handled in a crowd. They may be slow in their steps or milestones but CBC is giving them space. And that is what is being described as stage because it's not about the age, but about a child achieving their milestones at an individual pace and capacity to reach their full potential.

Moderator: Do you think the media have done enough in highlighting the plight of children with special needs and people with disabilities?

Media have done their best. There are programmes on KBC and K-24 on stories of possibilities and making it in life especially engaging persons with disabilities from different fields who have succeeded to encourage others. Also sign language interpretation by most TV stations is part of the help the media have extended. The only challenge is that media houses are not accessible to persons with disabilities.

Media have done it but need more energy. Finding creative ways to help children with disabilities to access information and especially those from very poor background should be a priority.

The media have been giving hope by carrying uplifting stories that show that in spite of the severity of the disability, there are people who have made it life.

Questions/Answers/Comments

Question: Do we need a separate law for special needs education or do we mainstream all these issues in the mother law, which is the Basic Education Act? **Answer:** Instead of having the Special Needs Education Act, it should be mainstreamed into the mainstream Education Act so that it does not just become an appendix, an afterthought

Question: My concern is over what is currently happening after assessments and our children with autism and intellectual disabilities are placed in special units, they tend to remain in one class for a very long time. And then they exit the school system without any form of certification. What happens after 18, what happens as they transition to adulthood, just like any other young adults, we have tried to access the vocational centres of learning, the minimum

qualification is an 8-4-4 certificate. What can we do to help them? Is there a policy? Are we able to exempt them?

Answer: We have institutions and programmes that emphasize on transition and exit. The Minimum Standards on EARCs that were launched spoke to these concerns and parents are encouraged to work closely with EARCs centres. There is need for continuous assessment because the learners are not supposed to be in a special unit forever. On certification, in the competence-based curriculum, there is the competence-based assessment.

Answer: There is the National Qualification Framework meant to give accreditation for skills and competencies that are even acquired out of school. One can be evaluated and be certified for the skills acquired out there.

PLENARY SESSION 2

The presentation “functional assessment in early intervention”

The presenter acknowledged the support she had received from KISE and the opportunity to present at the conference.

Giving her background, she said she had attended schools and university in Kenya and taught teachers but had since relocated to the USA. She said she taught at Kericho Teachers College and Shanzu Teachers College for about 12 years before moving to the US where she studied her masters degree in early childhood special education and doctorate degree in educational leadership and a cognit area in special education at Idaho State University. When she was admitted at the university, she worked in an inclusive setting. She was in a pre-school classroom with young children some of whom had disability. Therefore she had first-hand experience working in an inclusive setting. She was the first black teacher, and the children would ask her, “How come you have a black skin?” This was based on their innocence and wanting to know more why we were different. I came to realise all of us need to learn from each other and I took the opportunity to teach the children our diversity in terms of different colours and this helped them realise they were also different but somehow there is something similar among ourselves. Sometimes even the parents were concerned that there was a black new teacher in class.

She revisited a case where there was this little boy in class who always gave her a kiss on her cheeks. The mother used to pick him from school every day and her face would change when the ritual happened – she wasn’t amused at all. So she started hiding when the mother picked the boy to avoid the uncomfortable situation. But one day the boy got sick and was crying at night asking for her. And the mother asked him, “Are you talking about Ms Christine or Margaret?” And the boy insisted on the latter. From then on the mother changed her attitude

and when she came to pick the child, she would ask him to look for Ms Margaret and give her a kiss. That's how they were able to connect.

Drawing this parallel with teachers' experiences in a classroom set up, she stressed the importance of supporting children, especially those with disabilities. "They'll say something at home to show that you're building a trusting and loving relationship with them. And they'll be wanting to go to school or childcare centre, and they would be saying I want to see 'Ms Margaret there' and in the process supporting their social emotional development. How to interact and how to build emotional stability so that they feel they're secure in your presence."

She said because of her background of working with children in inclusive settings, she was offered a teaching job at Marie State University in Kentucky even before she completed her dissertation, and was preparing students who were going to be teachers and observing those already in the field. One of the main classes she taught at Marie State University was assessment, why she was proud to share her experiences at the conference.

The presenter later taught at Western Kentucky University as a programme coordinator for the early childhood special education and early childhood, what is known in the US as a blended programme in which you prepare teachers to work with children with disability in an inclusive setting. She is currently teaching at the State University of New York in courses that lead to inclusion.

The presenter's presentation focused on early intervention and assessment to give a perspective from the USA. She said she was impressed on how functional assessment was implemented in Kenya, adding that there was progress in working with children with disabilities, specifically working with parents and families.

In the curriculum for teachers in the USA, there are two classes on family engagement. One class is for all families and another specifically working with families with children with disabilities. With the assessment class, she said she taught two classes where one class is assessing all the children in a classroom setting, formative assessment (on-going assessment of children performance in a classroom) and another class specifically teaching how to assess children with disability, the process of assessment.

How to collect data and assess children with disability

In the USA, there is early intervention where teachers and early interventionists are prepared and some become assessors. Early intervention is addressed from birth. There are tools that assessors can use to collect data to support even a two-months-old child. The information is used to help the parents to support the child from that early age. So why is it important to support the child from a very young age? The value of that is that the first five months is where neuro pathways are formed in the brain, what the children is observing and experiencing. That

creates a strong foundation and everything else they learn later is not very difficult because they have a familiar experience in it. A child with disabilities is not able to do things easily as those with no disability, so there is need to start addressing those areas where the child has needs at a very early age. In the process the child can start to see some progress.

The presenter cited a case in her masters thesis of a child called Caleb who had autism. A child with autism struggles in areas of social emotional areas of development, struggles with language skills and while some of them have a cognitive impairment, some do not. It's a broad spectrum. Caleb always had people smile. Children with autism have a difficult problem of being touched because they have sensory processing difficulties. Caleb was always happy to go to class, and hug teachers. And people were amazed that he was doing this yet he had autism. The difference was that his intervention had started early. His mother was very much aware and did a lot of studies to make sure she understood how to work with Caleb at home, so Caleb was not struggling too much with social emotional, could relate and play with other children which is unusual for a child with autism. Early intervention therefore is very important.

And because in the USA teachers are prepared in advance on how to work with families, they are more competent in trying to understand. They use the strength based approach where you see the strength of a family, visit a family and identify the strength of the family. There is so much you learn from the parent or a family member who work with the child. In the process, you find some strategies used at home that a teacher will learn and there are some strategies you can share. There is need for mutual respect where we always encourage teachers and early interventionists not to have a deficit model where you think you know it all because you have studied it and the parent may have not, but there is always something you can learn from the parent and family. There are some things you can do together where there is a partnership, mutual respect, understanding the parent and trying to support the parent.

Dr. Margaret revisited another case she had in her classroom where the child could not walk and the uncle who visited her was on a wheelchair and she was concerned and wondered whether there could be something related to the child's uncle's disability, genetic background. But the child received a lot of support from a physical therapist and later on started to walk. It was only that she was delayed and needed more support. All these therefore points towards closely working, relating and supporting the parents and letting them know we are with you because it is a challenge for the parent.

While delving on her presentation that was giving an overview of early intervention and how it is carried out in the USA, she tackled the question of how do you define assessment, the process of assessment and how to carry out functional assessment?

What is early intervention? It is how to support a child with disability and the family. What type of services are you providing? Before you provide the services, assessment must take place, so early intervention is providing services to children with disabilities and their families.

Why provide the services from when a child is born? Sometimes depending on the type of disability, there are some form of disabilities that are easily identifiable e.g. you can easily tell this child has down syndrome or cerebral palsy but there are other children that one cannot easily determine what disability they have at an early age. Therefore in most cases we are trying to provide services that target mainly the areas that are determined to be delayed in. Children diagnosed before 12 months tend to have disabilities that are obvious. When having early intervention, the parents who are the children's primary caregivers are provided with a lot of support to help the children develop because parents are with the child most of the time. In early childhood is when basic skills can be established and therefore we have to support the child in all the different domains of developmental areas.

What is involved in early intervention?

This is plan to meet the developmental needs of each an eligible child. When a child is determined to be delayed in specific areas of development, you are trying to support that child. It is plan to meet the needs of the family related to supporting.

What are the needs of the family?

You need to understand the family. What are the resources in the family? It is very important to work with the family and then plan how to collaborate. That is part of the intervention. Also when intervention is taking place, a qualified person must be involved. This is why early interventionists, assessors and teachers are trained. Most of the universities in the USA require teachers to study special education because there are no special schools but inclusive setting. The law in the USA states that a child must be in an inclusive setting regardless of their disability. Therefore a qualified person, either a teacher or interventionist, has to be with the child to deal with the disability in the schools and to provide intervention and it occurs within individualised family service plan. Individualised Education Programme (IEP) is for the older cases, from three years old but the younger children – from birth to three years – a different programme, Individualised Family Plan, is used. This is a plan to support the intervention process. The requirements for early intervention is working hard to meet the standards set by the state. The needs of the children should be provided in a natural environment. Intervention, therefore, occurs where the child is spending most of the time. It can be in a childcare centre, preschool setting at home or even in the churches.

Early intervention in the US is free. The Federal Government pays for all the cost and assistive technology is employed. Assistive technology is making adaptations or accommodations to make the child do tasks that would be otherwise difficult for them.

“One child may have their fine motor skills delayed and even using a spoon or pen or marker may be difficult. You may need adaptive equipment such as adaptive spoon which the child

can use to eat or adaptive markers or pencils.” These are what are called adaptive equipment, anything that is helping a child be in an environment with other children.

Comparing the two different interventions, early and assistive technology, she brought in the IDEA law, Individualised Disability Education Act, enacted in 1975 in the USA and revised in 1986. In 1975, they only addressed children with disabilities who were going to school but revised the law in 1986 and started targeting children from birth to three years old, addressed by the department of health. However from three years onward, it is addressed by the department of education. From birth to three, is what is known as early intervention. It’s Part C of Education Act, a policy that guides implementation and provision of services for children with disabilities. Part C is about early intervention, providing services for infants and toddlers with disabilities.

The IDEA Law was further revised in 2004 to include homeless children and those living in poverty. They were included as children who needed services and support so that they are not at risk of getting delay in specific areas, especially social emotional areas of development.

Part B of the law is about early childhood special education which starts mainly from preschool up to children 8 years old and is served by IEP but IEP is not limited to only children up to that age. It serves children from 3 years old to 21 years olds. Every state is required to ensure it implements inclusive education but modalities of how this is done differ from state to state.

For early intervention, you are working closely with families (Part C). If you are an assessor, you are collecting data from the family and you call it family based assessment that is family centred approach. For part B, you are specifically working with teachers. Families also play a key role in the process. Parents play a key role in assessment. When setting the goals in part B, they have to be aligned with curriculum goals. Align the goals of the child with education standards. In Part C, the goals are aligned with what the family want.

The major provision of IDEA Law, she expounded, is the policy making sure that assessment is non-discriminatory and is multi-disciplinary. This means that every child has a right to be assessed and more people are involved in collecting data to determine whether the child needs help. Testing is done using the primary language used at home. When collecting data from the children and family, you get the correct data because language can inhibit the collection of data. The assessor must use a valid and reliable assessment tool. How do you determine an assessment is valid and reliable? With the IEP process, there are specific components that need to be included but the main one is trying to see how a child is performing in different domains, what are the family’s resources, priorities and concerns. The main component of early intervention is making sure that the family is the centre of intervention process and every activity is relation based in a natural environment. Try as much as possible to have materials in the classroom that can be found at home. When carrying out intervention, you want what the

child is experiencing in the classroom to have a similar experience at home, continuity of intervention.

Assessment

Assessment involves two areas – evaluation and assessment. Evaluation is what makes you make a decision. An overall idea of collecting data that guide in making decision about the child. This is what you use to determine eligibility for special services after carrying out an assessment. In evaluation, there are areas that are considered – cognitive and physical development, vision and hearing, communication, social, emotional and adaptive development.

Assessment is on-going. You are collecting data all the time, trying to look at the child's unique strengths and not only focusing on the child's disability. What are the strengths of the child? For instance, a child with down syndrome interacts very well and smiles. That is a strength. How do we identify that and use it to support the child more. Also find out the concerns of the parent. What can be done to support the parent? You learn the concerns by carrying out the functional assessment. Functional assessment is collecting data from different ways and is on-going and will guide in providing the support and the services the child needs. The purpose of assessment is trying to identify these children for the services they need, trying to assess their learning and development, monitoring how they are progressing, assessing if they are in school their academic performance and communicating effectively.

Issues in assessment

When collecting information about the child, we try to use different measures and technics. Collecting data from the mother or the person taking care of the child, using tools and observing and even interviewing the family. What is the child doing? Interacting with the child and seeing what you can collect from that. We also use specific tools designed to collect the data. You can use multiple technics – formal and informal, you can do it different times, one time will limit the information you are gathering. Try to collect data from different times and listen to people's perspectives and collect data from different developmental areas.

Different processes of assessment

Trying to help a child, where a person staying with the child says, 'We are concerned, we are seeing Elly is delayed, we are seeing other children walking at this age and Elly is not walking, what is happening?' They have agencies of early intervention that guide the parents where to go. At the agencies they get the assessment and find early interventionists to work with a parent. When they find the concern is not enough, there is screening that takes place. Screening is the initial phase in assessment. You are collecting data and determining why is the child delayed? In most cases you use no reference and it's more of trying to find how far is the child performing below the children who are performing as they should in that age. They use standard deviation

below the mean. We look at 1.5 standard deviation below the mean in two areas, or two standard deviation below the mean in one area. How far is the child performing in developmental areas? – the physical development, cognitive development and social emotional. This is done using a tool.

Many people use tools that are culturally responsive – what is available. Bringing a toy from the US and assessing a child with it may not be effective if the child is not familiar with that toy. So you won't tell much about that child. But using tools that the child is familiar with you'll be able to collect a lot. However there are some tools determined and reliable and can be used in the universally. For instance, in screening, there is one known as Ages and Stages Questionnaire. They have used it a lot in the US and it has been determined to be the most reliable and valid as a screening tool. It's a bit expensive but since you are really concerned about the child, it's good to use a tool that is determined to be reliable. "We can't just guess, we can observe and be concerned but then we need to use something that has been proven over and over to be able to determine a child is delayed in a specific area."

Diagnostic of developmental assessment

Here you are trying to collect data in a more clinical setting to use it to make judgement that this child needs special services now. Depending on whether the child does well in the screening or is having delay, is then when you progress. The first screening you do once or twice to determine the child really needs help and then advance to diagnostic of developmental and then you start planning on more assessment which is on-going and when you decide the child needs help you start the intervention. So you have to assess the child to see whether the child is progressing in the area of concern using different intervention strategies and then you also need to evaluate the programme – where the child is. Why the child is hitting other children all the time. What is happening? Are there enough play materials for all the children?

The presenter narrated how she had gone to a classroom where the children were watching a video but every time the teacher switched on the video the child would scream and leave the classroom. And we wondered what was going on only to realise later that the child had sensory processing concern and we had to approach it differently. Lighting for children with visual impairment, hearing, what can you do to improve the classroom environment? For instance, the traffic flow, how is it accessible to children with physical disability? You have to think about the environment and that requires an assessment too. Here we are not only assessing the child but also the environment and we are doing it on on-going basis. It's not a one off. And it's done with different professionals and using different measures

– it can be formal and informal – and you are looking at the areas of development.

With the functional assessment, a multi-disciplinary team is involved. A child who has physical disability or multiple or severe disability or has different areas of concern, in the process you bring in the physical therapist, occupational therapist, speech and language pathologist or

speech therapist and what we advise depending on the area of concern is try to train the teachers because getting a physical therapist to come every time in the classroom is not possible. It's very important to educate the teachers, help them learn and this is called trans-disciplinary approach where the teacher or any other service provider (we call them service providers because they are working with the child and they are professional) learn from each other so that when you leave that child in the classroom you have no fear. There are no occupational therapists that deal with fine motor and adaptive skills, so the teacher is well prepared to work with the child in the classroom. So teachers and other professionals are taught to help others learn the strategies they are using to support the child. Therefore the multi-disciplinary team is applied in assessment and also in intervention. You can therefore collect data about a child's adaptive skills even when you are a teacher. Everybody is involved in the welfare of the child. This information has to be included in the planning of the child's intervention. So with the component of functional assessment, what we are trying to learn a lot is what is the child's and family's every day routine and activities?, How is the child participating? And how does the child's participation compare with other children? There are several questions you can ask when collecting this data:

What are your concerns?

What are your challenges when you are interacting with Jacob?

Tell me about the family and friends who help with Jacob?

Tell me what you know about his condition?

You are trying to find out what is the concern resources support for this family.

You can ask how the child independently engages and how they interact.

Conclusion

Every student can learn, just not on the same day, or in the same way.

While inviting the Chief Guest, KISE Director The presenter, said the deliberations at the conference would provide direction to the country and the world in the field of disability. He said the presenters on the first day of the conference and every presenter gave direction and ensured participants that every idea brought forward in the discussions would be embraced by the stakeholders to move the agenda of disability forward.

He again thanked those following the conference proceedings virtually and appreciated their encouraging comments on social media platforms. He thanked the Zambian delegation, South Africans following virtually, and other local and international participants, NGOs interested in

disability, adding that this was a sign of commitment to the community of disability. He asked the delegates to go out after the conference and speak for the persons with disability.

The presenter also thanked the various sponsors for the conference, appreciated the goodwill from the MoE, TSC, various NGOs, UNICEF and various partners who had resolved to provide direction moving forward. He said he was challenged as he reflected on the speech by the CS that KISE must take up the challenge and provide data on disability community to enable anybody intending to carry out research on levels and types of disabilities in any part of the country can walk into KISE and get the data. He said the institute was committed and prepared for the challenge, adding that the council, after directive from the CS, would deliberate on the challenge and immediately start preparing to establishing and providing data so that informed decisions can be made because without data, without the evidence then decisions cannot be made on persons with disabilities.

To the parent, he assured, it does not matter the level of disability of your child, it is a prayer answered to you. “We will stand with you, together with stakeholders to provide direction and request everybody to understand and appreciate early diagnosis of all types of disabilities through assessment for early intervention and placement. Every child irrespective of disability is a product of a prayer to a parent,” The presenter encouraged the parents.

Representing the CEO Teacher Service Commission

Delivering a speech he read on behalf of the Teachers Service Commission CEO, The presenter emphasized that Kenya is a signatory to the United Nations on the convention of sustainable development goals. He said this placed the TSC, through its strategic plan, to maintain focus on delivery of SDG4 and other SDG4 goals and linking them with the existing national priorities.

The SDG4 acknowledges education for all, ensuring inclusive and quality education for all and promotes lifelong learning, he said, adding, “We are looking at embracing inclusivity from early years of schooling through to employment.”

He defined functional assessment as a continuous collaborative process that requires observing, asking meaningful questions, listening to family stories and analysing individual child skills and behaviour within naturally occurring every day routine and activities across multiple situations and settings.

“Long ago when we were joining school, the only assessment that was done was placing your hand across the head and touching your ear and if you were successful, you joined Class One. It is critical that functional assessment is done as an everyday routine for all children”, he urged.

Emphasising the guest speaker's key message that every learner can learn, every learner brings unique contributions, he said the learners may have special needs but they have special abilities and therefore should be valued. The aim of every society is to empower all individuals to attain self-sufficiency in life regardless of their race, gender, ability or disability or any other stratifying aspect, he added.

“We are empowering everyone and that's why in Kenya today we have CBC where we are saying we are burrowing every learner's potential to ensure they attain self-sufficiency in life.

Underscoring the important role assessment plays, he said the undertaking enables children with disabilities to be placed where they can benefit most. “In our society today, we have been hiding learners with disabilities but I would urge the parents and caregivers to bring them for assessment.”

While addressing the issue of components of effective assessment, Dr. Nthamburi said individual psychological evaluation should be done where the multi-disciplinary team determines that as necessary. The evaluation may include the general intelligence of the child, instructional needs of the child learning strengths and weaknesses and social and emotional dynamics of the child.

Academic history, including interviews of reports of the child's past and present reported together with a thorough social history is the other component to be incorporated. A physical examination is also done. The TSC handles education of learners with disabilities in partnership with the MoE. Currently MoE has registered 3,084 schools as either special units or integrated as well as 38 special secondary schools throughout the country.

The presenter pointed out that the sector policy for learners and trainees 2018 recognises the following as disabilities areas: hearing impaired, visual impairment, deaf blind, physical impairment, intellectual and development disability, specific learning disability, cerebral palsy, speech and language difficulties, multiple disabilities, autism and albinism. Other forms of special needs are gifted and talented, psychological disorders and chronic illnesses

The presenter underscored the importance of paying keen interest in the gifted and talented, adding that it was an area that was facing so much challenge. He narrated how one time he took a friend to see her daughter and when they got to her class, her desk was empty. On asking the teacher, where her daughter was, she said she had stepped out to use the bathroom. But then a cheeky girl in class discounted the teachers account and told the parent that her daughter was closed in the closet by the teacher and proceeded to open the closet for her. When the teacher was asked why she had closed the learner in the closet, she said the girl was so bright and even knew the next sentence the teacher would say even before she said it. She had found that as a disturbance and therefore had closed her in so that she could teach the rest of the class.

The presenter reiterated that the gifted and talented needed help and required attention so that each time they had an issue, they could get help. The others that require much attention are those with psychological disorders and chronic illnesses. Sometimes teachers are not very keen. A teacher will ask a child, 'and you why are you always sick?' He reminded the teachers that it was not the learner's wish to be sick all the time and they needed to address the issue differently, more humanely.

Saying that TSC took the issue of special needs seriously, he said the commission has been deploying teachers with various SNE skills to schools. The commission has also been deploying curriculum support officers to the EARCs to carry out assessment of learners with disabilities. There are 214 EARC officers deployed countrywide while two are at KISE which is a referral centre.

He said the EARCs are staffed with teachers, nurses, psychotherapists, occupational therapists, physiotherapists and social workers. The EARC's are supposed to conduct assessment – screening, identification, eligibility, diagnosis and placement, instructional planning and evaluation. They should also guide and counsel besides offering in-service training, production of materials and providing support services to schools.

The most common objective of staffing functional assessment centres, he added, involves identifying, projecting and specifying the personnel needs and the cost of staffing.

The presenter challenged KISE to look at every assessment centre, its functionalities, needs, staff required to project the personnel needs and the cost of staffing the assessment centres to make EARCS a vibrant programme.

“We have to make sure that children with disabilities are not going to be disadvantaged at any level of their learning,” he said adding, “Any opening or aspect of providing their personnel and professional growth and their needs and potential getting harnessed must be looked at pertinently.”

KISE, he added, should also be staffed correctly to address issues such as life safety, facility, community security and yearly operating budget. This will help in ensuring that the children are assessed on time and interventions effected on timely basis.

Saying assessment centres were not one size fit for all, neither are their staffing needs, he said pointed out different centres have different needs. Staffing requirements include types of disabilities and may require modifications or policy to ensure the most efficient and effective use of resources. The policies for SNE should be efficient and effective.

Calling on EARCs officers to be passionate while carrying out their duty of supporting children with special needs, he said it was impossible for staff to perform without passion.

While lauding the CBC, he said it had brought a pathway for SNE specifically and what remained was for the staff handling the children with special needs to ensure the children in each level transit effectively to participate in the world of work.

Parallel Session 2 Presentations & Parents Workshop

Panel 1: Assessment Tools, Materials and Equipment; Resourcing for Assessment; Technology and Functional Assessment

The presentation “School Readiness Screening Test Tools”

In his remarks, The presenter pointed out that the policy document states that before children can join school, they should go through screening. He used an analogy where he compared assessment with the funnel which used to pour liquids. He said the top part of the funnel where the liquid passes is what is screening, the part that drops the liquid into the container is the diagnosis and the outcome is now the IEP.

There are different types of screening tools, he explained, citing examples as such for learners with cognitive or sensory problems, learners with communication problems or difficulties, learners with motor problems and/or learners with health problems. “So, when one is talking about the learner joining class one, when one thinks about these learners, all of them go through the funnel. As an educational assessment teacher out there or a person who is using the tool, one should therefore be a professional who is trained and with a background,” he cautioned.

He noted that the School Readiness Screening Test Tool is important because it is used by Educational Assessment and Research Centres; Professionals in the Educational Assessment Centres to determine school placement and intervention strategies for learners with special needs in pre-school programmes. He noted that the tool has been in use in the educational centres in Kenya since 1984 and yet its efficacy is still in doubt.

In his study of the use of School Readiness Screening Test Tool for learners with special needs, The presenter involved 25 educational assessment professionals who were the coordinators of the centres purposefully sampled from city, urban, rural and semi-arid areas in Kenya. The study revealed that the School Readiness Screening Test Tool does not screen all kinds of disabilities. The study recommended that additional test content be incorporated to the tool to screen the contemporary special needs. He said the findings were important in helping to improve the screening services at the EARCs, and in particular to help improve the school readiness-screening tool.

The major challenges in using the school readiness screening tool from the study findings were:

- Scope of the school readiness screening tool;

- Adaptation to meet the individual needs;
- Challenges in use of language during the screening process; and
- Experience of the assessors in using the tool.

The recommendations that the presenter shared with the delegates drawn from the research were:

- There is an urgent need for the Kenya Institute of Curriculum Development to establish a panel of multidisciplinary specialists in educational assessment and development to adapt the screening material used in School Readiness Screening Test Tool to meet the individual needs for contemporary categories of learners with special needs and disabilities;
- The assessors should not be left to use their own coping strategies to adapt the screening material to meet the individual needs.
- The MoE through Quality Assurance Standards and the Kenya Institute of Curriculum Development should involve all the stakeholders: parents, multidisciplinary professionals working in the EARCs and the educational assessment professionals to validate the screening tools.

Questions/Answers/Comments

Question: A clarification on whether the School Readiness Screening Test Tool was the same with the Kenya School Readiness Tool which is filled by all learners who are progressing from the early years of learning to Grade One.

Answer: What was covered is what is called school readiness screening, the original one from KISE. The one you talk about is the one that is coming in with the curriculum, the original one, which is basic and is called the three Ps –the prereading skills, writing skills, and then remember. From the beginning I talked about a funnel. In the funnel, all these learners go through in.

The purpose of assessment is identification, intervention and placement, and that is why we need the multi-disciplinary team. And with the modern technology, a learner or parents can be assessed remotely then the placement or referral can be done elsewhere. Assessment should be done at home, that is the ideal place.

The presentation “Adaptation and use of Digital Platforms in Functional Assessment for Children with Disabilities”

The presenter said although she was a trained physiotherapist, she didn't know about the existence of EARCs and functional assessment. They came across it when they stumbled on the conference poster when searching for ways to sustain therapy for the children they see.

Faced with this challenge, The presenter pointed out that they went online looking for tools that one could use to carry out functional assessment so that they can place the child. She reiterated the need to integrate digital apps to the process of functional assessment to take advantage of the current growth trends where technology has influenced every facet of our lives.

The presenter said that in their review, they went online looking for literature and research papers that have been done in the sector and they found that functional assessment is an integral element of decision making for children with disability. However, they also found that in the current state, it is still a cumbersome process that still involves a lot of waiting, paperwork and travelling for the child because it is still by and large a face-to-face process. There is still limited access to specialists because of their few numbers to patient ratio, few centers and long duration between assessments. So they were looking at how they could bring this closer and be able to do remote assessments without having to have the parents travelling and removing that barrier of accessibility to service.

Their research revealed how digital platforms were employed in the place of face-to-face visits and these were then evaluated against parameters used in physical assessments. The example that was cited was one of using digital photographs as remote monitoring tools to assess clubfoot treatment: study found that digital photographs would be a useful screening adjunct to the process, reducing the rate of patients drop out or premature discharge.

In the other scenario, one study aimed at developing a digital app that houses all the screening tools for autism including functional assessment. The researchers conducted two trials with the app that resulted in changes to it to meet required standards in India. The other study looked at self-assessment tools used by young bipolar patients to keep track with changes in their behavior and mood. The tool had notifications that reminded them to do data entry, and when to visit their clinicians. Mobile apps in this case were found to be effective monitoring tools as they provided frequent high quality data.

The presenter also highlighted the studies of using digital platforms for coaching, training and as resource centers. She noted that two studies looked at using digital platforms as conduit for training or coaching parents to assess and remotely intervene in their children's treatment. Both had positive outcomes and encouraged participation of the parents in caregiving. In this, one last study looked at the review of a website that housed screening tools as well as training

modules on how to use the tools. The website is to be used by all caregivers especially teachers, in special education, to carry out assessment as well as interventions. Researchers found the website as a great addition to this sector.

The presenter noted that their review showed that most digital platforms were still in the preliminary stages with researchers trying to find the most suitable ones and what are the various features they should contain. And there are still a lot of improvements to be done on the current ones to make them standard and not only as adjuncts to physical encounters.

In conclusion, the presenter pointed out that their review showed that:

- All researches showed positive feedback on the use of digital platforms either as the tools themselves or as a conduit for passing information among the involved key partners in disability – teachers, parents and healthcare providers;
- Despite the many benefits that would result in digitalizing functional assessment, there is still so much to be done in this area to find out how the systems can be sustainable and hence viable in the long-term.

Questions/Answers/Comments

Question: The presenter started off by saying she didn't know EARCs existed despite being a therapist. The EARCs therefore need to make the public aware that they exist and the work they do and using technology today that is possible and easy. On assessment tools, they are expensive but we should start developing to bring the cost down.

Answer: I take the challenge that as EARCs in some places we are not known and we should do more awareness campaigns and programmes to expose our services. What we also require is a digital tool, possibly at the national level, but incorporating all the EARCs and all the assessment information is stored there for officers' and parents' access.

I would like to underscore the importance of the social media or using digital platforms to extend services to persons with complex disabilities.

Question: I wonder if you contemplated the ethical consideration because assessment should be individualistic and fair.

Question: The title of the research is the adaptation and use? What is being adapted? The assessment processes? Adapting the process? Or adapting the environment or adapting the tools?

Answer: We have to move with the trends. And so this was an important area. And I agree with all the suggestions that you've made. On the question of ethical configuration, the platforms that have already been developed, the ones that have been used, are the ones that are available in literature, or other pilot, stages. These are tools that the government is still looking

at how they can be sustainable? We're looking at ways of maintaining the confidentiality of the information that has been obtained. And also finding who has access to this information. Do they have passwords? How do you get this information? How is it referred? All these things need to be looked into. That is critical for the ICT people.

The presentation "Availability and Accessibility of Assessment Equipment for Special Education: A Case of Zambia Institute of Special Education"

The purpose of the study was to investigate the availability and accessibility of assessment equipment for special education needs in colleges and universities in Zambia. The researchers hoped that the findings would help the institutions lobby for support from the government and donors for funding to acquire materials and equipment for assessment centers in colleges and universities.

The presenters started by highlighting the background particularly of the Zambia Institute of Special Education assessment centre, which became operational on 12th September 2005 after Niilo Maki Institute of Finland provided the necessary resources that operationalized it. The Niilo Maki Institute donated some test kits and tools for the center and trained staff on how to use them but the centre doesn't have any new assessment tools since.

The objectives of the study were to:

- Establish the availability of equipment for special needs assessment;
- Ascertain the accessibility of the equipment for special needs assessment;
- Investigate the suitability of the available equipment for special needs assessment; and
- Explore the experiences of the assessors with the use of the available equipment for special needs.

The study revealed that the equipment were not accessible in the sense that most team members do not know how to use them and how to interpret data and therefore training was required.

They concluded that the ZAMISE assessment center lacks assessment equipment and that affects proper assessment and placement of SNE learners. The study recommended that the Ministry of Education stocks modern assessment equipment and scale up capacity building for lecturers in the use of the said assessment equipment.

Questions/Answers/ Comments

Question: Do you have assessment for gifted and talented persons in Zambia?

Answer: We use fundamental assessment for the very intelligent or gifted children to bring them up to the level where they should be.

Question: When it comes to the screening tools, are they Africanized or are we still borrowing from the West?

Answer: Africa is disadvantaged because our innovations are not accepted universally. It is the high time Africa united and developed our own tools to use on our continent, and this will bring down the cost of these tools.

comment: My concern is about what somebody has been asking about the gifted and talented children. I think in Kenya we have a tool that was developed by Kenyatta University but it has not been validated. The issue of the gifted and talented is crucial and that is why I'm always lobbying for establishment of an Institute of specialists where we can develop our own tools. We shall have researchers working on the tools, departments for autism, for the gifted and talented and many others. We shall have better tools but if we don't have an institute then we are moving nowhere.

PARALLEL SESSION 2: Presentations and Parents Workshop

Panel 2: Role of Stakeholders in Functional Assessment; Role of Research; Policy and Media in Functional Assessment

The presentation **“Television Framing of Intellectual Disability on Inclusive Education”**

Introducing her area of research, the presenter said she pioneered the first TV programme on disability, *Abled differently*. She said she was currently lead for Inclusive Media Project, an Internews initiative. Internews is an international organization that supports media houses to address areas that are not adequately featured in the media, disability being one of them.

What is legacy media?

It comprises television, radio and newspapers which can play an important role in influencing the attitude towards persons with disability. This in turn can influence the inclusion of learners with intellectual disability in the education system.

Intellectual disabilities include autism, cerebral palsy and down syndrome. Inclusion is a radical idea that advocates for full membership in education where children with disabilities and those without disabilities are supposed to be in the same class gaining knowledge.

There are several legislative and policy trends over the past 30 years that have shifted education from special schools to integrated schools and now the push is towards inclusive education.

Kenya is a signatory of so many national and international policies and laws such as UNCRPD 2007, EFA 2002, Individuals with Disabilities Act (IDEA) 1997, UN Convention on the Rights of the Child 1989. 2002), UNESCO Salamanca Statement 1994, The Education Act (2013), Kenya constitution 2010, Special Needs Education Policy (2009) and Persons with disabilities Act (2003), Vision 2030 and SDGs.

Many children in Africa and indeed the world struggle to access education. About 98% of children with disabilities in developing areas do not go to school and the enrolment rate differs according to the type of disability. Enrolment of children with intellectual disability in Africa is far worse, according to WHO. Only one in 6 children with disability attends school and when they do they still face stigma and victimization, according to Global education for All.

The idea of inclusion to present a paradigm shift in education in Kenya is backed by global, regional and even local policies. For inclusion to succeed, it requires a concerted effort of all agencies of change – media being one of them A well sensitized media has the potential to change the way society treats learners with intellectual disability. Television plays a central position in social construction of disability in society. However, studies fail to link media, disability and inclusive education.

Theoretical Framework

According to the framing theory advanced by Goffman (1986), media elaborate and reinforce certain representations which in turn creates frames through which opinions about issues are shaped

In this way then, the media play an important role in distributing ideology primarily through framing

Framing involves selecting pieces of information and organizing them to produce stories for an audience

The essence of framing, therefore, is selection to prioritize some facts, images, or developments over others, thereby unconsciously promoting one particular interpretation of events (Cohen & Wolfsfeld, 1993).

Media is the mirror of the society and through them we are able to learn so much about children with disabilities and inclusive education among many other thing

Findings

Uncoordinated communication activities among the key stakeholders in inclusive education sector without using media

Lack of public awareness and national education policies

Unsynchronized communication strategies

Lack of capacity

Lack of awareness

Lack of partnerships and knowledge for inclusive education is the main hindrance for effective public communication for social inclusion.

Conclusion

Effective media advocacy can propel the right community or family empowerment, public awareness, attitudes and behaviour for all

NCPWD should spearhead capacity building for journalists to develop higher professional standards in reporting disability matters and to amplify voices of persons with disability by encouraging inclusive education

Organisations for persons with disability should hold annual award ceremonies for journalists covering disabilities issues and that will be motivate them to produce stories on PWDs.

Questions/Answers/Comments

Questions: Was the sample of 45 for the TV framing representative of the 45 counties? And why TV?

Answers: My sampling was online I analysed secondary data and I didn't go to the field for sampling. I focused on TV for its visual power but radio is the best tool for framing information.

The presentation “Institutionalising Support for Learners with Disabilities at the School Level: The Role of EARCs with School Based Inclusion Teams and Rolling out Innovative Approaches”

While giving a brief on the project, the presenter said Leonard Chesire was running a project in Nyanza, The Girls' Education Challenge (GEC) funded by FCDO. It was a 10-year project executed in two phases supporting about 2600 children with only 10% boys, so majority of the beneficiaries are girls. The key intervention is inclusive education, so the implementation is through schools and the directorate of special needs education. Within the bigger project, Girls Education Project, he said they had identified two key interventions under the inclusive education component. These are assistive technologies and differentiated curriculum. He said they had introduced assistive technologies in rural schools to determine whether they could work in that kind of settings.

The focus of the project, Evaline, said was to help the girls in the project to transit from primary schools into secondary schools or vocational training. The project has been working closely with the EARCs officers especially in areas of assessment and support for children with disabilities in inclusive setting. Strategies to strengthen inclusion have been introduced and sustained through school based inclusion teams that provide institutional support.

Rationale for innovation and assistive technologies

Children with disability have access to schooling but little support in access to curriculum. Teachers are also orientated on inclusive pedagogies, but have few skills and resources for curriculum differentiation to ensure all the learners in school are learning.

Aims of the project

- Improved access to the curriculum and participation of learners with disabilities
- Teachers' knowledge and skills to apply differentiated curriculum methodologies is improved
- Communities and families are supportive of children with disabilities to learn using differentiated TLM's/ digital resources /devices.

A School Based Inclusion Team (SBIT) is a group of school level stakeholders made up mainly of teachers whose main aim is to ensure the school environment is inclusive and responsive to the needs of learners. Leonard Chesire together with the schools under the project rolled out the teams so that schools were in a better position to identify and address barriers to learning and development.

Importance of SBITs

- Schools are in a better position to identify and address contextual barriers to learning and development
- By sharing joint expertise of school staff, problems can often be solved without bringing in external professionals
- Help to ensure that all children who need additional support can be effectively supported in and outside the classroom because they do a follow up
- Can identify partners in the community who could support inclusion in the school.

Leonard Chesire is also supporting Curriculum differentiation – a strategy for responding to the needs of learners with diverse learning styles.

Curriculum differentiation involves processes of modifying, changing, adapting, extending and varying teaching methodologies, teaching strategies, assessment strategies and content of the curriculum to address the needs of each learner in the classroom. Teachers in this curriculum are not teaching a class but are focusing on individual needs of different learners.

The differentiated curriculum also takes into account learners' levels of functioning, interests and backgrounds and can be done at the level of content, teaching methodologies, assessment and learning environment.

Leonard Chesire has also introduced assistive technologies, Orbit Readers (refreshable Braille devices), in remote and poorly resourced schools. Learners who have visual impairment can use it to learn in an inclusive classroom. They have also provided laptops to 25 schools under the project. The laptops are installed with two software, Clicker and Dolphin Supernova. Clicker is used to support learners with intellectual disabilities and Dolphin Supernova is for learners with visual impairment. The other area the project is supporting is in capacity building and training for EARCs and teachers who act as trainers of trainers. EARCs support teachers and in turn teachers support learners. In all the trainings, the project involves the EARCs because they are on the ground and will give support even when the project phase comes to an end.

For Orbit Readers, 13 teachers have been trained and 10 learners supported with the assistive Orbit Readers. The teachers were trained on braille and follow-ups were done by the facilitators. For the software, the project has supported 25 primary schools and trained 5 EARCs officers besides on-going support where the EARCs officers are constantly meeting with teachers to offer support.

The role of EARCs in supporting inclusive education through differentiation curriculum and assistive technology

Support for individual children:

- Conducting assessment for learners with disabilities
- Making referrals for the learners
- Evaluating and monitoring progress as proposed programme is implemented.

Support for teachers and schools

- Monitoring and evaluating the work of the team within an 'action-reflection' framework

- Together with the SBITs identify resources and opportunities for the schools
- Identifying and addressing contextual barriers to learning and development
- Coordinating all learners, teachers, curriculum and school development support in the school
- Conducting review meetings with the teachers using assistive technology
- Encouraging the use of assistive technology to enhance learning for all learners.

Key successes of the project

- EARCs officers worked with schools to form SBITs
- School ownership of inclusive support for all learners at school level
- Ongoing support by EARCs to ensure that the teams are functioning well
- More cost effective and sustainable use of scarce specialized human resources.
- EARCs officers equipped with hardware and software to support learners with visual and intellectual impairments
- With support and monitoring by EARCs officers, teachers now confident to use assistive technology to support learners with different types of disabilities
- Introduction of assistive technology has helped improve inclusion in the school; changed attitudes of other students towards learners with different impairments.

Challenges

Skills gaps

- Teachers do not have Braille skills
- Proficiency in use of ICT and assistive technology to enhance learning. Most teachers in most primary schools do not have the skills.
- EARCS/CSOs had to find sustainable ways to support them in skills acquisition through individualized interventions.

Way forward

Continued support from government especially the Ministry of Education, Teachers Service Commission. To be achieved through development of policies that support inclusion in contexts similar to that of this project.

Scale up of the current infrastructure and resources beyond the targeted schools and EARCs, leveraging on the MOE ICT strategies for schools and ensuring EARCs are well facilitated and equipped to provide technical support to schools focusing on inclusive education

Increased advocacy for the full implementation of the sector policy for learners and trainees with disabilities, specifically focusing on the School Based Inclusion Teams, and how EARCs can play a central role in the formation of the teams in the country.

Questions/Answers/Comments

Question: What is the role of parents' participation in the differentiated curriculum?

Answer: Parents are involved in the school based inclusion team on conversations on how the schools can accommodate such learners. School based teams are expected to outlive the project therefore the importance of having parents on board.

The presentation “Engaging Caregivers to Enhance Achievement of Desirable Learning Outcomes for Children with Disabilities in Low Resource Setting”

The founder and executive director of Action Foundation, The presenter described the organisation as community driven and works with other organisations to fight exclusion, discrimination and violence towards children and young people with disabilities in marginalized areas.

Action Foundation conducted research in 2020 in the midst of Covid-19 in Kibera and Kawangware, so the presentation is about the findings of the research on issues of children with disabilities and their health and education as well as parental involvement. Children with disabilities in urban informal settlements are highly vulnerable to physical, psychological and emotional abuse. They face neglect, stigma and are excluded from accessing services that they require. The services can be health or education. Some parents do not even know where assessments are done. In some cases, the caregiver is in denial and takes them along time to accept that their child has a disability and this delays early intervention. Early intervention is critical because a child's condition is identified early.

When parents are in denial, they have issues when it comes to placement. “You'll find a caregiver or a parent who goes to an assessment centre and says, ‘I want my child to be placed here or they go there with a predetermined end’”.

Functional assessment, The presenter explained, is a collaborative process and it is continuous. It involves the parent, assessor and the EARCs officer working together. “You’ll find parents at the assessment centres, and they are being asked questions about family history, trying to establish why that child has that condition but they feel attacked or targeted.”

On the research conducted during the Covid-19 period, Wanjiru said the aim of the research was to find out whether there were services that children with disabilities and their caregivers had a hard time or challenges trying to access.

Research findings

- On social participation, in Kawangware 36% of the children with disabilities feel they are socially excluded in community life and in Kibera 25%
- Those able to access health services in Kawangware were 21% versus 28% in Kibera
- 44% could access education in Kawangware compared to 32% in Kibera.

From the above findings, early childhood care in education is critical for preparing the children to succeed in their academic pursuits as well as enhancing their physical, social and emotional development.

A research done by Volunteer Services Overseas (VSO) indicated that there are more children with disabilities who are out of school compared to those without disabilities and this is a common phenomenon where caregivers of children with disabilities may feel that they don’t need to take the child to school, they feel helpless and sometimes it’s an issue of esteem. Children with disabilities being locked up is a common practice in the informal settlements and we undertake actions geared towards ensuring that such parents get to face the law.

From the research, Action Foundation also wanted to find out whether caregivers were involved in supporting children with disabilities to learn at home during the long period of schools closer in the Covid-19 era. And although some children were involved in learning through digital platforms supported by the government, for learners with disabilities there were no infrastructures or systems put in place and materials to support them to learn at home.

Action Foundation therefore worked with an organization known as Education Above All and adapted a resource known as the Activity Bank for Disabilities. Community health volunteers were trained on how to support parents to support children with disabilities to be involved in ordinary daily activities. There were 163 caregivers trained on activities of daily living. Since some children may not benefit from the mainstream education system, through activities of

daily living, caregivers can be engaged in the learning process of a child. Therefore parents play a responsive role to the needs of that child by promoting their learning process.

The areas that the caregivers were trained in were dressing, feeding, toileting, bathing and oral sensory activities – gum massage, blowing candles, things that promote the gum. Also trained in auditory sensory activities that involve sounds and shaking. For the visual sensory activities, there was finding shapes, matching colours and shapes and numeracy and literacy.

After the research and engaging the parents, it was reported that children were able to pick up food from a plate and they would scribble. Previously they could not do that. Some would make sounds and understand instructions, aspects missing before the intervention. Some would perform activities of daily living like dressing and undressing and some would chew food.

Lessons

- Training parents to engage in home learning activities positively contributes to early childhood development for children with disabilities
- A parent is the first teacher
- Training parents on home based learning led to an increase in productive time parents played with their children
- Children were able to learn non-academic skills and parents equipped them with some of these skills
- Some of the children benefitted from learning especially gaining skills on how to navigate life.

Recommendations

- Strengthen community structures e.g. working with the community health volunteers in the communities to reach the parent and also to monitor the uptake of some of the trainings for parents
- Enhancement of capacity of parents to be involved in home learning. Learning does not have to be confined to the classroom setting, so caregivers should learn to play with and teach their children at home
- Need for CBC compliant system that is easy to use at home
- More research on home learning to generate evidence on best practices.

Questions/Answers/Comments

Question: Home schooling, can you involve teachers at that level?

Answer: We are exploring a partnership to use a software for Abra Reads to work with teachers in select schools to promote language development, literacy and numeracy for learners with disabilities. We have partner schools where we train teachers on inclusive education, classroom management and how to engage learners with disabilities to ensure they gain from the education classes like other learners.

Question: What category of children did the study focus on?

Answer: Covered different types of disabilities but the most prevalent was cerebral palsy.

Panel 3: 2nd Plenary for Parents

The presentation “**Educational Options for Assessed Persons**”

The presenter began by saying that irrespective that children have special needs they need not just education but appropriate education. She emphasized the educational shift that the CBC had brought along to accommodate and nurture every learner’s potential.

Explaining about functional assessment, she said it entailed coming up with the strengths of the child and knowing what support the child needed for placement. She emphasized the importance of involving the parent when carrying out the assessment and even during placement.

“We have options because you consider individual needs for a specific child; CBC has stage based and age based curriculum based. Children may have similar disability but may require different needs,” she explained.

- Key questions for parents after functional assessment:
- Strengths, challenges or needs of the learner
- Learning methods and resources required
- Other services they may need. One may have a visual impaired, emotional disorder, or a deaf child who needs an interpreter, and many other needs.

Placement option can be as simple as changing the sitting position of a learner in class.

Question to parents: Any parent who has been involved in assessment and placement of their child? How were you involved? Why is it necessary to involve the parent? In your view, what consideration should be put in place when selecting appropriate placement options? What experiences do you have?

Parent: There are several things we would like done, for example, my child was placed in a certain public school, I felt good because I knew the cost would be favourable, but on going there I found that the school has only one classroom for children with special needs. My son has Autism. The school had only one teacher against 50 children with different challenges, the teacher told me she couldn't handle my son but I return the next day when her colleague would be present. And the next day I took my child back and found the other teacher who told me "your child is hyperactive, he might get out of class and run to the road and might find many dangers around". I was asked to employ a caregiver to take care of the child and look for a car to transport him to and from school.

Is there a way we can group the children depending on their challenges, and also have more teachers?

Parent): My son has cerebral palsy. He had an assessment done and when I took him to the placement school, I was told there was no one who could handle him for tasks such as taking him to the toilet, changing his diaper, or feeding him. Can the government help us have nurses for the children in schools especially for the cerebral palsy to help in these tasks?

The presenter said the placement team should consider several factors before they conclude on the placement option. These are:

- (i) Type and nature of disability. Maybe severe, mild or moderate.
- (ii) Parental preference. We advise the parent to visit the facility first.
- (iii) Needs of the learner.
- (iv) If the learner is vulnerable – maybe orphans.
- (v) If it's affordable for the parent.

Answer: In placements, we have regular schools, the integrated, specific units, special schools, homes and home based facilities. I would like to request the government to have adequate funding for EARCs and equip them with infrastructure and modern materials. Additionally, deploy adequate trained officers.

The presentation” **Assessment and Registration of Persons with Disability**”

Engaging the officer, The presenter told him that parents had questions on disability cards and senior citizens who had the disability cards. What is there for them?

A representative said his department dealt with registering the person and ensuring that they get the disability cards. He singled out tax exemption as one of the benefits for registering as a person with disability.

“Once you have a disability, you should accept and know life must go on, but first you must understand that anyone can pick me and put me on my wheel chair or matatu and someone else will clean my house. Just know you are not the first person neither are you the last and you are not alone,” he encouraged the parents.

He encouraged them to engage in counselling especially if it’s a disability they got when mature, for psychosocial support and also join groups for therapy.

On registration, he said the district hospitals have medics specialized in different areas. We have Ophthalmologists, Physiotherapists, Audiologists, and tell the degree of your disability.

In Nairobi, the centres accredited for registration are Mathare Mental Hospital, Mama Lucy, Mbagathi and Spinal Injury Hospital.

Kenyatta helps with a professional report maybe from an orthopaedic, ophthalmology, audiology and KISE offers the same services.

Also you need a passport photo, national ID card and then filled registration form. Once registration is complete then one gets into the system. There are offices for NCPWD in all counties.

What benefits does the card bring?

The card, Musyoki explained, is your identity and it will help you. You will not queue for services especially government services.

One also get to benefit from AGPO, university placement, access at the National Council services: device support, scholarships, job placements, allocation of public facilities, self-help groups and tax exemptions.

Delay in card issuance has been a concern. This is mainly caused by system failure but plans are under way to launch a new system.

The presentation **“Psychosocial Support for Families and Caregivers”**:

The presenter started by stressing that parenting is hard enough but parenting a child with special need is harder. “With a special child, the parent should learn to be a patient, nurse, lawyer, medic, to fight for the rights of the child, offer support system and become a mediator.”

The presenter asked the parents about the myths they had heard about a parent with a special child or what people say and here are the responses:

1. The family is cursed.
2. Cultural requirements that remain to be done e.g. dowry payment.
3. Witchcraft.
4. Bad omen or you tried some abortion.
5. Your child is demon possessed.

Responding to the parents’ answers, The presenter said those were all myths and for sure one could believe them as a person, sometimes as a Christian/ Muslim when told that God has cursed you, or you committed adultery, or in case of albinism, the dad of the child is a white man, or for some with autism, some believe they are vaccination reactions.

She asked the parents to list some of the challenges they had gone through and here are some:

Rejection

- Isolation from society
- Family conflict
- Stigmatization
- Discrimination - you can’t go for *chamas*, church, mosques
- Loss of jobs
- Fatigue
- Sexual abuse for the Children.

What happens when you get this child or you get the diagnosis that your child has disability? Once you get the news, she explained, you get through emotional stress, you get angry with your spouse, then you start grieving and get prolonged worry, fear and anxiety, maybe this is your first child, now you have a child with the disability and you start to wonder how you will take care of him/her.

What can you do in order to cope or not to get mental health issues because prolonged worry, sadness, fear and depression will put you down, you may suffer many mental issues including bipolar disorder. What to do to cope:

1. Accept yourself and accept the condition of the child. Some of the factors that lead to disability may be environmental or genetic, so be positive and accept self.
2. Join other parents facing the same challenge, or support groups.
3. Seek support from your partner, walk together as a couple and discuss the issue. As a family talk to somebody and share.
4. Self-care – you did not cease to be when you got the special child. Request a family member or a friend to help you if you need some time off. This will help you know that life is worthy living.
 - What can counsellors, psychiatrists, psychologists do?
 - Sitting with the family to know the child is not only special but abled differently
 - Empower with coping skills on how to adjust
 - When a child is going for assessment, there should be mechanisms to assess the parents too to determine their mental health
 - Advocacy for psychosocial support is what we need to support the parents financially through supported employment. Some of the parents cannot do the 8am-5pm job, so should have flexible jobs.

The presenter suggested that the government provide assistive and supportive devices and services to persons with disabilities the same way it was catering for the elderly.

Questions/Answers/Comments

Question: Is it possible to have transport for children with disabilities to school, a policy where a child is taken from home to school and back for accessibility?

Answer: About the transport, this is one of what I called assistive device services. On psychosocial support, if you feel sad, you can go to the EARCs where your child is being assessed and you can talk to the counsellors. Churches too can help.

Closing Ceremony

While inviting the chief guest at the closing ceremony the KISE Director, expressed his appreciation to the thousands of participants following online, and giving positive comments, a sign that disability advocacy had gained momentum.

“You are the right person for the occasion, we know your passion for the disability society, we know your concern, you have asked us to work with arid areas so that parents of children with disability in marginalised areas can be reached. We are encouraged that the story of disability will be told for a long time because of your commitment to the course,” he told the CAS.

He urged participants to appreciate a person before judging them. “We want to see children as children, judged by their performance and not how they look like.

We would like to assure the parents that their children are like any other children. It doesn't matter that they have a disability, they have potential. Any child can learn. It doesn't matter the speed but learning can take place. As an institute, we shall continue partnering with parents with children with disability. We shall ensure that no parent of a child with disability is left behind,” he added.

“The campaign has been, ‘No child should be left behind’ now we are saying, ‘No parent, no child will be left behind’ because we want to walk together as a group,” he stressed adding, “We want also to reach out to regular schools because there are children who require attention there. Sometimes they are called naughty and all sort of names, but they are gifted in a way. They require somebody who understands the emotional and learning difficulties and address that.”

He said KISE will work closely with the educationists supporting the institute, mother ministry and TSC in ensuring that a data centre was established “to provide direction in relation to disability.

He reiterated that KISE remains home for disability adding that anybody who wants to speak about disability, or with disability has a space in KISE to pitch a tent and speak about it any time.

He said the institute was prepared to do everything to ensure that the government's effort is not wasted. "The government has done a great job in providing the facility and equipping the assessment centre," he said and urged the stakeholders to speak to parents to bring their children for assessment so that intervention can commence early to enable the children live a normal life. "What is required is not to favour the children with disability but rather to provide them with opportunities to realise their potential," he concluded.

Speaking at the closing ceremony, the chief guest said the council chairman mentioned some gaps especially the lack of data, adding that at the policy level, there's very little the government can do without accurate data. "You can't even convince the government why you require resources to do anything. If there is anything that can be done on data collection and processing that data to speak to every stakeholders, let's work on it as soon as it is possible," she said in her remarks.

On the issue of access to the assessment services, she expressed concern that there were many places where the services are not easily accessible. "We must work towards having EARCs in each sub-county, not just empty structure, but a centre that is well equipped and functional to perform the duties it's designed for," she added.

On operation among different stakeholders and resource mobilisation, she said the government resources were never enough and therefore called for strategic partnership within government, institutions outside government, critical partners to commit resources for special facilities required for functional assessment.

She emphasized the role of parents in giving care to their special needs children. She said mothers are naturally caregivers but they do it at the expense of their health and well-being. "How do we then support the mothers who are already giving care?" She posed.

She said in every situation, there is always an opportunity that presents itself to change the narrative, stressing that there was need to change the narrative of people with special needs. She said the education sector was undergoing reforms and perhaps that was the distractions needed to address the issues of learners with special needs. What are the things within the CBC that point to how we can take advantage of the reforms?

- Competences: Focus is now moving from exams, theories to key competences (talents, unique skills that every learner can demonstrate). That gives children with special needs an opportunity to showcase their talents and abilities. More emphasis should be given on how we appreciate, how we reward, and how we encourage learning under the CBC. Also within the CBC, the underpinning principles being emphasized such as relevance, access, equity and quality can be used to improve and enhance education of learners with special needs.

- The other pillar that is much emphasized is the parental empowerment and engagement. Strong voices are required to support parents and learners with special needs.

She said the MoE had committed to ensuring that no child misses out on education because of disability. The ministry had created the Directorate of Special Needs Education in an effort to strengthen coordination and enhance quality and relevance of education as well as improve outcomes of the learners and trainees with disabilities.

She said the provision of the Constitution 2010 and the Vision 2030, the Basic Education Act 2013, the sector policy for learners and trainees with disabilities 2018, among other relevant laws and policy guidelines governing special needs education reaffirm the commitment of the government in promoting and protecting the rights of every Kenyan with special needs and disability.

The MoE in conjunction with KISE will revamp functional assessment through educational assessment and resource centres to ensure 100% placement, access, equity, quality, relevance, transition and completion at all levels in line with CBC, she informed the delegates.

The presenter commended KISE for its involvement in research and provision of professional and technical advisory services. The MoE has been and shall continue supporting KISE to maintain its unique position in the country and the region,” she added.

“The government appreciates the role of educational assessment and resource centres in functional assessment. The policy is clear on these roles of EARCs in early identification, assessment, intervention and placement of learners and trainees with disabilities. We encourage our EARCs officers to further their education in functional assessment to serve the public better,” she added

Noting that functional assessment was facing some challenges, she reiterated that MoE will continue supporting EARCs to enhance quality services for every child and youth with disabilities. The government is committed to supporting the national cycle of education assessment, rehabilitation and research centre at KISE to reach as many learners with disability as possible, she said.

The CAS underscored the importance of stakeholders and partners for their continuous role in functional assessment and urged them to continue advocating for this essential service to ensure no child or parent is left behind in accessing quality services.

She said the ministry appreciated the significant contribution by development partners and key stakeholders, adding that this would go a long way in impacting special needs education. She invited other parties to work with the government in realising the goals of centres of excellence

in the regional EARCs, to emulate UNICEF, Sightsavers and Leonard Chesire, who have been at the centre of support. She also appealed to parents to take their special needs children to EARCs for assessment and support.

To counter cultural beliefs that sometime kept the parents from presenting the children with special needs for assessment at EARCs, Ms Mumina said this could be resolved by creating awareness. Knowledge and way forward deliberated upon at the conference for enhancing functional assessment and access to quality services for every child.