Technical Guidance Note on Promotion of Inclusive Education in Uganda during the COVID-19 Crisis

6 September 2021

1. Introduction

1.1 Objective

The overall objective of this technical guidance note is to offer guidance to partners on improving access to quality, equitable inclusive education for children with disabilities and other special educational needs. Specifically, this technical guidance note provides insight into the current situation of children with disabilities and other special educational needs , lessons learnt and best practices from experiences on the ground by humanitarian and development partners. In addition, this technical guidance note aims to mobilise actions to be taken by the Government and implementing partners and donors to promote collective effort and gain support for inclusive education in Uganda.

This technical guidance note supports multi-stakeholders to take effective actions to supplement government's efforts to achieve the above-mentioned objectives; including local and international NGOs, UN agencies, Disabled People's Organisations (DPOs), relevant ministries such as the Ministry of Education and Sports (MoES), Ministry of Health (MoH), and Ministry of Gender, Labour and Social Development (MGLSD) and donors.

Persons with disabilities comprise 15% of the world's population and are more likely to be poor, to face catastrophic health expenditures, to have lower levels of education and economic participation and to live in households that are more exposed to economic insecurity and shocks¹. Those inequalities, heightened for women and girls with disabilities, arise from multiple barriers faced at all ages, such as stigma, inaccessibility to infrastructures, transport, and information systems as well as the lack of inclusive public policies and practices. Those barriers generate significant disability-related extra costs for persons with disabilities and their families, increasing their economic vulnerability.

COVID-19 heightens existing vulnerabilities for forcibly displaced and stateless people in many ways. With increasing prices of basic food and commodities, many refugees, and internally displaced persons (IDPs) struggle to afford goods in addition to paying the rent, putting them at higher risk of eviction². The COVID-19 pandemic is likely to disproportionately affect persons with disabilities, putting them at risk of increased morbidity and mortality, underscoring the urgent need to improve the provision of health care for this group and maintain the global health commitment to achieving Universal Health Coverage³.

³ World Bank/ EiE. (2021). *Pivoting to Inclusion: Leveraging Lessons from the COVID-19 Crisis for Learners with Disabilities*. Retrieved from <u>https://documents.worldbank.org/en/publication/documents-reports/documentdetail/777641595915675088/pivoting-to-inclusion-leveraging-lessons-from-the-covid-19-crisis-for-learners-with-disabilities</u>

¹ USAID. (2020). *Return to Learning during Crisis*. Retrieved from <u>https://www.edulinks.org/sites/default/files/media/file/Guidance_ReturntoLearningBrief_Sept20.pdf</u>

² National Council for Persons with Disabilities (2020). The Effects of COVID-19 on Persons with Disabilities in Uganda.

1.2 The case of education in Uganda in the COVID-19 context

The Government of Uganda closed schools and all institutions of higher learning in March 2020 as one of the measures to prevent the spread of COVID-19. While schools reopened for specific classes between October 2020 and June 2021, all schools were closed once again on 7th June 2021. As a result, all learners including children with disabilities and other special educational needs were sent back home. While the measures put in place helped in slowing the spread of the disease, this also came with dire effects on access to education in formal, non-formal and informal learning institutions, with the effects deeply felt in poor rural and remote communities and refugee and host communities, further complicating a situation that was already dire even before. For instance, during school closure, education responses for continued learning relied on education solutions like printing and dissemination of learning materials, in some instances virtual lessons and mostly radio/TV lessons. These delivery mechanisms were not easily accessible to learners with disabilities, especially those in poorer, remote households. The 'digital divide' has been made evident during the pandemic, to the disadvantage of children with disabilities and other special educational needs.

2. Inclusive education in Uganda during COVID-19 crisis

2.1 Equitable access and inclusive relevant learning opportunities

A difficult school continuity: With schools closed, ensuring continued learning for all children became a high priority for both the Government of Uganda through the Ministry of Education and Sports as well as its partners. In May 2020, the government introduced E-Learning (television, internet, and radio), print media (newspapers) and through the National Curriculum Development Centre (NCDC), education materials were designed, printed, and distributed to learners across the country. However, not all children were able to access these materials. According to the COVID-19 bi-monthly update by UNHCR of July 2020, an analysis on the impact of the pandemic on refugee education was undertaken by The Education in Emergencies Sector Working Group - co-chaired by the Ministry of Education and Sports, UNHCR and Finn Church Aid This analysis showed that primary and secondary school-going children had missed 60 per cent of the 840 hours of education for term one since March 2020⁴. Findings in rapid assessments by education partners attributed this to lack of transmission signals in some areas, high cost of radio lesson transmission leading to many partners running short of money forcing them to discontinue the radio lesson support, lack of access to radio devices by children in poor households, inadequate distribution of home learning packs by government and partners, restricted movement and the high cost of movement at the time for education partners and stakeholders, lack of parent participation and inadequate knowledge on how to support children with disabilities. In addition to all these, other factors in the refugee settlements included unavailability of teachers within the schools, as many of the teachers went to their homes.

Access to education for children with disabilities and other special educational needs in both host and refugee communities: Although unintended, some children with disabilities and other special educational needs were indirectly excluded from the E-learning programs and continue to miss out on learning due to inaccessibility of Information, Communication Technology (ICT) and high cost of E-Learning. The E-learning materials developed by schools were not made available in accessible formats. The National Curriculum Development Centre attempted to produce learning materials in braille for learners who are visually impaired, however, the distribution failed due to lack of resources and poor coordination. The production of large print home learning packs was too expensive and only considered later when partners

⁴ Joan Salmon. (8 March 2021). Daily Monitor. *Effect school closure in refugee communities*. Retrieved from <u>https://www.monitor.co.ug/uganda/news/education/effects-of-school-closure-in-refugee-communities-3315736</u>

raised this concern. As pointed out earlier, the majority of children with disabilities and other special educational needs are from low-income households that cannot afford to buy a television, a radio set, smartphones with data or a daily newspaper for the learning needs of their children, and the majority of children did not benefit from distributions. Many learners with disabilities and other special educational needs were not studying like their counterparts, especially since their parents often lacked the specialised skills to support them. Some have lost interest in learning due to the extended time out of school and limited access to learning materials, which is likely to increase the dropout rates as reported to education partners by caregivers of children with disabilities or children themselves.

Education partners had invested in education infrastructures such as classrooms, latrine stances, and provision of scholastic materials. However, owing to a total lockdown, movement restriction, and school closures affected in March 2020 and June 2021 to contain the spread of COVID-19, the use of these provisions were suspended for a long time. As a consequence, this situation made it difficult for the partners to continue supporting children with disabilities to get access to education in mainstream schools. For example, movement restrictions restrained education partners supporting children with disabilities to conduct dynamic identification surveys of children with disabilities, provide them with assistive devices to ensure mobility, and provide rehabilitation services.

2.2 Delivery of quality education and training

It is even more challenging to improve quality education without securing access to continuity of learning. Rather than educating teachers about inclusive education, the priority was put higher to send teachers to the villages to first provide learning opportunities to as many children as possible during the school closures.

Historically, the Ugandan government has continually cut the education sector's budget, compromising the quality of education and service delivery that both children with and without disabilities and other special educational needs can access⁵. World Bank points out that public financing for special needs education accounts for only 0.1% of the education sector budget⁶. This ultimately affects the chances of Uganda's future generations with disabilities and other special educational needs to quality education. Most importantly, when a government deprioritises human development, it is children with disabilities and other special educational needs that will feel it most acutely since they are already missing out on service provision. Tackling this fundamentally discriminative gap in the education system requires governments, non-governmental organisations, and other development partners to re-think inclusive educational meeds, whether at home or in school⁷.

Moreover, another shock caused by COVID-19 is the lack of socialisation. A number of after school activities promote emotional wellbeing by allowing children to interact with their peers outside the classroom, work off excess energy, relax their minds, and overcome the stress associated with school life⁸. Suspension of clubs and extracurricular activities has delayed the

https://www.globalpartnership.org/blog/inclusive-response-covid-19-education-children-disabilities.

⁵ Kinani, Allan. (2018). *The Ugandan education sector: are we advancing or burying it? Parliament Watch*. Retrieved from https://parliamentwatch.ug/the-ugandan-education-sector-are-we-advancing-or-burying-it

⁶ World Bank. (2020). Special Needs Education in Uganda: Sustainable Development Goal (SDG) #4 Concerns Quality and Inclusive Education. Retrieved from <u>https://www.worldbank.org/en/news/factsheet/2020/02/07/special-needs-</u> education-in-uganda-sustainable-development-goal-sdg-4-concerns-quality-and-inclusive-education

⁷ McClain-Nhlapo, C. (2020). An inclusive response to COVID-19: Education for children with disabilities. Education for All. Global Partnership for Education.

⁸ Ministry of Education and Sports. (2020) *Guidelines on the formation, management and strengthening of school clubs.*

development of mutual understanding and peaceful coexistence among children of diverse national and ethnic backgrounds and different abilities.

2.3 Systems for effective delivery

During the school closures, inadequate data management among the government and stakeholders has been a bottleneck issue. While it is unclear how many learners with disabilities and other special educational needs have been affected by the COVID-19 pandemic due to a lack of statistical data, it does not take much imagination to realise they will have been affected in more extreme ways than children without these needs⁹. For instance, if there had been a comprehensive database of children with disabilities and other special educational needs shared by all the stakeholders, assistance of home-learning packages to these children should have been delivered quicker and more accurately. More than one year after the start of the spread of COVID-19, the data is still scattered among partners.

Since the Education Response Plan (ERP) for Refugees and Host Communities in Uganda II 2021-22 emphasises increasing community engagement on education issues, education partners have been strengthening the push factor by sensitising community structures for enrolling in and attending schools of children with disabilities and other special educational needs. However, many Secretaries of Persons with Disabilities in the Refugee Welfare Committees in the West Nile region raised their concern that community members became much more concerned with their livelihoods, health and infection prevention than with the education of their children, especially children with disabilities and other special educational needs who needed more support than others. Although no data are available yet on the situation in Uganda, it can be expected that households with children with disabilities and other special educational needs, who were already struggling to feed themselves, will face even more difficulty now that their daily earnings have reduced¹⁰.

2.4 Why Deliberate Steps MUST be taken to ensure continued learning and return to school by children with disabilities and other special educational needs

Ineffective home learning approaches: In many instances, caregivers and families of children with disabilities and other special educational needs are not able to support their children to continue learning at home and do not have capacity to interpret adapted learning materials. While the government and partners distributed home learning packs, adapted materials in alternative formats like braille were and are still inadequate.

The digital divide exacerbates the learning divide among learners related to accessing equipment, electricity, and the internet for learners with disabilities and other special educational needs, who have an additional barrier of inaccessible learning content. For instance, many remote learning options are not accessible to blind and deaf learners, nor is remote education possible for some children with intellectual or more severe disabilities¹¹.

No education means no protection: Children with disabilities and other special educational needs were left with limited ability or none at all to protect themselves or even report abuse, leaving them even more vulnerable than before. Some partners have witnessed that children

https://www.tandfonline.com/doi/full/10.1080/09687599.2020.1867075?scroll=top&needAccess=true

⁹ World Bank. (2020). Special Needs Education in Uganda: Sustainable Development Goals (SDG) #4 Concerns Quality and Inclusive Education. Retrieved from <u>https://www.worldbank.org/en/news/factsheet/2020/02/07/special-needs-education-in-uganda-sustainable-development-goal-sdg-4-concerns-quality-and-inclusive-education</u>

¹⁰ Femke Bannink Mbazzi, Ruth et al. (2020). *The impact of COVID-19 measures on children with disabilities and their families in Uganda*. Retrieved from

¹¹ Save Our Future (a coalition of ten large multilateral organisations coordinated by the Education Commission). (2020). *White Paper*. Retrieved from <u>https://saveourfuture.world/white-paper/</u>

with disabilities are exposed to high risks of child abuse and violence during the school closure. For example, during the lockdown, their vulnerability to abuse was heightened in the refugee settlements, as they were often left alone at home and sometimes locked up for long hours in isolation without food the entire day, as caregivers spent the day out looking for livelihood opportunities to supplement the reduced food rations.

Restrictions in movements across districts and reduction of passengers made it both impossible and where possible expensive for children with disabilities to access medical services, hence exposing them to health risks.

While the government and partners made efforts to raise awareness on COVID-19 and the preventive measures put in place, this information was not immediately available in accessible formats for children with disabilities and other special educational needs, leaving them vulnerable to infection. For example, some children with disabilities 'touch' a lot, yet there was no information on the need to sanitize their assistive devices e.g. wheel chairs. Such information was also not made available to caregivers to enable them to protect children with disabilities by washing or sanitizing their hands before touching the assistive devices.

Children with disabilities and other special educational needs face multiple forms of exclusion linked to education, health, gender equity, and social interaction¹². Pre-crisis, 50% of children with disabilities were out of schools worldwide, with higher figures in low-income countries¹³. With limited ability to protect themselves or even report abuse, they were left more vulnerable than before.

3. Technical guidance during the COVID-19 crisis

3.1 School closure

When schools were closed in March 2020 and June 2021 due to COVID-19, Uganda experienced one of the biggest disruptions in the history of its education, preventing children from getting the education they need. According to a 2018 World Bank report, children with disabilities are the most excluded from education all over the world and this risk is even higher during crises¹⁴. As a response and despite several challenges, various actors innovated to continue providing education to children, including children with disabilities and other special educational needs. Below are the key lessons learnt and good practices from partners to ensure inclusion of children with disabilities and other special educational needs in the home learning processes:

• Use of inclusive small group learning (maximum 15 learners) and home visits can be beneficial to children with disabilities and other special educational needs, as this enables them to receive more direct attention than in a classroom with many learners. However, for this to be effective, individualized planning is key. For instance, the small group learning activities shared by ZOA International and adapted by some partners in the West Nile region offered a great opportunity for continued learning during school closure. It provided a chance for learners with disabilities and other special educational needs to be included in the learning process and for those who

¹² Save the Children. (2020). *The Hidden Impact of Covid-19 on Children: A Global Research Series*. Retrieved from <u>https://resourcecentre.savethechildren.net/library/hidden-impact-covid-19-children-global-research-series</u>

¹³ UNESCO. (2020.) 2020. GEM Report- Inclusion and education. Retrieved from <u>https://en.unesco.org/gem-report/</u>

¹⁴ World Bank. (2018). *The Price of Exclusion: Disability and Education. The Challenge of Inclusive Education in Sub-Saharan Africa.* Retrieved from <u>https://documents1.worldbank.org/curated/en/171921543522923182/pdf/132586-WP-P168381-PUBLIC-WorldBank-SSAInclusive-Disability-v6-Web.pdf</u>

participated, both caregivers and the children themselves reported that the children were happier.

When using this approach, there should be a sufficient number of teachers to attend to the diverse needs of learners, the program should be structured, adequate follow up should be done to ensure children are learning, absenteeism and irregular attendance should be tracked, the distance from children's homes to the learning centres should be short and it works most effectively when concentrated on smaller communities or a household. In addition, there should be strict use of COVID-19 Personal Protection Equipment (PPEs) and Standard Operating Procedures (SOPs) by all learners and teachers to minimise risks of infection. In some instances, there is a need to provide transport (e.g. bicycles) to the teachers in case distances to the learning centres are longer.

• **Digital learning:** During the lockdown, there was a rapid shift to digital teaching and learning. Educators had to accelerate technology implementation plans to move teaching and learning to various digital platforms to ensure that children could learn from home. UNICEF Uganda, for instance, piloted the 'Accessible Digital Textbooks for All Initiative' in 20 inclusive/integrated schools across the country. Under this initiative, a teachers' guide was developed and used. Also, English Language textbooks for Grades Four (4) and Six (6) were adapted and produced in three formats: audio materials for children with low to no vision, large text HTML and enhanced graphic materials for children with low vision and sign language materials for children with hearing impairments. An accessible digital textbook has become a unique digital tool that gives all learners, including those with disabilities and other special educational needs, access to information in alternative formats in all settings and allows them to continue with their education, even during school closures. Another example is War Child Holland's 'Can't Wait to Learn' program, which delivers tablet-based learning to children in difficult circumstances.

When delivering digital learning, it is important to keep an eye on issues of equity so that children with disabilities and other special educational needs are not excluded. Partners therefore need to be cognisant of the various disabilities and needs children have to ensure technology-based learning solutions are tailor-made. Some of the useful platforms to advance digital learning include use of city/town radio channels, community radio channels, recording and repeating, use of community internet hubs, use of speakers and the mobile public address system. Since most of this technology requires electricity, there is a need to ensure reliable and sustainable supply of power in all settings, which may necessitate the use of solar power in some rural remote settings and refugee settlements. Digital learning requires close follow up to ensure all children are learning. Most importantly, there is a need for strong coordination mechanisms between the government and other stakeholders.

• Production and effective dissemination of home learning packages: At minimum, the use of braille, simplified content for children with intellectual impairments, sign language translation and subtitles where possible are key. However, parents and caregivers need to be engaged and trained as much as possible. This is because inperson guidance is needed for most children, and especially children with disabilities and other special educational needs, as not all will be able to go through the content as fast as others. For example, Backup Uganda has been distributing a community podcast called 'Every Child Can Learn' in English and Acoli in Gulu District and surrounding districts since the first school closure. The episodes explain specific learning difficulties and disabilities and offer guidance to parents and caregivers on how to support their children while learning from home. Having home learning packages available offers opportunities to combine content from different classes for children who could benefit from this (e.g. Mathematics from P4, English from P6). For this to succeed, there is a need to engage teachers for support where necessary. Parents

should ensure children are available for learning during sessions and encourage their children to take care of the materials given to them. In addition, the process of printing, distribution and transportation of learning materials needs to be well coordinated with actors on the ground. There is also a need to actively involve local community leaders, especially Secretaries for Disabilities at local council or village level in the distribution and monitoring the usage of the distributed learning materials. For example, AAR Japan involved Secretaries for Disabilities and Secretaries for Education of Refugee Welfare Committees in the distribution of home learning packages, weekly monitoring, and reporting to AAR Japan in Imvepi settlement in Terego District. They found that the Secretaries mobilised supportive siblings and fellows in the neighbourhood of the targeted children with disabilities to support their home-learning in their respective village. Many of them were able to simplify and interpret the materials, especially to the learners with disabilities in lower classes and their caregivers.

• Combining education support with checking on a child's general wellbeing: Support is likely to be less accessible during the pandemic, yet very important. This can be successful if there is proper coordination, timely referral and a multi-sectoral approach that integrates rehabilitation and psychosocial support with nutrition, among other services to the learners. In addition, during such times, there is a need for donors' flexibility and adjustments: e.g. target groups, modality of activity, et cetera to suit the actual needs. In addition to supporting the educational needs of children with disabilities and other special educational needs, teachers who conduct small group learning sessions can also check on the wellbeing of their learners. During school closure, AVSI Foundation in Palabek settlement in Lamwo District worked with Community Incentive Workers to provide useful information on the needs of children with disabilities that informed their response with the provision of devices to address their needs. During home learning visits, Humanity & Inclusion teams tracked all other aspects of rehabilitation and welfare. In Rwanda, Chance for Childhood worked with trained community frontline volunteers to visit households of children with disabilities and or special educational needs and deliver inclusive messages that guided parents on how to respond to both educational and other daily needs of their children. The team also used phone calls to follow up and provide remote counselling and advice to parents and caregivers of children with disabilities and or special educational needs to ensure their wellbeing.

• An active system for ongoing collection of students' data disaggregated by disability for emergency response and monitoring helps with tailoring interventions. Having reliable and accurate data of students disaggregated by disability and other special educational needs is the first step to eliminating exclusion. In addition to doing regular disability assessments, there is a need to train actors on screening children for disabilities and other special educational needs, so that data is available for use. Some of the disability screening tools that can be used include those developed and used by Chance for Childhood, Ministry of Education and Sports and Humanity & Inclusion.

• Involvement of children with disabilities and other special educational needs and their caregivers ensures empowerment, ownership and success of the interventions. The principle of 'nothing for us without us' is therefore key.

• Both government and partners should plan for connected and coordinated service delivery specifically targeting children with disabilities and other special educational needs. Strategies should be developed where linked services (rehabilitation, health, MHPSS, nutrition, social protection, education and child protection) can be provided or referrals for the same are easily made to protect children with disabilities and other special educational needs. In South West Uganda, for instance, Humanity & Inclusion identified children with disabilities who were malnourished and as a result, were too weak to attend their rehabilitation sessions. While HI made referrals to nutrition partners, preliminary information indicated that such

children did not fit into the selection criteria for the nutrition support since they were beyond the target age group.

3.2 School reopening

The gradual school reopening process offers a unique opportunity to build back better towards a more inclusive learning environment for all children. In order for this to happen effectively, a multi-stakeholder approach needs to be applied, in which every stakeholder is aware of and well-versed with their role and responsibilities. Throughout this process, it is vital to keep in mind that all learners have experienced their time away from school in a unique way. Children with disabilities in particular have faced more complex challenges related to learning at home and the availability of support services¹⁵. Therefore, a differentiated approach would be preferred over a one-size-fits-all solution.

First of all, it is vital that all communication and sensitization concerning going back to school includes children with disabilities, in terms of both content and modes of communication¹⁶. Most children are likely to benefit from returning to school-based learning, considering the significant challenges that learning from home has posed. In particular, children with disabilities who receive additional assistance when learning at school, may have not received this in their home setting - for example, because their parents or guardians did not have the time, training or resources to offer this¹⁷. All messaging to inform learners, parents and guardians about the dates of reopening for specific learning years and the SOPs to be followed should emphasize the importance of children with disabilities returning as well, visually and verbally. In addition, all information should be accessible to all, for example by making use of sign language, closed captions and simple, straightforward content.

Secondly, SOPs at schools are only effective if followed by everyone physically present. Children with disabilities with pre-existing health conditions are more likely to fall severely ill due to COVID-19 compared to other learners, for example, if they are born with cerebral palsy¹⁸. To create a safe, inclusive school environment, it is imperative that all children, teachers, support staff and visitors uphold the SOPs consistently. This can only be done if safety measures are designed with children with disabilities in mind. Hand washing facilities need to be accessible for all children, regardless of the way they move or their ability to see. Social distancing needs to be planned carefully by teachers and administrators, keeping in mind children who may need additional space in the classroom and children who will find the concept difficult to grasp. Precautions need to be explained in a way that is understandable for all, and additional, continuous guidance needs to be available where necessary for children with disabilities and their peers alike, to support them in keeping each other's needs in mind. Teachers' creativity can make a significant difference in making this adjusted learning environment familiar within a short period of time.

Thirdly, finding an effective way of classroom-based learning that is sensitive to the current situation is proving to be challenging worldwide, especially since temporary closures may continue to happen as long as COVID-19 infections are identified. So far, a variety of

¹⁵ Femke Bannink Mbazzi, Ruth Nalugya, Elizabeth Kawesa, Claire Nimusiima, Rachel King, Geert van Hove & Janet Seeley (2021). *The impact of COVID-19 measures on children with disabilities and their families in Uganda, Disability & Society.*

¹⁶ UNICEF. (2020). Child disability and COVID-19. Retrieved from <u>https://data.unicef.org/topic/child-disability/covid-19/</u>

¹⁷ Femke Bannink Mbazzi, Ruth Nalugya, Elizabeth Kawesa, Claire Nimusiima, Rachel King, Geert van Hove & Janet Seeley (2021). *The impact of COVID-19 measures on children with disabilities and their families in Uganda, Disability & Society.*

¹⁸ Article on EurekAlert!. (2021). *Impact of COVID-19 on children with disabilities, caregivers and healthcare providers.* Retrieved from <u>https://www.eurekalert.org/pub_releases/2021-01/ip-ioc010421.php</u>

approaches has been experimented within different countries, leading to valuable lessons learned. One could conclude that one of the main purposes of these approaches is to have learners get 'up to speed' as fast as possible, making up for any time 'lost'. Three main examples are:

• **Catching up:** Covering content that was missed out on by learners until reaching a point where 'normal' learning can continue.

• **Remedial teaching:** Remediation of skills or knowledge that a learner has not yet mastered fully at a time when they would have been expected to;

• Accelerated learning: Covering more content in a shorter period of time than usual¹⁹.

Although these terms are often used interchangeably, they have significant differences and need to be understood well in order to be implemented inclusively. All three approaches require the following considerations:

• Initial and continuous assessment is key: Not all learners will return to school at their expected learning level. Some will have managed to continue learning from home, others will have had occasional learning moments, and others may have experienced learning loss. Children with disabilities are likely to fall in the latter category. It is vital to determine a starting point for them, without leading to immediate, drastic decisions.

• Continuous differentiation respects children's individual learning needs: Not every child will benefit from the same approach. A child with a physical impairment may be well able to learn at an accelerated speed, while a child with a learning disability may require remedial teaching in specific learning areas. Remedial teaching, in particular, should not be interpreted as a temporary method, solely to recover from the impact that the COVID-19 pandemic has had and is still having on learning. Children with specific disabilities affecting their learning may require this throughout their years of education.

• An increased speed of instruction may lead to a decreased speed of learning: Not all learners can process more learning content in a shorter period of time. For some, the speed of instruction was already too high before schools were closed. While the pressure to cover as much content as possible as quickly as possible, this will leave children with difficulties in learning behind. Before deciding on a specific approach to use, we recommend evaluating each learner's realistic speed of learning.

• Learning requires more than teaching: Children may return to school after a year of challenging, traumatizing experiences. Home has not been a safe place for every child, especially for children (and girls in particular) with disabilities. Some have seen their parents or guardians lose their income due to the pandemic. These experiences will significantly impact children's ability and willingness to learn and will require a holistic approach to their wellbeing, including psycho-social and other support. An emphasis on ensuring standards of safeguarding needs to be maintained and enhanced in each school environment and wider community to accommodate learners with disabilities and other special educational needs.

• **Collaboration is essential:** Each of the three approaches mentioned above will help children with disabilities more effectively if their parents or guardians are engaged in the planning and decision-making process. Children with disabilities may need additional guidance and practice at home, and teachers may need to learn more about what their learners have experienced at home while schools were closed. This can lead to a successful collaboration that may continue well beyond the aftermath of the COVID-19 pandemic.

• Children and teachers' safety is the key priority: Regardless of which combination of approaches is used, it can only happen in a safe way if all SOPs continue to be followed. Using a multiple shift system where learners attend lessons in

¹⁹ Presentation on 6 May 2021 for EiE SWG by Holly Romeyn, Regional Education Officer (Emergencies) at UNHCR, slide 8

smaller groups can be considered, to mitigate the risk that having all learners in classrooms without social distancing poses.

• Upskilling teachers in inclusive teaching and learning methodologies is vital: As teachers are getting back to the classroom, they require opportunities for continuous professional development to grow their knowledge and skills related to inclusive teaching. This includes training moments and regular follow up visits to guide the teachers on their implementation.

For these guidelines towards an inclusive reopening of schools to be implemented in all their complexity, teachers and administrators require further professional development on inclusive education in general and how to apply its core principles during reopening in particular. Inclusion at all levels is not temporary and is stipulated by the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), to which Uganda is a signatory. However, inservice training on inclusive education has been scarce up to date and practical, specific guidance on inclusion during school reopening will be needed. Existing in-service professional development structures could be utilized for this, such as the Coordinating Centres and their Tutors, led by the Ministry of Education & Sports' Special Needs & Inclusive Education Department and monitored by the local education offices. While development partners can support these efforts, many have ongoing partnerships with schools and could offer direct training to fill possible gaps and speed up the process. As (digitalized) innovations in the field of professional development are on the rise, methods that can deliver quality training at a larger scale are welcomed. Lastly, to obtain an accurate impression of the actual level of inclusion in schools throughout this process, learners' individual experiences will need to be listened to and used for continuous adjustments where necessary.

Developed by the Inclusive Education Task team under EiE Sector Working Group: AAR Japan, Humanity & Inclusion, Backup Uganda, Chance for Childhood, AVSI Foundation, Save the Children, Windle International Uganda, Finn Church Aid

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