The Inclusion Champions’ Handbook
by Steve and Jan McCall
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Introduction

Welcome to the inclusion champions’ handbook. Inclusion champions are experienced and qualified teachers who have been specially selected to participate in an exciting five-year project to promote inclusion of children with disabilities in 7 pilot schools in the South West, Center and Far North regions of Cameroon. The project is funded by Irish Aid is being implemented by Sightsavers and the Ministry of Education of Cameroon. Given that the pilot project is being scaled up in 68 new pilot schools in Cameroon by the Ministry of Education, this guide will also support a new generation of inclusive teachers.

This handbook has been designed to help you, the inclusion champion, to understand what you will need to do to do your job well. The handbook contains information, ideas and materials to help you to carry out this important new role.

Initially, this guide has been written for inclusion champions of Sierra Leone thanks to funds from European Union. We would like to thank all of the people who contributed ideas, and suggestions and materials for this handbook, including the training teams from CEFORD and UNIMAK, and Frank Velthuizen, Disability Coordinator for Plan International Ireland. Our special thanks go to Guy Le Fanu, Global Technical Lead (Education) for Sightsavers, for his help and advice in designing and editing the handbook and for writing the section on supporting girls with disabilities in Chapter 5. A big thank to Laurène Leclercq, Regional Technical Lead in education and social inclusion for the West Africa region in Sightsavers, for the adaptation of this guide to the specific contexts of Senegal, Mali and Cameroon.

We have drawn on a number of sources to compile this handbook, including the excellent 'Inclusive Education in Low Income Countries’ by Lilian Mariga, Roy McConkey and Hellen Myezwa, Atlas Alliance (2014). We also want to acknowledge the invaluable Plan International Disability Toolkit from which the illustrations are drawn.

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1. Inclusive schools

Aims of this chapter

The aim of this chapter is to provide you with some simple ways of talking about inclusion to your colleagues at school. An important part of the role of the champion will be to explain to your fellow teachers how the school needs to change to support children with disabilities and how they need to change the way they teach to meet the needs of children with disabilities. In this chapter we are looking at how the school needs to change. In the next chapter we will be looking at how teachers need to change.

What is an inclusive school?

An inclusive school is where:

- All children in the community are welcomed and are seen as equally important.
- All children have the opportunity to start school when they are young.
- All children feel safe and valued.
- Parents feel involved in their children’s education.
- Changes are made in the environment and in education practices to include all children.
- Teachers try to change their teaching to include all children in lessons.
- Individual differences in children are recognised and respected.
- Children support each other's learning.
Which is the inclusive school?

Schools are really important. They help children feel they belong to the community. They provide opportunities for children to develop skills that can lead to jobs and improve the life chances of all children.

There are barriers in schools that are hard for children with disabilities to overcome. These barriers may be to do with the school buildings, with negative attitudes towards disability or with rules and ways of doing things that make it hard for children with disabilities to succeed. We will be looking at some of these issues in later chapters of this handbook, but let's begin by thinking about how you can change your teaching to make it more inclusive.
2. Inclusive teaching and learning

Aims of this chapter

This chapter aims to give you guidance about inclusive teaching and learning. It is guidance that you can use to develop your own teaching and will be useful in helping you to train and advise your fellow teachers.

It is divided into two parts. The first part contains advice about how teachers can change their teaching to help all children including children with disabilities. What is good teaching for children with disabilities is good teaching for all children in the class.

The second part looks at some simple strategies teachers can adopt to help children with disabilities to be successful in class.

Developing an inclusive classroom

All children learn best in a well-ordered classroom. A well-ordered classroom is tidy and well organised. Children in a well-ordered classroom are well behaved and are encouraged to look after the classroom and to keep it neat. The teacher respects the children and deals with all children fairly and equally according to their abilities. Children respect the teacher and respect each other. Children want to help each other and support other children to learn. The teacher has high expectations of all the children in the class, but recognises that children have different learning needs and adapts his or her teaching to meet the learning needs of every child. The teacher encourages children to learn from each other and to respect each other’s differences. The teacher praises the work of any child who has really tried hard.

Teachers realise that children work at different speeds. Some children need time to process information and complete work. Others will finish the same learning tasks more quickly than others and need additional work that will stretch their skills and help them to work independently.

In an inclusive classroom, children put bags away, and keep the spaces between desks clear so children can move around without tripping over.

Consideration is given to where children sit so they can learn best and desks/chairs are arranged in groups for learning activities.

Writing boards are kept clean and teachers write clearly on them. Rules, posters, and displays are in large and clear writing at the eye level of the children.
Inclusive teaching: effective whole class approaches

Here are simple things you can do that will help all children in the class to learn more effectively.

1. When you speak make sure all children can see your face. Whenever possible stand in the brightest part of the room where the light shines on your face.

2. When you are making an important teaching point:
   - Use gesture and expression to emphasise what you are saying.
   - Keep your language clear and simple.
   - If you feel that some of your students have not understood what you have just said, repeat the same point using different words.
   - Ask children questions to check for understanding.
   - If some students need to sit near the front of the class (for instance, to see you or hear you), allow them to sit near the front of the class.

3. When you are setting a learning task:
   - Ask children to carry out difficult, complicated activities in the morning when they are fresh and alert.
   - Provide clear instructions and check that children understand them.
   - Identify the key words you will be using in a lesson, list them on the blackboard, and make sure the meaning of these words is made clear during the course of the lesson.
   - Work through an example so children understand what you want from them.
   - Allow children to work in pairs/small groups to compare and discuss answers and help one another.
   - Provide simplified tasks/alternative activities for those children who need them.
   - Use large writing, drawings and pictures to make things easy to understand for all children.
   - Use visual aids, such as real objects, models, photographs and posters, in your lessons. Make sure all children can see them and allow some children (e.g. children with disabilities) to handle them.
   - Remember that children learn better by doing things rather than listening to someone talking about them. Think how you can make learning practical. For instance, when teaching numbers, use beans for counters and use cups for adding numbers of beans together. When teaching measurement, get children to measure each other. When teaching capacity, let children pour things.
**Inclusive teaching: classroom management**

Children learn best in an environment that places high value on good behaviour, consideration for others and working together. Effective learning takes place in a classroom where children have a clear understanding of what is expected of them in terms of what they do and how they behave. Good behaviour promotes learning as children find it hard to learn in an environment that is noisy and disorderly.

However all children behave poorly sometimes and their behaviour may disrupt the learning of others. There are many reasons why children may behave in a disruptive way. It could be because they are tired or hungry, they might be angry because they have been provoked, or they may be frustrated because they cannot do their class work even when they try hard. They may be unhappy about something that has happened at home or at school. Some children behave badly to seek attention because they feel ignored.

Mostly this disruptive behaviour happens only occasionally and lasts only a short time. However sometimes disruptive behaviour carries on and children regularly find it hard to control themselves. This is bad for them because it means they cannot learn well and they may find it hard to make friends. It is bad for other children in the class because it interferes with their learning.

So what can you do if you find that a child is constantly disruptive in the classroom?

Below are some ideas for managing poor behaviour.

1. Observe the child to see if you can work out why the child behaves in this way. Keep a record of each time the behaviour happens and write down what the child did and what you think caused the behaviour.

   Is it to avoid doing tasks they find difficult? Is it because they want attention from the teacher and other children? Are they restless because they are hungry or feeling unwell? Are they angry because they have been provoked? Once you have identified these reasons, you will be able to identify strategies for improving their poor behaviour. For instance, if the children are trying to avoid tasks they find difficult, you can provide them with extra help, ask the other students to help them, or give them simpler tasks.

2. Talk with other teachers in your school and agree a way of treating the child when the child is difficult. Write it down so you have a policy for dealing with the child's behaviour that all teachers understand. Do not beat the child as you should never use corporal punishment.

3. Find out from the parents of the child if the child behaves like this at home. Do they know why the child behaves like this? If it is due to a bad experience, it might help if the child is able to talk about it to a trusted adult, such as a pastor.

4. Distract the child. Some children show signs that they are just starting to behave badly. If you can observe and recognise these signs, you can sometimes distract children by putting your hand on their shoulder as you continue to teach. Or you can give them a job that you know will make them think about something else – for instance, cleaning the board or taking a message. Try to choose something that the child enjoys and can do well.
5. Think about where the child sits. It may be useful for the child to sit near the front of the class where you can better keep an eye on him or her. If the child wanders around, sit the child near the wall or between two other students to make wandering more difficult.

6. If the child wanders or becomes restless, give the child practical tasks to do, such as tidying the room, handing out books or sweeping the compound.

7. Praise the child when the child is behaving well and has completed work. Award them a token or star. When they have collected five stars, they can exchange them for a treat, such as fruit. Reward the whole class if the child behaves well.

8. Stay calm when you are admonishing the child. Tell them clearly and firmly what you do not like about the way they are behaving and why it is not appropriate. Use short and simple sentences.

9. Think carefully about any punishment you give: e.g. making the child stand outside the classroom may not be a punishment. The child might see it as a reward for their disruptive behaviour. You must never use corporal punishment.

10. Do not make threats that you do not intend to follow up. Make it clear what will happen if the child behaves badly: e.g. if you hit another child, you will miss your favourite game.

11. If children lose control of themselves, they may need to be taken to a quiet place to allow them to calm down. They will need to be supervised by an adult.

12. If the child is an able child, you might talk to them to explain why their behaviour is bad for them and for the other children.

**Inclusive teaching: supporting children who find learning difficult**

All children learn at different rates and are good at different things. Some children are particularly kind and helpful to their classmates. Some children are good at singing, while others are good at drawing. It is important that children have opportunities to show what they are good at and be praised for it. In classwork, some will be better at working with words rather than numbers, while others will enjoy maths and be good at sums, but will find reading and writing difficult. Some are good at sports, but find school work difficult. Some children will be good at remembering, while others will find it hard to remember what they have learnt and will need reminding.

So if you have a big class to teach, how do you manage to help children who find classwork particularly difficult? Here are some ideas that you might find useful.

- When the class is working on an activity, the teacher may spend some time going over with the child what they need to do and how they might do it. The teacher might give them individual work based on the lesson topic that is easier for them to complete.

- You might ask a child who has finished their work quickly to sit with the child who is finding the work hard, to help them. A child who is good at reading might listen to a child who finds reading hard and help them with difficult words.

- The teacher can keep the child back for 10 minutes at lunchtime to give extra coaching.
Older children in the school can be paired up with younger children occasionally to help support their learning. This helps children and can also be part of the older child’s social service programme.

Volunteer helpers can come into the classroom to help the child with some lessons. Family members or grandparents might be able to do this. It may not need to be for a long time, just to help in some lessons or to help the child settle in to a new class.

Parents or older brothers or sisters may help the child develop their reading or number skills at home. But this can only happen when parents are welcomed into school and are told by the teacher what the child needs to learn and how they can help. It is important that parents understand that this learning at home should be enjoyable for them and for the child. They should not force the child to learn and must not punish the child if he or she makes mistakes.

Inclusive teaching: supporting individual differences

Children with disabilities are fundamentally the same as other children. It is important that, as much as possible, you treat these children just the same as the other children in your class. However, you may also need to do some specific things to make sure these children are happy in school and appreciated and respected by the other children. Here are some ideas that you might find useful.

- Explain to the whole class the reasons why some children in the class may behave differently or have to learn in different ways. Use the correct words to describe disabilities.
- Encourage children with disabilities (where appropriate) to explain to the class about the special equipment or aids they use.
- Don’t make children with disabilities feel different from the other children. Don’t single them out in an obvious way. Set up a buddy system for children with disabilities, i.e. a group of students who help the child when necessary. Don’t expect one buddy to do everything.
- Give children with disabilities who find classwork difficult additional responsibilities or tasks that they enjoy and can do well, and that make them feel valued, e.g. tidying and sweeping chores, running errands.
- Think of how sports and games can be adapted to include children with disabilities
- If you are teaching out of doors, remember that children with hearing or vision loss may find it harder to hear what you say.
- Wherever possible, set tasks that you know that children will successfully carry out, even though it may cost them some effort.
- Use praise when you can see that children have made an effort, even if they may have made some mistakes.

The learning needs of children with disabilities are mostly the same as their fellow students but sometimes their disability will affect the way they learn. You will need to understand their individual learning needs and how to meet them. This is discussed in the next chapter.
3. Understanding and meeting individual needs

Aims of this chapter

In this chapter, we identify some simple ways in which you can meet the particular needs of children with disabilities. This chapter will also assist you to use the right language when discussing children with disabilities.

What to do if you believe a child has a disability that has not yet been identified

If you believe a child has a disability, you should first talk to the child’s parents or guardians to see what they can tell you about the child’s difficulties. You will need to find out if the child has been referred to a hospital or clinic, and to check that the recommended treatment has been carried out.

If the child has not been assessed by a hospital or clinic you need to clearly explain to the parent or guardian that you believe the child has a disability while pointing out that only medical personnel can confirm this through an examination. Your first priority is to help the parent to take the child for medical assessment. If the child has a severe hearing impairment they may need to attend an assessment at the school for deaf children (ESEDA Ecole des Sourds et Déficients Auditifs of Yaoundé, or at Ephphatha of Kumba), and in an audio lab (at the regional hospital of Limbe). If the child has a severe sight loss you will need to contact the school for blind children (RIB Rehabilitation Institute for the Blind of Buea, or CJARC Centre des Jeunes Aveugles Réhabilités du Cameroun of Yaoundé), and in eye health clinics within hospitals. But before we look at individual types of disability, we will discuss some general ideas about disability.

Understanding disability

Congenital or acquired?

There are many different kinds of disability. Sometimes a child is born with a disability. If this is the case, the child has a 'congenital' disability.

Sometimes congenital disabilities are obvious from a very early age. For example, Paul’s father could see that Paul had no fingers as soon as he was born. When Mercy was born she had cloudy eyes and her parents knew straight away that she not see properly. At other times, disabilities are there at birth but they are not discovered until the child is growing up. For example, Marie's brain did not develop properly when she was in the womb, but she was three before her parents realised she was not developing like other children. The first thing they noticed was that Marie was much slower in learning to walk and talk than other children of her age. She continued to need help with dressing and feeding herself long after her brothers and sisters did.
However, sometimes disabilities are not there when the child is born. They come later, perhaps as a result of a serious illness such as measles or polio, or might be caused by an accident such as a severe burn or being hit by a car. These are sometimes called ‘acquired’ disabilities.

Disabilities can affect how a child hears or sees. They can affect how a child moves around or plays. They can affect how the child talks and mixes with others. They can affect how a child thinks and learns. Each child is affected differently. How much the child is disadvantaged by the disability will be affected by how the people around the child react to the disability, and on the amount of help the child receives from those around them.

Fatmata’s story

Fatmata is eight years old. Fatmata loves going to school. She has lots of friends there and feels welcome. Her favourite activities are singing and listening to stories. She knows a lot of children at school and all the children know her. After school she goes back to her village with her friends and some of them come round to her house to play.

Her mother and father are very proud of her. When Fatmata was born her mother had problems during her delivery and they soon discovered that Fatmata was physically disabled in both of her legs and one of her arms. But they believed that their child was delivered to them by God, so they wanted to do their best for her.

The parents went to the Centre National de Réhabilitation des Personnes Handicapées Cardinal Paul Emile LÉGER (CNRPH) of Yaoundé to seek advice and treatment. The hospital did give the child some treatment but they said they could not make the disability go away. At the hospital they met an inclusive champion who said he would visit them at home. He came to see them and gave them advice about how they could help their daughter’s development.

Every day they tried to help Fatmata to develop as best she could. There were some things that Fatmata found easy. She loved to talk with her brother and sister and played with them all the time. But Fatmata found other things, like feeding and dressing herself, hard to do by herself. So, with advice from CEFORD, her parents split up these skills into little steps which she could practise day by day and gradually she became better and better at them. They praised Fatmata each time she succeeded, or tried hard. From an early age Fatima’s mother took her to the market place to sell things the family had grown. Fatmata got to know lots of people and liked to help her mother sort out the vegetables.

As Fatmata grew, her parents wanted her to have the same chances as other children from the village. They wanted her to go to school at the same time as her friends. The school were happy to welcome Fatmata and she joins in all lessons. Her teachers know that Fatmata has disabilities, but the other children just know she is Fatmata, a classmate. Fatmata’s parents are very proud of her. The school makes them feel welcome and Fatmata’s teacher tells them how she is doing in class and what they can do at home to help with her learning.
There are children with disabilities in most villages in Cameroon. Many of them, like Fatmata, are loved and cared for by their families and are made to feel welcome by their communities. These children know lots of people, and lots of people know them. They grow up feeling part of the community because they can play and learn with their friends in school.

Unfortunately there are also many children with disabilities who never get the same opportunities as Fatmata. Paul is 10. He is physically disabled like Fatmata. His mother died when he was born. His father ran away and he was left to be brought up by his grandmother. She looked after him as best as she could but hid him away and stopped him from mixing with other children because she thought he would be teased or hurt. Paul didn’t get the opportunity to develop his skills and never went to school. He never got a chance to show what he could do and now people don’t think he can do anything. He finds it hard to talk to people and to get about. People ignore him.

Separating children from daily life in the village and local school is harmful to their development and ruins their chances. Some children with disabilities may be doing well at school and may not need your help. But there are many children with disabilities that will need your help. These are children who are not able to learn successfully because their teachers don’t understand how to overcome the barriers that are holding these children back. The purpose of this chapter is to give you more detailed advice on how to work out what the main needs that can arise from particular disabilities, and what you and your fellow teachers can do to help meet them in the classroom.

**A child with hearing impairment in my classroom**

Hearing impairments lead to mild, moderate, severe or profound hearing loss. Many children temporarily experience mild hearing loss – for instance, if they have a cold or an infection – but their hearing usually returns to normal when the infection is gone. Hearing impairment affects only a few children and is usually permanent. If you suspect that a child has a hearing impairment that has not been detected you should make sure they are referred to a clinic for further assessment.

**Identifying hearing impairment**

You can begin to suspect that the child might have a problem with hearing if the child:

- Does not turn towards the source of new sounds or voices.
- Has frequent ear infections (discharge from ear, earache).
- Does not respond when you call unless she/he can see you.
- Watches your lips when you speak.
- Talks in a very loud or soft voice.
- Does not talk at all or talks strangely.
**Teaching a child with hearing impairment**

Some things you can do:

1. Seat the child in the front row in a position where the child can see the teacher and other children in the classroom. Make sure the child's better ear is not on the side nearest the wall.

2. Always get the child's attention before you start to speak, and face the child when talking.

3. Talk clearly in a normal voice. Do not exaggerate your speech.

4. Ensure that there is adequate lighting so the child can see your face and lip movements clearly.

5. Do not cover your face when you are talking and do not walk around as you talk.

6. Repeat and rephrase key points.

7. Break difficult or new words into syllables and write them down for the child.

8. Reduce background noise as much as possible.

9. Encourage the other children in class to speak one at a time (turn-taking).

10. Encourage the child's attempts to speak.

It is unlikely that you will have a child who communicates through signing in your classroom but if you meet a child who communicates by signing, there is a finger spelling system used in American Sign Language or French Sign language that some children may understand. You will find a list of the signs in Appendix 3. If you have a child who uses sign language in your class, contact Ephphatha of Kumba and/or The Plateform, Inclusive Society for Persons with Disabilities. We can then arrange for you to be provided with extra help so you can include the child in your classroom.

**A child with visual impairment in my classroom**

There are many children and adults who cannot see well without glasses, but with the right glasses they can see normally. Children who can see normally when they are given the right glasses are not usually counted as ‘visually impaired’.

Children who are visually impaired have serious eye conditions that cannot be fully corrected, even after treatment. They may have low vision or blindness. A child with low vision has a lot of useful vision, but still sees much less than fully-sighted children. A child who is blind has little or no sight. Most children with visual impairments only have a problem with seeing. But some children with visual impairments have other difficulties as well – for instance, difficulties with hearing. If you think a child has a visual impairment that has not been detected then they need to attend a clinic to be assessed properly.
Identifying visual Impairment

You can begin to suspect that the child might have a problem with vision if the child:

- Is often unable to find small objects that he/she has dropped.
- Has red eyes or chronic discharge from eyes, spots on the eyes, a cloudy appearance to their eyes, or frequently rubs eyes and says they hurt.
- Often bumps into things while moving around.
- Holds his/her head in an awkward position when trying to look at something.
- Has difficulties reading print.

Teaching a child with a visual Impairment

Some things you can do:

1. If the child has a severe visual impairment, orient the child to the classroom if necessary. Take them on a tour of a classroom, showing them where everything is and explaining what everything is. Let them feel any objects you show to the class. Familiarise the child with any equipment you will be using in the lesson.

2. Speak to the whole class to let the child know when you enter and when you leave the room.

3. When you want to speak to the child with visual impairment, say the child’s name first.

4. If the child cannot see your face, identify yourself by name. Don’t assume that the student who is visually impaired will recognise you by your voice even though you have met before.

5. Don’t make the child feel different. Don’t single the child out. Find a way of including the child in all activities.

6. If the child has some vision, sit the child with their back to a window to avoid glare. Don’t stand in front of the window when you are talking to the class. Check discreetly whether the child has enough light to read and write.

7. Avoid using vague terms such as ‘it’s over there’ and ‘do it like this’. Be specific when providing information. For instance, say ‘the book is on the table in front of the blackboard’. Tapping the table can give an extra clue.

8. Describe in detail any important visual information you provide to the class. Keep instructions precise and clear.

9. Offer to read written information when appropriate, e.g. read aloud whatever you write on the blackboard.

10. Where possible, prepare notes for the child in advance, in braille or clear print as appropriate. If you are dictating, allow the child enough time to keep up. Check what they have written.
11. If you are using textbooks with a child with low vision, make sure the child has a personal copy in the appropriate medium. Make sure the book is open at the right page and don’t ask the child to share books.

12. Tell students when you are leaving them.

It is possible that you will have a child who is blind in your classroom and it is useful to know something about how children who are blind learn and how best to guide a child who is blind. You will probably already know that some children who are blind learn to read through their fingers rather than their eyes, using a system of raised patterns of dots called Braille. If you would like to see what the Braille alphabet looks like, see Appendix 2. For advice on how to guide someone who has little or no sight, see Appendix 3. If you have a blind child in your classroom, contact the schools for blind children, or l'Association Nationale des Aveugles du Cameroun (ANAC) so we can provide you with extra help to include the blind student in your class.

A child with physical impairment in my classroom

There are a wide range of physical impairments that can affect children, and they will affect children in different ways. It is therefore hard to give general advice as each child will need to be considered individually.

Some physical impairments are mild and may have little or no direct impact on the child’s learning in class. For instance, children with a weakness in only their left arm may have no difficulty writing with their right arm or participating in games like football. Some children with mild physical impairments may not need your help – they may be doing fine and their disability does not prevent them from being successful learners in school. They don’t want to be treated differently, or made a special case. If things are working well, don’t change them!

You may want just to check with these children from time to time to see if they are having any difficulties that need your help, or to see if they are being provoked by other children, but you don’t need to monitor them closely.
However, some physical impairments can be severe and impact on all aspects of learning in school and reduce a child’s independence in daily life. Children with moderate or severe physical impairments are likely to need some support and may need adapted equipment to help them move about and learn.

Identifying physical impairment

There are a wide range of physical impairments. Some are easy to identify because they are so obvious. They may be present at birth, they may be the result of childhood illnesses such as polio, or they may result from injuries such as road accidents.

Physical impairments vary greatly in terms of the effect they have on the child. They can affect the child’s ability to do one or more of the following:

- Walk, run and move around.
- To balance or climb.
- To get up from a lying or squatting position.
- To pick up or manipulate small objects.
- To talk and communicate.
- To lift and carry heavy objects.
- To coordinate their movements.

Children with physical impairments that affect their movement may find it hard to travel to school. For example, a child with a ‘club foot’ (usually one or both feet curling inwards) might find walking to school very difficult, slow and tiring especially if their home is far away.

Children who have impairments that affect the mouth or throat (e.g. a cleft lip or palate) may have difficulty talking and being understood. They may have difficulty with eating or swallowing, and they may worry about how teachers and other children will react to the way they look.

Some children have a range of disabilities. For example, ‘cerebral palsy’ is the name for a group of lifelong conditions that affect movement and co-ordination, caused by a problem with the brain that occurs before, during or soon after birth. Children with cerebral palsy may have difficulties controlling their movements. Their muscles may be stiff and tight, or may switch between stiffness and floppiness, causing random, uncontrolled movements and spasms. Some types of cerebral palsy may affect balance and coordination, resulting in shaky or clumsy movements or shaking.

Physical disabilities may affect different parts of the body. Hemiplegia means one side of the body is affected, diplegia is when two limbs are affected, monoplegia is when one limb is affected and quadriplegia means all four limbs (and usually the whole body) are affected.

Children with physical impairments may also have reduced vision or hearing, and sometimes epilepsy.
Epilepsy may occur on its own or with other disabilities. Children with epilepsy may:

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

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

**Do:**

- Protect them from injury (remove harmful objects which are near them).
- Cushion their head.
- Time how long the jerking lasts.
- Aid breathing by gently placing them in the recovery position once the jerking has stopped.
- Be calmly reassuring.
- Stay with them until they are fully recovered.

**The recovery position**

**Don’t:**

- Restrain their movements.
- Put anything in their mouth.
- Try to move them unless they are in danger.
- Give them anything to eat or drink until they are fully recovered.
- Attempt to bring them round.

If the fit lasts for more than five minutes, you need to get the child to a doctor or get a doctor to the child.

These ideas are taken from a British website: [www.epilepsy.org.uk/info/firstaid](http://www.epilepsy.org.uk/info/firstaid)
Children with physical impairments may benefit from surgery, so it is important that they are taken to clinics or hospitals for proper assessment. Some children with physical impairments will benefit from physiotherapy. Physiotherapists are health professionals who use techniques such as exercises or training to encourage movement, build strength and stretch muscles. Physiotherapists can provide aids such as wheelchairs and walking aids that might benefit the child.

**Children with genetic conditions**

There are a very wide range of conditions that affect children that result from problems with the genes that determine how the body and brain grows and works. Here we will look at only two examples, Down’s syndrome and sickle cell anaemia. Down’s syndrome (sometimes called Down syndrome) is a condition that has a direct association with learning difficulties. Sickle cell anaemia is not linked to learning difficulties, but the illness that comes with the condition may affect the child's attendance at school and disrupt their learning.

**Down's/Down syndrome**

Down’s syndrome is a condition that results from a difference in the structure of the genes. Down's syndrome is not common, but there's a small chance that any a woman may have a child with Down's syndrome with any pregnancy, with the likelihood increasing with the age of the mother.

It is often identified when the child is very young. The condition causes some level of learning difficulty, but the level of learning difficulty will be different for each child.

For example, with help, some children with Down's syndrome can develop good reading and writing skills. People with Down's syndrome can often learn to live independent lives, have jobs and relationships. It is very important that children with Down’s syndrome have the chance to go to school to develop their learning and social skills.

Children with Down's syndrome will benefit from many of the approaches in the section about supporting children who find learning difficult in Chapter 2.

**Sickle cell anaemia**

Sickle cell anaemia is a lifelong genetic condition that affects the blood and makes it hard for oxygen to travel around the body. Children with sickle cell anaemia may have difficulty breathing and they may experience shortness of breath and tiredness. People born with this condition sometimes experience problems from early childhood, but most children with sickle cell anaemia have few symptoms and lead normal lives most of the time. In some cases children may have painful episodes called ‘sickle cell crises’, which can be very severe and can last up to a week.

Some children also experience other problems such as delayed growth and lung problems. Children with sickle cell anaemia may have long periods when they are not well enough to go to school and this can badly affect their progress.

There are many other children who may not be able to attend school regularly because of ill health. They may be absent from school for days or even weeks.
There are some easy things you can do to help children who are experiencing school absences through injury or regular illness. You can:

- Visit them at home and give them schoolwork to do at home.
- Encourage their classmates to visit them at home and to talk about what has been happening in school.
- Encourage their classmates to make daily visits to their homes and talk about what they have learned in school.
- Encourage classmates to lend them the notes they have taken in class so they can read and copy them.
- Make them feel very welcome when they come back to school.
4. Assessment, record-keeping and planning

Aims of this chapter

It's very important to keep records of what is known about children with disabilities. This chapter discusses the different types of information that you need to collect about children with disabilities. However, collecting information is not enough. You have to use this information to help plan what children will need to learn and how they can learn it. You will also need to record children’s performance periodically to measure the progress they are making. It is therefore also important that you keep records safe. These records should be shared with the child’s parents/guardians and with relevant health professionals, but otherwise should be kept confidential.

The student monitoring form

This form collects key information about the child, information which can be used to develop an individual education plan (this is discussed later in the chapter). This form should be kept in a safe place where teachers can have access to it. It needs to be updated as new information comes in, e.g. from the clinic or hospital. On the next two pages you will find a blank student monitoring form and a version that contains advice about how it should be filled in. It also shows you who should contribute to the process of information gathering.

The blank form doesn't need to be photocopied. It can be copied onto a sheet of paper by hand.

A range of people may have information about the child. You should seek information from parents, health professionals who have had contact with the child, and social workers or community workers who have worked with the child or family. You need to get as complete a picture as possible of the child’s needs. This form should be reviewed every year.
<table>
<thead>
<tr>
<th><strong>STUDENT MONITORING FORM (empty)</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name of child:</strong></td>
<td><strong>Name of child's parents/guardians:</strong></td>
</tr>
<tr>
<td><strong>Age of child:</strong></td>
<td><strong>Address and contact number of parents/guardians:</strong></td>
</tr>
<tr>
<td><strong>Sex of child:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Grade:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Name of class teacher:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Name of health professional:</strong></td>
<td><strong>Name of social worker:</strong></td>
</tr>
<tr>
<td><strong>What is the impairment/condition of the child (if known)?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>What is the impact of the impairment/condition on the child’s functioning (if known)?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>What support does the child require in school?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Please add any further information you consider useful:</strong></td>
<td></td>
</tr>
</tbody>
</table>
STUDENT MONITORING FORM (guidelines)

This form should be regularly updated.

<table>
<thead>
<tr>
<th>Name of child:</th>
<th>Name of child's parents/guardians:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of child:</td>
<td>Address and contact number of parents/guardians:</td>
</tr>
<tr>
<td>Sex of child:</td>
<td></td>
</tr>
<tr>
<td>Grade:</td>
<td></td>
</tr>
<tr>
<td>Name of class teacher:</td>
<td></td>
</tr>
<tr>
<td>Name of health professional:</td>
<td>Name of social worker:</td>
</tr>
</tbody>
</table>

**What is the impairment/condition of the child (if known)?**

This information should be provided by a health professional.

**What is the impact of the impairment/condition on the child's functioning (if known)?**

This information should not only be provided by a health professional, but by the parents/guardians, teacher and social worker (based on their experience of the child). You should not only discuss the impact of the child’s impairment/condition on the child’s general functioning, but also the impact of the impairment/condition on the child’s functioning *in school*.

**What support does the child require in school?**

The health professional, the child’s teacher and the parents/guardians should provide ideas for this. The child should also be asked to contribute his/her own ideas. You can consider the following: changes to teaching and learning approaches; assistive devices and educational resources required by the child; one-to-one assistance to be provided by the teacher and/or other professionals; adaptations to the school and classroom environments; support that can be provided by the other children; assistance with travel to, from and around school; home-based support from parents, other family members and the social worker. Any suggestions need to be feasible, taking into account existing resources and capacities in schools and communities.

**Please add any further information you consider useful:**
Individual Education Plans (IEPs)

What is an IEP?
An IEP is a plan or programme designed for children with disabilities to help them get the most out of their education. The IEP sets out the things that teachers and others need to do to meet the child's needs at school. The IEP identifies out the goals and actions that are different from (or additional to) those that are in place for the rest of the class. When completing the IEP, you should consult the Student Monitoring Form as it contains some key information about the child.

What is the purpose of the IEP?
The IEP is meant to inform the teacher and those working with the child (including parents) about the specific learning targets for the child and how they will be reached. The IEP allows teachers to plan the way forward for the child, and identifies the people who need to be involved. It is a useful tool for measuring progress and the effectiveness of teaching.

Who should complete it?
The IEP should be completed by the class teachers with the help of the inclusion champion(s) for the school. It is important that the class teachers understand that it is their responsibility to carry out what is agreed in the IEP. It is the job of the champion to offer advice and support to the teachers if it is required, and to help them evaluate the child's progress.

What should it contain?
An IEP should contain the following information:

- Information about the child (name, age, grade etc).
- Information about the challenges faced by the child – e.g. in literacy, numeracy, independence skills, social skills.
- Information about any equipment/resources required by the child.
- Goals for the child.
- An action plan for helping the child.
- An evaluation of any progress made by the child, identifying if the goals were met and including comments from the teacher, the child’s parents/guardians and the child.

How do I identify learning goals?
Goals set out in IEPs should be 'SMART', which stands for:

- **Specific**: so it is clear what the child will be working towards.
- **Measurable**: so it is clear if the goal has been achieved.
- **Achievable**: for the individual child.
- **Relevant**: to the child's needs and circumstances.
- **Time-bound**: so everyone knows when the goal will hopefully be achieved.
Setting learning goals is not easy, particularly at the beginning. The goals should not be too difficult, as otherwise the child will become discouraged. The goals also shouldn't be too easy or the child won't be challenged enough. If the child quickly achieves the goals you have set, then you can identify additional goals. If the goals are too hard you can break them down into smaller steps.

It is best to have new goals at the start of each term. You can review the goals from the previous term as well as setting new ones. In this way the IEP can form a record of the child's progress that can be shared with new teachers as the child progresses through school. It is best to keep all the plans for a child in a folder with the child's name on it (along with the student monitoring form). Where possible, parents should be given a copy of the plan. Head teachers should review the IEPs after they have been completed and after students' progress has been evaluated. This is useful for head teachers because it tells them what the champions are doing, gives them opportunities to praise and encourage effective teaching, and helps them measure the school's effectiveness in meeting students’ needs.

Older students can be involved in setting their own targets.

**How often should it be completed?**

The IEP is a working document and should be reviewed regularly (once or twice a term) to ensure that it continues to meet the child's needs.

When reviewing IEPs with the class teacher, champions should consider:

- The progress made by the student against the agreed target.
- Issues that affected the child's progress (positive or negative).

After considering the child's current progress, new targets should be agreed with the teacher to be achieved at the next IEP review.

**Can it be used in secondary schools?**

Yes. For primary school children the IEP will usually identify specific learning curriculum areas such as reading, writing and number work. For secondary school students the plan might also cover the different subject areas.

Older students can be involved in setting their own targets with the teacher.

**Should parents be involved in the IEP?**

Yes, it is essential that parents are involved from the start. Parents should be invited to the school and should receive an explanation in simple terms of what an IEP is and what it is for. Ideally parents should be involved in the setting of goals and assist their children to achieve these goals. At least once a year, usually near the start of term, parents should be invited to school to review the child's progress in meeting the targets and in drawing up new targets for the next school year. Where appropriate, children with disabilities themselves should also be involved in setting and agreeing the targets.
**INDIVIDUAL EDUCATION PLAN (empty)**

<table>
<thead>
<tr>
<th>Name of student:</th>
<th>Description of difficulties faced by the child:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age:</td>
<td></td>
</tr>
<tr>
<td>Class level:</td>
<td></td>
</tr>
<tr>
<td>IEP start date (dd/mm/yyyy):</td>
<td></td>
</tr>
<tr>
<td>IEP review date (dd/mm/yyyy):</td>
<td></td>
</tr>
<tr>
<td>Name of class teacher:</td>
<td></td>
</tr>
<tr>
<td>Additional equipment/resources required by child (if any):</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goals</th>
<th>Plan of action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
<td>2.</td>
</tr>
<tr>
<td>3.</td>
<td>3.</td>
</tr>
<tr>
<td></td>
<td>4.</td>
</tr>
<tr>
<td></td>
<td>5.</td>
</tr>
</tbody>
</table>

**EVALUATION**

Were the goals achieved? (✓ or X)

<table>
<thead>
<tr>
<th>Goal 1</th>
<th>Goal 2</th>
<th>Goal 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comment of teacher:

Comment of parents/guardians:

Comment of child:
**INDIVIDUAL EDUCATION PLAN (completed)**

<table>
<thead>
<tr>
<th>Name of student:</th>
<th>Marie Wafo</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age:</td>
<td>7</td>
</tr>
<tr>
<td>Class level:</td>
<td></td>
</tr>
<tr>
<td>IEP start date (dd/mm/yyyy):</td>
<td>15/09/2017</td>
</tr>
<tr>
<td>IEP review date (dd/mm/yyyy):</td>
<td>15/12/2017</td>
</tr>
<tr>
<td>Name of class teacher:</td>
<td>Anna Atangana</td>
</tr>
<tr>
<td>Additional equipment/resources required by child (if any):</td>
<td>Pencil with tape wrapped round it.</td>
</tr>
</tbody>
</table>

**Description of difficulties faced by the child:**
Marie cannot walk well or hold her pencil well. She finds writing very difficult. It is difficult to understand what she says. Other children do not play with her. She often does not participate in class. She may have cerebral palsy.

**Goals**

<table>
<thead>
<tr>
<th>Goal 1</th>
<th>Goal 2</th>
<th>Goal 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marie will be more included in class.</td>
<td>Marie will hold her pencil.</td>
<td>Marie will write all the letters of the alphabet.</td>
</tr>
</tbody>
</table>

**Plan of action**

1. Teacher will talk to the child and tell them to be kind to her.
2. Teacher will ask the class if there are any students who want to be Marie’s friends.
3. Two students who have volunteered to be Marie’s friends will help her in class.
4. Teacher will wrap some tape around Marie’s pencil to make it easier to hold.
5. Teacher will simplify tasks, concentrating on individual letters.
6. Marie will write all the letters of the alphabet.
7. Teacher will give Marie lots of encouragement.

**EVALUATION**

Were the goals achieved? (✔ or X)

<table>
<thead>
<tr>
<th>Goal 1</th>
<th>Goal 2</th>
<th>Goal 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
</tbody>
</table>

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

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

**Comment of child:** I like school. I have good friends. I can write. I play with the other children.
5. Carrying out the role of inclusion champion

Aims of this chapter

Sightsavers – along with the Ministry of Education – has established a pilot inclusive education project in 7 schools in 3 regions of Cameroon. In this project, 14 inclusion champions – 2 per school – are responsible for ensuring children receive necessary educational and education-related support. This chapter identifies the qualities of these inclusion champions and their roles and responsibilities.

Qualities of a successful inclusion champion

Inclusion champions are normally experienced and qualified practising full-time class teachers who are government-recognised.

They are good at their jobs, they promote academic attainment and personal development in all children, and they have high expectations of all the children they teach. They are respected by their peers in the school.

They carry out training, tutoring and coaching, and have the support and backing of the head teacher to carry out their roles.

They communicate well with children, parents and fellow teachers, write well, and are serious about keeping good records. They are confident speakers and can talk well to groups of fellow teachers and give them good advice about children with disabilities.

Inclusion champions are energetic, resourceful, enthusiastic and keen to do well. They show initiative, are persistent and resilient, and willing to take on new ideas and study out of term time.

Role and responsibilities

Inclusion champions are responsible for supporting the social and academic development of children with disabilities by ensuring children with disabilities are enrolled in education and have access to:

- Appropriate educational support.
- Essential educational equipment, aids and materials.
- Appropriate learning in the classroom.
**Working with families**

Champions support and celebrate the achievements of children with disabilities. They ensure parents of students with disabilities regularly meet teachers to discuss the progress of their children.

**Working with fellow teachers**

Champions provide advice to colleagues on developing inclusive teaching techniques and they cascade their own training to their colleagues. They support their colleagues in assessing and planning to meet the needs of children with disabilities through Individual Education Plans and drive the school towards more inclusive practices.

**Personal development**

Champions regularly update their skills and knowledge on the education of children with disabilities – e.g. through attending relevant training days and meetings. Champions consult and liaise with other champions in their clusters by phone and text.

**Record-keeping**

Inclusion champions need to ensure that proper records are kept for children with disabilities. Working closely with their lead tutor (inspectors) and with institutional support (social workers of social centers located nearby the school), they are responsible for:

- Assessing and monitoring the child’s health, social and educational situation.
- Ensuring that an Individual Education Plan is in place for each child with disabilities that has been developed in association with the class teacher, parents/guardians and head teacher.
- Developing a School Inclusion Team.

The inclusion champions also need to keep records of evidence of their work (particularly of home and school visits) that they can show to their tutor when the tutor comes to visit.

**Setting up a School Inclusion Team (SIT)**

**Why set up a school inclusion team?**

Teachers have many responsibilities in their daily work and it is easy for the issues of inclusion, disability and gender to be overlooked. The SIT can provide regular opportunities for discussing and addressing these issues.

**What is a school inclusion team?**

The job of an SIT is to identify and closely monitor any barrier and progress towards inclusion of boys and girls with disabilities in the school.
Ideally, an SIT is composed of the head teacher, two inclusion champions (one male and one female), two representatives of parents (if possible at least one parent of a child with disabilities, one father and one mother), two representatives of children with disabilities (one boy and one girl). Key additional stakeholders can join the SIT, depending on the agenda, e.g. a member of a disabled persons organization (DPO from The Platform), a local councillor, a social worker, a child protection focal point, an inspector, a member of the village committee, etc.

What are the responsibilities of a school inclusion team?

The SIT is responsible for supporting the inclusion of boys and girls with disabilities in terms of enrolment, attendance, participation and achievement. If children with disabilities are experiencing problems, the SIT should try to find solutions to the problems. For example, the SIT could look at:

- Wellbeing and protection of the child, with a focus on girls.
- Making sure that school environments are safe and accessible for children with disabilities, particularly girls.
- Encouraging positive attitudes among teachers and parents.
- Supporting girls with disabilities (tutoring, peer support).
- Ensuring appropriate health care, assistive devices and adapted learning material are available to children with disabilities.
- Promoting positive teacher-parent relationships.
- Helping teachers to adopt more inclusive teaching methods.
- Developing an inclusion plan for the school.
- Lobbying authorities and communities for financial and social support.

How does a school inclusion team fit in with other school committees?

Ideally the SIT should be embedded into an existing functional committee within the school (e.g. a school management committee receiving funds from local council or from the Ministry of basic Education (MINEDUB), rather than being an additional separate working group.

The SIT should meet every term and produce a short report with clear action points to be shared between participants for the following months.

Who should a school inclusion team should report to?

The SIT could share reports with the inspectorate to influence education authorities in providing technical support, budget, in-kind items, etc., but also with the regional delegations of the Ministry of Education.

The reports will also be useful for Sightsavers to provide evidence to Irish Aid that the programme is promoting inclusion within schools in Cameroon.
Questions to consider when establishing a SIT

1. How are you currently supporting children with disabilities in your school? How many children with disabilities do you have in your school at present? What information do you have about them?

2. How could your school better support children with disabilities? How can you make your school more inclusive?

3. If a SIT is set up in your school, which existing committee should it be linked to?

4. Who should participate in the SIT?

5. What should be the responsibilities and priorities of the SIT in your school?

6. What resources do you need to become an inclusive school?

Supporting girls with disabilities

The evidence shows that girls with disabilities in Sierra Leone are even less likely to go to school than boys with disabilities. They are also more likely to drop out of school early.

There are many reasons for this. Firstly, parents may be particularly unwilling to send girls with disabilities to school. This may be because they are worried their daughters may be harmed if they go to school. It may be because they consider education is wasted on girls. It may be because they think that girls are less intelligent than boys. And it may be because they believe that girls should get married after a certain age. Secondly, schools may be unattractive and threatening places for girls with disabilities. Boys may bully and tease girls. Male teachers may humiliate students and even sexually abuse girls. Lessons may be boring for girls because they are not about subjects girls are interested in. Latrines may be dirty and hard to access, with no clean, fresh, running water.

As inclusion champion, you have overall responsibility for making sure girls with disabilities are happy and successful in your school. How can you make sure your schools is inclusive for girls with disabilities? Below are some ideas for you to consider.

1. Visit homes in order to persuade the parents of girls with disabilities to send their daughters to school. Community leaders, particularly women with disabilities, can also play a key role.

2. With community members and parents, identify ways of making sure girls with disabilities can travel easily and safely to and from school. For instance, girls with disabilities could travel with a friend or relative. If they live a significant distance from school, they could take a bus.

3. With community members and parents, identify ways in which the costs of sending girls with disabilities to school can be covered. For instance, community members could decide to pay the bus fare of the girls or pay for their school uniform. Community members could also decide to provide girls with disabilities with free school lunches.

4. With your fellow teachers and community members, carry out an audit of your school to identify the ways in which it can be made more inclusive for girls with disabilities. Once you have done this, you can draw up an action plan for making your school more inclusive. Older girls with disabilities
should also be involved in this audit as they will be able to identify what is inclusive and non-inclusive about your school.

5. Set up a ‘buddy system’ in your school. This involves non-disabled girls volunteering to look after and help girls with disabilities in their classroom. Try to make sure each girl with disabilities has three to five buddies so a group of people is supporting her. (You can set up the same system for boys with disabilities in your class.)

6. Encourage child-to-child learning in your class. This involves students helping other students to learn. For instance, if a student finds it difficult to read, another student may be assigned to help her with her reading. (You should use this approach for both boys and girls.)

7. Consider setting up ‘girls clubs’ in your school. These are clubs for girls of all ages in your school (including girls with disabilities) and should be run by the female champion, another female teacher and/or female community members. These clubs provide valuable opportunities for girls to raise concerns (for instance, about bullying from boys). However, it is important that these clubs do not just become ‘talking shops’. As inclusion champion you need to make sure that actions are taken to address the concerns raised by girls.

8. Talk regularly to the girls with disabilities in your school (and also the boys with disabilities) to find out if they are experiencing difficulties. Once you have this information, you can take the necessary steps to improve the situation.

9. Treat girls with disabilities with respect and consideration. Never humiliate or embarrass them in front of others. (You should of course treat all the students in your school in the same way.)

10. Remember girls with disabilities, especially adolescent girls, are much more likely to be comfortable working alongside girls rather than boys.

11. Try to make your lessons interesting for girls as well as boys. Girls may be more interested in certain topics than others. You need to make sure girls have the opportunity to properly study these topics. Girls may also particularly enjoy working in groups with other girls. You should provide opportunities for this type of group work. Girls may prefer to make presentations with other students rather on their own. You should not force them to stand up alone in front of the class if they are uncomfortable doing so.

12. Ensure girls with disabilities receive guidance, counselling and support from female teachers in your school. If there are very few or no women teachers in your school, female community leaders can also perform this role. If girls with disabilities are having one-to-one after-school support (for instance, with reading and writing), this support should be provided by a female teacher.

13. Girls in particular require access to clean, private latrines with fresh running water. You must do everything in your power to make sure this is the case. Adolescent girls will require sanitary pads.

14. Regularly meet the parents of girls with disabilities to discuss their daughters’ progress, and provide positive messages. This will encourage parents to keep sending their daughters to school.

These are just some ideas for promoting inclusive education for girls with disabilities in your schools. We are sure you will also be able to identify some other good strategies.
6. Conclusion

At the beginning of this handbook we said that the inclusion champion has to think about two important questions:

1. How does my school need to change to become inclusive for all children?

2. How do teachers in my school need to change their teaching to make it more inclusive?

Schools do not become inclusive quickly. Inclusion is a process that takes place over time. It will take time for you and your colleagues to adopt more inclusive practices.

Inclusion involves change and to begin with some of your fellow teachers may not welcome change. It may require all of your determination, enthusiasm and persuasion to help your colleagues to adopt inclusive practices.

The job of an inclusion champion is not an easy one and you will meet many challenges along the way. There will be good times when you feel as though you are making progress, but there will also be times when you will become frustrated and you feel you are not being listened to. When difficult times come, you need to remember that you are doing something that is important and worthwhile. Your goal is to enable children with disabilities to achieve their rights and to access the education and opportunities that inclusive schools can provide.

The job of helping a school to change takes time and patience. Inclusion is a long journey that is taken step by step. We hope this book will be a good companion and a useful guide along the way.
Appendix 1

Useful additional resources: online videos

Kids like me: Disability and child protection (1.23 minutes long)
https://www.youtube.com/watch?v=3SzazN2OrsQ

Disability: How you see me (3)
https://www.youtube.com/watch?v=bwW6mYdJ7Xc

The inspirational story of 9 year old Ezra Frech – physical impairment (4.30)
https://www.youtube.com/watch?v=ekLpn4zKiNU

Fairnsquare: Making the world better for kids with disabilities (2.35)
https://www.youtube.com/watch?v=nlzMD1Kj6kE

Listen up! Children with disabilities speak out. (3.44)
https://www.youtube.com/watch?v=FjhF-pdlJ8M

In depth: education, disability and poverty (2.11)
https://www.youtube.com/watch?v=ijRU4akqobM

An inclusive school in Bangladesh (13 minutes)
https://www.youtube.com/watch?v=_9fiNgijKbA

Introduction to child rights
https://www.youtube.com/watch?v=mJggYdw3I0k

Fadzie, a young girl with a visual impairment

Understanding deafness – Jessica Le (3.27)
https://www.youtube.com/watch?v=l_EmsguJMic

Tips for teaching children with a mild hearing loss – National Deaf Children’s Society (2.45)
https://www.youtube.com/watch?v=jylb7TDn2Tk

Children with communication difficulties (1.52)
https://www.youtube.com/watch?v=ILMLzXzgB_s

Epilepsy in schools: how to deal with a tonic clonic seizure (Epilepsy in Action) (2.29)
https://www.youtube.com/watch?v=olArThAgUd8

For children with clubfoot, treatment can be changing (5.19)

Types of cerebral palsy (Cerebral Palsy Alliance) (4.23)
https://www.youtube.com/watch?v=cOfUGUNxEqU
Appendix 2

The Braille alphabet

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The finger spelling alphabet (American sign language)

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The finger spelling alphabet (French sign language)

Alphabet Manuel LSF

A B C D E F
G H I J K
L M N O P
Q R S T U V W
X Y Z

D’après Albert Tabaot
Appendix 4

How to guide a child with little or no sight

1. Offer your arm to the child. They should hold your arm just above the elbow with their fingers on the inside and thumb on the outside. Keep your arm in close to your body so that the child can detect your movements.

2. Walk so that you are half a step ahead of the child. The child should be tucked in behind you so that their shoulder is in line with yours.

3. Try and avoid uneven surfaces and walk at a speed comfortable to the child.

4. Talk to the child and give information about where you are and what's coming up.

5. Narrow spaces: When going through a narrow space, let the child know. Move your guiding arm diagonally across your back so that the child moves behind you out of danger.

6. Doorways: Approach the door with the child on the same side of the door as the hinges, open the door with your guiding arm so that your child can feel whether the door opens inwards or outwards. The child should then take responsibility for the door so that you both walk through with the door closing behind you.

7. Steps: when you are approaching a step, tell the child whether it is ‘step up’ or ‘step down’. Pause slightly before stepping up or down and the child will feel the change in arm movement.

8. When helping the child to locate a seat, guide their hand to the back of the chair. The child should then be able to sit down.