

REVIEWS

DISABILITY INCLUSIVE EDUCATION IN BANGLADESH

Majid Turmusani^{1*}

1. Handicap-Dev, Quebec, Canada (www.handicapdev.ca)

ABSTRACT

This paper is aimed at starting a debate on disability and the inclusion of children with disabilities in the public school system under the Primary Education Development Programme 4 in Bangladesh. The analysis is based on a strategic Design Note developed by USAID, with the author as consultant, and is guided by the rights perspective of the Convention on the Rights of Persons with Disabilities (CRPD, 2006), notably Article 24 on inclusive education, and the Sustainable Development Goals (SDG4) (UN, 2015).

Extensive consultations were carried out in the course of developing the Design Note. Discussions and workshops were conducted with government agencies and stakeholders, notably civil society, organisations of persons with disabilities, the donor community and human rights organisations.

Mainstreaming disability into public schooling requires a reform in the primary education system. It is necessary in order to identify, enrol, maintain and retain learners with disabilities throughout the primary cycle.

Key actions entail creating an enabling environment and focusing on overcoming attitudinal barriers in the local community and school authority; improving school infrastructure; strengthening inclusion practises, notably with adapted pedagogy, as well as consolidating policy framework, coordination and governance, in addition to empowering users. These steps will enhance targeting and screening of a wide range of children with disabilities in school as well as out of school. By contributing to improved learning outcomes, fulfilling the right to education (Article 24 of CRPD) and achieving Sustainable Development Goals (SDG4), this could be a model of good practice for other countries in the region.

* Corresponding Author, Email: consultant@handicapdev.ca or Turmusani@hotmail.com

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INTRODUCTION

According to the Constitution of Bangladesh (Article 17, a, b, c) the right to education is guaranteed by the State and measures are taken to protect human rights on the grounds of disability (Constitute Project, 2017). The Ministry of Primary and Mass Education is mandated to provide primary educational services to all children, while secondary education is provided by the Ministry of Education. There are different forms of mainstream schooling for learners with disabilities who have mild educational needs. For learners with severe impairments, the Ministry of Social Welfare provides educational and rehabilitation services through its varied special education institutions - special schools and vocational training centres that serve over 21,000 learners with disabilities, including 1500 students with developmental disabilities - along with attempts to mainstream education within the public schooling system.

Primary education and vocational training for 1,200 children is provided in 12 special schools - of which 5 are for children with visual impairments, 5 for children who are deaf, and there are 2 centres for children with physical disabilities that provide vocational training. Residential schooling is available in the main cities for under a third of these children. Jatiyo Protibondhi Unnayan Foundation, a semi-governmental organisation established by the Society Act, provides special schooling for 18,000 children with disabilities (of various types) in 62 schools, as well as for 1500 students with neuro-developmental disabilities, namely autism, in 11 schools. The Autism and Neurodevelopmental Disabilities community is active and provides schooling to a considerable number of students with developmental disabilities, along with a growing mainstreamed education service.

Despite Bangladesh's achievements in the education sector, with the Net Enrolment Rate (NER) reaching 97.9% for primary education in 2015 and gender parity attained (Annual Sector Performance Report- ASPR, 2016), many challenges remain for achieving inclusive and equitable quality education and lifelong learning opportunities for all, as set out in the Sustainable Development Goals (SDGs), notably SDG4 (UN, 2015). The number of out-of-school children in the 6-10 year age group remains high, at around 17% with a repetition rate of

6% (ASPR, 2016) and cycle dropped-out rate of around 17.5% (BBS/SID, 2015). This group of out- of-school children and drop-outs or class-repeaters includes a variety of vulnerable children, particularly those with disabilities. Among them are a number of Rohingya children with disabilities who have taken refuge in Bangladesh from violence across the border in Myanmar. Currently, most learners with disabilities who are enrolled in primary schools are those with mild disabilities and are significantly at lower rates of national and international estimates. According to the Annual Sector Performance Report (2016), the total number of students with disabilities enrolled in primary education in mainstream schools is reportedly 67,793, but there is little known about their academic profile, performance, or the overall conditions of the school. That said, upon discussion with stakeholders and based on the analysis of the situation by the Campaign for Popular Education (CAMPE, 2011, 2015, 2016), it is clear that attitudes towards children with disabilities are changing from charity to societal responsibility, and there is recognition of the need to move away from teacher-centred instruction to learner-centred pedagogy for all children. Equal rights of children with disabilities to education, however, can be further enhanced. Three areas of action can be looked at in this regard: awareness-raising campaigns, namely concerning attitudes (CSID/Disability KaR, 2005; Das, 2011, World Bank, 2013; EU/Leonard Cheshire Disability, 2014), advocacy for the identification and removal of barriers, and legal reforms.

It should be pointed out that data on disability in Bangladesh is limited and there are different estimates of numbers of persons with disabilities, constituting 0.9% - 1.4% (BBS, 2015), but all are far below internationally agreed rates. A survey conducted by the Ministry of Social Welfare in 2013 put the number of persons with disabilities in Bangladesh at 1,526,013, with nearly a quarter of a million persons having developmental disabilities. The disability prevalence among children in Bangladesh is estimated to be between 1.4 and 17.5%. This means that there are 805,000 - 10 million children with disabilities in the country (ASPR, 2017). The low disability figures in Bangladesh may be due to different methods of data collection and different definitions of what constitutes a disability. In fact, the Household Income and Expenditure Survey (HIES) 2010 included an innovative self-identifying module on disability that was based on the Washington Group Child Functioning module. However, discussions with stakeholders revealed that limited training provided to data collectors may be responsible for the low reported number of persons with disabilities. Data collectors were better able to

report moderate or severe disabilities. There was also a tendency for parents to not report certain disabilities (i.e., intellectual) due to the family's standing in the community.

The policy framework regulating this sector in Bangladesh is quite extensive and, to a large extent, in line with international standards, namely the Convention on the Rights of the Child (CRC, 1989) and Convention on the Rights of Persons with Disabilities (CRPD, 2006). As such, there are a number of comprehensive legal provisions enacted, such as the Disability Act (Disabled Person's Rights and Protection Act, 2013) as well as the innovative Neurodevelopmental Disabled Persons' Protection and Trust Act (2013) (ICI/Shuchona, 2016). In terms of education, the document of reference is the National Education Policy (NEP, 2010) which makes mention of learners with disabilities with emphasis on special education, but further regulations/orders are needed for supporting learners with disabilities.

Despite such a comprehensive legal framework, there are notable challenges in the implementation of the Disability Inclusive Education policy and practices in the areas of specialised pedagogy including curriculum (textbooks/teaching and learning materials, exams) as well as teacher education and training and infrastructure (EU/Leonard Cheshire Disability, 2014). There are also foundational challenges in targeting, screening and reaching out to children with disabilities. The latter is pertinent to policy, programme and strategy respectively.

Currently, the primary education curriculum is hardly adapted (UNESCO, 2004; Das, 2011; JICA, 2013; EU/Leonard Cheshire Disability, 2014; IBE-UNESCO, 2016) and serves mainly learners without disabilities or those with mild disabilities. Yet, there exist organised structures designated to develop a curriculum and oversee their quality and standards, such as the National Academy for Primary Education and the National Curriculum and Textbook Board. Progress continues to be made in teachers' skills development, with a number of teacher education programmes being conducted by the special education department at the Institute of Education and Research of Dhaka University and Proyash Institute of Special Education and Research under Bangladesh University of Professionals. These institutes offer different degrees and diplomas in special education. There are other training structures such as the Upazila Resource Centre at the Upazila level, as well as civil society teacher education skills development providers such as the Centre for Disability in Development, Bangladesh Rural Advancement

Committee, and others. It is important that skilled graduates from such institutions be given priority in recruitment and, for the time being, be placed in schools where children with disabilities are enrolled.

Currently, there are more children with disabilities enrolled in mainstream education than in special education settings. It can be argued that the needs of teacher education for skills development are dependent on the needs of learners with disabilities. There are 3 broad categories of needs which include:

- Learners with mild disabilities who can benefit from mainstream schooling with very little accommodation, such as the provision of simple devices (i.e., glasses, magnifier, larger print and hearing aids for students with poor vision and hearing difficulties) or by making school facilities more accessible. Currently, learners with mild disabilities can be found in mainstream schools and there is evidence of successful inclusion (ASPR, 2017). That said, this analysis aims at increasing their number significantly by providing accurate data on those who are in schools, as well as reaching out to learners with mild disabilities among out-of-school children;
- Learners with moderate disabilities who can benefit from mainstream schooling but require significant rehabilitation and accessibility standards including removal of barriers. This may include those who use a wheelchair or those requiring adaptation in the classroom as well as accessible toilets. It also includes those requiring physiotherapy and/or speech therapy, such as children with cerebral palsy; however teaching staff require sound knowledge to work with these children;
- Learners with severe disabilities who can benefit from mainstream schooling but require major changes in pedagogy. This primarily includes three categories of learners with disabilities: learners who are blind, learners who are deaf and learners with developmental disabilities (the latter may also include those with learning or intellectual disabilities or with autism).

At present this latter category of children with disabilities is being taught in special schools/institutions. Under different stages of the Primary Education Development Programme (PEDP) 1- 4, UNICEF and UNESCO with support from a number of donor partners, notably USAID, have been actively involved in improving the quality and learning outcomes, the decentralisation and the reduction of disparities in the education sector (PEDP3, 2015). As such, the

Programme addressed barriers to inclusion and focused on making schools more disability-friendly while trying to reduce gender discrimination. This emphasis on equity and quality of learning outcomes and their mutual role in achieving Sustainable Development Goals (SDG4) is demonstrated in how disability inclusive education mutually contributes to achieving targets under Primary Education Development Programme 4 and subsequently the Sustainable Development Goals (SDG4).

Given the heightened level of debate and the political will in Bangladesh to advance the cause of children with disabilities, it is time to adhere to a rights perspective to children's education based on the social model of disability (Barnes and Sheldon, 2010; WHO, 2011). Within such a philosophy, all children of primary school age are included in mainstream schooling and provided with the support they need for quality education outcomes (Ainscow et al, 2011; Barton, 2013). This is in line with Article 24 of the CRPD which requires duty bearers to ensure that children with disabilities are not excluded from free and compulsory inclusive primary education and are provided with accommodation and effective individualised support that maximises academic and social development, consistent with the goal of full inclusion. It also requires qualified and trained teachers, a specialised pedagogy and modified school infrastructure (CRPD, 2006).

The Reality of Inclusion into Mainstream Primary Education: Some Prerequisites for Learners with Disabilities

Despite noticeable progress in primary education outcomes in Bangladesh, universal access is still hampered by out-of-school children and drop-outs, both of which include a large number of children with disabilities (Mizunoya et al, 2016). Given the hard living conditions for many of them and the limited facilities and infrastructure at schools, as well as the limited number of trained teachers, the prospect for effective inclusion can be challenging. Yet, there are continued efforts to make inclusion a reality and some prerequisites towards that end are as follows:

Identification, Screening and Classification of Disabilities

To determine if there is a disability, the person needs to be screened, identified, and classified. This could be a complex process when tools and trained personnel are limited and specialised facilities are required which are currently provided

at the district level by a Chief Medical Officer. The medical report issued by the Upazila Health Complex or Government Hospital is necessary for a variety of purposes, such as for acquiring an identity card or stipend for children with disabilities (according to Law 39/2013). The official 'diagnosis' of disability qualifies persons with disabilities to receive services such as education and hence to be registered in the system.

The scope of coverage, extent and quality of existing classification services are unclear, but the Ministry of Health and Family Welfare has started a pilot training project for health personnel (mainly doctors and health workers) in 7 selected divisional Upazilas, for screening and early detection of autism and neurodevelopmental disabilities. Currently, a One-Stop-Service Centre is being pioneered with the support of the World Bank and this would resolve many challenges facing persons with disabilities in terms of information, referral and access to services needed for their rehabilitation, development and education. These 103 district level centres provide comprehensive lifecycle services including assessment and therapy (i.e., physiotherapy, speech, occupational therapy and counselling) and referrals, all of which are disseminated by the media.

While classification does not necessarily help the child to be and feel included and supported, many children need rehabilitation services and assistive devices; however their inclusion in school should not be conditional on this.

Rehabilitation Needs of Learners with Disabilities

To make effective use of education, many learners with disabilities would require to be rehabilitated in the first place. This may include the use of assistive devices such as glasses, hearing aids or crutches, therapy or treatment. Many learners with disabilities can follow mainstream schooling with little adaptation of pedagogy or school infrastructure. Equally, other learners with moderate disabilities could follow mainstream pedagogy, but require major rehabilitation support services including, for instance, artificial limbs, wheelchairs, physiotherapy or speech therapy. Such essential services can contribute to making education more effective and could lead to quality learning outcomes for learners with disabilities and contribute to achieving universal access to education. For learners with severe disabilities, a reform in pedagogy together with a shift in mindset is needed, to make it more specialised to their educational needs.

Currently, rehabilitation services are provided by the Ministry of Social Welfare

and the Ministry of Health and Family Welfare, as well as by NGOs such as the Bangladesh Rural Advancement Committee's Limb and Brace Fitting Centre, Centre for the Rehabilitation of the Paralysed and Centre for Disability in Development. Other rehabilitation services are provided by Jatiyo Protibondhi Unnayan Foundation/Ministry of Social Welfare and 103 One-Stop-Service Centres at district level throughout the country.

For children with disabilities in school to qualify for orthopaedic services, they need to apply directly through the School Management Committee. There is a specific budget allocated for that purpose (50,000TK per Upazila – equivalent to US\$ 600). This small amount covers a limited number of children who need secondary assistive devices. Among challenges to rural users are maintaining devices, repair issues and the need for regular replacement due to children growing rapidly. Such challenges may be overcome by local solutions such as Appropriate Paper Technology which is a cost-effective local-based technology that provides supplementary solutions for various rehabilitation needs of children with disabilities, mainly concerning creative alternatives to design, maintenance and spare parts (Hinchcliffe, 2007; Westmacott, 2015). Although Appropriate Paper Technology has been introduced in Bangladesh, its application remains on a limited scale.

Given the rural context of many local communities in Bangladesh, Community Based Rehabilitation may provide an innovative solution for reaching children with disabilities in remote settings and providing them with quality support services related to inclusive education. This structure has the potential of providing complementary inclusive education services such as home schooling. Community Based Rehabilitation is a strategy for community development focusing on rehabilitation, equal opportunities and inclusion of persons with disabilities. It can be considered as a comprehensive approach in supporting the inclusion of learners with disabilities in schools. Within Community Based Rehabilitation, both the community and individuals are considered as equal partners in the rehabilitation process. The needs, priorities and resources of the local community and that of persons with disabilities are defined locally. The key words in Community Based Rehabilitation are: awareness-raising to overcome attitudinal barriers; capacity building of the local community as well as participation and referral services (Turmusani et al, 2002; Hartley, 2006; WHO, 2010; Turmusani, 2017).

According to the Community Based Rehabilitation Matrix, there are five

components that work together under this strategy. These are: inclusive education, livelihood, health, social and empowerment. Examples of interplay between components include: how health component (i.e., assistive devices) contributes to the rehabilitation and preparedness of children with disability to receive effective education or how empowerment component helps in raising awareness and advocacy on rights of children with disabilities to inclusive education.

The Community Based Rehabilitation approach is more in line with actual inclusion and it works because Community Based Rehabilitation works with the community as a whole as well as the individual child. That tends to include collaboration with local schools.

The Community Based Rehabilitation approach is already in operation on a smaller scale in rural Bangladesh. For example, under the Disabled Rehabilitation and Research Association's health and inclusive education programmes, 200 Community Based Rehabilitation workers in 30 districts are trained to ensure quality services (DRRA, 2017).

Research Agenda, Disability Data and Evidence-Based Knowledge

Despite a growing capability in education sector data management in Bangladesh, evidence-based knowledge on the situation of learners with disabilities is still limited regarding the size of this population as well as the reality of their school inclusion, learning outcomes and community life. Data on disability in general is not accurate and there are different estimates of persons with disabilities, but all are far below international rates constituting 0.9% - 1.4% (BBS/SID, 2015; BBS, 2016). The low figures for prevalence of disability in Bangladesh may be due to using different methods of data collection and different definitions of what constitutes a disability.

Pertinent to this discussion is the importance of strengthening comparable data at all levels (*mezzo*, *micro* and *macro*). The Washington Group on Disability Statistics has the potential to provide such comparable data and can be linked to a thematic survey and national census accordingly (Altman, 2016). Although known for its simple application and accuracy, the Washington Group requires that considerable training be provided to data collectors on disability definitions and identification of invisible disabilities. The short set of questions of Washington Group may be appropriate for census data. These questions concern difficulties the

person experiences in doing certain activities including: difficulties in seeing even if wearing glasses; difficulties in hearing even if wearing hearing aid; difficulties in walking or climbing steps; difficulties in remembering or concentrating; difficulties with self-care; difficulties in communication (understanding or being understood). These are measured on a scale of effort ranging from 'ability to perform the task' to 'complete difficulty'.

An example of a well-running database can be seen in the Education Management Information System – which is a form of administrative data collection used to monitor students and schools. For effective management, a national database can be created on diverse children and their wide range of educational needs from line ministries. Data on disability can be established concerning the rehabilitation needs of children with disabilities, accessibility standards in schools, public services and roads, accessible transport, accessible Information and Communication Technology, etc. It is important that all databases be linked to a central system as well as to the Bangladesh Bureau of Statistics and Ministry of Planning.

Upazila Resource Centre

With one of the largest primary education systems in the world, a certain level of centralisation is necessary to ensure standards, competence and accountability. Yet, the learning process takes place at the schools' level in small local communities. To bridge the gap between different layers of authorities from Directorate of Primary Education at the central level to School Management Committee at the school level, a linking chain has to be found where information and competence flow smoothly from one structure to another. This role is assumed by the Upazila Resource Centre, a structure at sub-district level representing the nearest education authority to schools.

In addition to its supervisory role, the Upazila Resource Centre plays a vital role in transferring knowledge and skills to schools. As such, its role in building competence in disability inclusive education is crucial. Its officers can be trained on thematic disability inclusive education and may serve as specialists in the subject area when necessary. They can provide training including sub-cluster training to mainstream teachers/principals, monitor their performance and report information to the Directorate of Primary Education through the Education Management Information System.

An area for supporting teachers who have learners with disabilities in their classroom is the management of an Individual Education Plan, including its development and implementation. An Individual Education Plan is based on specialised teaching and is linked to adapted pedagogy which includes the curriculum and teaching and learning materials. It measures the capacity and potential of learners with disabilities for achieving education goals set out in the curriculum in a way comparable to their peers, by using adapted methods of learning.

Typically, the Individual Education Plan assesses the level of existing competence for learning the new competence, identifies available and required resources (i.e., adapted teaching and learning materials) to help learners acquire the new skill and determines an appropriate method of skill acquisition and a timeframe to make this happen. Yet, when it comes to learners with disabilities, tasks such as 'listening' have a prerequisite of being able to hear in the first place. For those who are hard of hearing or deaf this means using Bangladeshi sign language in order to develop this competence. Methods of skill acquisition may include dividing the competence into components or smaller steps to facilitate its acquisition, extra time for repetition or using specific teaching and learning materials such as geospatial forms.

This is not an impairment focused approach, but rather a recognition that in inclusive education the school system and curriculum are redesigned based on the needs of ALL learners, with and without special needs (Hehir et al, 2016). In order to accommodate all learners with disabilities, a reform in the system is needed and that requires specialised pedagogy for learners with more substantial educational needs, such as those with severe disabilities. This is not a medical categorisation of impairment, but rather a pragmatic understanding of the pedagogical needs of this group that would otherwise be forgotten if not made explicit. It may be especially true for a group of children with more complex neurodevelopment disabilities which require specific attention and a clear diagnosis made by a multidisciplinary team, and not only by a medical doctor. Therefore, while all types and degrees of disabilities are targeted in this Design Note, those with significant educational support are singled out due to their need for a specialised and adapted pedagogy.

Design Note's Objectives and Description of Activities

Given the progressive nature of disability inclusive education, the Design Note's objectives are numerous but they focus on improved quality of learning outcomes and consequently on social participation and inclusion (Turmusani and Fougeyrollas, 2018). This is to recognise that the child has the right to be included FIRST. Social participation is a prerequisite for learning effectively and reaching learning outcomes.

The first objective of the Design Note concerns significantly increasing the number of children with disabilities who are receiving primary education in Bangladesh, with a target of 60% (equal to 600,000 out of an estimated 1 million school age children) achieved by the end of the Primary Education Development Programme 4. This means increasing the number of learners with disabilities by adding 2 students per school annually. This attainable target aims at increasing access of children with disabilities by adding fewer than 10 children per school over a period of 5 years (lifecycle of the project). The ultimate goal is to achieve 100% coverage rate by enrolling all estimated 1 million children with disabilities by 2030 in line with SDGs agenda.

Other objectives include: incorporating appropriate disability inclusive education modules into teacher education programmes for teachers of mainstream schools; adapting primary education curriculum in all subject areas including Bangla and Math; and making text books and teaching and learning materials available in Braille, sign language and simplified texts for learning difficulties, as well as adapting assessments and exams, and making the school environment disability-friendly. Specifically, this includes accessible premises such as the entrance, playground and interior design of classrooms, as well as accessible water, sanitation and hygiene facilities, including gender-segregated toilets and drinking water.

There are a wide range of activities which could be proposed to meet the above objectives. However, the success of proposed action is largely determined by the environment within which it operates. An *enabling environment* for education along with favourable conditions is likely to help in the implementation of activities. This includes, for example, the government's commitment and political will, the firm engagement of development partners in supporting the sector, and the active involvement of the local community, notably organisations of persons with disabilities. A good strategy towards that end is one that focuses on *identification*

and removal of barriers (i.e., obstacles related to accessibility, attitudinal barriers or discriminatory policy and practices...), provides individualised educational support to learners and one that aims at empowering users to fulfil their rights.

Target Groups

Given the vastness of Bangladesh's education system, target groups can include a wide range of constituents, but their two main categories include:

Rights holders - These are the primary constituents of rights and they have entitlements by the power of the law. They include:

- Primary beneficiaries - learners across the disability spectrum.
- Secondary beneficiaries – peers, teachers, parents, organisations of persons with disabilities, local communities,

Duty bearers - They are typically state agencies that provide services mandated by laws, but this may also include non-state service providers. They include:

- Line ministries - primarily Ministry of Primary and Mass Education / Directorate of Primary Education, Ministry of Education, Ministry of Social Welfare, Ministry of Health and Family Welfare, Ministry of Women and Children Affairs, Ministry of Labour.
- Other service providers - such as Bangladesh Rural Advancement Committee, Campaign for Popular Education and other NGOs

Components of Disability Inclusive Primary Education

Based on international standards, namely CRPD, the following are suggested components for Disability Inclusive Education in Bangladesh under PEDP4. For the sustainability of action, it is important that these are implemented under a sector-wide approach with the Government of Bangladesh taking the leading role and organisations of persons with disabilities actively involved as partners and advisors.

- a) Increasing access of children with disabilities to mainstream public education through improving their reception at schools. This includes, for example, simplification of procedures of registration and exemption of fees.
- b) Elimination of barriers linked to access to education such as child labour (MLE, 2010, 2013) and early marriage of girls (UNICEF, 2015).

- c) Reinforcing the capacity of the Cell on Inclusive Education, operating under the Directorate of Primary Education at the Ministry of Primary and Mass Education. As a policy planning unit, the role of the Cell on Inclusive Education can be strengthened in overseeing regulations, coordination and monitoring, as well as in providing technical support for disability inclusion to different divisions of the Directorate of Primary Education.
- d) Skills development of teachers.
- e) Adapted curriculum, textbooks, teaching and learning materials and exams.
- f) Strengthening the existing policy framework including monitoring the implementation of article 24 of CRPD.
- g) Reaching out to children with disabilities who are out of the school system through Community Based Rehabilitation. A conducive approach for reaching the out-of-school children may be characterised by following strategic focus: being preventive in nature; proactive in focus; referral based and rights proclaimed.

In Practical Terms

To conclude, pending the full implementation of the disability-inclusive education Design Note into the Directorate of Primary Education under Primary Education Development Programme 4, it is important to continue serving the existing population of learners with disabilities who are found in schools. It is equally important to widen opportunities for increasing universal access (Sustainable Development Goals - SDG4) to other children with less educational needs (mild/moderate disabilities) to enter and/or re-enter schools, given that their accommodation in school is often cost-free. For this to happen, changes may be necessary at different levels:

- At policy level - until relevant policy on 'targeting' is elaborated or updated, regulations (i.e., circulars, orders, etc.) issued by the Ministry of Primary and Mass Education/Directorate of Primary Education concerning the right to inclusive education of all children, including those with disabilities, can be effective and may open up opportunities for the inclusion of this marginalised group.
- Attitudes of teachers and the Head teacher - a positive attitude on the part of teachers and Head teachers towards disability and disablement can greatly

ease the learning process of children with disabilities and help in their inclusion. An introductory teacher education guide on how to identify and include learners with disabilities into mainstream classrooms can be useful as it would provide needed guidance on the issue until the curriculum/textbooks/teaching and learning materials /exams are adequately revised and/or developed.

- School infrastructure - although water, sanitation and hygiene are being made accessible under the Primary Education Development Programme 4, it is important to ensure that accessibility standards are being respected in the design and execution of work according to the National Building Code (NBC, 2008). That said, learners with disabilities require more than accessible water, sanitation and hygiene facilities. Schools with disability-friendly infrastructure also include: accessible buildings (i.e., secured ramps to the entrance of school and classroom/facilities); interior design of classrooms and safe playgrounds. Much of the above alterations can be limited and may cost very little, especially if included in the universal design (CHRC, 2007) of new facilities. For example, a library on the second floor requiring a lift or a ramp can be moved down to the first floor, and this would enable learners with mobility challenges to access facilities more easily.
- The family and local community - bringing about social change regarding disability and children with disabilities requires collective effort by everyone, including the individual, family and local community. As a main stakeholder, family collaboration in the learning process cannot be overemphasised and so too is the collaboration of the local community where schooling and learning process takes place. It is important that attitude change happens at grass-roots level and within the community so that action is sustainable.
- Strengthening linkages with line ministries and other stakeholders and setting up coordination and collaboration mechanisms to carry out certain activities proposed in the Design Note, including that of identification, assessment, rehabilitation and education of children with disabilities. For example, collaboration between stakeholders for the provision of complementary rehabilitation services such as assistive devices.
- Enhancing the capacity of the Cell on Inclusive Education at the Directorate of Primary Education - despite a competent workforce, currently there are no staff members appointed as technical reference on disability issues. This may

hinder the ability of this unit to mainstream disability into its own inclusive education programme as well as to different divisions of the Directorate of Primary Education, not least concerning its role as policy planner, monitor or provider of technical support to decentralised structures in districts or at the Upazila level. Training and skills development on disability inclusive education and oversight issues is therefore necessary and can best be embedded in larger inclusive education training programmes.

- Improving evidence and knowledge base - creating a unified national database (which includes thematic issues such as disability and rehabilitation) within the Education Management Information System and making effective use of Information and Communication Technology in education for enhanced pedagogy as well as for data management, monitoring and reporting. It is important to link the identification of children with disabilities to the monitoring system and as such collect disaggregated data on children with disabilities and key indicators of their school inclusion. The Washington Group on Disability Statistics has the potential to provide such comparable data and can be used among good research practices.

The continued leadership of USAID (USAID, 2017) in promoting the rights of learners with disabilities for quality and equitable education is highly commendable but remains limited. A sector-wide approach with Government of Bangladesh taking the leading role and organisations of persons with disabilities actively involved as partners and advisors may lead to fruitful results. Given the context, it is recommended that the community of donors (i.e., development partners) continue promoting the inclusion of learners with disabilities in primary education in Bangladesh under their respective sponsored/supported components of Primary Education Development Programme 4, following a twin-track approach to include mainstreamed interventions across Primary Education Development Programme 4 as well as targeted projects. A focus on empowering organisations of persons with disabilities and enhancing their role in bringing about social change and reaching out-of-school children is an area that could be explored further.

To raise awareness on the issue, create energy and maintain momentum, it is important to increase the visibility of persons with disabilities who are recruited in the primary education system at all levels, from schools up to key positions at the Ministry of Primary and Mass Education and Directorate of Primary Education.

The continued dialogue between development partners, government and stakeholders through disparity working groups, debates and sharing successful models of good practices, give an opportunity to influence policy and practices. For effective dialogue, users' voice (learners with disabilities) can add richness and insights to the conversation and enhance its quality of inclusiveness.

CONCLUSION

While there are different levels of school integration, it is important to note that schools for ALL help greatly in overcoming the exclusion of marginalised groups, but they do not necessarily guarantee the inclusion of learners with disabilities. Disability inclusion requires a reform in the school system to make it geared towards the specific needs of learners with disabilities (improved capacity to identify, enrol, maintain and retain learners with disabilities throughout the primary cycle).

It is important to recognise that the provision of quality education for learners with disabilities requires the recognition of disability as a cross-cutting issue throughout the Primary Education Development Programme 4 components and sub-components including areas such as gender, language, education in emergency, water, sanitation and hygiene, school infrastructure, teacher education, curriculum development and decentralised practices. It has much to do with the quality and efficiency of educational services as well as governance and management structure of the primary education system. Unlike other marginalised groups (i.e., children living in poverty or in areas hard to reach) whose inclusion into the education system requires minimum changes, learners with disabilities would require a reform in the system to become more accommodating to their educational needs. A shift in perspectives is therefore needed towards learner-centred pedagogy and this involves investment in infrastructure, skills and knowledge and inclusion practices. In fact, inclusive pedagogy can be beneficial to everyone in the classroom and not only to learners with disabilities. For example, working in small groups is likely to increase the participation and involvement of all students in various classroom activities. Equally, sign language can be acquired by all learners and can be used effectively as a communication tool. All this ought to take place under a human rights framework, being guided by the Convention on the Rights of Persons with Disabilities (CRPD) and other international treaties in which Bangladesh has ratified and harmonised its national laws accordingly. CRPD (Article 24) is therefore the point of reference against which to measure progress targeting inclusive education for learners with disabilities.

In line with an inclusive approach to primary education, all types and degrees of disabilities are included in this Design Note. The focus is placed on changes that need to happen in the education system that will help improve education outcomes for the full range of children with disabilities. For example, ensuring education spaces adhere to building accessibility standards (for any and all children with disabilities ranging from mild to severe); facilitating the learning and use of Bangladeshi Sign Language (so that hearing and all children within the range of mild to severe hearing disabilities can benefit); integrating 'differentiated learning' into core teacher training programmes so that children with and without learning disabilities can benefit.

To include some or all of the above groups into mainstream classroom education, a reform in the primary education system is needed, starting by creating an enabling environment and focusing on overcoming attitudinal barriers in the local community and school authority, improving school infrastructure and enhancing inclusion practices including pedagogy, policy, governance, and by changing attitudes. Together this may help improve learning outcomes, fulfil the right to education and achieve Sustainable Development Goals (SDG4).

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