

Project Evaluation Report

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Notes:

Some annexes listed in the contents page of this document have not been included because of challenges with capturing them as an A4 PDF document or because they are documents intended for programme purposes only. If you would like access to any of these annexes, please enquire about their availability by emailing uk_girls_education_challenge@pwc.com.

Endline Evaluation Report

GEC-T Inclusive Education in Kenya's Lake Region
implemented by Leonard Cheshire



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March 2022

One South, LLC

Using information to understand and deliver social change



One South produced this report for Leonard Cheshire as part of the Endline Evaluation of the GEC-T Inclusive Education Project implemented in Kenya's Lake Region.

The Endline Evaluation was carried out by Tariq Omarshah, Eva Bolza-Schünemann, James Gathogo, and Emily Goldstein from One South, LLC.

Data was collected by Health Poverty Action, One South's in-country partner. The evaluation relied on data collected from a cohort of girls with and without disabilities and their households. Girls and their parents and caregivers were tracked in project and non-project areas since 2017.

Data collection for this evaluation took place between October 2021 and January 2022.

The findings presented in this report represent the opinions of the authors and do not represent the opinions of Leonard Cheshire or any project staff members.

The evaluation was managed and facilitated by Rachel Gondwe, Samuel Katembo, Edgar Makona and Kevin Odhier from Leonard Cheshire. The report benefited from additional feedback provided by Sue Philpott, Rosanna Singler, and Hedaya Chunge-Odhiambo and Aimee Reeves.

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Table of Contents

1. Executive Summary	5
2. Project Summary.....	15
3. Methodology.....	19
4. Intermediate Outcome Findings	23
ATTENDANCE	23
ACCESS TO QUALITY EDUCATION	35
COMMUNITY ATTITUDES	52
SELF-ESTEEM	65
POLICY ENVIRONMENT	74
5. Ultimate Outcome Findings.....	96
LEARNING	96
TRANSITION	110
6. CONCLUSION AND RECOMMENDATIONS	123
Annex 1: Project Design and Interventions	130
Annex 2: Endline evaluation approach and methodology.....	142
Annex 3: Learning Outcome Data Tables.....	156
Annex 4: Characteristics and Barriers	157
Annex 5: Logframe	158
Annex 6: Outcome Spreadsheet	158
Annex 7: Beneficiaries tables.....	158
Annex 8: External Evaluator’s Inception Report	162
Annex 9: Data Collection Tools Used for Endline.....	162
Annex 10: Datasets, codebooks and programs.....	162
Annex 11: Learning test pilot and calibration	162
Annex 12: Sampling Framework.....	162

List of Acronyms

BOM	Board of Management	PTA	Parent Teacher Association
C2C	Child-to-Child Club	RCT	Randomized Control Trial
COVID-19	Coronavirus Disease 19	SD	Standard Deviation
CPD	Continuous Professional Development	SPED	Special Educational Needs
CWG	County Working Group	SPIP	School Performance Improvement Plan
EARC	Education Assessment and Resource Centre	SRH	Sexual and Reproductive Health
EGMA	Early Grade Mathematics Assessment	SRHR	Sexual and Reproductive Health Rights
EGRA	Early Grade Reading Assessment	STEM	Science, Technology, Engineering, and Mathematics
F	Female	TOT	Trainers of Trainers
FCDO	Foreign, Commonwealth, & Development Office (UK)	TVET	Technical and Vocational Education and Training
FM	Fund Manager (GEC Fund)	UK	United Kingdom of Great Britain and Northern Ireland
GBV	Gender-Based Violence	UN	United Nations
GEC	Girls' Education Challenge	UNESCO	United Nations Educational, Scientific, and Cultural Organization
HHS	Household Survey	UNICEF	United Nations Children's Fund
ICT	Information and Communication Technologies	WASH	Water, Sanitation, and Hygiene
IO	Intermediate Outcome		
M	Male		
MEL	Monitoring, Evaluation and Learning		
MGCubed	Making Ghanaian Girls Great!		
MoE	Ministry of Education		
NaSiA	National Schools Inspectorate Authority		
OOS	Out-of-school		
OOSC	Out-of-School Children		
OOSG	Out-of-School Girl		
PSEAH	Protection from Sexual Exploitation, Abuse, and Harassment		

1. Executive Summary

The *Inclusive Education in Kenya's Lake Region Project* was implemented by Leonard Cheshire through funding from the Girls Education Challenge, the largest fund for girls education in the world. The project supported 2,100 girls with disabilities and 677 boys with disabilities¹ and project ran from 2017 – 2022. The project worked in 83 educational institutions including 50 primary schools, 25 secondary schools and 8 vocational institutions across 5 sub-counties of the lake region: Kisumu East, Siaya, Homabay, Migori, and Kuria East.

The project aimed to:

- Support girls with disabilities to progress within mainstream primary schools and to successfully **transition** to secondary education and vocational institutes
- Support girls with disabilities to improve their **learning outcomes** in literacy and numeracy
- Support the Government of Kenya, local authorities, and structures to take forward inclusive education practices to ensure the **sustainability** project achievements

EVALUATION BACKGROUND²

The evaluation assessed the project's contribution, effectiveness, relevance, sustainability, and value for money. It adopted a mixed-methods approach, which incorporated a quantitative component tracking a cohort of girls with disabilities in project schools and a cohort of girls without disabilities in non-project schools.

The endline tracked a cohort of 327 girls with disabilities in project schools and 259 girls without disabilities in non-project schools across target regions. These cohorts were tracked to understand changes in key outcomes between Midline and Endline and to respond to a set of agreed evaluation questions.

Originally, the project aimed to close gaps between girls with disabilities and girls without disabilities in key outcomes. However, after the start of the COVID-19 pandemic, the project

¹ This is based on the 2019 census of direct project beneficiaries conducted by the project's MEL Team

² The full evaluation methodology is described in the methodology section and in the evaluation inception report (Annex 8).

adjusted expectations, focusing on supporting girls with disabilities to sustain outcome achievements.

The evaluation administered 264 teacher surveys and conducted 50 lesson observations³ with teachers trained by the project and teachers in non-project schools to understand changes in attitudes and inclusive education practices.

Qualitative sessions were conducted with project stakeholders including teachers, parents, EARC officers, headteachers, Board of Management (BOM) members, members of County Working Groups (CWGs), and project staff. To understand the project's contribution to policy outcomes, the evaluation team conducted an in-country workshop with policy stakeholders.

While some boys with disabilities were supported by the project, the quantitative sample does not include boys due to resource limitations. This decision was made in consultation with the GEC fund manager and in alignment with the wider portfolio-level focus on supporting girls. Boys with disabilities were sampled through qualitative sessions and findings relating to boys are discussed within the body of the report.

The evaluation team, with the support of the project, organized a validation session to gather wider stakeholder feedback on key findings. Validation took place in Kisumu and included government officials, headteachers, teachers, EARC officials and other project stakeholders. Findings from validation discussions have been integrated throughout the report.

KEY FINDINGS

To achieve its ultimate outcomes, the project target several intermediate outcomes supporting **attendance** levels of girls with disabilities, promoting **the adoption of inclusive education practices** by teachers in schools, supporting girls' **self-esteem** through supports in and out of school, supporting changes the inclusive education **policy environment**, and promoting improved **attitudes and practices at the community level** towards children with disabilities.

ATTENDANCE

- The project supported girls with disabilities to attend school as frequently as girls without disabilities, across the three time periods attendance records were reviewed from 2019-2021.

³ Data has been collected as part of Phase 2 and will still be analyzed

- Participation and engagement in Child-to-Child Clubs and better access to sanitary wear, transport, assistive devices, bursaries, and scholastic materials supported girls with disabilities to attend school.
- Being a young mother, having given birth, and having a high chore burden suppressed the attendance levels of some girls with disabilities.

TEACHING QUALITY (INCLUSIVE EDUCATION)

- Teachers trained by the project demonstrated an understanding of inclusive education at Endline and identified several strategies they have put in place to support children with disabilities in lessons.
- After receiving training from the project teachers reported: developing and implementing Individual Education Plans (IEPs), providing children with disabilities with extra time on assessments and tasks, providing individualized contact time to children with disabilities, intentionally adjusting seating arrangements in the classroom to accommodate for children who experience difficulty hearing and seeing, increasing the use of manipulatives, and modifying curriculum expectations to meet children at their ability levels.
- Lesson observations indicate that the project supported teachers to adopt inclusive education practices in the classroom. Lessons observed at Endline were more likely than lessons at Midline to be *planned and executed with the learning of all students in mind*⁴, to *provide opportunities for students to learn collaboratively*⁵, and to *encourage the participation of all children in the lesson*⁶, all at statistically significant levels.

⁴ Definition: 1.1) There is a lesson plan with clear learning objectives available for the lesson 1.2) The learning objectives for the lesson are made clear to the students at start of lesson 1.3) Teacher is able to explain adaptations made for learners with disabilities and they are plausible

⁵ Definition: 2.1) The lesson used at least one of these strategies: paired work, group work, play-based approaches, student presentations 2.2) Min of 2 of these must be met 2.2.1) Teacher allows students to help each other to answer or solve problems 2.2.2) Lesson plan included opportunities for student to work in groups 2.2.3) Teacher changed around seating during the lesson e.g. changing groupings from/to mixed ability

⁶ Definition: 3.1) Min of 2 of these must be met: 3.1.1) Teacher asks students how they arrived at the answer 3.1.2) Teacher asks questions to challenge students of all levels 3.1.3) Teacher provides thinking time before children respond to questions 3.2) Teacher speaks to students in a friendly tone 3.3) Min of 1 of these must be met 3.3.1) Teacher made any of the following adaptations: use of visual aids, word cards, manipulatives, large print, simplified text, alternative work sheets 3.3.2) Teacher provides prompts or individual assistance to children who struggle during the course of the lesson

- Inclusive practices resulted in girls with disabilities feeling more supported by their teachers. 90.3% of girls with disabilities feel their learning needs are supported by their teachers at Endline compared to 85.7% at Midline and 68.9% at Baseline.
- Despite notable improvements, teachers reported that they still face several barriers to adopting inclusive education practices including large class sizes, short lesson durations, and pressures from the Ministry of Education to achieve higher mean scores, higher exam results, and higher pass rates.
- The project has supported teachers to move away from using corporal punishment to discipline girls with disabilities, with evidence that this practice has reduced between Midline and Endline. However, 19.7% of girls with disabilities still report being physically punished by their teacher in recent weeks.

SELF-ESTEEM

- The project supported a larger proportion of girls with disabilities to sustain and improve their self-esteem between Midline and Endline, than girls without disabilities in non-project schools.
- Qualitative findings suggest that self-esteem was supported by increased socialization between children with and without disabilities in Child-to-Child Clubs and through a more inclusive school environment.
- Teachers report that celebrating the success of children with disabilities and meeting them at their ability level supported their self-esteem development and encouraged them to continue learning and challenging themselves.
- Facilitators of Child-to-Child Clubs also reported that increased engagement with their peers, supported children with disabilities to socialize more, be willing to try new things, and improve the way they saw themselves in relation to others.
- Girls with disabilities supported by the project see secondary school as a means to access better career opportunities and several explained how their aspirations had changed since they had received support to attend secondary school.
- Several girls with disabilities described clear career goals and ambitions, signalling that project activities have them to have similar aspirations to their peers. Girls with disabilities want to go to university, become teachers, lawyers, doctors, fashion designers, hairdressers, actors and pilots. However, some girls with disabilities who had become young mothers underwent goal shifts, limiting some of their aspirations for the future.

COMMUNITY ATTITUDES

- Girls with disabilities were more likely to report that their parents engage positive actions to support their education at Endline than at Midline at statistically significant levels.
- 81.7% of girls with disabilities at Endline reported that their parents took at least 2 positive actions to support them to stay in school. Positive actions included providing them with the necessary materials and support and speaking out to improve how the community treats children with disabilities.
- Girls with disabilities whose parents were PSG members were more likely to report that their parents took at least two positive actions to support them to stay in school, compared to girls with disabilities whose parents were not PSG members. This suggests that PSGs are an effective intervention for encouraging parents to take actions to support their children.
- Qualitative findings also suggested that the project's training encouraged parents to use alternative discipline techniques and move away from using corporal punishment to discipline their children.
- Community sensitization has helped make communities safer for children with disabilities, but girls with disabilities remain at increased risk of sexual violence, according to qualitative evidence.

POLICY

- The project supported the standardization of quality standards for EARCs. Minimum Quality Standards for EARC Services were adopted in November of 2021.
- The project provided technical advice and resourcing to support the passing of the Sector Policy on the Provision of Education and Training for Learners and Trainees with Disabilities⁷ in 2018.

⁷ Leonard Cheshire Disability, VSO Kenya, & Sense International. (2018). *An Easy to Read Version of the: Education and Training Policy and Implementation Guidelines for Learners and Trainees with Disabilities*. Ministry of Education. <https://www.education.go.ke/index.php/downloads/file/516-special-needs-education-guide-2018>

- At the county level, the project achieved its target to facilitate the introduction of seven policies supporting inclusive education and children with disabilities in county governments.
- In schools, the project supported sustained changes with project schools being more likely than non-project schools to budget for infrastructure improvements to promote access for children with disabilities and more likely allocate additional human resources to support inclusive education practices.

LEARNING

- The project supported girls with disabilities to improve their literacy levels between Baseline, Midline and Endline through the adoption of inclusive education practices by teachers. Girls with disabilities improved literacy scores by 10% between Baseline and Midline and 7% between Midline and Endline, on average.
- Several specific practices supported girls with disabilities to improve their literacy including addressing girls' individual learning needs, providing them with extra time on assessments and exams, supporting teachers to be more accessible to children with disabilities, improving community attitudes towards children with disabilities, and having a member of the household who was part of the male mentorship programme.
- Although it is likely that the project supported improvements in numeracy, evidence linking numeracy improvements to project activities is less robust than evidence linking literacy improvements to project activities and the adoption of inclusive practices.
- Girls with disabilities improved their numeracy scores by 16% between Baseline and Midline and 8% between Midline and Endline, on average. However, teachers demonstrated ongoing gaps in knowledge and resources for teaching abstract math concepts at higher levels.

TRANSITION

- At Endline, girls with and without disability were equally likely to successfully transition. Between Midline and Endline while transition rates decreased for girls without disabilities, the project was able to support girls with disabilities to maintain their transition rates. While at Midline, there was a statistically significant association between experiencing a successful transition and not having a disability, at Endline, this was no longer the case and both groups transitioned at similar rates.

- Teachers trained by the project report that inclusive education practices, role models, and encouragement has supported children with disabilities to successfully transition within school and to secondary school.
- Girls with disabilities are more likely at statistically significant levels to transition to vocational training than girls without disabilities. The project focused on raising the visibility of this transition pathway through career fairs at key transition points. Several teachers also outlined how they were equipped by the project to present vocational training as an alternative pathway for some children with disabilities.
- Several factors supported girls with disabilities to experience successful transition, validating central project assumptions. Girls with disabilities who felt respected by members of their communities, girls with disabilities were member of a Child-to-Child Club, and girls with disabilities who improved their attendance outcomes, were more likely to experience a successful transition between midline and endline at statistically significant levels.
- However, there is a statistically significant association between being out of school and having a disability according to Chi-square tests for association. 66.7% of girls with disabilities who are out of school at Endline have been pregnant compared to 4.1% of girls with disabilities who are in school or in vocational training. These findings indicate that girls with disabilities who have been pregnant are at increased risk of drop-out.

RECOMMENDATIONS

While the project has ended, the evaluation team would make several recommendations to education sector stakeholders working to improve quality education outcomes for girls with disabilities in Kenya's lake region in the future:

- 1) **Continue to provide children with disabilities opportunities to socialize with children without disabilities outside of the classroom.** Child-to-Child Clubs supported girls with disabilities to develop social skills and improve their self-esteem between Midline and Endline. Qualitative evidence suggests club settings also supported girls' motivation to attend and participate in school. In addition, Child-to-Child clubs were effective mechanisms to promote attendance and transition outcomes according to quantitative analysis. Education sector stakeholders working in the lake region should continue to provide opportunities for girls with disabilities to socialize with their peers, as these are effective avenues to support key education outcomes based on evaluation evidence.

- 2) **Strengthen safeguarding mechanisms at the community level for children with disabilities to counter the risk of sexual violence and continue to promote sexual and reproductive health messaging for girls with disabilities given effects of teenage pregnancy on drop-out.** Qualitative evidence suggests that girls with disabilities face increased risk of sexual violence in their communities. In addition, girls with disabilities who are out of school were more likely to have been pregnant at some point, suggesting that strategies to promote SRH knowledge and prevent early pregnancy should continue to be delivered to girls with disabilities in target regions.
- 3) **Advocate for reduced class sizes and increased lesson duration.** Teachers indicated that the length of lessons is too short to meet the curriculum expectations, particularly when adopting inclusive education strategies that require additional time to implement effectively. Teachers reported that although they have made improvements by using these strategies, they are not able to meet existing expectations for children with or without disabilities. As several of these approaches require individualized approaches for children with disabilities, curriculum delivery is hampered by large class sizes. Education sector stakeholders should advocate for longer lessons, smaller class sizes and/or professional teaching assistants to support teachers to effectively deliver the curriculum in an inclusive manner.
- 4) **Advocate for changes to teacher and school performance review processes within the Ministry of Education for grades which have not rolled the CBC, and to the Teacher Performance Appraisal Directorate to prevent teachers from being disincentivized to implement inclusive practices. Consider raising awareness of teacher and school appraisal processes to promote continued adoption of inclusive education strategies.** While there is some evidence that the Ministry of Education is interested in the number of children with disabilities enrolled in schools, current school and teacher performance review processes evaluate performance with regards to academic outcomes, particularly for target grades in which the competency-based curriculum has not been rolled out. According to reports from teachers and school stakeholders, pressures to meet performance indicators disincentivize teachers from adopting inclusive practices as they work to raise school and class averages to align with expectations. Some teachers in validation also indicated that their peers are not aware of changes made to the appraisal processes and wider awareness raising on this, would promote the adoption of inclusive practices.
- 5) **Strengthen modules on “ableism” in teacher trainings on inclusion to support the empowerment of children with disabilities.** While teachers demonstrated a

clear understanding of inclusion and the strategies to promote inclusive education, language used by teachers indicated that ableist mindsets are still evident. Teachers view children without disabilities as “normal” and “able”. While these attitudes may not affect the adoption of inclusive practices, language and framing on inclusion influences the extent to which children are empowered and feel capable. Future activities should strengthen learning on these concepts to promote inclusive language. Some teachers also have the perception that children with disabilities “play the victim” or have a “victim mentality”. Future activities should further consider how to challenge this perception in messaging while not promoting ableist perspectives.

- 6) **Consider strengthening and targeting SRH messaging for girls with disabilities to prevent early pregnancy and dropout.** A higher proportion of girls with disabilities are out of school than girls without disabilities. More than half of these girls have been pregnant at some point. This suggests there may be additional need to develop targeting messaging to support the SRH outcomes of girls with disabilities and prevent the consequences of early pregnancy, including social stigma, as reported by stakeholders in validation.
- 7) **Continue to train teachers and caregivers on alternative approaches to corporal punishment, including positive discipline.** Although the prevalence of corporal punishment decreased, 19.7% of girls with disabilities still report being physically punished in recent weeks. Although teachers in qualitative sessions indicated asking children why they engage in certain behaviours, explaining to children why these behaviours are not appropriate, and utilizing other disciplinary approaches, some teachers admitted that they now cane children outside of class instead of during class. These finding suggests that corporal punishment still takes place. Education sector stakeholders should consider the addressing this in future teacher training initiatives. In addition, means to report corporal punishment at schools or mechanisms to record discipline practices administered could improve accountability and compliance with existing regulations.
- 8) **Consider additional support for girls with disabilities who become young mothers to support them to pursue their aspirations.** Several girls with disabilities indicated that their goals changed after they became young mothers. For example, some shared that they wanted to be teachers or continue their schooling but now have more limited aspirations. Education sector stakeholders should consider the additional time restraints, burdens, and stigma young mothers face and continue to support these girls to realize their aspirations through targeted support and raising the visibility of role models who have been through similar experiences.

- 9) **Continue to address high chore burdens for girls with disabilities.** Having a high chore burden limited attendance outcomes for some girls with disabilities. Education sector stakeholders should continue to address high chore burdens among girls with disabilities by engaging and sensitizing parents and caregivers to the negative consequences of high chore burdens.
- 10) **Consider additional targeted support to reduce community stigma against girls with high degrees of functional difficulty in communicating, seeing, concentrating, and mobility.** A significantly lower proportion of girls with communicating, seeing, walking, concentrating, and learning difficulties felt included, accepted, and respected by their communities than girls without these difficulties or girls with disabilities who do not have high degrees of functional difficulties, suggesting additional community sensitization would continue to support girls who face high degrees of functional difficulty.
- 11) **Consider additional targeted support to enable girls with epilepsy to attend school.** Some qualitative findings indicated that girls with epilepsy face additional barriers to attend school due to fears associated with having an episode and concerns that teachers or peers may not be aware how to react to episodes. Additional training on how to respond in these cases and more targeted support for these children, would likely support their attendance outcomes.

2. Project Summary

CONTEXT

Kenya has an estimated population of 52 million people. More than 41% of the population is under the age of 14 years old. Of the total population, 74% live in rural areas. Kenya ranks 146 in the Human Development Index. Between 1995 and 2015, Kenya experienced an increase of 3.4 years of life expectancy at birth, and a 2.6 year of schooling increase on average. The Kenya Integrated Budget and Household Survey (KIHBS) (2005/6), estimates that 45.9% of the population is poor, with an inequality index (Gini coefficient) of 0.45.

Kenya has a decentralized administrative system based on the constitutional reform of 2010, where the country's administrative organization shifted from a province to a county-based structure. There are 47 counties nation-wide, of which 6 belong to former Nyanza province: Siaya, Kisumu, Homa Bay, Migori, Kisii, Nyamira. The Nyanza region hosts 11.8% of the country's population, which was projected to be 6 million inhabitants by 2018.

There are an estimated 4.4 million people with disabilities in Kenya. Of these, 26.2% have mobility impairments, 19% have visual impairments, 12.4% have auditory impairments, 10.6% have speech impairments, 8% have cognitive impairments, and 23.6% experience other impairments. According to the National Special Needs Education Survey (2014) one in ten people under the age of 21 have disabilities.

Article 54 of the Kenyan Constitution establishes that a person with disabilities is entitled "to access educational institutions and to facilities that are integrated into society to the extent compatible with the interests of the person".

Kenya, therefore, has several policy and legal instruments supporting the education rights of people with disabilities, including: the Education for All Initiative (Government of Kenya, 2010), the Children's Act (2001), the Persons with Disability Acts (2005), the National Special Education Policy Framework (2009), and the Disability Mainstreaming Policy (2012). Each of these recognize the need for inclusive policies and practices.

Kenya currently has an 8-4-4 education system which is based on the assumption that every child will have 8 years of primary school (with an entry age of six years old), 4 of secondary school and 4 of higher education. However, this structure is being phased out to a 2-6-3-3-3 system. This includes 2 years of pre-primary, 6 years of primary, 3 years of junior secondary (JSS), 3 years of senior secondary and 3 years of tertiary education.

In 2018, the Sector Policy for Learners and Trainees with Disabilities (SPLTD) was issued by the Ministry of Education. It defines inclusive education as education which provides

appropriate modification in curriculum delivery methods, educational resources, medium of communication or the learning environment to cater for individual differences in learning. Leonard Cheshire provided technical guidance on the development of this policy at the national level during the first phase of the project (GEC).

The Policy stresses the importance of early identification, assessment and placement as key components in providing quality education and training. The Policy emphasizes the importance of revitalizing Education Assessment and Resource Centers (EARCs).

The main objectives of the sector policy are to: (1) Align education and training services for learners and trainees with disabilities with the relevant national policy frameworks; (2) Develop a clear policy framework for the provision of inclusive education and training; (3) Address the existing policy and implementation gaps in the provision of education and training for learners and trainees with disabilities; and (4) Develop guidelines for the implementation of the policy.

Despite improvements made in the inclusive education policy environment, schools in Kenya continue to face significant barriers to supporting learners with disabilities. These barriers include a lack of knowledge as to the meaning of inclusion, inadequate facilities and infrastructure, low capacity of teachers to support learners with special educational needs, and negative societal attitudes towards people with disabilities. What is the source of info here?

For girls with disabilities, gender related barriers intersect with barriers associated with disability. These include a lack of access to assistive devices, non-inclusive teaching practices, low levels of life skills such as employment skills and financial literacy, safety concerns in and traveling to school, distance to school, non-inclusive school facilities, and economic hardship. Findings in this report are presented in relation to these barriers to understand how they interact with gender and disability and to understand the role the project has had in reducing these barriers.

THEORY OF CHANGE

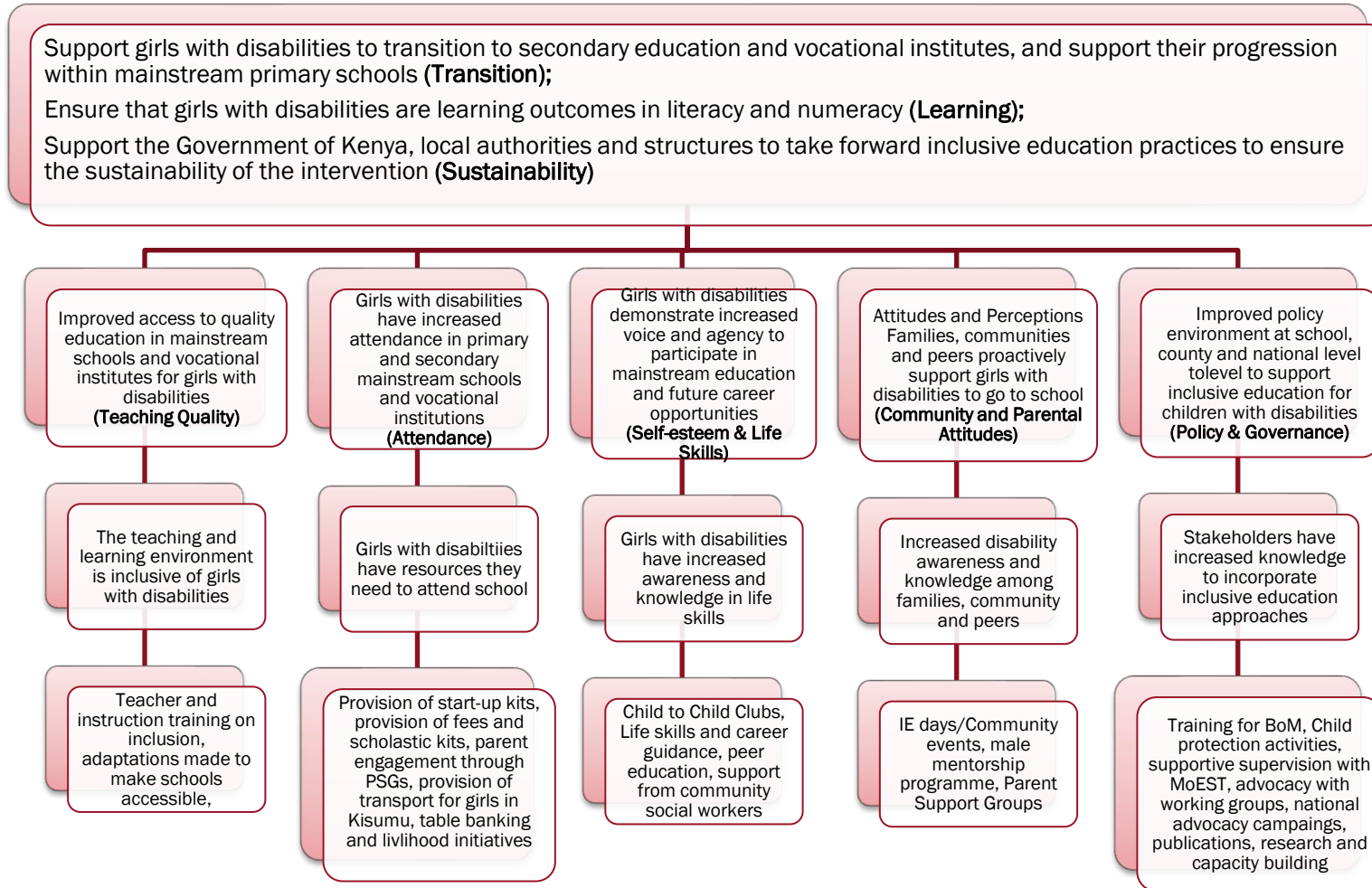
At the outcome level, the Expanding Inclusive Education Strategies for Girls with Disabilities Project aimed to:

- Support girls with disabilities to transition to secondary education and vocational institutes and support their progression within mainstream primary schools.
- Ensure that girls with disabilities are achieving learning outcomes in literacy and numeracy.

- Support the Government of Kenya, local authorities to take forward inclusive education practices to ensure the sustainability of the intervention.

A visual diagram of the project's Theory of Change is shown on the following page. Linkages between outputs, intermediate outcomes, and outcomes are discussed in further detail in the project's GEC-T Funding Proposal and MEL Framework, included as annexes to this report.

Figure 1. Project Theory of Change



3. Methodology

SCOPE

The evaluation scope and methodology are described in more detail in the evaluation inception report (Annex 8).

EVALUATION TOOLS

The evaluation relied on several quantitative tools:

EGRA/SeGRA: English Literacy was assessed using the Early Grade Reading Assessment (EGRA) in primary school and the Secondary Grade Reading Assessment (SeGRA) in secondary school

EGMA / SeGMA: Numeracy was assessed through the Early Grade Mathematics Assessment (EGMA) in primary school and the Secondary Grade Mathematics Assessment (SeGMA) in Secondary School].

Washington Group Short Set⁸: Before conducting Learning Assessments and the Child Survey we conducted a pre-survey including the Washington Group Short Set of six questions to screen for functional difficulty. According to the outcomes we provided reasonable accommodations for the children. These reasonable accommodations were developed with the support of inclusive education specialists at Leonard Cheshire.

Attendance and Re-enrolment: Historical attendance data was obtained from school registries and attendance records made available by school authorities during school visits.

Household Survey (HHS): The HHS asked questions about families' socio-economic status, educational status, living conditions, attitudes towards girls' education, home-learning environments, and other project dimensions. The tool also measured household's opinions on project's strategies and adaptations during COVID-19⁹.

Girls Survey (GS): The Girls' survey was administered to all girls sampled in target and comparison schools. This included all girls with disabilities and girls without disabilities who have been tracked since the Midline. The survey measured logframe indicators, girls' attitudes

⁸ [Washington Group Short Set on Functioning](#)

⁹ The adaptations during COVID-19 include Radio Programmes, SMS messaging, Parent Publications, PSGs, Community-based learning, Support on Child Protection, Solar Radios and Dignity Kits.

towards school, perceptions of teaching quality, reading habits, psycho-social skills, school safety, facility use, girls' perceptions of their home learning environment, life skills, and attitudes and knowledge about COVID-19.

Teacher Survey: The Teacher Survey measured teachers' attitudes, knowledge, and practices towards inclusive education.

Lesson Observations: Lesson observations were conducted in target and comparison schools and assessed the extent to which teachers have adopted inclusive practices in their lessons.

Qualitative discussion guides were developed and administered during two sequenced phases of qualitative data collection. This included a series of key informant interviews and focus group discussions.

All qualitative and quantitative data collection tools are included in Annex 9.

Learning tests, including SeGRA, SeGMA, EGMA and EGRA were designed and calibrated at Baseline to be of similar levels of difficulty at each assessment point, through a pilot exercise including children with and without disabilities. Results of the pilot and calibration process included in Annex 11.

ASSESSED DISABILITY and WASHINGTON GROUP SET

The evaluation reports outcome findings by both the Washington Group Short Set, used to screen for **functional difficulty** across key domains, and girl's **assessed disability type**, as determined by an EARC assessment facilitated by the project. EARC assessments were conducted at the beginning of the project and girls are assumed to fall under key disability types for the duration of the project. The Washington Group Short Set assesses for functional difficulty across key domains at the time of data collection. As it is based on girls perceived functional difficulty at any point, which is determined by the extent to which they experience key barriers, it is variable for an individual girl across time.

SAMPLE

Additional details on data collection, attrition and sampling can be found in Annex 2.

The sample of girls with and without disabilities tracked at each period is shown in the table following.

The **target group** (T) are girls with disabilities in schools supported by the project and the **comparison group** (C) are girls without disabilities in non-project schools. The comparison

group at Midline and Endline are the same girls but at Baseline were girls without disabilities in project schools¹⁰.

Table 1. Sample Size of Main Cohort (Girls and Households) by Period

Grade at Baseline	Baseline		Midline		Endline ¹¹	
	T	C	T	C	T	C
5	83	59	81	66	81	66
6	91	69	103	72	103	72
7	96	61	96	67	96	67
8	58	47	47	54	47	54
Total	328	236	327	259	327	259

Table 2.2 Final Sample Sizes Achieved (Quantitative)

Tool	Final sample size	
	Target	Comparison
Household Survey	327	259
Girl Survey		
Attendance Tool		
Learning Assessments - English Literacy (EGRA/SeGRA) and Mathematics (EGMA/SEGMA)	327	0
Teachers Survey	186	77
Lesson Observations	50	0
Headteacher/School-Wide Assessments Survey	66	38

Qualitative sessions sampled a range of project stakeholders including girls with disabilities, boys with disabilities, teachers trained by the project, EARC officers, school stakeholders, and project staff. A list of qualitative sessions conducted is included in Annex 2

¹⁰ Refer to the Midline Report for the methodology adjustments made at Midline

¹¹ The overall attrition rate was 25%. The treatment group had an attrition rate of 23% while the control group had 28%.

LIMITATIONS

There are several limitations the evaluation team acknowledges with regards to findings presented in this report:

1. Findings cannot be generalized to all girls with disabilities or all girls without disabilities in target sub-counties. Sample sizes for girls with disabilities were set to establish a representative sample of the population of girls with disabilities targeted by the LC Inclusive Education project rather than a representative sample of the entire population of girls with disabilities in the lake region or the specific sub-counties targeted. Sample sizes for girls without disabilities are not representative of all girls without disabilities in the target sub-counties or these schools but were set to provide an indication of the project's contribution to key outcomes in comparison to changes experienced by girls without disabilities between evaluation periods.
2. While the project also supported boys with disabilities, a sample of boys with disabilities was not taken. This prevents the evaluation from definitively commenting on the project's contribution to outcome changes for boys with disabilities. This approach was agreed in consultation with the GEC Fund Manager during Baseline due to resource constraints of the evaluation and the overall GEC portfolio's focus on supporting girls. Boys with disabilities were sampled as part of qualitative research conducted and findings are presented for this group within the report.
3. Findings from the Teacher Survey and Lesson Observations are based on samples that are not of sufficient size to be representative of all teachers trained by the project. Therefore, findings cannot be generalized to this group. Instead, these samples were taken to provide an indication of project progress towards the adoption of inclusive practices and to report on key performance indicators included in the project's logframe. Due to resource limitations, it was not possible for the study to sample a representative number of teachers trained.
4. Due to ethical concerns with overburdening children in comparison schools and in consultation with the Fund Manager, the evaluation decided not to administer learning assessments to girls without disabilities in the comparison group at Endline. This limits conclusions which can be made as to the extent to which the project closed the learning gaps in outcomes between Midline and Endline.
5. Due to the small sample sizes of children who experience functional difficulties according to the Washington group set, findings made for these populations are indicative and cannot be generalized to members of these groups.

4. Intermediate Outcome Findings

ATTENDANCE

The project aimed to reduce several barriers preventing girls with disabilities from attending primary schools, secondary schools, and vocational training institutes¹. Throughout implementation, girls with disabilities were attending school as regularly as girls without disabilities. This points to the project's success at removing barriers that previously caused girls with disabilities to have lower attendance.

The project supported girls with disabilities to attend school by facilitating a welcoming environment, improving accessibility, and reducing stigma. Child-to-Child Clubs encouraged students with disabilities to attend school by bolstering their self-esteem. The project's work to facilitate access to sanitary wear, assistive devices, and physical adaptations to school buildings improved accessibility and promoted higher attendance, according to qualitative evidence. Training teachers on inclusive education and male mentor outreach to parents reduced school and community stigma that previously discouraged students with disabilities from attending school.

Reports from students and other stakeholders show that pregnancy, young motherhood, and high chore loads still pose significant barriers to attendance that should continue to be addressed in future activities. Stakeholders in validation agreed with this finding, emphasizing the barriers that young mothers face to attending school, particularly due to stigma associated with early pregnancy.

The project supported girls with disabilities to maintain relatively high attendance levels between Midline and Endline¹².

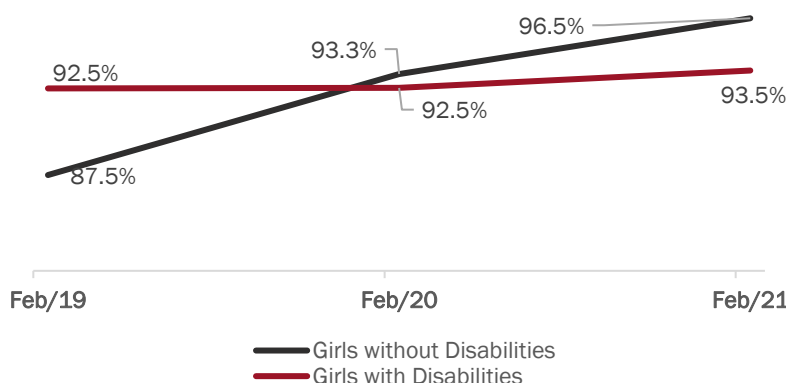
The proportion of girls with disabilities attending school 80% of the time remained similar between Midline and Endline, and over the last three years, based on the percentage of girls who attended school 80% of the time in the months of February.

¹² Indicator: *Percentage of Children Attending At Least 80% of Available School Days in February 2019, 2020, and 2021*

By Endline, in 2021, 93.5% of girls with disabilities attended school more than 80% of the time compared to 92.5% at Midline which is a positive result especially in light of the Covid-19 pandemic and prolonged school closures.

Differences between mean attendance rates between all periods are insignificant signally that attendance levels have remained relatively similar across the last three years.

Figure 2. Percentage of children attending at least 80% of school days in February 2019, 2020, 2021¹³



The project has supported girls with disabilities to attend school as frequently as girls without disabilities, over the last three years¹⁴.

Girls with disabilities were equally likely as girls without disabilities to attend school at least 80% of the time at all three periods according to tests for association. This finding indicates that the project supported girls with disabilities to overcome the barriers that would have caused them to have lower attendance than girls without disabilities¹⁵.

Attendance by Assessed Disability Type and Functional Difficulty

Girls with functional difficulties communicating, hearing, and concentrating had lower attendance levels than girls without disabilities at Endline¹⁶.

¹³ Baseline n=194 (Treatment n=186, Control n=8); Midline n=418 (Treatment n=240, Control n=178); Endline n=575 (Treatment n=321, Control n=254)

¹⁴ See Error! Reference source not found..

¹⁵ For all periods, there is no statistically significant association between the proportion of girls attending school 80% of the time and disability status, suggesting girls with and without disabilities are equally likely, at any period to attend school 80% of the time.

¹⁶ February 2021

There were statistically significant differences in average attendance rates in February 2021 between girls with functional difficulties communicating, hearing, and concentrating and those without disabilities.

Girls with functional difficulties seeing, walking, self-care, or learning had similar attendance levels to girls without disabilities, indicating that barriers for girls with these disabilities have been overcome.

Table 3. Attendance means of children by disability type according to the Washington Group Short Set on Functioning (EL)

DOMAIN	WITHOUT DIFFICULTY (n = 254)	WITH DIFFICULTY
Communicating ¹⁷ (n=25)	97.1%	86.7%
Seeing (n=139)	97.1%	95.8%
Hearing ¹⁸ (n=70)	97.1%	92.5%
Walking (n=18)	97.1%	95.5%
Concentrating ¹⁹ (n=50)	97.1%	92.1%
Self-care (n=15)	97.1%	97.6%
Learning (n=170)	97.1%	94.8%

Girls with and without disabilities had similar attendance levels, on average²⁰.

There were no significant differences in attendance between Midline and Endline for either group²¹ or between girls with disabilities and girls without in any period.

These findings indicate that the groups maintained broadly similar attendance levels between periods and that gaps did not increase or decrease between the two groups. Girls with disabilities face more barriers to attendance than girls without disabilities. So, the similar attendance levels between the groups suggest that inclusive education helped reduce these barriers.

¹⁷ $t(277) = 4.6, p < .001$

¹⁸ $t(322) = 2.9, p < .001$

¹⁹ $t(302) = 2.7, p = .007$

²⁰ Furthermore, 22.6% of girls with disabilities and 23.7% of girls without disabilities improved their attendance outcomes between February 2020 and February 2021. 21.0% of girls with disabilities improved their attendance outcomes between February 2021 (Endline) and Feb 2019 (Midline) compared to 18.7% of girls without disabilities. There is no statistically significant association between changes in attendance and disability status.

²¹ Paired t-test analysis results showed an insignificant difference for girls with disabilities between Midline ($M = 95.5, SD = 11.0$) and Endline ($M = 95.1, SD = 15.1$). There are also no significant differences between Midline ($M = 96.6, SD = 7.9$) and Endline ($M = 97.1, SD = 7.9$) levels for girls without disabilities

Girls with assessed disabilities regularly attend school regardless of disability, but students with epilepsy often miss class.

Overall, attendance was high for girls with each type of assessed disability²².

Girls with epilepsy and visual and learning disabilities had lower attendance levels at Endline (85%) than at Midline, but the difference is not significant.

Qualitative evidence confirms that it was common for girls with epilepsy to miss school.

One teacher reported:

They've come to school almost on a daily basis [except] the epileptic ones...Despite their difference in abilities they are positively working around academics. They love school, they are enjoying the reading, they don't want to miss classes, so basically it has been good²³.

The teacher also reported instances where parents came to the school to inform teachers that their child has to stay home from school because of epileptic episodes.

This suggests that the project should consider training teachers, parents, and students in how to respond to seizures. Additional measures should also be taken to connect students with epilepsy to SBITs and health services to ensure they can access medication to reduce and control seizures. With informed safety measures and proper medication, parents will be empowered with information about treating epilepsy and might feel more comfortable sending their children to school even when there is risk of seizures, so that students with epilepsy can have more regular attendance.

Reducing Attendance Barriers²⁴

Child-to-Child Clubs supported girls with disabilities to improve their attendance.

Girls with disabilities in Child-to-Child Clubs had higher attendance levels and experienced larger improvements in attendance between periods at statistically significant levels.

²² $t(277) = 4.6, p < .001$

²² $t(322) = 2.9, p < .001$

²² $t(302) = 2.7, p = .007$

IDI C to C NYIKENDO docx

²⁴ See Annex for additional analysis of barriers including school fees, transportation, and COVID-19

Girls with disabilities in Child-to-Child Clubs had:

- Higher attendance levels than their peers (97.23% vs. 93.22%) at statistically significant levels in February of 2020 but not in February of 2021
- Higher improvements in their attendance levels than their peers (1.99% increase compared to 6% decrease respectively) between February 2019 and February 2021 at statistically significant levels
- Larger improvements in their attendance levels than their peers (0.05% increase compared to 3.54% decrease) between February 2020 and February 2021 at statistically significant levels

Clubs provide opportunities for girls to interact with peers who do not have disabilities and develop life skills. This likely influences their motivation to attend school. A club facilitator explained that sometimes girls host club sessions on their own, which further builds their agency and motivation to attend school:

There are times that they can have their meetings. They conduct their discussions on their own. From there, they can discuss their issues as children without any interference from the teacher. [Through this] they have gained self-esteem...they can express themselves and know that it is their right to be in school. They also understand they need to have education as others.²⁵

Participants in validation confirmed that students in Child-to-Child clubs have better attendance because clubs positively impact their self-esteem.

Parent Support Groups also helped alleviate financial strains that bar girls from attending school. In an in-depth interview, a club facilitator explained that clubs engage in income generating activities that provide financial assistance to member:

The [group] is good as I told you earlier we used to have chicken rearing, so, specifically, we were selling eggs. So, when one of the children has a problem or basic need, they could chip in and assist. Like getting the uniform, some small things - even money for exams they could get from the club²⁶.

Young mothers with disabilities and girls with disabilities who had been pregnant had more difficulty attending school.

²⁵ 15.6 IDI TEACHER NANGA

²⁶ 15.1 IDI C T C REMANYANKI

Compared to girls with disabilities who had not been pregnant, those who had been pregnant had:

- Lower attendance levels in February 2020
- Smaller attendance improvements between February 2020 and 2021
- Smaller attendance improvements between February 2019 and February 2021
- Associations between pregnancy and attendance are all statistically significant, suggesting that girls who have experienced pregnancy face additional barriers to school.

In qualitative sessions, some girls with disabilities stated that being pregnant and having a child had not brought many changes into their lives. One even said that girls are allowed to bring their children to school so that they can continue their education²⁷.

Others said that having a child put extra strains on their time and school attendance. One girl with a disability said that she missed school to take her child to a clinic²⁸. Another summarized:

It was easier before because I was alone but now I have to wake up earlier than that because I have a child. I now have to prepare my things and that of my child before I go to school so there is a change²⁹.

Participants in validation added that some parents blame young mothers for getting pregnant and leave pregnant girls to fend for themselves. The lack of support negatively affects attendance and learning.

Girls also shared that young mothers are more likely to go into vocational training than secondary school³⁰ so that they can start earning income to support their children as soon as possible³¹.

²⁷ 11.4 Y.MOTHERS CHINATO

²⁸ 11.2 IDI Y MOTHERS NINA

²⁹ 11.3 IDI YOUNG M.MBITA

³⁰ 11.3 IDI YOUNG M.MBITA

³¹ The participant explained:

After giving birth someone mostly calculates the number of years he/she will take studying at school and sometimes they have more than two kids and above. If they think of secondary school for four good

High chore loads made it difficult for girls with disabilities to attend school.

The disproportionate burden of domestic work experienced by girls with disabilities in the project is due to a mix of various factors. Primarily, many households in the project area are in a rural setting where traditional power structures are in play. Girls spend more hours than boys doing household chores. In such environments, women and girls bear the more significant burden by performing such duties as cooking, fetching firewood and water, cleaning, and babysitting. Also, economic hardship and COVID-19 related shocks in the project area have affected household incomes. Parents and caregivers are spending more hours outside the home leading to an increase in the amount of time girls spend taking care of the home.

Compared to girls with disabilities who spend less time on chores, girls who spend half the day or more doing chores had:

- Lower attendance levels in February 2020
- Smaller attendance improvements between February 2020 and 2021
- Smaller attendance improvements between February 2019 and February 2021

Qualitative evidence from interviews supports this finding. Multiple girls with disabilities reported that doing chores stopped them from going to school, saying, “*Like today I didn’t go to school, I can just wake up and do my chores then create sometime around 1.00 pm to do my revision*³².”

One girl with a disability described a day when doing chores caused her to be late for school, at which point the teacher turned her away at the door because of her tardiness³³. Not all teachers in project schools have been trained by LC and this signals that additional work is still necessary to support teacher awareness of gender-specific and disability related barriers to attendance.

*years then to university or college, they settle to vocational training where you do a course and start earning as soon as you complete your course*³¹.

³² 11.2 IDI Y MOTHERS NINA

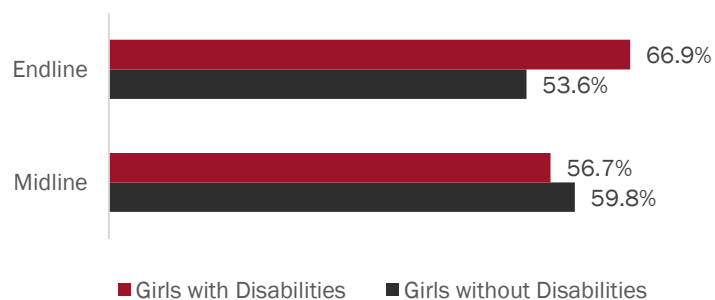
³³ 11.3 IDI YOUNG M.MBITA

Access to Scholastic Materials

The project supported girls with disabilities to have access to necessary scholastic materials such as notebooks and stationary.

Girls with disabilities were more likely than girls without disabilities to report that accessing scholastic materials, including books and stationary,³⁴ had become easier by Endline, at statistically significant levels. This finding suggests that LC's support reduced this material barrier for girls with disabilities. Project staff explained that this was likely due to support provided to PSGs to engage in income generating activities which provided them with additional income to cover costs associated with accessing these materials.

Figure 3. Percentage of girls who report that it has become easier to access scholastic materials³⁵



Other participants emphasized the need for additional materials for children with disabilities and asked for continued support.

A teacher warned that when there is a lack of materials, parents and teachers may prioritize students without disabilities:

One of the challenges is lack of materials...A parent gives those materials to those children who are well placed and caters for this one [the child with disabilities] last. So, our learners who have some disabilities end up coming to school without all they need...Then come to school also, when we don't have enough learning materials, usually we teachers...consider those who are...physically fit because we want to improve our means [performance scores]...So, we tend to...show partiality when sharing the learning materials. And a teacher can defend himself and say, you

³⁴ Including books, interactive learning materials, backpacks, reading lights, radios for distance learning.

³⁵ Midline n=585(Treatment n=326 Control n=259); Endline n=543(Treatment n=293 Control n=250)

know...the ministry of education will not understand that I had some learners with disabilities in my class. They'll just be on my neck that 'why is your mean so low'^{36?}

This example of bias against students with disabilities indicates that some barriers remain preventing them from accessing needed material. Pressures that the Ministry of Education puts on teachers to secure higher performance scores may result in teachers deprioritizing the needs of children with disabilities. Additional sensitization may be needed to ensure that parents and teachers distribute available materials equitably. There is also the need for general advocacy for availability of teaching and learning materials at primary and secondary schools.

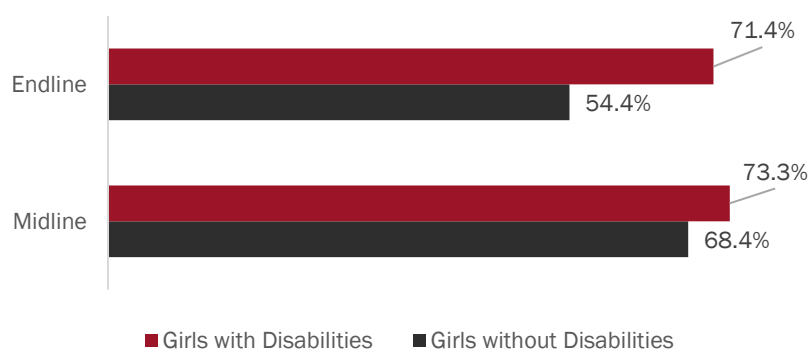
Access to Sanitary Wear

The project supported girls with disabilities to access sanitary wear and not miss school when menstruating by providing pads.

Between Midline and Endline, fewer girls both with and without disabilities reported that it had become easier to access sanitary wear. Although for both groups it became more difficult to access sanitary wear between Midline and Endline, girls with disabilities reported less difficulty at Endline than girls without disabilities.

At Endline, there is a statistically significant association between disability status and access to sanitary wear³⁷, suggesting that the project's support helped reduce this barrier for girls with disabilities. The project provided sanitary wear to every girl each quarter.

Figure 4. Percentage of girls who reported that it has become easier to access sanitary wear³⁸



³⁶ 15.4 IDI C TO C ONYALO

³⁷ $\chi^2(1, N = 529) = 16.5, p < .001$.

³⁸ Midline n=528(Treatment n=300 Control n=228); Endline n=529(Treatment n=290 Control n=239)

Sanitary wear helps girls to not miss school when they are menstruating. As one girl explained:

Before LC...if you could attend [during] your menstrual cycle and people realized, they would really laugh at you, so it was shaming. During that period...you could be told to go to school...if you just imagine of the shame you will meet at school, you could not come. But since they came, they have provided us with pads and everything so no one realizes that you are [menstruating], so you feel so encouraged to come to school³⁹.

Access to Assistive Devices

LC provided assistive devices that enabled children to attend school regularly.

Participants in qualitative sessions reported that the project supplied girls with disabilities with assistive devices such as braille and large print texts, canes, glasses, and wheelchairs⁴⁰.

A teacher described the impact that a wheelchair had on one student's attendance:

Initially they were not coming to school. We have a child in grade 4 [who] could not move. He used to use hands to move but when LC came, they introduced a wheelchair so the child now is always in school⁴¹.

Teachers stated that accessibility adaptations to school infrastructure encouraged students with disability to attend more regularly.

A teacher explained that inclusive adaptations to the school environment made it easier for students to attend mainstream schools and not just schools designated for children with disabilities:

You know sometimes back, these learners who are disabled they found it hard to come into a regular school. If a child has got a disability, parents preferred taking them to special schools...And I think what has made them come is...how the environment has been adapted to accommodate them⁴².

³⁹ 3.1 FGD GIRLS OBAMBO

⁴⁰ 1.8 FGD TEACHER ONYALO, 14.3 IDI PARENTS ONYALO (1), 15.5 IDI CTC F CHINATO

⁴¹ 15.1 IDI C T C REMANYANKI

⁴² 2.4 IDI TEACHER NYAMILA

The ability to attend the nearest, regular public school, could also reduce barriers like transportation and school fees that pose difficulties when students must travel to special schools which are fewer and farther away.

Participants in validation reiterated that repairing and maintaining school infrastructure will be key for keeping schools disability-friendly and ensuring that students with disability will continue to attend in the future.

Reduction in Stigma

The attendance of girls with disabilities is supported by teacher attitudes and practices.

Girls with disabilities who felt that their teacher addresses their individual learning needs had higher attendance levels in February 2020 than those not supported by teachers at statistically significant levels.

One teacher explained that she saw an improvement in the attendance of girls with disabilities when she started utilizing inclusive, child-centred education practices:

Two years ago...we had some learners who had some disabilities, they were never regular in school...Then we discovered that they need that close attention. We talked with them and kept on monitoring them and also finding out what they were lacking and what they need. The attendance improved⁴³.

Another participant added that teachers' attitudes toward children with disabilities changed thanks to LC-supported sensitization. According to a male mentor⁴⁴, teachers used to be concerned that children with disabilities would bring down their class's average score on the test required to enter grade 8. Because of teacher discouragement, many students with disabilities would drop out in grades 6 or 7. According to the mentor, LC training sensitized teachers to include students with disabilities without regard to their scores.

⁴³ 15.4 IDI C TO C ONYALO

⁴⁴ 13.2 FGD TEACHERS NINA

Qualitative evidence also shows that discipline practices may have affected students' attendance. Multiple teachers reported that project training supported them to shift away from corporal punishment which previously discouraged children from attending school⁴⁵.

The project's male mentor program continued to support improved attendance for girls with disabilities.

Girls with disabilities who had a male mentor experienced higher attendance improvements between Midline and Endline at statistically significant levels compared to those who did not have mentor. The male mentor program had a similar effect at Midline.

The project established the male mentorship programme to build support for girls' education amongst male role models in the community and girls' households. According to the Midline report, having a male mentor speak to a girl with disabilities' household member leads to an average improvement of 5.2% in monthly attendance. Therefore, the male mentorship programme is an effective means to support girls with disabilities to improve their attendance.

In an interview, a male mentor explained the impact on attendance:

There is a time that their rights were being violated, others were not taken to school, they were hidden at homes. So, we as male mentors could go to their homes and talk to their parents to release them to go to school⁴⁶.

Parental attitudes influenced the attendance of girls with disabilities.

Stakeholders in qualitative sessions, including teachers, EARC staff, and parents, all noted that parental attitudes are a primary factor of school attendance for girls with disabilities. Social norms and community stigma have previously led parents to hide their children with disabilities and not bring them out into public or into school. Qualitative evidence shows that LC's community sensitization activities helped to shift these attitudes and encourage parents to enrol their girls with disabilities in local schools⁴⁷.

⁴⁵ "The teachers were sensitized; they went in for...seminars that changed our attitudes. Because at the end of the day if a learner has a disability...[if] you cane that learner the whole day, at the end of the day, the problem still persists. So, you would not even have moved a step ahead. You'll just have drawn the child out of school. So, the learner might decide ok, the next day I'll not go back to that school because I'll be caned. But ever since we changed our tactics, the learners come to school happily."

⁴⁶ 17.1 IDI M.M MBITA

⁴⁷ For more on parental attitudes, see Community section.

ACCESS TO QUALITY EDUCATION⁴⁸

The findings clearly demonstrate that the project has successfully supported teachers to learn about and implement inclusive education strategies, filling acknowledged gaps in their teaching pedagogy. Teachers were able to provide specific examples of accommodations and modifications made to make lessons more inclusive, including the use of individual education plans, providing targeted and individualized support to children with disabilities, adjusting the physical classroom environment, adjusting curriculum expectations to meet children at their level of ability, and relying on a wider range of teaching strategies. Despite Covid-19 school closures across domains reviewed, lessons at Endline were more likely than lessons at Midline to adopt inclusive education practices at statistically significant levels.

The project also strengthened relationships between teachers trained, EARCs, and parents to develop individualized strategies to support children with disabilities and provide a holistic perspective on their needs.

Teachers trained by the project reported that large class sizes, short lesson durations, and pressures from the Ministry of Education for teachers to achieve higher exam results, higher grades, and higher pass rates remain barriers to the adoption of inclusive education practices in lessons.

There is also evidence that the project supported teachers to move away from using corporal punishment to discipline children with disabilities, although a large proportion of children with disabilities still reported being physically punished by their teacher in recent weeks.

The project trained teachers and TVET instructors on how to apply inclusive education practices in their lessons.

The project trained 670 teachers across both secondary and primary schools in inclusive education practices. In addition to this professional development, project staff provided ongoing one-on-one mentoring to teachers and instructors to support them in attending to the needs of children with disabilities.

Training covered modules on inclusive education, including:

⁴⁸ IO2: Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities

- Screening and Identification of children with disabilities
- Removing barriers to education for children with disabilities
- Developing individual education plans (IEPs)
- Providing relevant accommodations and modifications in the classroom
- Differentiating the curriculum
- Adapting and developing inclusive teaching and learning materials
- Child protection in the context of disability
- School based inclusion teams

To further support the adoption of inclusive education, the project established a Teacher Mentorship Program. 30 mentors with backgrounds in special education provided regular monthly support to teachers. These mentors supported teachers to implement inclusive education practices and problem solve around individual learners' needs.

The project also trained 86 VTI instructors on inclusive vocational training, including similar training modules as those delivered to primary and secondary teachers. And a further 164 instructors were given awareness raising on disability inclusion across the 5 sub-counties.

Teachers reported that training on inclusive education filled a gap in their teacher training.

Several teachers reported that the project's training was highly relevant to their professional development:

It has created level of awareness which, prior to that, was really being ignored - especially these learners with learning disabilities. So, there were so many areas which were covered...which are not normally covered in the normal education curriculum⁴⁹.

What brought the change was the training⁵⁰.

⁴⁹ 1.2. FGD Nyamome

⁵⁰ 1.2. FGD Nyamome

Applying Inclusive Education

Teachers demonstrated an understanding of inclusive education and identified several strategies they employed to support children with disabilities, although attitudes towards inclusion remained similar between Midline and Endline.

Teacher attitudes towards inclusion remained similar between Midline and Endline. 77% of teachers in project schools at Endline, compared to 73% at Midline⁵¹, demonstrated higher attitudes⁵² towards inclusion, but the difference was not statically significant⁵³.

Teachers generally understood the main principles of inclusion. However, several still utilized ableist language, referring to children with disabilities as not being “normal” or “able.”

Inclusive education is the education system or style that includes both the abled learners and learners that have got special capabilities integrated within it...they learn from the same environment⁵⁴.

Before the training, there was very little support but now that they've also been trained by the organization, they fully understand issues evolving around inclusive education⁵⁵.

Inclusive learning is where we have those learners with normal abilities and we have those with challenges -the challenged ones. They are included in a learning session⁵⁶.

⁵¹ n=127

⁵² To understand attitudes towards inclusion, the evaluation team constructed a scale with 4 attitudinal indicators: Children who experience disabilities have unique learning needs; The needs of children with disabilities can be served in special, separate settings (reverse coded); Inclusion sounds good in theory but does not work well in practice (reverse coded); Inclusion of children with disabilities in general education takes away from students without disabilities and lessens the quality of education provided (reverse coded).

⁵³ Over 80% of teachers during both evaluation periods felt that children with disabilities have unique learning needs. Over 70% of teachers disagreed that the needs of children can be served in special separate settings, indicating support of inclusive education. Another 70% responded that the inclusion of children with disabilities does not generally disadvantage children without disabilities or lessen the quality of education provided. 64% of teachers at Endline and Midline disagreed that inclusion does not work well in practice⁵³.

⁵⁴ 1.3 FGD TEACHERS NYABIKONGORI

⁵⁵ 1.2. FGD Nyamome

⁵⁶ 1.8 FGD TEACHER ONYALO

Teachers widely agreed that inclusion means targeting and supporting children's individual learning needs.

As one teacher stated:

It has changed because we've learnt to understand these learners individually. We don't group them, we don't categorize them. You look at the character of the learner individually and then you [find] ways of correcting that learner⁵⁷.

The adoption of inclusive practices was measured using results from the lesson observation. Three dimensions of inclusive practices were measured:

- Teaching is planned and executed with the learning of all students in mind⁵⁸
- Students learn collaboratively⁵⁹
- Lessons encourage the participation of all students⁶⁰

The footnotes summarise how each inclusion dimension was measured and the minimum requirements for a lesson to be classified as inclusive⁶¹.

Analysis shows an association⁶² between each of the three dimensions and the time period. Teachers were more likely to adopt improved practices at Endline than at Midline at statistically significant levels for all three dimensions.

⁵⁷ 2.9 IDI ENGLISH&MATHS TEACHER

⁵⁸ 1.1) There is a lesson plan with clear learning objectives available for the lesson 1.2) The learning objectives for the lesson are made clear to the students at start of lesson 1.3) Teacher is able to explain adaptations made for learners with disabilities and they are plausible

⁵⁹ 2.1) The lesson used at least one of these strategies: paired work, group work, play-based approaches, student presentations 2.2) Min of 2 of these must be met 2.2.1) Teacher allows students to help each other to answer or solve problems 2.2.2) Lesson plan included opportunities for student to work in groups 2.2.3) Teacher changed around seating during the lesson e.g. changing groupings from/to mixed ability

⁶⁰ 3.1) Min of 2 of these must be met: 3.1.1) Teacher asks students how they arrived at the answer 3.1.2) Teacher asks questions to challenge students of all levels 3.1.3) Teacher provides thinking time before children respond to questions 3.2) Teacher speaks to students in a friendly tone 3.3) Min of 1 of these must be met 3.3.1) Teacher made any of the following adaptations: use of visual aids, word cards, manipulatives, large print, simplified text, alternative work sheets 3.3.2) Teacher provides prompts or individual assistance to children who struggle during the course of the lesson

⁶¹ See **Error! Reference source not found.** in Annex for measurement of inclusion dimensions

⁶² A chi-square test of independence was performed to examine the relation between inclusion dimensions and the evaluation period. The relation between these variables was significant:

Teaching is planned and executed with the learning of all students in mind ($X^2(1, N = 101) = 30.3, p < .001.$)

Students learn collaboratively ($X^2(1, N = 101) = 55.7, p < .001.$)

Lessons encourage the participation of all students ($X^2(1, N = 101) = 20.5, p < .001.$)

The project successfully supported teachers to plan lessons with all students in mind.

At Endline, 90% of lessons in project schools were planned and executed with the learning of all students in mind, compared to 37.3% of lessons at Midline.

Figure 5 shows results of further analysis by evaluation period. At Endline, 94% of the teachers, compared to 37% at Midline, were able to explain specific adaptations made for children with disabilities. Other measures of teacher planning were similar at Endline and Midline.

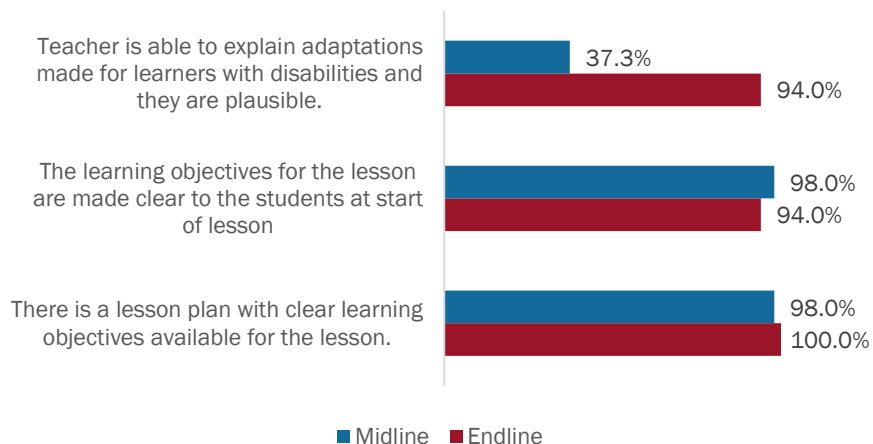


Figure 5. Percentage of lesson observations where teaching was planned with all students in mind, by evaluation period⁶³

The project successfully helped create learning environments where all students learned collaboratively.

Students were learning collaboratively in 88% of lessons at Endline, compared to 13.7% at Midline.

40% of teachers observed at Endline compared to 19.6% at Midline changed the seating arrangements to accommodate students with disabilities. As a teacher explained:

One of the accommodations provided for children with disabilities is that they are put at strategic positions in the class where they can easily access the blackboard and easily get what the teacher speaks about. And then number two, they are put in places

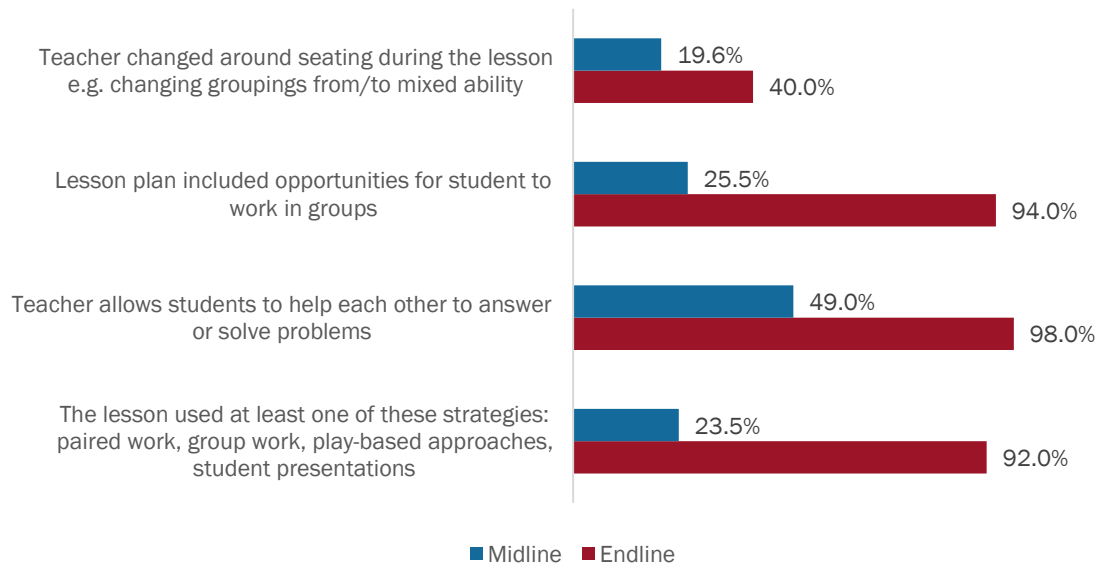
⁶³ Midline n=51 Endline n=50

where they cannot be easily injured by others, maybe when they are running out of class⁶⁴.

There were also considerable differences between evaluation periods for:

1. Providing opportunities to work in groups (25.5% Midline to 94% at Endline)
2. Allowing students to help each other answer or solve problems (49% at Midline to 96% Endline)
3. Using at least one student engagement technique (23.5% at Midline to 92.0% at Endline)

Figure 6. Percentage of lesson observations where students learned collaboratively, by evaluation period⁶⁵



The project supported teachers to encourage all students to participate in lessons.

54% of lessons at Endline, compared to 11.8% at Midline, encouraged all students to participate.

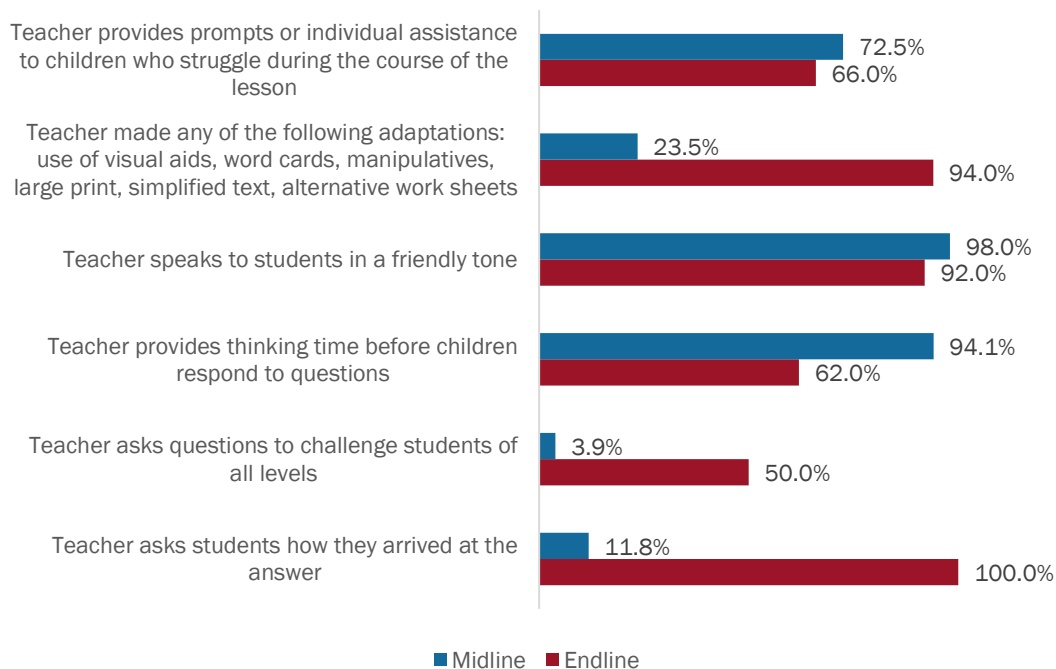
At Endline, all observed teachers asked students how they arrived at their answers. 94% of teachers at Endline utilized adaptations to encourage the participation of all students, compared to 23.5% at Midline.

⁶⁴ 1.8 FGD TEACHER ONYALO
⁶⁵ Midline n=51 Endline n=50

Between Midline and Endline, teachers decreased the use of two practices:

1. Speaking to students in a friendly tone (98% at Midline to 92% at Endline)
2. Providing thinking time before children respond (94.1% at Midline to 62% at Endline)

Figure 7. Percentage of lesson observations where teachers encouraged the participation of all students, by evaluation period⁶⁶



Parents and caregivers of children with disabilities reported that inclusive education practices became more widespread in schools which helped their children.

Parents reported:

Teachers treat children with disabilities the same as children without disabilities, and they are put together and taught the same things⁶⁷.

Teachers treat children with disabilities the same as those without disabilities because LC has been sensitizing teachers on how to handle children with disabilities and treat them equally. For instance, those with hearing impairment are placed in front in

⁶⁶ Midline n=51 Endline n=50

⁶⁷ 2.1 PSG NINA

classroom so that they also hear what the teacher is teaching. And those with sight impairment were given reading glasses by LC⁶⁸.

Teachers treat these children the same due to inclusive education brought by this project and trainings teachers have undergone...on how to handle children with disabilities⁶⁹.

Before this awareness, there was this belief that these students with special needs need to go special schools. That one is something which drastically changed...These other activities can just be incorporated within the normal school curriculum without necessarily moving them⁷⁰.

Teachers employed specific accommodations and modifications to support children with disabilities in lessons.

Modifications included providing learners them with extra time or contact during lessons⁷¹, considering their placement in the classroom, using mixed ability groupings to encourage peer work⁷², increasing the use of tactile learning tools, and modifying curriculum expectations⁷³.

Some teachers indicated that these modifications required extra and deliberate planning time, focused on individual learner needs and continual progress assessment:

You prepare...In this case, you would prepare depending on the abilities that you put into focus. And when you want to attend to those individual learners, you plan for them according to their time, and you look on how they are progressing⁷⁴.

⁶⁸ 2.1 PSG NINA

⁶⁹ 2.1 PSG NINA

⁷⁰ 1.2. FGD Nyamome

⁷¹ "Specific support that we give them, for example, is to do some individual learning with them...apart from separating them from the rest, this is where you will give them more contact hours...compared to the rest" 1.3 FGD TEACHERS NYABIKONGORI

⁷² "When they are in groups...I've placed them, according to their abilities. It's mixed abilities such that the learner who has a disability is able to be assisted by the other learner who doesn't have a disability...The other strategy...they learn by actually doing, so, they do a lot of manipulatives. They manipulate the things from their environment" 13.2 FGD TEACHERS NINA

⁷³ "They are given simpler content [in] the context [of what is] being taught...They are given more contact hours away from the other learners in the very same class during the very same lesson"

⁷⁴ 1.3 FGD TEACHERS NYABIKONGORI

LC supported teachers to implement individual education plans.

Teachers reported that they learned the value of developing and implementing individual education plans⁷⁵ through training and continued support from LC:

We allocate a lot of time to focus on them [in order] to implement the individualized educational plan[s]⁷⁶.

IEPs...cater [to] the learners understanding so that [we] include the learner in the learning process...I consider that a very instrumental accommodation that has been advanced⁷⁷.

According to the teacher survey, 73% of teachers trained by the project report implementing IEPs. Some teachers reported that it was difficult to develop and implement IEPs due to the extra time and resources required, as well as the limitations of the current education system:

It's not too easy to implement the individualized educational plan because it requires a lot of time and other resources which are not provided for by the current system. So, it's not very easy to implement. However, we are trying our best⁷⁸.

Teachers demonstrated a comprehensive understanding of the IEP development process and emphasized the importance of consulting multiple stakeholders, including EARCs⁷⁹, previous schools, and parents⁸⁰.

Teachers interviewed at Endline reported:

There are specific learners that you come to realize that they have a certain problem in a given subject...so it means that you have to get the history of the school[ing]...You have to do some interviews with the parents, friends, other teachers... before you deduce, you give the learners some...test. So, from the test tools, we are able to

⁷⁵ "When we prepare individual educational plan, we have to ...cater for the interest of all the inclusive children so that all their needs are kept...[so] no one is left out" 1.2. FGD Nyamome

⁷⁶ 1.2. FGD Nyamome

⁷⁷ 1.2. FGD Nyamome

⁷⁸ 1.2. FGD Nyamome

⁷⁹ "It is prudent to involve professionals so that you ascertain that this child indeed has a disability. So, you can make a referral to the assessment centre so that they help you...to establish the extent of the disability, and that will give the right intervention" 1.2. FGD Nyamome

⁸⁰ "It's involving the parents and the school administration so that, if you identify a child, then...maybe [the] parents are not even aware...they are also included in the management of these learners with special needs" 1.2. FGD Nyamome

deduce that...this learner has a problem, let's say in Mathematics...We have the objectives that are short term and then we have the objectives that are long term⁸¹.

The training exposed us to the importance of [the] EARC, so it has increased cooperation between our school and EARCs...We rely on their assessment to get the right dimensions for these learners with disabilities⁸².

Teachers said that working closely with parents supported the learning of children with disabilities and that parents and caregivers have demonstrated an increased interest in their children's education. As teachers commented:

Parents of these learners also want us to understand about the needs of their learners...So, they're always concerned about what they do in their daily activities, and they support us in whatever we are doing to try to help these learners⁸³.

I can say yes because you know some of these parents don't want to accept the problems their learners have. But with time, they got to accept. Some of them didn't know until the learners' problems were identified, and they were able to support their learners so that they can accept their situations with the problems⁸⁴.

In validation, participants confirmed that collaboration between teachers, EARCs, and parents helped to support students with disabilities. Validation participants explained that the project facilitated this beneficial collaboration by creating forums for parents, EARCs, and teacher to meet.

Inclusive education improved peer relationships between learners with disabilities and those without.

Teachers commented that engaging children with disabilities in groups with children without disabilities supported all learners to feel included, enhanced cooperation between children, and strengthened supportive peer relationships.

Several teachers summarized:

It enhances learning even to other learners without disabilities because it has enhanced cooperation between learners with and without disability⁸⁵.

⁸¹ 13.2 FGD TEACHERS NINA

⁸² 1.2. FGD Nyamome

⁸³ 1.2. FGD Nyamome

⁸⁴ 1.2. FGD Nyamome

⁸⁵ 1.2. FGD Nyamome

It's not only beneficial to the learners with the disability but to all the learners⁸⁶.

Pressures from the Ministry of Education to achieve high exam results, pass rates, and high mean scores can disincentivize teachers from adopting inclusive practices.

Teachers shared:

The only challenge is our education system as it is arranged now...[It] is exam oriented. So, at the end of the day, people are concerned with the end product, 'How many did you take to the university?' not 'How many did you improve from [a grade of] E to C?'...That overall assessment. It creates a mentality within the system...Even if you do that perfectly well, and you don't have somebody who has gone to the university, then you [are] viewed as failures. So, as much as we would want to have all these learners, [there are] challenges incorporated [in the system]⁸⁷.

The Ministry of Education has become increasingly aware of inclusive education.

According to some teachers, the Ministry of Education has begun to emphasize reporting the number of children with disabilities in schools and providing accessible examination materials despite the parallel pressure placed on teachers and schools to achieve high scores:

The Ministry of Education also has their element, especially when you look at the Kenya National Exam Council. When the schools are being registered for exams, they may ask so many details which we provide: people with visual impairment, hearing impairment etc. So...you have large font...they never used to have that before. But because of that awareness, even the government has taken responsibility through the ministry⁸⁸.

Participants in validation reiterated that the Ministry is supporting students with disability but added that the Ministry should improve efforts to collect data on students with disabilities and support schools accordingly.

Some teachers shared that it is difficult to attend to children with disabilities and complete the curriculum, especially with large class sizes.

Teachers said that large class sizes make it difficult to provide the additional attention and planning time necessary for children with disabilities. They explained that the added attention

⁸⁶ 1.2. FGD Nyamome

⁸⁷ 1.2. FGD Nyamome

⁸⁸ 1.2. FGD Nyamome

required for children with disabilities and the additional time spent planning and supporting them prevented teachers from covering the whole curriculum⁸⁹:

The challenge is the numbers. The ideal class [should] be around 15 to 20. We have classrooms where you have 60. So, organizing that becomes a bit of challenge. Funding for more teachers should be done either through your organization or the ministry⁹⁰.

I need more time to teach these learners. Within 35 minutes to 40 minutes you can't manage, so that one should also be changed. And then in the curriculum, I tend to believe that...it should be modified...They should put into consideration, ok - this is a learner with this kind of disability⁹¹.

We also have to come up with...teaching learning aids...There comes a time that you teach this learner as an individual. That's why I tell you that we are not able to cover the syllabus in time. You have to attend to that learner, you know that, ok, I have another learner at the other corner to go and attend to and remember there are different IEPs⁹².

One teacher said that additional focus on children with disabilities led to high-achieving children acting out because of a lack of challenge and attention:

For those people who are slow learners, the teacher takes more time, and then it really affects those children who are gifted and talented because you have to go with these children and the gifted and talented want to be ahead. So, most of the time, they make a lot of noise⁹³.

In validation, participants explained that class sizes became a barrier when the government made primary and secondary education free for all and increased enrolment. Participants suggested that hiring aides and paraprofessionals to assist teachers could help address the barrier and make sure that the learning needs of all students are met.

⁸⁹ *The curriculum has taken a lot of time...Finding more extra time with these learners, the time is very limited*1.2. FGD Nyamome

⁹⁰ 1.2. FGD Nyamome

⁹¹ 13.2 FGD TEACHERS NINA

⁹² 13.2 FGD TEACHERS NINA

⁹³ 1.8 FGD TEACHER ONYALO

Teachers said that adopting inclusive education practices required extensive effort but was rewarding when children with disabilities had the opportunity to participate equally in learning.

Teachers shared:

At least that learner is able to put bread on top of the table and I end up sleeping soundly, fully satisfied. I don't have stress [this] time. It only becomes a problem when I know that I've been pushing this learner, I've taught, taught, taught, taught, advised, did guidance and everything, and at the end of the day I'm not successful. A teacher will never sleep. He/she will just be dreaming of that learner. What else should I do? I think the strategy that I use isn't working, so I'm going to change it. So, at the beginning of the new day, you come up with another strategy, you use it, till you succeed⁹⁴.

You know, before, there was a lot of exclusion...we would exclude some learners. We would not take out a learner who has physical impairment...for an excursion, for a field activity. Sometimes, we would even leave them when we go out for trips, academic trips...you can imagine! But today it is not possible. All of them have to go, they have to learn. We give them [the] opportunity...to learn at their pace...I think their participation has really improved. They participate in virtually everything⁹⁵.

Meeting Individual Learning Needs

During teacher training, the project emphasized the importance of creating supportive climates for children with disabilities to learn and make mistakes.

LC supported teachers to meet the learning needs of girls with disabilities.

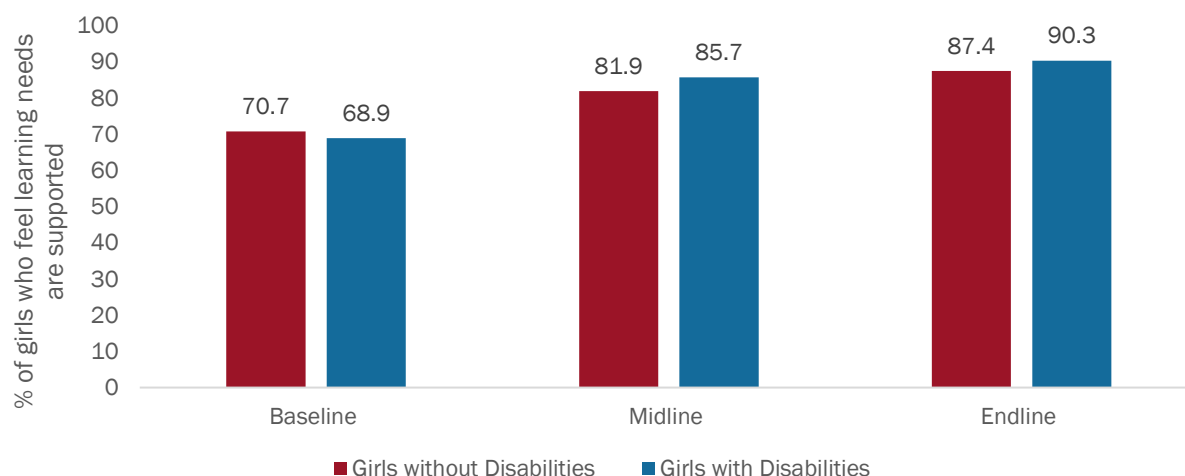
At Endline, 90.3% of girls with disabilities felt their learning needs were supported by their teachers⁹⁶, compared to 68.9% at Baseline and 85.7% at Midline.

⁹⁴ 13.2 FGD TEACHERS NINA

⁹⁵ 15.1 IDI C T C HAWINGA

⁹⁶ GS 292 - In general, do you think your teachers or instructors provide for your own individual learning needs?

Figure 8. The extent to which girls felt their learning needs are supported by teachers



Increases were observed for both girls with disabilities in project schools and for girls without disabilities in non-project schools, suggesting that the wider education environment has generally become more supportive in project areas.

Inclusive education and changes in discipline practices helped girls with disabilities to feel better supported.

A young mother with a disability:

Initially, embarrassment made [children with disabilities] feel bad, so it was difficult...to learn. So, if you find that, at home, you are being encouraged by the parent and at school you are also being encouraged by the teacher, you also feel encouraged to continue working hard⁹⁷.

Teachers confirmed improved support⁹⁸⁹⁹:

⁹⁷ 11.3 IDI YOUNG M.MBITA

⁹⁸ "We try to encourage them so that they can work hard and achieve their goals like the rest of the students who are not like them" 1.2. FGD Nyamome

⁹⁹ "We've tried to implement the one-on-one contact with the learners by continuously monitoring their problems and giving them guidance and advice all the time on what they need and the difficulties that they face" 1.2. FGD Nyamome

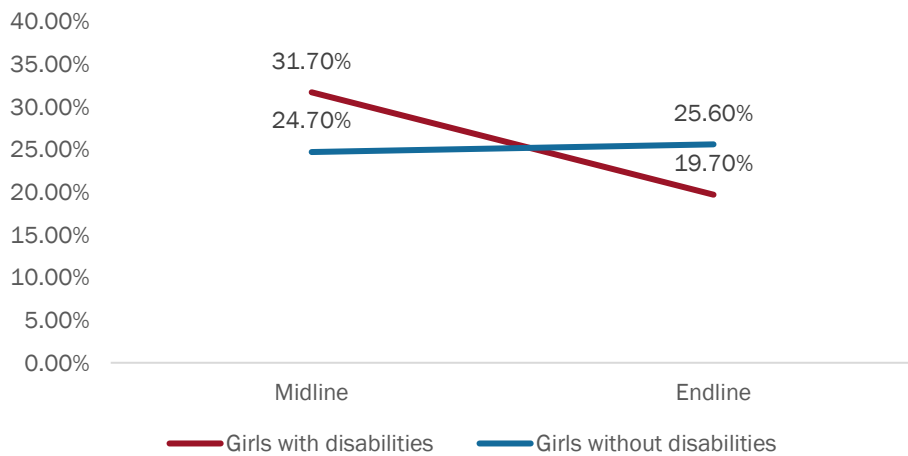
Yes, there is a change because you know now you have to take care of each and every learner's need - those with hearing impairment, the visual impairment - so that you ensure that all of these learners' needs are catered for and no one is left out¹⁰⁰.

Because of the increased awareness that is in the trainings, [students with disabilities'] participation has increased because you see there is increased focus on these learners and therefore teachers are very keen to see that they participate. And indeed, they are responding by cooperating maximumly in the learning process, and so their participation is good, significantly in the last two years¹⁰¹.

The project supported teachers to move away from using corporal punishment and reduced the proportion of girls with disabilities reporting being physically punished by their teacher between midline and endline. However, 19.7% of girls with disabilities still reported being physically punished by their teacher at endline.

At Midline, 31.7% of girls with disabilities reported being physically punished by their teacher in recent weeks, but at Endline, this proportion decreased to 19.7%. The proportion of girls without disabilities who had been physically punished in recent weeks in non-project schools remained the same between Midline and Endline, suggesting that the project positively influenced discipline practices in project schools.

Figure 9. Proportion of girls physically punished by their teacher in recent weeks



After findings from Midline indicated that girls with disabilities were more likely to have been physically punished by their teacher in recent weeks than girls without disabilities at statistically significant levels, the project conducted additional trainings and awareness

¹⁰⁰ 1.2. FGD Nyamome

¹⁰¹ 1.2. FGD Nyamome

raising for teachers on alternative strategies for disciplining children. The project also raised this issue in subsequent advocacy activities with relevant government authorities, including the Ministry of Education and the Directorate of Children Services. The Ministry went further to issue a letter stating their position on corporal punishment. The same letter was also circulated to all project schools.

Teachers reported adopting alternative strategies for disciplining children with disabilities and managing disruptive behaviours.

Teachers explained:

Through going through the inductions done by LC and other organizations, we've seen the that even the corporal punishment has been removed and the methods for punishment have changed over the years¹⁰².

When you tell a person with disability that I've given you a different punishment, first off all, he will hate himself, and you are promoting that scenario where he is seeing that 'I'm not able'...So, when you are giving punishment, you have to...know...this group of people you are giving punishment, a person with disability is there, so you have to design that punishment in a way that it is not so harsh to any person...They have to be uniform punishment to all¹⁰³.

You know, some of these learners with disabilities...have behaviours fluctuating from time to time, depending on the moods that they have. Learners with disabilities...you have to attend to them carefully unlike these other normal children. But disciplining is [the same] for all these children, and we said we use guidance and counselling...So, all this is done for all these learners equally¹⁰⁴.

Utilizing alternative discipline techniques and reinforcing positive behaviours, creates an environment where children can make mistakes and learn from those mistakes. Teachers continued to explain:

We discipline learners in the class in various ways...Some of them we discipline after the class, but whether in class or outside the class...you correct [them] by giving them advice on whatever they've committed...Also, when you appreciate those ones that

¹⁰² 1.3 FGD TEACHERS NYABIKONGORI

¹⁰³ 2.11 IDI TEACHER REMANYANKI

¹⁰⁴ 1.2. FGD Nyamome

have done better...[those that] did wrong will now have the opportunity to change...You can now point to them...[to] be a mentor in the class¹⁰⁵.

Yes, they are different because children with the disabilities - you cannot rush in punishing. But now, after finding out why they did a mistake, now you'll find a better way of correcting...because...they will not realize their mistake...So, if you give them a punishment and they failed to realize their mistake, then they will run away from school¹⁰⁶.

Some teachers still reported caning children with disabilities but now do it outside of class, where the child is not ashamed of being caned.

This practice stands in contrast to national policy. Wider education sector stakeholders working in the region, should consider additional activities to continue to address corporal punishment. Validation participants emphasized that the national policy against corporal punishment must be implemented in full.

In my class, when a learner makes a mistake, I do not discipline the learner in class but I'll call him or her later to enquire why they made a mistake...After finding out, I will give out two canes depending on the weight of the mistake¹⁰⁷.

Although teachers report that they do not use corporal punishment to the same degree as before, they also claim that children with disabilities 'play the victim.' Future activities should seek to address these views to ensure non-discrimination:

What caused the changes first was legislation from the government, banning of corporal punishment, and then introducing [the] guidance and counselling concept. However, there are certain challenges, especially when learners with disabilities play the victim...When they have a problem and you want to help them, then they begin to behave as if, now, because of their condition, that victim syndrome is sometimes a challenge¹⁰⁸.

¹⁰⁵ 1.3 FGD TEACHERS NYABIKONGORI

¹⁰⁶ 1.3 FGD TEACHERS NYABIKONGORI

¹⁰⁷ 1.3 FGD TEACHERS NYABIKONGORI

¹⁰⁸ 1.2. FGD Nyamome

COMMUNITY ATTITUDES

The project aimed to improve the attitudes and perceptions of families, communities, and peers to support girls with disabilities in attending and learning at school.

Project activities positively influenced the support that parents and communities give children with disabilities. The project's Parent Support Groups (PSGs) encouraged parents to take positive action to support the education of children with disabilities by bringing children to school and investing in school materials.

Girls also felt increasingly respected, included, and accepted by the community, although not at statically significant levels. The project's outreach to communities and local leaders raised awareness of safeguarding issues and has improved work to curb sexual violence against children with disabilities, although stakeholders reported that sexual violence still poses a significant issue.

To understand changes in parental and caregiver engagement and support, the study measured the:

1. Extent to which families, community, and peers demonstrated positive actions that supported girls with disabilities to go to or stay in school
2. Proportion of girls with disabilities who felt included or accepted by the community
3. Percentage of other male parents (not male mentors) who supported girls with disabilities to go to secondary and/or VTI

Supporting Girls with Disabilities to Stay in School

To measure the extent to which families, community members, and peers demonstrated positive actions that supported girls with disabilities to go to or stay in school, the evaluation used a 3-item scale¹⁰⁹ in the Girls' survey to calculate two positive actions at Midline and Endline.

The project supported parents to take positive actions to support the education of their girls with disabilities.

¹⁰⁹ Your parents/caregivers provide you with the necessary materials to attend and learn in school.

Your parents/caregivers support you to get to and from school.

Your parents/caregivers speak out to improve the way people in your community treat children with disabilities

81.7% of girls with disabilities reported that their parents took at least 2 positive actions to support them to stay in school. Table 4 details the proportion per measure. There was a significant increase from Midline to Endline in the proportion of girls with disabilities who reported that their parents took at least two positive actions to support them to stay in school.

Table 4. Breakdown of Positive Action Measures

Measure	Proportion
Girl reports that parents provide them with materials needed for school	84.3%
Girl reports that that parents support them to get to school	63.3%
Girl reports that parents want to improve the way people in the community treat children with disabilities	87.0%
Girl identifies at least 2 positive actions that enable girls with disabilities to go to school	81.7%

There was no significant difference between Midline and Endline in the proportion of girls without disabilities who reported positive support from parents. This suggests that project supported parents to take positive action regarding their girls with disabilities' education.

At both Midline and Endline, a higher proportion of girls with disabilities reported receiving positive support from their parents than girls without disabilities¹¹⁰.

In interviews, a teacher described the increase in parent support over the term of the project:

It is much better because the parents...I've interacted with, you can see they can admit to the fact that their children who have disabilities are human beings and they give them equal opportunities in education... Parents are changing their attitude, though slow, but it's changing. So, it's better now than two years before¹¹¹.

Some parents still undervalued the importance of education for girls with disabilities. As one girl explained:

¹¹⁰ A paired-samples t-test was conducted to compare the means of girls with disabilities who reported two positive actions at Midline and Endline. There was a significant difference in the scores for Midline ($M=0.7, SD=0.3$) and Endline ($M=0.8, SD=0.3$). $t(226)=-2.1, p=.032$

¹¹¹ 15.1 IDI C T C HAWINGA

My results were not all that good. So, she told me that she never took me there to waste her money, and there is no need for me to go to school only to waste her money...So she told me to get it right in my mind that I was to come back home and that it how it ended¹¹².

Parent Support Groups increased parental support for girls with disabilities to continue their education¹¹³.

Girls with disabilities whose parents were PSG members were more likely to report that their parents took at least two positive actions to support them to stay in school, compared to girls with disabilities whose parents were non-PSG members. This suggests that PSGs are an effective intervention for supporting girls with disabilities.

At Midline, PSG members scored higher on supporting children with disabilities than non-PSG members at a statically significant level¹¹⁴. At Endline, results were not significant.

These results suggest that PSG membership had an effect on increasing positive actions that support girls with disabilities to go to or stay in school. When a parent of a girl is a PSG member, girls feel more supported.

Many parents described the impact that PSGs and project trainings had on their attitude and interactions with their children with disabilities:

Being in the group has helped me, especially when we share among ourselves. Unlike before when I was just alone with my CWD at home, and no one was there to advise

¹¹² 25.1 IDI GIRLS WHO DROPPED FROM SECONDARY

¹¹³ *"The benefits I've received from PSG, number 1, I've been trained how to live with a child with disability. Secondly, we've been given skills on how we can support children. We do table banking and business"* 13.1 FDG PARENTS MBITA

"I give her a chance to learn...I have to respect her rights just like other children...I have to treat them equally because they are all my children. Another one [is] for the child to go to school" 13.1 FDG PARENTS MBITA

"My mind has changed severely...A change of mind has made me understand how to live well with my child. My mind has changed through the training I have received" 13.1 FDG PARENTS MBITA

"Being in groups has made us together and made it easy [to intervene] when something is affecting our children" 13.1 FDG PARENTS MBITA

¹¹⁴ An independent-samples t-test¹¹⁴ was conducted to compare identification of 2 positive actions by whether a parent or caregiver was a member of a project-supported PSG. At Midline, there was a significant difference in the scores for PSG members (M=2.5, SD=0.6) and non-PSG members (M=2.1, SD=0.9).

me. I have learnt how to handle children with disabilities, which I did not know before this project's arrival¹¹⁵.

Leonard Cheshire, it made us be aware that the children with disabilities are just like the other children without disability. So, just the way we were fighting for the other children to go to school, they made us take even the ones with disability to school, and we've even realized that some of our children with disabilities had a very clear mind¹¹⁶.

Teachers and mentors also noted the impact of PSGs on parental support:

Before the project, there was negative attitude from both parents, teachers, and even fellow pupils. But after getting advocacy messages, getting sensitization, the parents are being mentored by other parents in their support groups¹¹⁷.

Being in parents support group brought many changes...You may discuss as a group, the level of [how] the children should be treated. Through that discussion, a parent would understand how long she had gone or he had gone without protecting the child's needs. So, through PSGs we've acknowledged that many of our parents had not been taking their children seriously, their education seriously. So, through PSGs we could talk to them, advise them on how to be with their children, how to protect their children¹¹⁸.

Parents increasingly invested in the education of their girls with disabilities.

84.3% of girls with disabilities reported that parents provided them with materials needed for school. Between Midline and Endline, there was a statistically significant increase¹¹⁹ in the proportion of girls with disabilities who reported that their parents provided them with materials, suggesting that parents are increasingly investing in their girls with disabilities.

There was also a statistically significant increase¹²⁰ in the proportion of girls with learning difficulties who reported that their parents provided them with materials necessary to attend and learn in school.

¹¹⁵ 2.1 PSG NINA

¹¹⁶ 13.1 FDG PARENTS MBITA

¹¹⁷ 15.6 IDI TEACHER NANGA

¹¹⁸ 17.1 IDI M.M MBITA

¹¹⁹ Results of a paired samples t-test¹¹⁹ show a significant increase in the number of parents reported to provide materials needed for school between Midline and Endline.

¹²⁰ Paired samples t-test¹²⁰ by assessed disability

One girl shared:

I thank my parents because my mother has helped me, and when I tell her that I'm lacking something, she really struggles to the extent she can manage to send me some of the things that I use here in school¹²¹.

In interviews, many parents acknowledged their responsibility to provide scholastic materials to their children with disabilities¹²²:

A primary school child will need books, pens, money, because there are some levies that are paid in school. So, when paying for her, you encourage her too to continue going to school¹²³.

A teacher described:

Some of [the parents] did not want to pay school levies for [children with disabilities]...You find that, nowadays, the parents are very much responsible, they buy uniforms, even school shoes¹²⁴.

Another teacher, however, suggested that LC's material support has let parents off the hook and allowed them to shirk their responsibility:

Some parents, we have had rough time with them...So, you find that when it comes to materials [LC] give[s], some parents, they feel you as the teacher [are] in charge of the children, or LC or the C2C¹²⁵.

The project's sensitization activities encouraged parents to bring children with disabilities to school.

Interview participants revealed that one of the largest barriers to education for girls with disabilities had been parental attitudes. Shame, stigma, and lack of awareness of educational opportunities led many parents to keep their children with disabilities at home and out of sight of the community.

¹²¹ 9.1 FGD GIRLS NDERE

¹²² "After class 8, I tried my best to buy for her some of the requirements like shoes. Most of all, what helped a lot was LCD who enrolled them in primary school. So, I was trying my best but most of it was done by LCD" 14.2 IDI PARENT MBITA

¹²³ 10 FGD PARENTS MBITA

¹²⁴ 15.6 IDI TEACHER NANGA

¹²⁵ 1.6 FGD TEACHERS URIANDA

63.3% of girls with disabilities reported that their parents supported them to get to school. The proportion was slightly higher at Endline than at Midline, but the difference is not significant.

87% of girls with disabilities reported that their parents wanted to improve the way community members treat children with disabilities¹²⁶. The proportion was slightly higher at Endline than at Midline, but the increase is not significant.

Teachers and EARC staff explained how the project's community sensitization activities helped address this barrier¹²⁷:

[Parents] never used to take some of these children to school. So, they had that negative attitude that these ones, even if you take them to school, it is a waste of time and money. So, because of change of attitude, those children were brought to school¹²⁸.

It will not be easy for [the parents] to [let] children go to school because they feel they are not supposed to get out. So, once you sensitize them and they share with you and they see...examples and such...So, they can now be free to accept [and send] their children to school. So, it is by far than when the Leonard Cheshire, VSO came in, now we could get some money and then sensitize the parents outside...now they could accept to bring their children by for assessment¹²⁹.

In validation, participant also noted that parents play a critical role in identifying disabilities early on and getting children assessed so that they have the support they need in school.

¹²⁶My parents/caregivers want to improve the way people in our community treat children with disabilities

¹²⁷ "Others were kept at home...but as we worked around with the caregivers and the parents, they saw that kind of positive move. Then the rest just came into our school" 15.8 IDI C to C NYIKENDO docx

"You'll find that there are some 50% of parents who may not really bring out children with disabilities. They still close them in and that still remains a substantial barrier to the excellence and growth of such children academically, or even in learning process. But with persistent teaching, persistent change of attitude through educating the parents, I think we can do away with the barrier bit by bit" 15.1 IDI C T C HAWINGA

"Inclusive education has changed because most of the parents that did not even want their learners to be exposed, some of them have come out and brought their learners to school" 2.9 IDI ENGLISH&MATHS TEACHER

¹²⁸ 15.4 IDI C TO C ONYALO

¹²⁹ 16.1 IDI EARC MIGORI

Project activities encouraged some parents to move away from using corporal punishment to discipline children with disabilities, according to interviews¹³⁰.

Many parents described those trainings helped them adopt more positive discipline practices:

In the past two years, when she made a mistake, I was getting a cane and striking her...After being trained on how to handle children with disabilities, I left that and now use guidance and counseling, which I feel is better. This has even improved her performance in school¹³¹.

However, other parents described their ongoing use of corporal punishment, suggesting that future activities should continue to address this practice.

When she has made a mistake, I talk to her. But when the mistake is involving her and other children without disabilities, I simply get a cane and strike them all so that other children don't feel inequality¹³².

When disciplining them, it's written even in the bible how to discipline a child. I just punish her according to the mistake she has done, not a serious caning...If she has hearing impairment, then now I slap the ears, I just discipline her based on the wrong she has done¹³³.

¹³⁰ "When she was still young, I could get a cane and strike her, but I did not know that she had impairment. After joining the project, I got sensitized, and I was taught on how to handle her. Now, I use guidance and counselling" 2.1 PSG NINA

"In the past two years when my child with disability made a mistake, I encouraged her siblings to cane her, and I also did the same...After being in this group, I learned that this was wrong and changed. So, I simply call her and talk to her because I realized that caning could even scare her and run into a ditch" 2.1 PSG NINA

"In the past two years...I get a cane and strike them thoroughly. I even slapped them before getting a cane. After training, I realized that caning was not helping them so now when they make mistakes I call them and talk to them" 2.1 PSG NINA

"The benefit that my child has received in the group is that sometimes the group members intervene to understand whether the parents take good care of those children. Sometime they come when I'm not there and ask my child, 'Does your mum cane you so badly?" 13.1 FDG PARENTS MBITA

¹³¹ 2.1 PSG NINA

¹³² 2.1 PSG NINA

¹³³ 13.1 FDG PARENTS MBITA

Community Inclusion

10% more girls with disabilities felt respected by the community at Endline than at Midline, although the difference is not statistically significant.

The proportion of girls with disabilities who strongly agreed that they were respected by everyone in the community increased between Midline (15.5%) and Endline (25.4%), but the difference is not significant.

An SBIT member spoke to the team’s community sensitization efforts, saying, “*We talk to the community members on their [children with disabilities’] rights, and we also ensure that these children are respected in the community where we live*¹³⁴.”

Figure 10. Girls with disabilities: I feel respected by everyone in my community¹³⁵

More girls with disabilities felt included in community events but changes were not statically significant.

The proportion of girls with disabilities who strongly felt that they had been included in community events¹³⁶ increased between Midline (17.2%) and Endline (28%)¹³⁷.

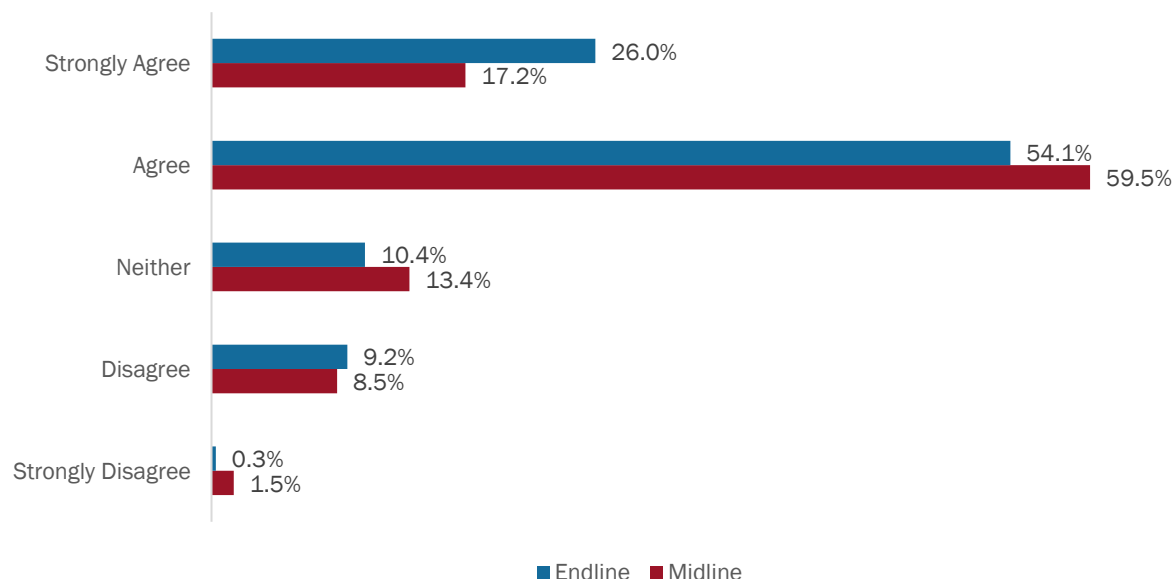
¹³⁴ 19.1 FGD SBIT NYASARE

¹³⁵ n=249

¹³⁶ Community events include religious ceremonies, like attending church, weddings or funerals as well as other cultural community celebrations.

¹³⁷ See **Error! Reference source not found.**

Figure 11. Girls with disabilities: I feel included in community events¹³⁸



In the project context, stigma associated with disability has previously been reported to prevent girls with disabilities from participating in community events. According to stakeholders interviewed at Midline, parents were reluctant to allow children with disabilities to participate in such events because of social stigma, but by Endline the attitude has changed as described below.

Teachers described how the project’s sensitization activities affected community inclusion¹³⁹:

One thing that has caused these changes is that the rest have been educated on how to include [girls with disabilities] amongst themselves. And that one has made them feel very free - that they are part and parcel of the society where they belong...This acceptance, resulting from the community being educated on how to live with people with disability has made it easier for coexistence and intermingling of everyone, including girls with disability¹⁴⁰.

In the past...these children were [segr]egrated and they could be addressed differently. But now, they are put together and even the teachers or the community

¹³⁸ n=249

¹³⁹ “It was less safe [before] because...people living with disabilities, two three years back...there was a lot of exclusion from the mainstream activities in the community for learners or children with disabilities. But...the community is picking up slowly” 16.6 IDI REPLACED C TO C TEACHER HAWINGA

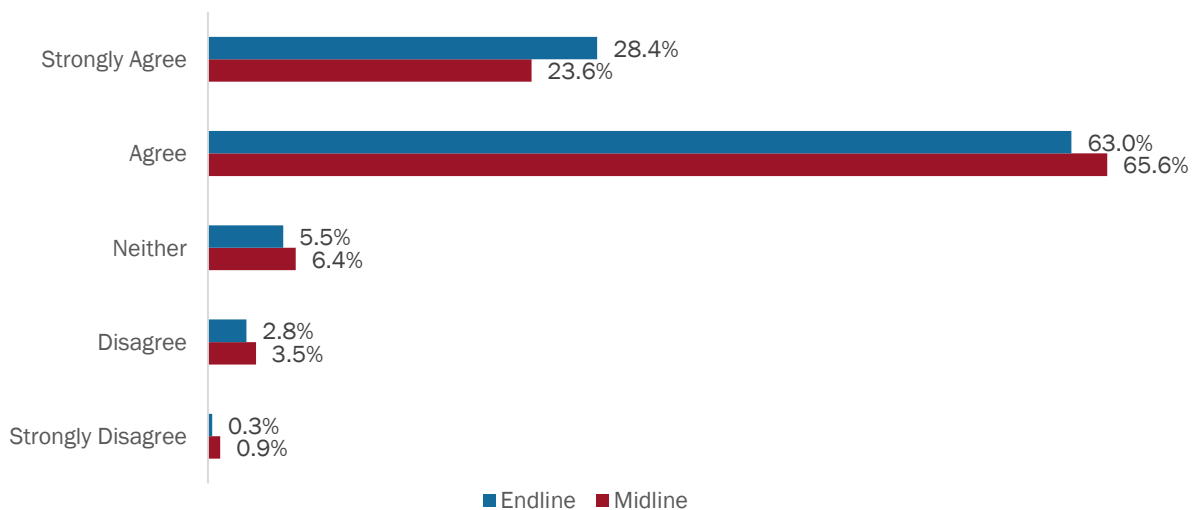
¹⁴⁰ 1.8 FGD TEACHER ONYALO

members now know that no one should be side-lined because of any problem, but people should be living together and everything be done together¹⁴¹.

More girls with disabilities felt accepted by the community, but changes were not statically significant.

The proportion of girls with disabilities who strongly felt that they were accepted by the community increased between Midline (23.6%) and Endline (28.4%) ¹⁴², but the increase was not significant¹⁴³.

Figure 12. Girls with disabilities: I feel accepted by my community¹⁴⁴



Parents and teachers attributed changes in community acceptance to LC trainings:

In the last two years, there were some children who couldn't be together with others and even the community could not take the initiative of reporting the issue of a child with disability. All these are attributed to the trainings we've received...The LC team...alert[ed] the community that all children are equal and the children with disability are the same as others¹⁴⁵.

I think the community has also changed, the way they used to view these children back at home. It's the knowledge we have given the children and they have passed it to

¹⁴¹ 10 FGD PARENTS MBITA

¹⁴² See **Error! Reference source not found.**

¹⁴³ Paired samples t-test

¹⁴⁴ n=249

¹⁴⁵ 13.1 FGD PARENTS MBITA

them [the community], they have also seen the importance of these children going to school¹⁴⁶.

However, some girls with disabilities noted ongoing community stigma:

The community people look at the children with disabilities as those who are cursed in the community, and so they shouldn't come out because they'll be laughed at by their peers or other community members¹⁴⁷.

There are those who despise them but there are those who love them and some even look at them as less important even as some look at them as very important people¹⁴⁸.

Girls with functional difficulties reported feelings of inclusion, acceptance, and respect to a lesser extent than girls without functional difficulties.

Comparing¹⁴⁹ by functional difficulty, a significantly lower proportion of girls with hearing, communicating, seeing, walking, concentrating, and learning difficulties than girls without these difficulties felt included, accepted, and respected.

Table 5. Girls with disabilities who felt included, accepted and respected by their community, by Washington Group Short Set on Functioning (EL)

DOMAIN	WITHOUT DIFFICULTY (n=259)	WITH DIFFCULTY
Communicating ¹⁵⁰ (n=25)	84.7%	72.0%
Seeing ¹⁵¹ (n=142)	84.7%	79.9%
Hearing (n=72)	84.7%	81.2%
Walking ¹⁵² (n=18)	84.7%	73.7%

¹⁴⁶ 1.7 FGD TEACHERS CHINATO

¹⁴⁷ FGD_with_Girls_with_disabilities_enrolled_in_Secondary_school_Onyalo

¹⁴⁸ 25.2 IDI_with_girls_with_disabilities_who_dropped_out_of_secondary_Kuria East

¹⁴⁹ Independent samples t-test

¹⁵⁰ $t(282) = -4.3, p < .001$

¹⁵¹ $t(399) = -3.6, p = .001$

¹⁵² $t(275) = -3.2, p = .001$

Concentrating¹⁵³ (n=50)	84.7%	73.3%
Self-care (n=15)	84.7%	77.8%
Learning¹⁵⁴ (n=173)	84.7%	79.2%

Community attitudes across sub-counties remained largely the same.

Across the five sub-counties, girls with disabilities' perceptions of community respect stayed largely the same¹⁵⁵.

A larger proportion of girls with disabilities in Migori (35.7%) and Kisumu (35%) reported improvements in community respect. Further analysis did not reveal any association with PSG membership; however, a higher proportion of learners (37.9%) in Migori had their parents or caregivers who were PSG members.

Similarly, the proportion of girls with disabilities who felt included in community events largely remained the same between Midline and Endline across sub-counties¹⁵⁶.

Community sensitization helped make communities safer for children with disabilities, but sexual violence is still evident¹⁵⁷.

¹⁵³ $t(307) = -5.1, p < .001$

¹⁵⁴ $t(430) = -4.0, p < .001$

¹⁵⁵ See **Error! Reference source not found.** in Annex

¹⁵⁶ See **Error! Reference source not found.** in Annex

¹⁵⁷ "One of the results [is a] reduction of...rap[e] cases and all that because we've talked to parents about the status of the children" 17.1 IDI M.M MBITA

"It is currently safer because they now respect these children. They are being told that if you are caught misbehaving with a child with disability, then you are in for it. So, you find that it is something that the people living in the community know that this is how we handle a child with disability" 14.4 IDI PARENTS NANGA

"To my understanding, the community is becoming safer. By the community being enlightened, they see the need of educating such a child...I think with education [the community] get[s] enlightened. Then the community becomes safe because it has well informed people for the present and the future" 15.4 IDI C TO C ONYALO

Teachers and parents described how the community has become safer thanks to the project's work with community leaders¹⁵⁸ to impact on community attitudes:

Some could use [children with disabilities] in a very unbecoming manner. But now, they have welcomed and respected them. They now take them just like other children. In the past, a child with disability [was] hidden in the house, and rape cases were rampant, especially among the girls with disability, and all [this] was because they were not taken good care of. But now, they are taken good care of¹⁵⁹.

The community around us are very much aware of what is going on. Remember the son to the woman we were talking to, there was a day he was coming to school...the bus didn't go to collect them. So, immediately the boy was left around the school gate by the bodaboda. He had seizures. It is the community around who came and alerted the teachers and in fact they even alerted the watchman¹⁶⁰.

However, many parents, teachers and girls with disabilities noted that sexual violence against girls with disabilities is still a larger concern¹⁶¹:

In terms of security, you can't trust them. You see like those who are mental. Still some communities they can take for example raping because the child won't recognize him. So, still it is not safe¹⁶².

When you are at home and you are a girl, there are some criminals roaming around the village. You know, if they find a girl staying in the house herself, then there is rape case¹⁶³.

¹⁵⁸ "LC really took time to have meetings with the provincial administration, children department, churches, the chiefs, the assistant chiefs, and mostly, we were talking about issues of child protection" 15.3 IDI TEACHER NYAKAYTIEMBA

¹⁵⁹ 14.4 IDI PARENTS NANGA

¹⁶⁰ 15.6 IDI TEACHER NANGA

¹⁶¹ "The parent first of all was not positive...she was not supportive, and so this child got introduced into sex and she had to leave school. The community outside...they are taking advantage of these children and they are finding it not very safe outside there...Some people who are ready to take advantage of them because maybe they don't know how to talk for themselves, but for the children who have gone to C2C, they have been assertive enough and they can say no. They can say no in or outside unless they are taken advantage [of], as in people use force. But as per now, the children we have had for the last two years, we have been talking to them and they know their rights. The community is harsh" 15.2 IDI TEACHER KASSAGAM

¹⁶² 15.1 IDI C T C REMANYANKI

¹⁶³ 7 FGD GIRLS ONYALO SEC

SELF-ESTEEM¹⁶⁴

The project supported a larger proportion of girls with disabilities to sustain and improve their self-esteem between Midline and Endline, than girls without disabilities in non-project schools.

Qualitative findings suggest that self-esteem was supported by increased socialization between children with and without disabilities in Child-to-Child Clubs and through a more inclusive school environment.

Teachers reported that celebrating the success of children with disabilities and meeting them at their level of ability supported their self-esteem development and encouraged them to continue learning and challenging themselves. Facilitators of Child-to-Child Clubs also reported that increased engagement with their peers, supported children with disabilities to socialize more, be willing to try new things, and improve the way they saw themselves in relationship to others.

Several girls with disabilities described clear career goals and ambitions, signalling that project activities have supported girls with disabilities to have similar aspirations to their peers. Girls with disabilities want to go to university, become teachers, lawyers, doctors, fashion designers, hairdressers, actors and pilots. Girls with disabilities supported by the project see secondary school as a means to access better career opportunities and several explained how their aspirations had changed since they had received support from the project to attend secondary school. However, some girls with disabilities who had become young mothers underwent goal shifts, limiting some of their aspirations for the future.

Participants in validation confirmed that the project's mentorship programme, life skills training, psychosocial support, career guidance, dignity kits, and school accommodations supported girls with disabilities to improve the way they view themselves.

The project aimed to improve several key life skills amongst girls with disabilities. These include self-care, independent living, self-esteem, self-confidence, assertiveness, resistance to peer pressure, effective communication, informed decision-making, healthy relationships, stress management, anger management, conflict management, and sexual reproductive health knowledge, attitudes, and practices.

To support these improvements, the project:

¹⁶⁴ IO3: Self-Esteem: Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities (Intermediate Outcome 3)

- Delivered a life skills curriculum through Child-to-Child Clubs (C2C) organized in 50 primary schools and 25 secondary schools
- Trained 54 mentors with disabilities for girls in secondary schools¹⁶⁵
- Developed a best practice guide for mentoring girls with disabilities and published a Life Skills Manual
- Provided career guidance to girls with disabilities completing primary school
- Delivered 3-day financial literacy training to 83 teachers so that they could deliver financial literacy lessons in classrooms¹⁶⁶
- Provided Psycho-social support (PSS) to girls with disabilities through community social workers who maintained close relationships with girls including during school closures

The project supported some girls with disabilities to improve their self-esteem¹⁶⁷, but a large proportion of girls with disabilities experienced a decrease in self-esteem between Midline and Endline, likely due to school closures.

Self-esteem refers to the extent to which we like, accept, or approve of ourselves, or how much we value ourselves. Self-esteem is widely agreed to relate to wider indicators of general well-being. When a person's ideal self and actual experience are consistent or very similar, a state of congruence exists, which is an important basis for the development of self-esteem. The development of congruence is dependent on the positive regard that we receive from our social context¹⁶⁸.

39.4% of girls with disabilities increased their self-esteem between Midline and Endline¹⁶⁹.

¹⁶⁵ Goal of 60 to be trained by the end of the project

¹⁶⁶ Development of age-appropriate training and implementation

¹⁶⁷ Self-esteem was measured through the Rosenberg scale at both Midline and Endline. Self-esteem (also known as self-worth) refers to the extent to which we like, accept or approve of ourselves, or how much we value ourselves. When a person's ideal self and actual experience are consistent or very similar, a state of congruence exists, which is an important basis for the development of self-esteem. The development of congruence is dependent on the positive regard that received from social context. Self-esteem is determined by one's views of their ideal self, their actual self, and the 'positive regard' received from social context. Positive regard is driven by (1) the ways in which others, particularly significant others, react to us, (2) how one thinks they compare to others, (3) social roles, (4) the extent to which one identifies with other people.

¹⁶⁸ Self-esteem is determined by one's views of their ideal self, their view of their actual self, and the 'positive regard' received from social context. Positive regard is driven by (1) the ways in which others, particularly significant others react to us, (2) how we think we compare to others, (3) our social roles, (4) the extent to which we identify with other people.

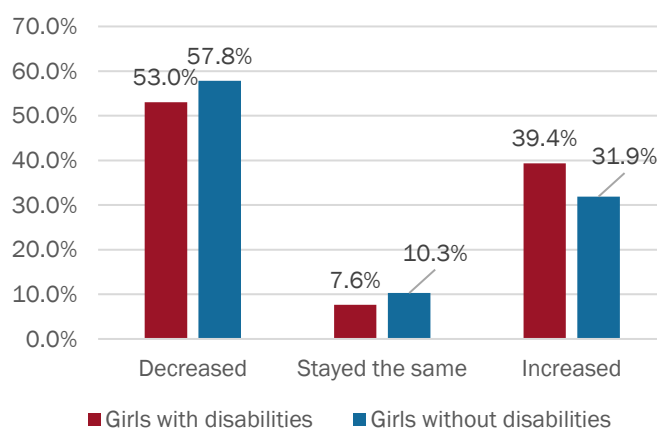
¹⁶⁹ Falling short of the project's target

Girls with disabilities were more likely than girls without disabilities to improve their self-esteem between Midline and Endline, at statistically significant levels¹⁷⁰.

This suggests that the project played a significant role mitigating the negative effect of COVID-19 and school closures on the self-esteem of girls' with disabilities, supporting them to experience improvements that were not experienced by girls without disabilities.

By comparison, only 31.9%¹⁷¹ of girls without disabilities improved their self-esteem.

Figure 13. Changes in Self-esteem for Girls with and without disabilities (n=434)



Most girls with and without disabilities experienced a decrease in self-esteem between Midline and Endline.

COVID-19 and school closures likely suppressed girls' self-esteem between Midline and Endline.

Self-esteem is determined by one's views of their ideal self, their view of their actual self, and the 'positive regard' received from social context. Positive regard is driven by (1) the ways in which others, particularly significant others react to us, (2) how we think we compare to others, (3) our social roles, and (4) the extent to which we identify with other people. Therefore, limited interactions with other children and with teachers during school closures likely had a negative influence on self-esteem.

¹⁷⁰ Chi-square test for association $p < 0.05$

¹⁷¹ The project aimed for 80% of girls to have improved their self-esteem by Endline.

COVID-19 also imposed challenges on children, including the death of loved ones and fears associated with contracting the virus in a climate of information uncertainty. As one teacher explained:

And of course, there is the psychological aspect of it. With Covid-19 some lost their parents so imagine the psychological effect, a burden on these learners with disabilities. Some of them still need a lot of psychological counselling and psychological support¹⁷².

Qualitative evidence indicates that several project activities supported girls with disabilities to develop and sustain positive self-esteem.

Inclusive practices and the opportunity to pursue alternative transition pathways likely influenced girls' self-esteem as they felt better supported by their teachers and had more opportunities to succeed. A teacher commented:

Right now, even those learners [children with disabilities] as they are out there, they can even greet you, "teacher hi,". During the past years, the learners would shy away, such that when a learner sees you, he/she would wish that the earth opens up and covers him/her in order not to see the teacher because 'I did not achieve in life.' But now they've achieved, we have mechanics, tailors...So, we are grateful for LC¹⁷³.

The inclusive environment contributed to the motivation of children with disabilities to participate and engage socially with their peers, which supported their self-esteem.

Teachers and C2C club facilitators reported:

I can say it has helped the learners in how they relate with others so that those with disabilities have gained confidence in themselves in how they associate with others¹⁷⁴.

I think their outcome has improved because of they have been included with the rest so they don't see as they are neglected there, so they tend to improve on their areas¹⁷⁵.

In fact, they're really changed because the ones with disability used to isolate themselves, but currently, they are taking life normally and they are just free with these

¹⁷² 16.6 IDI REPLACED C TO C TEACHER HAWINGA

¹⁷³ 13.2 FGD TEACHERS NINA

¹⁷⁴ 1.2. FGD Nyamome

¹⁷⁵ 1.3 FGD TEACHERS NYABIKONGORI

other kids. So, they just participate and they really enjoy the participation together with other learners who are in the normal status¹⁷⁶.

One thing that has caused these changes is that the rest have been educated on how to include them amongst themselves, and that one has made them to feel very free - that they are part and parcel of the society where they belong to. That free interaction that has been given in some subjects in terms of educating them on how to cater with people with disability has made it easier for them to understand them and intermingle easily¹⁷⁷.

A young mother with disabilities also reported that the way the teachers treat girls with disabilities, alongside improvements at home encouraged them to continue learning:

Initially embarrassment made [children with disabilities] feel bad... It was difficult for them to learn... If at home you are being encouraged by the parent and at school you are also being encouraged by the teacher, you also feel encouraged to continue working hard¹⁷⁸.

Child-to Child clubs supported the self-confidence and social skills of students with disabilities.

Teachers and club facilitators emphasized that socializing with other children in C2C clubs encouraged children with disabilities to participate in other clubs and led to growth in leadership skills, social skills, and self-confidence.

It has had a great impact...It has made the school and the community at large to believe that these children can do something better, so it has increased even confidence. The confidence level is in the school, in learners with disabilities have also increased so that a learner with disability can just be incorporated in any kind of activity...They are not even in that club alone; they are members of very many other clubs and very many other groupings. That in itself has boosted their self-esteem and we are seeing it even in their performance - the way they participate in the activities of the school. It has a positive impact¹⁷⁹.

One way I know the club has assisted the children with disabilities is that those ones with disabilities are now at a point of understanding that they can compete with these others who are good without disabilities. Another way I know is that they've come to understand that with a disability it doesn't mean that you cannot make it as a learner.

¹⁷⁶ 1.8 FGD TEACHER ONYALO

¹⁷⁷ 1.8 FGD TEACHER ONYALO

¹⁷⁸ 11.3 IDI YOUNG M.MBITA

¹⁷⁹ 15.1 IDI C T C HAWINGA

You can still come to school and learn with others, and I know some have come to understand that [the disability is] not their own making, it's natural and it happens to many people, it has affected many people¹⁸⁰.

Now, changes that we have seen here have been caused by social factor. This child was learning, and she realized that this child...is communicating with the other one, she also came back and realized that she can also do it, and she started...socializing with others. Up to date, she is doing so well¹⁸¹.

Initially, you look even at co-curriculum activities, they could shy off. Leadership positions they could shy off, but nowadays they try¹⁸².

Participation in club activities and engaging with children without disabilities also supported children to learn collaboration skills which extended beyond the clubs themselves.

According to club facilitators:

The main achievement is [the] ability of these learners to come up with something that generates income for them. I have even seen some [of] them they replicate what they had learnt here back at home. So, they are learning from one another. Then one other thing it has brought about [is] collaboration even among these learners themselves. They can collaborate, form a group at home, support each other, advice each other and I think that is a major achievement...Learners with disabilities don't imagine that they are lesser human beings - that they should be given a second place. They take up roles in leadership, and I think that is a plus¹⁸³.

Socially, I think the school is very safe because I think most of the girls who [have a] disability... they find room to freely interact [in] the school...You can just see from the way they interact, from the way they relate with others, the roles they are given I think it's helping them socially¹⁸⁴.

One girl with disabilities explained how things had changed:

Things have changed a lot...you just start to be proud of yourself. You say things [like] 'everything is possible'. If someone can do this, then ...I can do better... Now what I should do

¹⁸⁰ 15.4 IDI C TO C ONYALO

¹⁸¹ 2.4 IDI TEACHER NYAMILA

¹⁸² 2.14 IDI TEACHER ONYALO

¹⁸³ 16.6 IDI REPLACED C TO C TEACHER HAWINGA

¹⁸⁴ 15.1 IDI C T C HAWINGA

*is just to have faith in myself and be confident that yes, I can.... That is what I can say right now.*¹⁸⁵

Teachers reported that celebrating the success of children with disabilities and meeting them at their level of ability supported their self-esteem and encouraged them to continue learning and participating.

Teachers reported:

*And then the school has also...been able to ensure that when these children do well - even if they try, they are normally recognized...So, it also boosts their self-esteem that 'eh, in the midst of this environment we can also be called champions.' So, the school is very much very-very much sensitive about that because what you speak to somebody...[it] builds this person*¹⁸⁶.

Parents and caregivers reported that their encouragement supported girls with disabilities to maintain their self-esteem.

Parents reported providing encouragement to girls throughout the project's duration:

*I encourage her by telling her that, 'My child you know you are disabled and going to school is what can help you.' I also look at her results after they've done an exam and I tell her that, 'My child, in which position were you? Just continue working hard and don't look at yourself as someone who is unable*¹⁸⁷.

*I most of the time talk to her, telling her to always maintain humility wherever she is. I also tell her that, 'My child, if you don't go to school well enough, there is no one who will help you. And if you go to school, well then you will help yourself because even the men of today need working class women. If you have nothing at hand then there is no way you will help yourself. So, I'm praying to God to bless you so that you learn well when I'm still alive so that you can be able to help yourself in [the] future. I usually sympathize with you, but with education, you will help yourself*¹⁸⁸.

¹⁸⁵ 7 FGD GIRLS ONYALO SEC

¹⁸⁶ 2.6 IDI TEACHER KEBAROTI

¹⁸⁷ 14.3 IDI PARENTS ONYALO (1)

¹⁸⁸ 14.3 IDI PARENTS ONYALO (1)

Aspirations and Career Goals

Several girls with disabilities described clear career goals and ambitions, signalling that project activities has supported girls with disabilities to have similar aspirations to their peers.

Girls with disabilities want to go to university, become teachers, lawyers, doctors, fashion designers, hairdressers, actors and pilots¹⁸⁹. Girls with disabilities also indicated that they want to engage in income generating activities to earn livelihoods for themselves and their families.

The project aimed to support the aspirations of girls with disabilities through the life skills curriculum delivered in Child-to-Child Clubs and through additional guidance counselling provided to girls with disabilities after they complete primary school and consider relevant transition pathways. One boy with a disability explained how his aspirations changed,

Initially I wanted to fetch water for people but nowadays there is hope because LCD has taken us to school and this can help us¹⁹⁰.

Another boy with a disability supported by the project outlined that he now “want to become a leader of those championing for [the rights of people with] disabilities”¹⁹¹.

Some girls with disabilities were supported to pursue these aspirations through vocational training:

With the course I’m currently [in], I would like to have a future of [independence] where I’ll be able to earn my own cash, [own] a tailoring shop...so that I become my own manager in everything I do without bothering my parents with phone calls here and there to for food and other things¹⁹².

Girls with disabilities supported by the project see secondary school as a means to access better career opportunities.

Several girls with disabilities reported that secondary school would help them earn incomes and better the living conditions of themselves and their families. Often this was brought about

¹⁸⁹ Range of qualitative sessions with girls with disabilities including KIIs and FGDs

¹⁹⁰ FGD BOYS GOT OYENGA

¹⁹¹ ibid

¹⁹² 11.3 IDI YOUNG M.MBITA

through encouragement from parents and caregivers or the advice of a role model. Girls with disabilities explained:

What made me to join secondary school was that my mom always told me that I was special that I was intelligent so I wanted to break the monotony that was at home I wanted to be the person who would deliver our family into greater heights. Personally I think I'm achieving it one way or another.¹⁹³

I joined secondary school because I'm aspiring to become a doctor and one of the doctors told me that it's through high school education that I can determine what to be.¹⁹⁴

Girls with disabilities explained how their aspirations had changed since they had received support from the project to attend secondary school and what it would have been like had they not received any support.

Girls with disabilities reported:

[Without the support to attend school] I'd be loitering around our home because it's through this school that... I have acquired knowledge; I've learnt to be creative and innovative. If I look back maybe in four years ago, I wasn't thinking the way I'm thinking right now because [school] has nurtured me to be the best person I can be... academically, socially and spiritually...I don't know what I would have been doing but it wouldn't have been good.¹⁹⁵

If I couldn't have come to school you know there are some culture that.... [they have] early marriage so by now I would be in my house, [married].¹⁹⁶

If I couldn't have gone to high school I would be working as a maid and being paid something small for it.¹⁹⁷

Some girls with disabilities who had become young mothers underwent goal shifts, limiting some of their aspirations for the future.

¹⁹³ 8.1 FGD GIRLS AHERO

¹⁹⁴ 8.1 FGD GIRLS AHERO

¹⁹⁵ 8.1 FGD GIRLS AHERO

¹⁹⁶ ibid

¹⁹⁷ ibid

Some girls with disabilities who are young mothers reported that they would like to get married and have more children, although some of these aspirations may have existed before they became mothers.

According to girls with disabilities who were young mothers:

I had a different dream [before] because I thought that I could go to secondary school¹⁹⁸.

I wanted to be a teacher [before].

Sometimes things change depending on the life condition of someone. You may have a dream, but you realize that life brings it a different way. That is when you decide that I do this because the other one is not possible. Because what you decide to do whole heartedly, you do it better than the one that you are forced to¹⁹⁹.

I would like to be a mother [after school].

I would like to get married.

In future activities, the project should consider whether young mothers should be given more targeted messaging on alternative career pathways, given that some young mothers reported that becoming a mother limited their options for the future.

POLICY ENVIRONMENT²⁰⁰

To create sustainable long-term change, LC project staff worked with stakeholders at the school, county, and national level to raise awareness about disability issues and increase understanding and knowledge of inclusive education. The project aimed to improve the policy environment so that it supports inclusive education for children with disabilities.

The project successfully supported the passing of national legislation that enshrined a commitment to inclusive education and standardizing EARC processes. Project staff also identified ongoing gaps relating to inclusive education in teacher training and helped connect parents with existing government resources.

¹⁹⁸ 11.3 IDI YOUNG M.MBITA

¹⁹⁹ 11.3 IDI YOUNG M.MBITA

²⁰⁰ IO5: Improved policy environment at school, county and national level to support inclusive education for children with disabilities (Intermediate Outcome 5)

At the county level, the project supported the drafting and passing of legislation related to disability, sexual and gender-based violence, child welfare and protection, accessibility infrastructure, and funding allocations.

The project supported individual schools to launch initiatives aimed at reducing stigma and discrimination against children with disabilities, conduct outreach to parents, and allocate funding for inclusive learning materials. Overall, 79% of schools introduced SBITs, but the success of SBITs mostly relied on the commitment of individual members.

The project encountered barriers to positive policy changes such as bureaucracy, lack of political will, limited and slow government funding, and discontinuity between county and national governments. However, a strong network of advocates helped move policy forward and SBITs had a positive impact on implementing policies in schools.

To achieve these outcomes, the project undertook the following activities:

At the national level, the project advocated for the effective implementation of existing policies on disability inclusion and inclusive education.

This advocacy involved sharing learning and best practices throughout project implementation, as well as providing technical expertise in the areas of inclusive education and disability research. The project published several resources, including the Life Skills Manual, impact stories of individual girls and project videos. The project also shared learning findings from evaluations to promote replication, sustainability, and scale-up.

At the county level, the project conducted targeted advocacy through four County Working Groups (CWGs)²⁰¹.

The CWGs were comprised of a wide spectrum of community leaders and institutional representatives who came together to advocate for improved legislation and build upon the policy achievements supported by GEC-1. CWGs advocated for resources to improve the lives of girls and boys with disabilities, such as physical accessibility at home, rehabilitation, and transport solutions to ensure access to schools. CWGs tried to garner financial support for Education Assessment Resource Centers (EARC) to make child assessments sustainable beyond the life of the project. CWGs also worked at the grassroots level to sensitize county heads and policy stakeholders on issues affecting girls with disabilities. Grassroots work included presenting inclusive education activities during education days.

²⁰¹ Migori CWG for Kuria and Migori sub-counties, Homa Bay CWG for Mbita sub-county, Kisumu CWG for Kisumu East sub-county, and Siaya CWG for Siaya sub-county.

Participating in technical and reference groups worked to introduce national policies at county level. Relevant policies pertained to early childhood development, disability, social protection, and bursaries. In an interview, a representative of the NCPWD noted that the work of the County Working Groups in Kenya's Lake Region often served as a benchmark in terms of advancing disability bills for other counties²⁰².

At the school level, the project trained school management boards in inclusive education, governance, and resource mobilization to support girls with disabilities. The project also encouraged schools to create school-based inclusion teams (SBITs).

Through training head teachers, School Boards of Management, and SBITs, the project aimed to make schools more accessible, support teachers to adopt inclusive education practices, and strengthen existing child protection initiatives.

National Policies for Inclusive Education²⁰³

The project aimed to contribute to national policies that support the implementation of inclusive education practices.

LC met its target of supporting the enactment of 2 national inclusive education policies.

The project contributed to the enactment of 2 national policies since Baseline. These were the Sector Policy for Learners and Trainees with Disabilities and the Minimum Quality Standards for EARC Services in Kenya.

The project supported the passing of the Sector Policy for Learners and Trainees with Disabilities; but effective implementation is stalled at the county and national level.

In 2018, the Ministry of Education (MoE) passed the Sector Policy on the Provision of Education and Training for Learners and Trainees with Disabilities (with Implementation Guidelines)²⁰⁴. The policy outlines Kenya's vision for inclusive education and enshrines 15 commitments aimed at holistically supporting the education of children with disabilities.

²⁰² KII with NCPWD Representative

²⁰³ #Of national policies in place that the project has contributed to that supports implementing inclusive education practice (IO 5.1)

²⁰⁴ LC Disability, VSO Kenya, & Sense International. (2018). An Easy to Read Version of the: Education and Training Policy and Implementation Guidelines for Learners and Trainees with Disabilities. Ministry of Education. <https://www.education.go.ke/index.php/downloads/file/516-special-needs-education-guide-2018>

These commitments include the integration of learners with disabilities in schools, provision of assistive devices, and engagement of parents, communities, and other stakeholders.

The policy commits the MoE to ensure that learners with and without disabilities at all levels learn together in the same schools. The MoE is also responsible for ensuring that learners with disabilities:

- Are identified and assisted early
- Are given equal chances
- Reach the highest level of learning
- Are healthy
- Eat well
- Learn in a safe and friendly environment
- Have the equipment they need for learning
- Are brought up as good Kenyans

In addition, the policy states that teachers and workers of learners with disabilities should be trained well, families should be encouraged to take part in the education of their children, and schools should be given enough money and commit to the protection of learners with disabilities. Lastly, the MoE should ensure that people recognize that all learners with disabilities must be given education and work.

At Midline, the project had already played a seminal role supporting the MoE to draft and deliver the policy through LC's membership in the technical committee on inclusion. LC also provided financial support for the review process, supported the national validation workshop, and provided technical advice on implementation to the Ministry.

The Sector Policy provides an important framework at the national level; however, a large degree of implementation relies on county government policy adoption and officers. Qualitative evidence²⁰⁵ showed that, since Midline, the policy's implementation has been inhibited by the national government's slow pace of dissemination, sensitization, and awareness raising at county level as well as a lack of resources²⁰⁶. A legislator described the government's innerworkings:

²⁰⁵ KII with Project Officer

²⁰⁶ KII with LC Project Staff (SK)

Implementation of the education policy is still, let me say, it is below average according to my understanding and my expectation as a consumer...The government is slow in making curriculum for learners with disability²⁰⁷.

According to Outcome Harvesting Workshop participants, the policy also stipulates that people with disabilities should be included in school committees. Participants reported that this measure was successfully adopted at the county level and that the project helped to ensure that it was carried out²⁰⁸.

The project supported heightened quality standards for EARCs.

The MoE adopted the Minimum Quality Standards for EARC services in Kenya in November 2021²⁰⁹. The policy builds on the 2018 Sector Policy as well as the 2013 Basic Education Act in the endeavor to increase the capacity to support students with disabilities by standardizing EARC operations. The EARC guidelines dictate standards for management and accountability, infrastructure and environmental requirements, roles, and responsibilities of EARC officers, assessment processes, materials, and assistive devices for children with disabilities.

Notable measures include:

- Improvements to EARC accessibility²¹⁰
- Additional required experience and competencies for staff to ensure that they can assess a broad range of disabilities
- A requirement to staff technicians specialized in assistive devices
- The application of a standardized assessment tool²¹¹
- Sensitization workshops for teachers and community members
- Consistent documentation.

LC provided technical assistance on the development of the EARC standards²¹². LC staff supported the organization of meetings, reviewed the document, and supported the national dissemination of the policy²¹³. The project made it possible for EARCs and parents from Kisumu, Siaya, and Migori to attend the launch event for the guidelines in November 2021²¹⁴.

²⁰⁷ Transcript interview with county working group member

²⁰⁸ Workshop Recording Activity 1

²⁰⁹ Okoth, G. A. (n.d.). Minimum Quality Standards for EARCs.

²¹⁰ Must be accessible to all, provide 2 disability friendly toilets (1 for males, 1 for females), have waiting area, outdoor play spaces, toys among others

²¹¹ Produced by the Kenya Institute of Curriculum Development

²¹² LC Staff M. on National Policy Changes

²¹³ KII with Project Staff (SK)

²¹⁴ Outcome Harvesting Workshop, Group 3

Participants in validation suggested that by Community Health Volunteers could monitor the implementation of EARC standards and ensure children are receiving the necessary support.

LC raised awareness of existing government supports and encouraged parents to register learners with disabilities with the National Council for Persons With Disabilities.

LC sensitized schools about the availability of government bursaries for children with disabilities and encouraged them to apply. Funds covered the purchase of adaptative books and materials²¹⁵.

LC also encouraged parents to register their children with disabilities with the NCPWD after being assessed by a medical officer. The NCPWD refers children to EARC officers, who ensure that the children receive assistance in school and accommodations during exams²¹⁶.

The evaluation team observed inclusive education policy gaps in assessing learners with disabilities, as well as in pre-service and in-service teacher training.

The Kenyan Certificate of Primary Education (KCPE) focuses on exam scores for 5 subjects. Learners with disabilities who have been assessed for a disability and reported to the ministry are provided with accommodations such as more time, larger print, or 1 on 1 assistance. The cut-off points for learners with disabilities are also lowered for school admission²¹⁷. If, however, a headteacher fails to report the need for assistance to the ministry, the learner will go unassisted, and their performance suffers. A teacher stated, *“It can even lead to parents of non-disabled ‘bright’ children being sent to other schools since the school’s mean score is being reduced²¹⁸.”* This indicates the importance of raising teacher and headteacher awareness of assessments and government registration.

In addition, teachers suggested that the national government should consider broadening the assessment to include areas other than academic results. Even if learners with disabilities are accommodated during exams, they cannot be expected to score as high as children without special needs. A differentiated teaching approach goes beyond simply providing accommodations. The special educational specialist Carol Tomlinson defines differentiation as the process of *“ensuring that what a student learns, how he or she learns it, and how the student demonstrates what he or she has learned is a match for that student's readiness*

²¹⁵ Outcome Harvesting workshop, Group 1

²¹⁶ KII with NCPWD Representative

²¹⁷ Transcript interview with CWG member

²¹⁸ KII SNE Teacher Waondo

level, interests, and preferred mode of learning²¹⁹.” This suggests that students should not simply be given the same exam with more time or larger print, but rather, assessed to their ability level.

At Endline, pre-service teacher training included only one unit on SNE. Increased pre-service training with a focus on individualized education is critical for supporting students with disabilities, but theoretical knowledge does not guarantee implementation in the classroom, partly because teachers (especially those at schools without any learners with disabilities) lack opportunities to practice inclusive education. LC should lobby the government to expand the required coverage of teachers who are trained to teach in inclusive settings and cater to diverse learners in pre-service training. In-service professional development (similar to the training provided by LC) could support teachers to stay up to date on inclusive education practices.

A qualitative anecdote suggests that the MoE is designing a Teacher Education Policy and that LC has an opportunity to affect the policy’s development²²⁰. According to an LC staff member, the government is “*really counting on LC*” to provide technical and financial support on disability and inclusive teacher education²²¹. This could be an opportune chance to encourage inclusive education pre-service training. The evaluation team suggests that LC gets involved through other projects it is currently implementing as the period of GEC-T has passed.

County Policies²²²

The project aimed to encourage county governments and other stakeholders to introduce policies and strategies in support of inclusive education, many of which are derived from policies passed at the national level.

LC supported the introduction of 6 policies, almost reaching its target of 7 policies in county governments.

By Midline, LC had fallen just short of its 5-policy goal by supporting 4 pieces of successful legislation. By Endline, county governments enacted an additional 2 policies supported by the project, bringing the total to 6. Throughout counties, LC advocated for 10 additional bills and policies that remained in the development phase at Endline²²³.

²¹⁹ Tomlinson, C. A. (2014). *The differentiated classroom: Responding to the needs of all learners*. Ascd.

²²⁰ LC Staff M. on National Policy Changes

²²¹ LC Staff M. on National Policy Changes

²²² Number of county level policies/strategies that the project has contributed to that support implementing inclusive education practices (IO 5.2)

²²³ See Table 6

Table 6. Policy Progress at the County Level

HOMA BAY	MIGORI	SIAYA	KISUMU
ENACTMENTS			
Disability Act (2020)	Sexual and Gender-Based Violence Policy (2019)	Bursary Act (2019)	
Education Bursary Fund Act (2018)	ECD and Education Bill (2018)	ECD Act (2019)	
DRAFTS			
Child Welfare and Protection Policy	Disability bill	Disability Bill	ECD Policy
Internship Policy	Bursary and Sponsorship Policy	Social Protection Fund for the Elderly and People with Severe Disabilities	
Social Protection Policy	Vocational Education Training Center Policy		
ECD Policy	Social Protection Policy		

Homa Bay

Persons with Disability Act

Homa Bay passed the Persons with Disability Act in 2020²²⁴. According to participants in the Outcome Harvesting Workshop, LC provided financial and technical support for the act's passage²²⁵. The purpose of the Act is to “ensure the realization of the rights of persons with disabilities in the county”²²⁶.

Education Bursary Fund (Amendment) Act

²²⁴ KII with project officer

²²⁵ Outcome Harvesting Workshop, Group 3

²²⁶ [Homa Bay Persons with Disability Act 2020](#)

Homa Bay enacted an amendment to the Education Bursary Fund Act (2015) in 2018. The act was amended to ensure that the Ward Education Bursary Fund Committee includes a member that represents persons with disabilities and a person “*experienced in education matters representing persons living with disabilities*”²²⁷. The law also amended the criteria to determine the amounts that may be awarded to include “*children with special needs or living with disabilities*”²²⁸.

Child Welfare and Protection Policy draft

Starting in 2018, LC facilitated the development of the Homa Bay County Child Welfare and Protection Policy, which aims to safeguard vulnerable children against abuse. A policy draft was collectively developed through the CWG, public participation, and various partner meetings. LC contributed both technical and financial support to the policy’s development²²⁹. As of Endline, the policy had yet to be enacted.

Internship Policy draft

In May 2019, LC participated in a Stakeholders Inception Meeting to update the Homa Bay County Internship Policy, which includes measures to protect interns and vocational trainees from abuse. LC leveraged support from the Homa Bay government to assist children with disabilities after completing their vocational and technical training. According to participants in the Outcome Harvesting Workshop, LC provided input and technical support and facilitated public participation for the development of these guidelines²³⁰. According to an LC staff member, the bill was read to residents in every ward, and residents then had the opportunity to provide input on the bill’s language²³¹.

Social Protection Policy draft

Starting in 2018, LC facilitated the development of the Homa Bay Social Protection Policy. The policy stipulates that the best interest of the child is paramount and stresses that counselling should replace physical punishment. The policy draft was collectively developed through the CWG, public participation, and various partner meetings. At Midline, the draft was due for public validation.

²²⁷ Homa Bay Education Bursary Fund (Amendment) Act

²²⁸ Ibid.

²²⁹ Outcome Harvesting Workshop, Group 3

²³⁰ Outcome Harvesting Workshop, Group 3

²³¹ KII with project officer

In the Outcome Harvesting Workshop, participants shared that LC counsellors strengthened the precedent for child-centered counselling²³².

ECD Policy Draft

Homa Bay's ECD policy is undergoing the legislation process and had not been passed as of Endline²³³. LC had supported the development of the policy through technical input on disability issues²³⁴.

Migori

Sexual and Gender-Based Violence Policy

LC played an influential role in the drafting of Migori's Sexual and Gender-Based Violence Act, which was passed in 2019²³⁵. LC helped to sensitize stakeholders and mentors on the need to safeguard people with disabilities²³⁶. According to one of Migori's legislators, LC encouraged the law's special provisions for people with disabilities:

The Sexual Gender-Based policy was also influenced by LC because, most of the time, we talked about learners with disabilities...[and] malpractices. It became clear [that in the] policy...children with disabilities - girl or boy - should be taken care of and [that] any malpractice is against the law²³⁷.

Participants from the Outcome Harvesting Workshop reported that more cases of abuse are now being reported to mentors who LC sensitized²³⁸.

ECD and Education Bill

In 2018, Migori county passed an ECD and Education Act. A legislative assembly member stressed that the act is inclusive of learners with disabilities²³⁹. The law mandates accessibility infrastructure, such as ramps²⁴⁰, and seeks to ensure equitable and practical educational resource allocation for inclusion. Additionally, the act aims to support schools to be child-friendly, increase teacher capacity on inclusion, and provide resources for inclusive

²³² Workshop Recording Activity 1

²³³ KII with project officer

²³⁴ KII with project officer

²³⁵ Migori Sexual and Gender-Based Violence Policy

²³⁶ Workshop Recording Activity 1

²³⁷ Transcript interview with county working group member

²³⁸ Workshop Recording Activity 1

²³⁹ Transcript interview with county working group member

²⁴⁰ Transcript interview with county working group member

infrastructure. LC supported the county government of Migori to draft and enact the ECD and Education Bill 2018.

Despite the law's successful passage, funding restraints have limited effective implementation. A Migori assemblywoman reported:

So, I want to confirm that, in Migori county, we have an education policy which is inclusive...But I want to say that not much has been done about it in the past two financial years. Because, you know, when you are talking about inclusivity, it talks about even increments in funding because learners with disability need extra costs of living in their learning system...There is need for a regulation to operationalize it. However, I've not seen that. But we are moving forward²⁴¹.

According to the participant, additional regulations are needed to enforce the law's inclusivity measures.

Disability Bill (2021) draft

Migori's drafted Disability Bill covers education, social welfare, and other matters concerning people with disabilities²⁴². A project staff member shared that LC consulted with legislators, lawyers, CSOs, human rights organizations, PPOs, and government officials on the development of the bill²⁴³. The project also provided the venue and funding for consultation meetings as well as input on the bill's content²⁴⁴. The bill has yet to be enacted and must pass 4 additional stages of review²⁴⁵.

Vocational Education Policy draft

In Migori County, legislators have drafted a Vocational Education Policy that seeks to address issues of resource mobilization and management structures. It also aims to establish limits on county engagement and identify support programs, staff qualifications, and special considerations for learners with disabilities. LC was involved in a policy meeting with selected representatives from the child and education sectors. At Endline, the draft was in the midst of the legislation process.

²⁴¹ Transcript interview with county working group member

²⁴² Transcript interview with county working group member

²⁴³ KII with project officer

²⁴⁴ KII with project officer

²⁴⁵ Transcript interview with county working group member

According to participants in the Outcome Harvesting Workshop, the policy should help protect persons²⁴⁶ with disabilities from abuse while training in employable skills and entering the workforce²⁴⁷.

Social Protection Policy draft

Migori's Social Protection Policy is a localized version of the national policy²⁴⁸. At Endline, the draft was under legislative review. LC provided contributed technical inputs on issues of disability²⁴⁹.

Siaya

Bursary Act

At Midline, LC had taken part in a series of meetings, organized by the County Working Group, to give input on the Siaya's Bursary policy draft. The bill was enacted in 2019²⁵⁰.

ECD bill

In 2019, Siaya County enacted the Early Childhood Development bill. LC helped disseminate the bill to partners along with the Education, Gender, and Social Services Committees and selected representatives from Child/Education supporting CSOs.

Social Protection Fund Bill for the Elderly and People with Severe Disability draft

Between Midline and Endline, the Siaya legislature drafted a Social Protection Fund for the Elderly and People with Severe Disability bill. The language sets standards for distinguishing people with severe disabilities²⁵¹. At Endline, the bill had yet to be enacted²⁵².

Kisumu

Early Childhood Development (ECD) Policy draft

At Midline, LC contributed to the development of Kisumu's ECD policy. The bill seeks to ensure that educational resources are allocated to schools in an equitable and practical way. The policy also supports the development of child friendly schools, teacher capacity building, school accessibility, and the provision of learning resources to all public schools. Key actors

²⁴⁶ Participants mentioned girls, in particular.

²⁴⁷ Workshop Recording Activity 1

²⁴⁸ KII with project officer

²⁴⁹ KII with project officer

²⁵⁰ KII with project officer

²⁵¹ KII with project officer

²⁵² KII with project officer

include the Education, Gender, and Social Services committee as well as selected representatives from Child/Education supporting CSOs. The draft has not advanced since Midline.

Inclusive strategies at schools²⁵³

The project encouraged school management boards to adopt inclusive education strategies and practices such as physical accessibility adaptations, adequate teaching and learning materials, adapted child protection policies, supportive leadership, and budget allocations.

Most project schools introduced initiatives to reduce stigma and discrimination.

Headteachers in project schools (91%) were more likely than those in non-project schools (68%) to confirm that their school had become more accessible and welcoming to learners with disabilities in the last two years compared to non-project schools²⁵⁴. The difference is statistically significant; however, the sample is non-representative²⁵⁵. Results from the teacher survey confirmed that project schools (98%) were significantly more likely than non-project schools (58%) to have introduced new initiatives to reduce stigma and discrimination and increase the protection and inclusion of children with disabilities over the past two years²⁵⁶.

Regarding physical adaptations, project schools were more likely than non-project schools to have a budget specifically for constructions or adaptations for children with disabilities (52% vs. 34%)²⁵⁷. They were also more likely to involve parents of children with disabilities in the decision-making process for these adaptations (39% vs. 26%)²⁵⁸.

Both project and non-project schools were similarly likely to allocate more funds for inclusive learning materials in the next budget cycle (70% vs. 63%)²⁵⁹. They were also equally likely to introduce new initiatives or policies to promote child protection over the past two years (79% vs. 70%), allocate additional financial resources in the next budget cycle (55% vs. 53%)²⁶⁰

²⁵³ % Of schools that have incorporated inclusive education strategies (including child protection) in the school development plans. (e.g. physical adaptations, capacity building, adaptation of teaching and learning materials etc.) (IO 5.3)

²⁵⁴ Statistically significant (p<0.05)

HTS - Q12

²⁵⁵ Assessed through the school-wide assessment and head teacher survey. N=104

²⁵⁶ Teacher Survey Q58

²⁵⁷ HTS - Q13

²⁵⁸ HTS - Q15

²⁵⁹ HTS - Q33

²⁶⁰ HAT- Q23

and human resources for child protection policies in the current school year (58% vs. 42%)²⁶¹. These findings suggest that the project did not significantly contribute to these initiatives.

Evidence does suggest that the project contributed to school management attitudes toward inclusive education. Teachers in project schools were more likely than those in non-project schools to agree that school leadership and BOMs were committed to support teachers in adopting inclusive teaching practices in the classroom (98% vs. 43%)²⁶². They were also more likely to report that the level of support had increased slightly or a lot over the past two years (79% vs. 50%)²⁶³. Both findings were statistically significant, indicating that the project contributed to the increase in support from school management.

Improved attitudes toward inclusive education did not necessarily yield increased budget allocations²⁶⁴, suggesting that additional sensitization is needed to match attitudinal support with actual resources. No significant differences were found between project and non-project schools in terms of allocating additional *financial* resources for inclusive education practices (46% vs. 26%)²⁶⁵. However, project schools were more likely than non-project schools to allocate additional *human* resources in the current school year (59% vs. 32%)²⁶⁶.

79% of schools assessed through the school wide assessment introduced School-based Inclusion Teams (SBITs) embedding inclusive education in the schooling system.

The project worked to ensure that its impact is sustainable. LC developed and strengthened sustainability mechanisms with practices and institutional arrangements that embed inclusive education within the Kenyan schooling and education system. One of the important practices was the creation of SBITs.

SBITs are responsible for assessing learners' needs for support. They source funds from the government, NGOs, or fundraising to assist with learning materials, assistive devices, and school rehabilitations for learners with disabilities. SBITs also identify and mobilize existing resources that support inclusion, encourage peer collaboration among teachers, and coordinate support at school level. They are responsible for spreading awareness among colleagues about inclusive education and cooperating with headteachers on inclusive policies

²⁶¹ HAT Q24

²⁶² Teacher Survey 104 and 105

²⁶³ Teacher Survey Q 13

²⁶⁴ As noted above

²⁶⁵ HTS - Q21

²⁶⁶ HTS- Q 22

within the school. SBIT members also develop Individual Learning Plans (IEPs) for learners with disabilities.

According to project staff, SBITs play a key role in identifying learners with disabilities and referring them to EARCs for additional support. They maximize the role of EARCs, who now receive more cases than before the project²⁶⁷. 73% of surveyed project teachers indicated that they had reached out to an EARC, compared to 31% of non-project teachers²⁶⁸. Most teachers who did reach out to EARCs were satisfied with the EARC's support. 85% of project teachers indicated that the project improved their relationship with EARCs²⁶⁹, suggesting that LC helped establish importance linkages between teachers and EARCs.

Results from the school-wide assessment found that 79% out of schools visited²⁷⁰ had SBITs. 44% of headteachers reported SBITs being very effective in improving or supporting the inclusion of children with disabilities and 52% reported SBITs being somewhat effective. Teachers reported similar levels with 90% stating that SBITs were very effective or effective in improving inclusion²⁷¹. 92% of headteachers thought it very likely or somewhat likely that SBIT will continue after the project ends.

SBIT effectiveness depends on dedicated teachers, parental engagement, and supportive leadership.

SBITs are composed of a management representative, teachers with specialized knowledge, teachers who represent different phases of education (e.g., ECDE) learner representatives, parents, and local community members. A primary school teacher recalled how her SBIT began:

We were being inducted [by LC] on how SBITs run in other countries (like Macedonia). So, we came back [to the school] and set up our own team and made it a strong one. [We are seven teachers, and] we came up with the idea of including a parent of a child with special needs. The child has low vision. We also included a child with special needs. We are nine now²⁷².

Meaningful parental participation is critical because parents or caregiver are often the ones advocating for children.

²⁶⁷ KII with project officer (SK)

²⁶⁸ Teacher Survey Q25

²⁶⁹ Teacher Survey Q29

²⁷⁰ N=66

²⁷¹ Teacher Survey Q44

²⁷² FGD with SBTI trained by LC.

The headmaster of the school admitted that SBIT impacted her attitude more than LC's training, saying, "*I think what changed my attitude [about inclusive education] most was the SBIT here*²⁷³." Support from headteachers is key in the successful operation of SBITs. She mentioned:

*"When I came, they introduced me to the activities they are carrying out and then I embraced it...Other teachers in this school have been trained by this team. All teachers in our school are aware. They know how to handle these children...This team has been great. With the attitude and the amount of work they are doing, I definitely find it easy as a head teacher to work with them. They've made my work very easy*²⁷⁴."

This anecdote suggests that the initial impetus for inclusive education can come from many levels (like teachers and SBITs) and not necessary from the leadership. The key for success is to clearly articulate the vision, build consensus, and involve all stakeholders.

Teachers admitted the cooperative environment between teachers and headteacher facilitated the building of adaptive toilets and ramps. They observed that teachers and learners increasingly accepted learners with disabilities, and teachers introduced the differentiated learning approach²⁷⁵.

One primary school teacher highlighted that commitment and follow through from the headteacher is important for yielding results for students. The teacher mentioned that their school had not received funds for learners with disabilities in the past two years because "*the headteacher might have not forwarded the names of those learners to the ministry to send funds*²⁷⁶." She stressed that these funds are important for sustainability, saying, "*NGOs come and go but the learners are here to stay*²⁷⁷."

Project staff reinforced the idea that "buy-in" from school management and good team dynamics are key. According to staff, management needs to acknowledge the time and resources spent and also understand that a teacher might miss class to conduct an assessment²⁷⁸.

²⁷³ Ibid.

²⁷⁴ Ibid.

²⁷⁵ Ibid.

²⁷⁶ KII SNE Teacher Waondo

²⁷⁷ Ibid.

²⁷⁸ KII with Project Officer (SK)

SBITs facilitate policy enactment at the grassroots level.

SBIT are a substantial facilitator in rolling out established policies at the grassroots level. They support headteachers to follow through on “Open Admission Policy,” which ensures that students (with and without disabilities) can attend their neighborhood school²⁷⁹.

SBITs provide a platform for learners with disabilities to voice their perspectives and advocate for representation in school committees²⁸⁰. SBITs also impacted the language policy for non-discriminatory terminology²⁸¹.

Where local governments were slow to regulate inclusive education measures, LC-supported SBITs often stepped up to the plate. A child safeguarding specialist shared:

I'm happy about SBITs. They are now our ways of making sure the policies are implemented in smaller ways or in smaller bites... [Teachers and learners] can talk about a representative to identify and immediately report [child safeguarding] cases. And we've made sure we link them straight to the national government because, at county government, things are still not moving²⁸².

The key to sustainable SBITs is knowledge transfer, recognition, passion, and active commitment of members.

The evaluation team found several examples of well-functioning SBITs but also witnessed inactive SBITs. For SBITs to be active, members need to be fully committed. A project officer mentioned that this is easier in rural areas where people's time is more flexible, compared to urban areas where people tend to have fixed working hours. No monetary incentives are provided to SBIT members. Their incentive is to provide children with the best education possible and their engagement is recognized in performance evaluations at the end of the year²⁸³. Several teachers stressed the importance of knowledge transfer (preferably written) to ensure the continuation of activities when teachers are transferred²⁸⁴.

²⁷⁹ Outcome Harvesting Workshop, Activity 1, Group 3

²⁸⁰ Outcome Harvesting Workshop, Activity 1, Group 4

²⁸¹ Outcome Harvesting Workshop, Activity 1, Group 1

²⁸² KII with Project Child Protection Specialist

²⁸³ KII with Project Officer (SK)

²⁸⁴ KII SNE Teacher Waondo

Project Learning²⁸⁵

LC aimed to share key learnings with stakeholders to inform their practice regarding inclusive education.

LC trainings raised awareness and increased compliance with existing policy frameworks.

In qualitative interviews, project staff shared that the project's trainings helped county officials and other stakeholders understand national policies and employ relevant practices²⁸⁶. Speaking to the example of child safeguarding, a staff member explained:

In all trainings we bring in someone from the Department of Children Services to help [partici-pants] understand the national policy on child protection (CP). We make sure [participants] know what we - as LC - do in terms of safeguarding policies, know the reporting mechanisms, and know about disability inclusion so that they understand the challenges that people with disability have in terms of accessing justice, reporting channels, or survivors support. The policy existed before, but what was not there was the implementation framework²⁸⁷.

This suggests that LC's training activities (and not only its advocacy work) impacted policy implementation by providing frameworks for practice.

The participant continued to explain that LC training helped create an environment for more sustainable policy implementation²⁸⁸. According to the informant, LC aims to keep teachers trained in safeguarding practices in school systems or regions so that specialty knowledge is not lost. Impact is also multiplied when trained teachers “*share this knowledge with the rest of the team that wasn't trained in the school, and so everyone knows they are now being held accountable in two ways²⁸⁹.*”

LC's policy development helped raise awareness of disability terminology among other stakeholders. A project staff member identified that a positive learning outcome was “*the correct use of terminologies, as enshrined in policy. Our policies have got good language*

²⁸⁵ The extent to which the project's learning has informed stakeholders' practice (IO 5.4)

²⁸⁶ KII with Hidayat on child safeguarding (project child protection specialist)

²⁸⁷ KII with Hidayat on child safeguarding (project child protection specialist)

²⁸⁸ KII with Hidayat on child safeguarding (project child protection specialist)

²⁸⁹ KII with Hidayat on child safeguarding (project child protection specialist)

now²⁹⁰.” Understanding the language of an issue is the first step to understanding current policies and developing future ones.

LC’s work facilitated the development of a disability policy by sharing resources and learning and reducing redundancy.

A Migori county assembly member, who is a woman with a disability, shared a story of productive collaboration with LC²⁹¹. After identifying the legislative gap in protections for persons with disabilities in her county, she undertook the immense task of developing a disability policy on her own. She then reached out to an LC staff member, who shared that the project was participating in similar work and could share resources and learning. The assemblywoman narrated:

[The LC staff member] told me, ‘We have an activity with the technical working group, is it possible that we double our tasks? We can come early. We first do the LC activity and then use the opportunity to work on the disability bill...That is how it started.

I appreciated LC. We did two meetings. It pushed us because we had to mobilize people with disabilities from all 8 sub counties of Migori county so that they could come and sit down and read through the bill. I paid the facilitator, read through the bill, and then found what I had to add and remove. I then rearranged it, and it was done.²⁹²

In this example, LC’s existing work directly facilitated the drafting of a disability policy.

The bureaucratic environment posed problems for LC’s advocacy.

A Migori assemblywoman identified lack of political goodwill inside her own legislature as a barrier to policy change²⁹³. She stated, “*There is need for intense advocacy about disability inclusion in all spheres in all departments. Advocacy has not reached the level where it should reach²⁹⁴.*” An LC staff member reiterated that the lack of commitment from stakeholders’ bars progress²⁹⁵.

LC’s advocacy was also impeded by lack of engagement from influential government officials. A project staffer explained:

²⁹⁰ LC Staff M. on National Policy Changes

²⁹¹ Transcript interview with county working group member

²⁹² Transcript interview with county working group member

²⁹³ Transcript interview with county working group member

²⁹⁴ Transcript interview with county working group member

²⁹⁵ LC Staff M. on National Policy Changes

Getting hold of them is never easy. They are busy. They have competing priorities. So, the people I'm being given are junior officers within the policy and special needs education departments who cannot move the needle²⁹⁶.

When LC does manage to build relationships with government officials, progress can be lost when administrations change hands. A project officer stated, “*Everything is stalling...There was a change of the governor here. So, if the current governor doesn't make it in the elections, then someone else is coming in. Then you have to again begin from zero²⁹⁷.*”

Discontinuity between national and county governments prohibited efficient policy adoption and implementation.

National laws and policies provide an important framework at the national level; however, a large degree of implementation relies on the county governments to adopt policies and local officers to enforce them. Speaking to the lack of continuity in safeguarding policy, the project's child protection expert explained:

We have decentralized governments which are now the county governments, and in as much as they do have output or activities geared towards protection, they don't necessarily stick to the national guidelines. Some county governments have child protection officers, some do not. And in the counties where we are, we do not have child protection officers at county government levels, so that means each county was to then domesticate the national guidelines to suit the context of their counties²⁹⁸.

The trickle down of policy from national to county levels slows the pace of implementation and allows counties to water down policies as they see fit:

But if a policy is just a blanket document like that and everything is domiciled within it and then you say you want to implement it, you may implement one part and leave the other part. You may implement a clause and leave another clause which may not be right²⁹⁹.

In the case of the child safeguarding policy, LC attempted to facilitate collaboration between the national and Kisumu County governments, but funding issues prevented follow-through:

²⁹⁶ LC Staff M. on National Policy Changes

²⁹⁷ KII with project officer

²⁹⁸ KII with Hidayah on child safeguarding (project child protection specialist)

²⁹⁹ Transcript interview with county working group member

“So, the tussle that has made this process stagnate is who receives the money to move the process. Is it the national government or is it the county government³⁰⁰?”

Policies that cross national and county lines also create chain-of-command issues. The child protection specialist explained that domain boundaries are unclear, and it can be difficult to navigate the system and determine whether to bring a case to local or national authorities³⁰¹. Anecdotally, it was reported that local governments do not always have sufficient staff capacity to enforce policy, but national authorities may reject a case when they believe that local authorities did not follow proper protocol³⁰².

To develop local capacity, LC elected not to report any child-protection cases directly. The child protection officer at LC mentioned:

We’ve shied away from reporting directly [to local authorities]. We would not have our social workers go to the police station to report. That was very clear, we cannot do that. We can...show that this is the way, [but] they have to own the process. [Thus] we reduce the risk of liability coming back to [LC] that, when a case is reported by our staff, the community will say that’s a case for LC³⁰³.

Insufficient government funding impeded progress.

Insufficient government financing was another prevalent issue mentioned by interviewees. County and federal governments are left to compete for limited resources. An LC staff member stated that the government relies on partner organizations with funds, staff, and capacity to facilitate the process of policy drafting, discussion, lobbying, public dissemination, and policy advocates³⁰⁴. Although LC’s financial support spurred action in the short-term, the staffer voiced concerns that this is encouraging the government to form a dependence on external actors, which is not sustainable in the long-term³⁰⁵.

Another barrier is the oversaturation of NGOs in the policy space. This can lead to confusion, redundancy, competing priorities, and wasted resources³⁰⁶. Communication and an early analysis of competing interests are key in facilitating policy advancement.

³⁰⁰ KII with Hidayah on child safeguarding (project child protection specialist)

³⁰¹ KII with Hidayah on child safeguarding (project child protection specialist)

³⁰² KII with Project Child Protection Specialist

³⁰³ KII with Project Child Protection Specialist

³⁰⁴ LC Staff M. on National Policy Changes

³⁰⁵ LC Staff M. on National Policy Changes

³⁰⁶ LC Staff M. on National Policy Changes

A strong network of advocates for children with disabilities and personal relationships to government representatives enabled representation.

An LC staff member shared, “*We have a strong network representing people with disability in Kenya at the national and county level...They work hand in hand with [the] government and others [at the] international level³⁰⁷.*” He concluded that involving direct beneficiaries in advocacy work to be very beneficial.

LC also formed personal relationships with people with disabilities in the government. A previous beneficiary of LC is now a member of the county assembly.

LC also benefited from collaboration with several partner organizations, including, UNICEF, RYAX, Life Africa, Education for Life, Handicap International Humanitarian Coalition, and Sense International.

³⁰⁷ LC Staff M. on National Policy Changes

5. Ultimate Outcome Findings

LEARNING

Project activities positively influenced learning outcomes for girls with disabilities. Girls with disabilities improved literacy scores by 10% between Baseline and Midline and 7% between Midline and Endline, on average. Improvements were supported by inclusive education practices, teacher training, extra exam time, individual attention from teachers, supportive environments for asking for help, improved self-esteem, empowerment to participate in class, and community safety, respect, and acceptance.

Girls with functional difficulties communicating, learning, hearing, concentrating, or remembering and girls likely to be depressed did not improve literacy scores. Language barriers also restricted literacy improvements for girls with disabilities.

Girls with disabilities improved their numeracy scores by 16% between Baseline and Midline and 8% between Midline and Endline, on average. However, teachers demonstrated ongoing gaps in knowledge and resources for teaching abstract math concepts at higher levels. Although it is likely that the project supported improvements in numeracy, evidence linking numeracy improvements to project activities is less robust than evidence linking literacy improvements to project activities and the adoption of inclusive practices.

Overall, the girls with disabilities in grade 8 and form 1 had the highest improvements in literacy and numeracy. Across grades, girls with disabilities-maintained improvements despite COVID-19 related school closures.

The evaluation designed, piloted, and calibrated learning assessments at Baseline after a review of the Kenyan national curriculum and in consultation with the Fund Manager.

At Endline, evaluators assessed literacy in primary grade levels through EGRA, and in secondary grade levels through SeGRA to understand the project's contribution towards learning improvements. Numeracy in primary levels was assessed through EGMA and, in secondary levels, through SeGMA.

Girls with disabilities were provided accommodations based on a screening conducted with the Washington Group Short Set.

Girls with communication difficulties were allowed more time for questions. For girls with visual difficulties, enumerators tested their visual capacity, provided large text in black font on yellow paper, and ensured appropriate lighting during the assessment.

For girls with hearing difficulties enumerators gauged the right vocal volume for the child, spoke to the better ear, faced the learner, ensured that hearing aids were working, allowed extra time, and minimized background noises.

For girls with difficulties walking and with self-care, enumerators provided physical accommodations including a comfortable space to sit in the shade chosen by the child.

For learners with difficulties remembering or concentrating, enumerators simplified instructions, explained slowly, and repeated instructions as many times as needed. They prompted the child whenever possible to check if her or she would like the information repeated³⁰⁸.

To assess progress in English literacy, the study created an English aggregate literacy score (%), calculated by combining scores from all subtasks each girl sat at both periods. This included the Oral Reading Fluency subtask and Advanced Reading Comprehension 2. It is measured as an average percentage regardless of grade level at Baseline, Midline, and Endline³⁰⁹.

To assess overall progress in numeracy, the study created the numeracy aggregate score (%) calculated by combining scores from all subtasks each girl sat at both periods. Testing categories included multiplication and division, fractions, proportions, geometry, and basic algebra.

At Endline, the evaluation team only collected learning data for girls with disabilities and not for the comparison group of girls without disabilities. The team also evaluated the effectiveness of the supports provided to them.

Inclusive education practices successfully supported girls with disabilities to improve their literacy between Baseline, Midline, and Endline.

The evaluation found statistically significant differences in aggregate English literacy scores of girls with disabilities that were tracked between Baseline, Midline, and Endline. Scores improved by 10% between Baseline and Midline³¹⁰, and a further 7% between Midline and

³⁰⁸ Instead of asking „Did you understand?“ the enumerator would ask “Should I repeat that again?”

³⁰⁹ For the short passage reading (ORF) subtask, measured in words per minute, an arbitrary cap of 100wpm was used to convert the score into a percentage. This reflects the expectation that by the end of primary school, all students should be able to read 90-120wpm (Abadzi, 2011). For the advanced reading comprehension subtasks, an overall percentage correct was calculated based on the maximum total of 10 marks on the subtask. Both subtasks percentage correct scores were then averaged and weighted equally to generate an overall aggregate English literacy score.

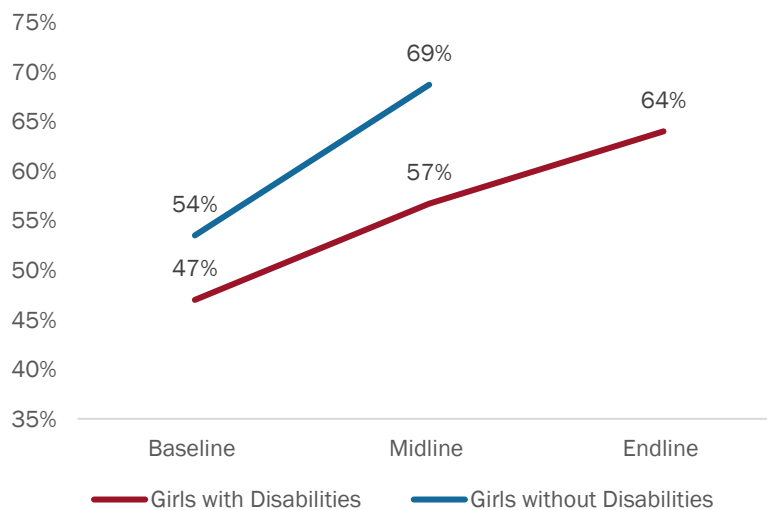
³¹⁰ Results of Paired Samples T-Test: Baseline (m=47.0, sd=23.9) vs. Midline (m=57.6, sd=23.1), t (195) = 6.3, p <0.001

Endline³¹¹. Participants in validation confirmed that literacy levels for girls with disabilities improved between periods.

Girls without disabilities improved their scores by 15% between Baseline and Midline. At Baseline and Midline, girls with disabilities had lower average literacy scores compared to girls without disabilities.

Improvements in literacy scores can be attributed to both natural progression and interventions by LC. Certain methods taught at LC's teacher training predict higher aggregate literacy scores. These methods include providing for individual learning needs, giving extra time during assessments in school, and making learners with disabilities feel comfortable asking teachers for support.

Figure 14. English literacy aggregate scores (%)



Teachers acknowledged that LC trainings led to gains for girls with disabilities in mathematics and English literacy³¹². A teacher stated, “*Participation in learning of girls with disabilities has improved. They enjoy reading and do not want to miss classes*³¹³.” Teachers recognized that applying inclusive methodologies such as learning in groups, using teaching aids³¹⁴,

³¹¹ Results of Paired Samples T-Test: Midline (m=57.3, sd=24.3) vs. Endline (m=63.9, sd=20.7), t (231) = 3.9, p <0.001

³¹² 1.2. FGD Nyamome

³¹³ 15.8 IDI C to C Nyikendo

³¹⁴ 2.14. IDI Teacher Onyalo and FGD SBIC Obinju

differentiating instruction³¹⁵, using dramatization and discussions³¹⁶, and employing books provided by LC³¹⁷ contributed to improving literacy levels of learners with disabilities.

Some teachers attributed improvements to the preparation of Individual Education Plans³¹⁸. A learner recalled that, in the past, he was only allowed to read for 5 minutes in class, but now, he is allowed to read for 20 minutes, which helps him better understand what he is reading³¹⁹.

Aside from teachers implementing inclusive education strategies, an instructor of a Child-to-Child Club acknowledged the impact of the newly adopted Competency-Based Curriculum³²⁰ on students. The instructor explained that English instruction was previously knowledge based, but *“textbooks are now colored, include stories and poems. Students are encouraged to practice conversations. They enjoy English classes more than before and it has impacted learners positively³²¹.”*

This suggests that the content, quality, and participatory approaches of English classes improved over past years.

Teachers commented on various challenges to further improve literacy among learners with disabilities. One teacher mentioned that the number of required literature books should be reduced for students with disabilities³²². Others indicated that inclusive education practices do not necessarily cater to all disabilities. A teacher in Ngija reported difficulties teaching listening and speaking skills to learners with hearing impairments³²³. Another teacher specified difficulties teaching reading and writing to learners with intellectual impairments³²⁴.

The 100% transition rule and high student to teacher ratio were considered non-conducive for improving literacy for learners with disabilities³²⁵. Teachers in Waondo spoke of a learner in grade 8 who cannot write, saying, *“She is just scribbling since she came³²⁶.”* The benefit of the 100% transition rule is that children transition with their peers to age-appropriate classes.

³¹⁵ 2.2. IDI Teacher Obinju

³¹⁶ 2.7 IDI Teacher Rapora

³¹⁷ 2.9 IDI Teacher Rapora

³¹⁸ 1.5. FGD Teachers Waondo

³¹⁹ 4.1. FGD Boys GOT Oyenga.

³²⁰ Introduced in 2017

³²¹ 15.8 IDI C to C Nyikendo

³²² 2.14 IDI Teacher Onyalo

³²³ 2.12 IDI Teacher Ngija

³²⁴ 2.2. IDI Teacher Obinju

³²⁵ 2.7. IDI Teacher Rapora

³²⁶ 1.7 FGD Teachers Waondo.

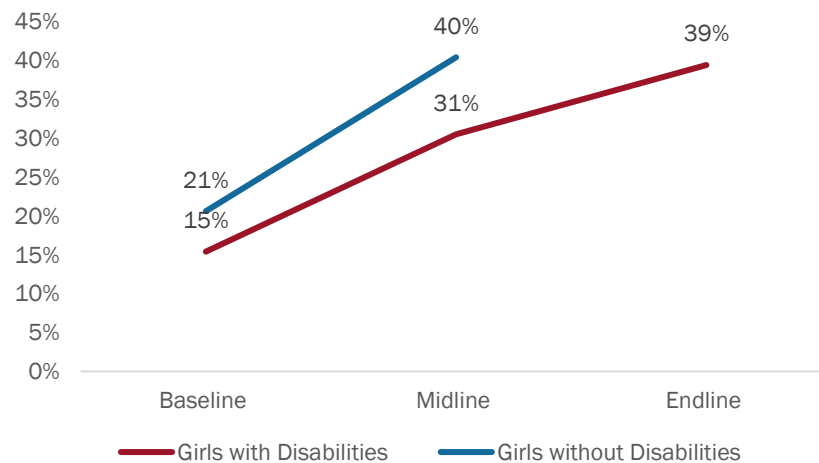
In this case, the teachers might have lacked an understanding and application of differentiated teaching leading to such a result.

The project successfully supported girls with disabilities to increase their numeracy levels between Midline and Endline.

The study found statistically significant differences in aggregate numeracy scores of tracked girls with disabilities between all periods. Numeracy scores improved by 16% from Baseline to Midline³²⁷ and 8% from Midline to Endline³²⁸.

Girls without disabilities improved their aggregate numeracy scores by 19% between Baseline and Midline. At Baseline and Midline, girls with disabilities had lower aggregate numeracy scores compared to girls without disabilities.

Figure 15. Aggregate numeracy scores (%)



Again, improvements can be attributed to learners' natural progression and changed teaching practices of LC-trained teachers. Teachers, for example, recalled learning how to “practically” teach abstract constructs in algebra to children with disabilities³²⁹. However, many also mentioned challenges teaching mathematics to learners with disabilities³³⁰.

³²⁷ Results of Paired Samples T-Test: Baseline (m=15.5, sd=20.6) vs. Midline (m=29.2, sd=27.7), t (213) = 9.3, p <0.001

³²⁸ Results of Paired Samples T-Test: Midline (m=30.5, sd=29.3) vs. Endline (m=39.4, sd=29.9), t (242) = 5.6, p <0.001

³²⁹ 2.13 IDI TEACHER AGORO OYOMBE

³³⁰ 2.13 IDI TEACHER AGORO OYOMBE

Primary school teachers recalled a positive example of their “team effort” to support a girl in grade 8 who had problems with arithmetic: “*Teachers used a variety of methods to ensure that she would understand the content, and she will now be sitting the exam*³³¹.” This suggests that it is not just teacher training and skills that influence teachers’ inclusive practices, but also promoting a school ethos of encouraging teamwork and sharing support for learners.

Teachers described strategies they had adopted to improve numeracy of learners with disabilities. These included teaching classes interchangeably to support each other³³², grouping learners by areas they understand³³³, and partnering a good student with a weaker student to explain maths during game time or after class³³⁴.

Teachers also identified challenges, highlighting that the curriculum does not fully capture the needs of children with disabilities³³⁵ and that there are too many topics to cover³³⁶. Several teachers faced challenges teaching more advanced mathematical topics such as graphs. They stated that, when given the opportunity, they would “*change the topic of instruction...or avoid it [altogether]*³³⁷.”

A teacher in Nyamila considered many mathematical topics irrelevant for children with disabilities and suggested that instruction should focus on the basics such as addition or subtraction. The teacher said, “*When it comes to teaching a pie chart or graphs and you have a child who cannot see, you cannot force the child to see the graph*³³⁸.” Similarly, a teacher in Kebaroti suggested that natural numbers and fractions are important, but subtopics like linear motions are too technical³³⁹. A teacher in Agoro Oyombe echoed, “*When we teach geometry and students have to do a lot by themselves, they enjoy it but there are other areas like algebra where we have problems. They are too abstract*³⁴⁰.”

Teachers considered some topics outdated and allowed students with disabilities to use calculators instead of repeating concepts they do not seem to understand³⁴¹.

³³¹ 19.2 FGD SBIC Obinju

³³² 2.9 IDI Teacher Rapora

³³³ 2.9 IDI Teacher Rapora

³³⁴ 2.15 IDI TEACHER LIONS

³³⁵ 2.11 IDI Teacher Remanyanki

³³⁶ 2.13 IDI Teacher Agoro Oyombe

2.9 IDI Teacher Rapora

³³⁷ 2.11 IDI Teacher Remanyanki

³³⁸ 2.4. IDI Teacher Nyamila

³³⁹ 2.4. IDI Teacher Kebaroti

³⁴⁰ 2.13 IDI Teacher Agoro Oyombe

2.16 IDI Teacher Lions

³⁴¹ 2.15 IDI Teacher Lions

This qualitative evidence suggests that more work needs to be done at higher grade levels to help teachers meet the curriculum requirements and provide assistive devices, especially for children with visual, learning, and concentration impairments.

Girls with functional difficulties³⁴² in communicating, learning, hearing, or concentrating did not improve their literacy outcomes between periods.

Girls who had difficulties communicating or being understood and those who had difficulties remembering things or concentrating experienced significantly smaller changes in oral reading fluency, on average 46 and 23 words per minute less respectively, compared to girls who did not have these difficulties.

Difficulties in communicating, hearing, or concentrating also resulted in negative changes of English literacy scores, that is -21%, -8% and -10%, respectively, between Midline and Endline. Learners who had difficulties learning in class experienced a decrease in oral reading fluency (-26 words per minute) and English literacy scores (-11%) between periods.

Table 7. Changes in ORF, aggregate literacy and numeracy scores of girls with disabilities according to the Washington Group Short Set on Functioning

	Changes in ORF (wpm)	Change in Aggregate English Literacy Score	Change in Aggregate Numeracy Score
<i>Communicating</i>	-46 ³⁴³ n=12	-21% ³⁴⁴ n=12	Not significant ³⁴⁵ n=17
<i>Seeing</i>	Not significant n=102	Not significant n=102	Not significant n=106
<i>Hearing</i>	Not significant n=55	-8 ³⁴⁶ n=55	Not significant n=58
<i>Walking</i>	Not significant	Not significant	Not significant

³⁴² The Washington Group Short Set on Functioning presents a bio-psychosocial model that locates disability at the intersection between a person’s capabilities (limitation in functioning) and environmental barriers (physical, social, cultural, or legislative) that may limit their participation in society.

³⁴³ $R^2=0.05$, $f(1) =12$, $p<0.001$

³⁴⁴ $R^2=0.03$, $f(1) =7.8$, $p=0.006$

³⁴⁵ N/a = no statistically significant change

³⁴⁶ $R^2=0.017$, $f(1)=4$, $p=0.046$

<i>Concentrating</i>	-23 ³⁴⁷ n=29	-10% ³⁴⁸ n=29	N/a n=35
<i>Selfcare</i>	Not significant n=5	Not significant n=5	Not significant n=9
<i>Learning</i>	-26 ³⁴⁹ n=115	-11% ³⁵⁰ n=115	Not significant n=123

Girls with learning or remembering impairments and girls who were likely to be depressed experienced negative changes in literacy outcomes between periods.

Similar to the outcomes from Washington Group Short Set on Functioning, the results from the Child Functioning Set indicate that learners with learning or remembering impairments experienced significantly smaller changes in oral reading fluency at Endline, that is -93 and -99 words per minutes less.

Girls with learning or remembering impairments also experienced average decreases in English literacy scores, -48% and -52%, compared to learners without these impairments between Midline and Endline. Learners who were likely to feel depressed also experienced greater average decreases in oral reading fluency scores than their peers between Midline and Endline (-87 words per minute). However, for all of these groups, due to small sample sizes it is difficult to draw definitive conclusions, despite these indications that they experienced greater reductions in learning levels.

Table 8. Changes in ORF, aggregate literacy and numeracy scores of girls with disabilities according to the Child Functioning Set

	Changes in ORF Scores	Change in Aggregate English Literacy Score	Change in Aggregate Numeracy Score
<i>Visual</i>	Not significant	Not significant	Not significant
<i>Hearing</i>	Not significant	Not significant	Not significant
<i>Walking</i>	Not significant	Not significant	Not significant

³⁴⁷ R²=0.027, f (1) =6.4, p=0.012

³⁴⁸ R²=0.018, f (1) =4, p=0.04

³⁴⁹ R²=0.08, f (1) =20, p<0.001

³⁵⁰ R²=0.051, f (1) =12, p<0.001

<i>Selfcare</i>	<i>-/.³⁵¹</i>	<i>-/.³⁵²</i>	Not significant
<i>Communication</i>	Not significant	Not significant	Not significant
<i>Learning</i>	<i>-93³⁵³</i>	<i>-48³⁵⁴</i>	Not significant
<i>Remembering</i>	<i>-99³⁵⁵</i>	<i>-52³⁵⁶</i>	Not significant
<i>Concentrating</i>	Not significant	Not significant	Not significant
<i>Accepting Change ³⁵⁷</i>	<i>-/-</i>	<i>-/-</i>	<i>-/-</i>
<i>Behaviour ^{t358}</i>	<i>-/-</i>	<i>-/-</i>	<i>-/-</i>
<i>Difficulties Making Friends</i>	Not significant	Not significant	Not significant
<i>Anxiety</i>	Not significant	Not significant	Not significant
<i>Depression</i>	<i>-87³⁵⁹</i>	Not significant	Not significant

For learners with disabilities whose disability type was professionally assessed, for example by an EARC, there were no statically significant changes in oral reading fluency, literacy, or numeracy scores between Midline and Endline³⁶⁰.

Girls with disabilities in grade 8 and form 1 had the greatest improvements in literacy in numeracy.

Girls with disabilities in grade 8 had significantly higher English literacy and numeracy scores at Endline than at Midline.

Girls with disabilities in form 1 had significantly higher numeracy scores at Endline, compared to Midline.

Girls with disabilities in grade 8 had significantly higher English literacy scores (+16%) and numeracy scores (+17%) at Endline, compared to Midline. Similarly, girls with disabilities in form 1 increased numeracy scores (+12%) between Midline and Endline. This suggests that the project had the greatest effects for girls with disabilities who were in grade 8 and form 1.

³⁵¹ Sample size too small (1)

³⁵² Sample size too small (1)

³⁵³ $R^2=0.124$, $f(1)=32$, $p<0.001$

³⁵⁴ $R^2=0.104$, $f(1)=27$, $p<0.001$

³⁵⁵ $R^2=0.082$, $f(1)=21$, $p<0.001$

³⁵⁶ $R^2=0.07$, $f(1)=17$, $p<0.001$

³⁵⁷ Sample size too small (0)

³⁵⁸ Sample size too small (0)

³⁵⁹ $R^2=0.180$, $f(1)=7.7$, $p=0.006$

³⁶⁰ See table in Annex 3

These girls are likely to have benefitted from project activities, inclusive education practices, and improved self-esteem for the longest time.

Table 9. English literacy and numeracy scores between Midline and Endline for girls with disabilities

Cohort at Endline	English Literacy Aggregate Scores (%)			Numeracy Aggregate Scores (%)		
	Mid-line	End-line	Difference	Mid-line	End-line	Difference
Grade 5	-/-	-/-	-/-	-/-	-/-	-/-
Grade 6	-/-	-/-	-/-	-/-	-/-	-/-
Grade 7	36	44	+8	10	13	+3
Grade 8	46	62	+16*	16	31	+17*
Form 1	59	65	+6	26	38	+12*
Form 2	64	69	+5	45	47	+2
Form 3	79	74	-5	65	64	-1

Girls with disabilities improved their literacy and numeracy levels despite school closures.

Despite school closures, girls with disabilities increased aggregate English literacy scores by 7% and numeracy scores by 8% between Midline and Endline. 83% of children – both with and without disabilities - indicated spending most of their time learning or studying while school was closed.

Some teachers visited learners with disabilities at home during COVID-19 related school closures and helped them develop personal study timetables and improve arithmetic, speaking, and listening skills³⁶¹. Teachers concluded that due to their support, learners had “not forgotten everything upon returning to school³⁶².” However, home visits were not the

³⁶¹ 15.3. IDI Teacher Nyakaytiemba, 15.7. IDI T Waongo

³⁶² Ibid.

norm across project schools. 77% of learners with disabilities reported never having heard from their teacher during closures³⁶³. 12% heard from their teacher once and 11% more often. This aligns with internal project monitoring reports. According to monitoring data, “87% of teachers surveyed said they were not able to visit the children’s homes, 20% didn’t have the contact details of the children and 81% of the teachers couldn’t reach the children through remote learning technologies. 49% of teachers did not have resources to provide study packs”.

Most learners without disabilities (83%) also did not hear from their teacher during this period.

Most learners with disabilities continued learning with exercise books (84%), handwritten notes (60%), worksheets (27%), and the help of household members (17%). Fewer students learned through radio programs (16%), television (8%), phones (6%), or community-based learning centers (1%). Levels were similar for learners without disabilities, except that they were more likely at statistically significant levels to use handwritten notes (71%) compared to learners with disabilities³⁶⁴.

About half of learners with disabilities (57%) indicated that they had enough support from adults to continue learning while school was closed³⁶⁵.

About 1 in every 3 households of a girl with disability received a call or text message from LC to follow-up on the child’s well-being or any other concerns during school closures. Being contacted did not have any impact on literacy or numeracy outcomes.

Extra exam time supported literacy improvements for girls with disabilities.

Providing learners with disabilities with extra time for exams or in-class assessments resulted in an average increase of 7% in aggregate English literacy scores between Midline and Endline³⁶⁶. A teacher explained how he applied this method during English classes:

For writing, those with impairments are given more time because, during dictation, they may not be as fast. They can also be given notes, leave the room and copy them. For other assignments - while other students must hand them in immediately, I give students with disability [time] until the evening. When it comes to reading in class, everyone is given an equal chance. Those that have challenges speaking are given extra time to express themselves. The other students learn to wait. They will wait until

³⁶³ GS Q320 - How often did you hear from your teacher while school was closed?

³⁶⁴ Chi-Square Test (p>0.05)

³⁶⁵ GS Q319 - Do you think you had enough support from adults to continue learning while school was closed?

³⁶⁶ R²=0.017, F (1) =3.9, p=0.049

the student – who might have issues with speech or stammering [has finished]. [The student is] given a chance, even it takes ten minutes of the lesson³⁶⁷.

Individual support from teachers supported literacy improvements for girls with disabilities.

Girls with disabilities whose teachers addressed individual learning needs experienced greater improvements, an average of 13%, in English literacy scores between Midline and Endline³⁶⁸. Girls with disabilities also improved their oral reading fluency by an average of 15 words per minute between Midline and Endline if their teacher provided for individual learning needs³⁶⁹.

A teacher in Rapora echoed the importance of providing for students' individual learning needs, mentioning that “[teachers] must ensure we give [learners] a conducive environment...to learn to read and write³⁷⁰.”

A supportive environment for asking for help supported literacy improvements for girls with disabilities.

Girls with disabilities who found it easy to approach teachers or instructors for support read 24 words per minute more compared to girls with disabilities who find it difficult to ask a teacher for support³⁷¹. Finding it easy to ask for support also predicted larger improvements, an average of 11%, in English literacy scores between Midline and Endline³⁷².

This indicates that sensitizing teachers to understand the needs of children with disabilities, being able to provide support, and being approachable improves literacy levels in line with project assumptions.

Learners with visual impairments applied it the following way, “When something is hard for you...you go and say ‘excuse me teacher. This thing is hard for me’³⁷³.”

³⁶⁷ 2.5. IDI Teacher J. O.

³⁶⁸ $R^2=0.55$, $F(1) = 13$, $p < 0.001$

³⁶⁹ $R^2=0.023$, $F(1) = 5.2$, $p = 0.024$

³⁷⁰ 2.7. Teacher Rapora

³⁷¹ $R^2=0.046$, $F(1) = 11.0$, $p = 0.001$

³⁷² $R^2=0.032$, $F(1) = 7.7$, $p = 0.006$

³⁷³ 5. FGD Girls with VI

High self-esteem supported literacy improvements for girls with disabilities.

Girls with disabilities whose self-esteem increased between Midline and Endline experienced larger improvements in English literacy scores, an average of 5% between periods³⁷⁴.

Feeling empowered to participate in class supported literacy improvements for girls with disabilities.

Girls with disabilities who became more comfortable participating in classroom activities improved English literacy 3% more, on average, than girls with disabilities who did not become more comfortable participating in class³⁷⁵. Teachers suggested that if learners with disabilities feel comfortable and their efforts are appreciated, “*they are recognized. So, they try as much as they can...to do what the others are doing*”³⁷⁶,” which could have also included keeping up with their peers’ literacy levels.

Community safety supported literacy improvements for girls with disabilities.

Girls with disabilities who felt safe traveling to and from school at Endline experienced greater average improvements in numeracy scores between Midline and Endline, an average of 15%³⁷⁷.

Language barriers restricted literacy improvements for girls with disabilities.

Not speaking the language of instruction (English) resulted in a girl with disabilities having smaller aggregate changes in (-81%³⁷⁸) English literacy scores and reading 123 words per minute³⁷⁹ less than girls with disabilities who are more fluent in English.

Community respect and acceptance supported literacy improvements for girls with disabilities.

Girls with disabilities who felt respected by everyone in their community at Endline experienced larger average improvements in oral reading fluency between periods, on average 21 words per minute more than girls with disabilities who did not feel respected³⁸⁰.

³⁷⁴ R²=0.019, F (1) =4.4, p=0.37

³⁷⁵ R²=0.018, F (1) =4.0, p=0.47

³⁷⁶ 1.5 FGD Teachers Waondo

³⁷⁷ R²=0.028, F (1) =6.4, p=0.12

³⁷⁸ R²=0.05, F (1) =11, p<0.001

³⁷⁹ R²=0.191, F (1) =7.9, p=0.006

³⁸⁰ R²=0.025, F (1) =6.0, p=0.015

Girls who felt accepted by their community had even larger improvements, an average of 23 words per minute more between Midline and Endline³⁸¹.

Table 10. Relationships between Changes in Literacy and numeracy, intermediate outcomes and practices

		Changes in ORF Scores	Change in Aggregate English Literacy Score	Change in Aggregate Numeracy Score
Supportive Climate	<i>Extra time on assessments in school</i>	Non-significant	Significant	Non-significant
	<i>Teacher provides for girl's individual learning needs at EL</i>	Significant	Significant	Non-significant
	<i>Girl finds it easy to ask a teacher for support at EL</i>	Significant	Significant	Non-significant
Self Esteem	<i>Changes in Self- Esteem (Mean Score) between ML and EL</i>	Non-significant	Significant	Non-significant
Community Acceptance	<i>Girl feels respected by everyone in her community at EL</i>	Significant	Non-significant	Non-significant
	<i>Girl feels accepted by her community at EL</i>	Significant	Non-significant	Non-significant
Other barriers	<i>Girl does not speak Lol (English) at EL</i>	Significant	Significant	Non-significant
	<i>Girl feels safe traveling to and from school at EL</i>	Non-significant	Non-significant	Significant

³⁸¹ R²=0.02, F (1) =4.6, p=0.32

TRANSITION

At Endline, girls with and without disabilities were equally likely to successfully transition. Between Midline and Endline, transition rates decreased for girls without disabilities, but the project was able to support girls with disabilities to maintain their transition rates. At Midline, there was a statistically significant association between experiencing a successful transition and not having a disability. At Endline, this was no longer the case, and both groups transitioned at similar rates.

Teachers trained by the project reported that inclusive education practices, role models, and encouragement supported children with disabilities to successfully transition within school and to secondary school.

Girls with disabilities were more likely at statistically significant levels to transition to vocational training than girls without disabilities, likely supported by the project's focus on this pathway through career fairs at key transition points. Several teachers also outlined how they were equipped by the project to present vocational training as an alternative pathway for some children with disabilities.

Several factors supported girls with disabilities to experience successful transitions, validating central project assumptions. Girls with disabilities who felt respected by members of their communities, girls with disabilities who were member of a Child-to-Child Club, and girls with disabilities who improved their attendance outcomes, were more likely to experience a successful transition between Midline and Endline at statistically significant levels.

However, there is a statistically significant association between being out of school and having a disability according to Chi-square tests for association. 66.7% of girls with disabilities who are out of school at Endline have been pregnant compared to 4.1% of girls with disabilities who are in school or in vocational training. These findings indicate that girls with disabilities who have been pregnant are at increased risk of drop-out

The project supported girls with disabilities to maintain their transition rates between Midline and Endline, while girls without disabilities experienced drops in their transition rates.

At Endline, girls with and without disability are equally likely to successfully transition through a relevant pathway.

At Midline 88% of girls with disabilities successfully transitioned to the next grade level or to vocational training and 99% of girls without disabilities successfully transitioned.

At Endline 89.2% of girls without disabilities successfully transitioned through a relevant pathway and 91.7% of girls with disabilities successfully transitioned.

The project supported girls with disabilities to transition through several key pathways, including:

- Transitioning from primary school to secondary school
- Transitioning within school to the next grade level
- Transitioning to vocational training
- Transitioning to employment through apprenticeships

Through Child-to-Child Clubs and activities at schools, the project engaged role models to come and speak to children with disabilities about their successful transitions.

After girls with disabilities completed primary school, they were provided with guidance counselling to support them and their families to choose the most relevant transition pathway, whether that be to secondary school or vocational training.

Girls with disabilities facing economic hardship, who chose to continue to secondary school and vocational training were provide with bursaries by the project to support them to afford the costs of school and training.

Table 11. Overall Transition Rates

	Girls without disabilities (n=259)	Girls with disabilities (n=327)
Midline Percentage of girls who successfully transitioned through relevant pathway	99%	88%
Endline Percentage of girls who successfully transitioned through relevant pathway	89.2%	91.7%

Whilst at Midline there was a statistically significant association between experiencing a successful transition and being a girl without disabilities, at Endline, this is no longer the case, with both groups transitioning at similar rates.

Differences between Midline and Endline, however, indicate that transition rates for both girls with and without disabilities have decreased between Midline and Endline.

This is likely due to the negative effects of COVID-19, making it harder for girls with and without disabilities to pass their exams, a necessary step to successfully transition within school.

Table 12. Transition Rates at Endline

	Girls without disabilities (n=259)	Girls with disabilities (n=327)
Successfully transitioned from Grade 8 last year to secondary school (of girls in grade 8 last year)	90.7%	90.7%
Repeated grade	8.6%	6.8%
Successfully transitioned to vocational training	0%	5.5%
Currently Out of school	1.2%	2.8%

Teachers trained by the project report that inclusive education practices, role models, and encouragement has supported children with disabilities to successfully transition within school and to secondary school.

According to teachers interviewed:

When they come to secondary [now] they find us teachers who were trained. We will still give the environment which will enable him or her to learn more and we'll strain to provide the facilities that can make him/her learn. So the transition is now very high in terms of percentage compared to previously because of the knowledge people have... They believe just like we believe in inclusive clubs... that disability is not inability. We also had certain role models who come and talk to [the children with disabilities] and tell them surely this thing is able we can make it, what others can do we can also do. In this school the completion [now] is 100%. We try to make them feel they are part and parcel of the system.³⁸²

We encourage them. We try to talk to them [and tell them] to continue coming to school... We counsel them, we tell them the good things that they will get if they complete primary... 'This is what you will do. You will be like this'... so it encourages them that they also want to be like others...so that urge is in them. So, we continue with guidance and counseling and trying to be close to them... and then... they see that they are able to do things.³⁸³

³⁸² 1.4 FGD TEACHERS ST. IGNATIUS LOYOLA

³⁸³ *ibid*

Girls with disabilities are more likely at statistically significant levels to transition to vocational training than girls without disabilities, likely due to the project's focus on this pathway through career fairs at key transition points.

While no girls without disabilities in the tracked cohort progressed into vocational training, 5.5% of girls with disabilities successfully transitioned into vocational training.

There is a statistically significant association between being in vocational training and being a girl with a disability, indicating that this pathway is not frequently considered or realized by girls without disabilities and that the project has supported several girls to make this transition. The project organized career fairs for girls at key transition points, including at the end of primary school to provide girls with disabilities with a wider range of options to consider with regards to transition.

Several teachers also outlined how they were equipped by the project to present vocational training as an alternative pathway for some children with disabilities.

There are children with disabilities who are not good academically- but they are capable of ...practical work like [in a] salon and ... dress making. So, we have encouraged them to join vocational training after completing [their] ... they are very happy about it so we just encourage [about what they can do] after ... their KCPE.³⁸⁴

You know in the past when they failed that was the end of it. People were not following them but here all those who had disabilities have transitioned to secondary school [and] there is another one who went for vocational training.³⁸⁵

I've handled some who could not get the good marks to join form 1. Those ... have been taken to vocational have really improved. There is one who is now making windows and doors at Kamsama³⁸⁶

LC has tried to identify these learners and give them the correct placement. There are some learners who have been taken to vocational training, there are some who have been taken to secondary school and they are paying school fee for them.³⁸⁷

Parents also reported that support from LC to enable their children to go to vocational training and secondary school changed the lives of their children.

³⁸⁴ 1.7 FGD TEACHERS CHINATO

³⁸⁵ ibid

³⁸⁶ 1.7 FGD TEACHERS CHINATO

³⁸⁷ 1.7 FGD TEACHERS CHINATO

Parents reported:

*Talking about children going for vocational training, we really thank the Leonard Cheshire because ... they paid their school ... and some of them have completed.*³⁸⁸

*There are changes.... My child with disability has gone further than even her siblings who are not disabled and only through Leonard Cheshire. She has seen a lot through LC and she has even gained respect... She has changed. In fact she has gone even beyond me in terms of knowledge and only through these people [LC]. If they didn't come her life wouldn't have had much change because this child of mine has even taken to school up to class 8! [If they didn't come] I'd still be here with her in the house because she could not manage to walk going to school. But she is the first child who went to a boarding school in our home, she was learning in Kisumu and when they closed, she would just come home alone and go back alone. Her life really changed and if you see her today you cannot believe that.*³⁸⁹

However, despite these improvements, there are still some barriers to girls with disabilities likelihood of successful transition.

Girls with disabilities are twice as likely to be out of school at Endline than girls without disabilities.

There is a statistically significant association between being out of school and having a disability according to Chi-square tests for association. 2.8% of girls with disabilities at Endline are out of school compared to 1.2% of girls without disabilities.

Girls with disabilities who are out of school at Endline are more likely to have been pregnant at some point than in girls with disabilities who are in school.

66.7% of girls with disabilities who are out of school at Endline have been pregnant compared to 4.1% of girls with disabilities who are in school. There is a statistically significant association between having been pregnant and being out of school³⁹⁰.

Pregnancy imposes challenges with attending school and young mothers face additional childcare responsibilities than their peers. These findings indicate that girls with disabilities who have been pregnant are at increased risk of drop-out.

³⁸⁸ 10 FGD PARENTS MBITA

³⁸⁹ 10 FGD PARENTS MBITA

³⁹⁰ P<0.05 Chi-Square test for association

However, girls with disabilities and girls without disabilities are equally likely to have been pregnant according to tests for association.

Girls with disabilities who feel respected by members of their community at endline are more likely to have experienced a successful transition.

89% of girls with disabilities who feel respected by their communities successfully transitioned compared to 83.5% of girls who do not feel respected by their community.

Predictive modelling finds that feeling respected by one's community is a statistically significant predictor of having experienced a successful transition.

This finding indicates that supporting reductions in stigma and building respect amongst community members for girls with disabilities supports girls with disabilities to progress in school or through other relevant pathways.

Girls with disabilities who are members of Child-to-Child Clubs were more likely to experience a successful transition at Endline at statistically significant levels. 93.4% of C2C Club members experienced a successful transition compared to 74% of girls with disabilities who were not in C2C clubs.

Predictive modelling also indicates that girls with disabilities who are members of C2C clubs were more likely to experience a successful transition than girls with disabilities who are not C2C club members.

Qualitative sessions and quantitative evidence indicate that C2C clubs support girls' attendance outcomes and self-esteem which likely influences their ability to successfully transition in school and through other relevant pathways.

Improving girls with disabilities attendance levels supports their likelihood to experience a successful transition, supporting a key assumption in the project's theory of change.

Predictive modelling using changes in attendance levels between 2019 and 2020 and between 2020 and 2021 indicate that supporting girls with disabilities to improve their attendance increases the likelihood that they experienced a successful transition by

endline³⁹¹. This suggests that activities which support girls with disabilities to improve their attendance also support girls with disabilities to successfully transition.

Across functional impairment types, as captured by the Washington Group Short Set, girls with difficulty concentrating and girls with difficulty communicating had the lowest transition rates.

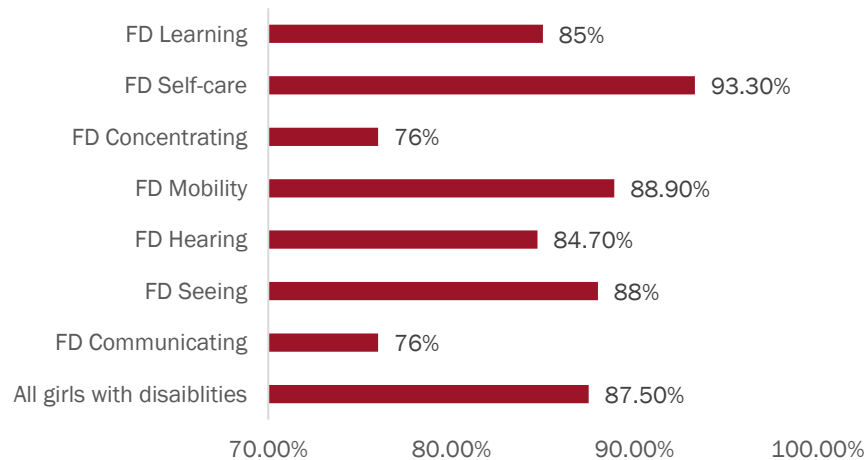


Figure 16. Transition Rates by Washington Group Short Set³⁹²

However, sample sizes for each of these functional difficulty types are relatively low, limiting the extent to which significant conclusions can be drawn from these associations.

Across assessed disability types, based on EARC assessment results, girls with visual impairments and girls with learning difficulties had the lowest transition rates.

³⁹¹ Linear regression using change in attendance levels between 2019 and 2021 predicted girls' likelihood to transition (Beta = 0.006; R square 0.111; p<0.05); Similar results using change in attendance between 2020 and 2021 as a predictor of transition (Beta=0.007; R square=0.086; p<0.05)

³⁹² Seeing (n=27); Hearing (n=4); Self-care (n=2); Communication (n=6); Learning (n=13); Remembering (n=9); Concentrating (n=5);

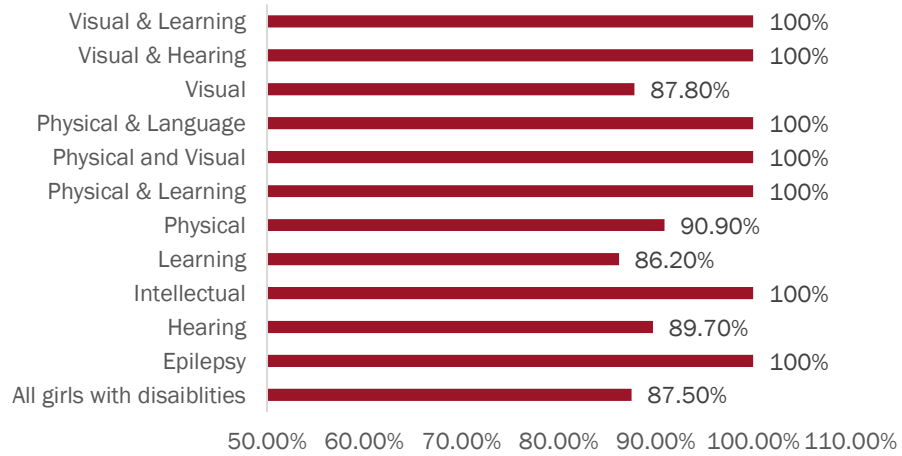


Figure 17. Transition Rates by Assessed Disability Type³⁹³ (n=327)

³⁹³ Epilepsy(n=1); Epilepsy & Other(n=1); Hearing(n=44); Intellectual(n=7); Learning Difficulties(n=39); Learning Difficulties & Other(n=1); Physical(n=14); Physical & Learning(n=1); Physical & Visual(n=3); Physical Speech & Language Intellectual(n=3); Visual(n=70); Visual & Hearing(n=11); Visual & Learning(n=3)

SUSTAINABILITY

During the validation workshop, the evaluation team worked with stakeholders to rate the sustainability of the project's achievements for each of the outcomes and across three levels: community, school, and system. Results of participants' rating across each level are shown in the following table.

At the community level, participants assessed that supports for sustainability of project achievements were between emerging and becoming established. There were strong supports for sustaining teaching quality, learning, transition, and attendance and weaker supports for sustaining achievements in community awareness, self-esteem, and the policy environment.

At the school level, participants indicated that sustainability mechanisms are emerging, for most outcomes, although they indicated that support for achievements in transition were becoming established.

At the system level, participants assessed that sustainability mechanisms are emerging across outcomes except in learning, which was rated as latent.

At the community level, participants rated supports for sustainability of project achievements as between emerging and becoming established, with the strongest factors supporting sustainability of achievements in teaching quality, learning, transition, and attendance.

Participants reported that supports for achievements in community awareness, self-esteem, and the policy environment were emerging. Participants reported that there were still negative views towards children with disabilities in communities, which would likely affect children with disabilities' self-esteem, and that although policies may have been put in place to support inclusion there are gaps in implementation and funding for these policies to play a role at the community level.

At the school level, participants rated supports for sustainability of project achievements across outcomes as emerging, although they indicated that support for achievements in transition were becoming established.

Participants reported that although improvements have taken place at the school level: (1) not all teachers adopt inclusive education practices or are equipped to implement them,(2) gaps remain to community awareness, self-esteem and attendance due to stigma against children with disabilities; (3) supports for learning improvements are emerging although there

are still gaps in inclusive practices and in the implementation and wider adoption of individualized education plans (IEPs).

At the system level participants rated sustainability of project achievements across outcomes as emerging except for achievements in learning, for which they rated supports for as latent.

At the system level participants reported that (1) large class sizes and large ratios of teachers to students could inhibit the sustainability of improved teaching practices (2) lack of resources at the system level prevent wider awareness raising on stigma and community awareness towards children with disabilities which will also inhibit the sustainability of attendance improvements (3) lack of funding prevents implementation of policies that have been put into place (4) transition supports are emerging but if schools and institutes that children with disabilities transition to are not widely implementing inclusive practices, sustainability of transition achievements may be at risk. With regards to learning, participants rated sustainability of achievements at the system level as latent as there is a lack of resourcing to ensure adoption of inclusive practices and the implementation of individualized learning programs.

Table 13. Participant's Sustainability Ratings Across the Scorecard

Level	Outcome	Sustainability Score ³⁹⁴ (1 to 3)	Group Explanation
Community	Teaching quality	3 (Becoming Established)	Continuing financial and technical support for teachers from MoE and KICD are in motion. Communities in the region are also accepting inclusive learning.
	Community Awareness	2 (Emerging)	Though perceptions and attitudes towards girls with disabilities have improved, some still hold cultural and religious views about disability as a bad omen that leads to negative responses towards disability.
	Self -Esteem	2 (Emerging)	Increased community awareness about disability are likely to

³⁹⁴ 1 = Latent (changes in attitudes)

2 = Emerging (changes in behaviors)

3 = Becoming established (Critical mass stakeholders change behavior)

Level	Outcome	Sustainability Score ³⁹⁴ (1 to 3)	Group Explanation
			provide a better environment for improvements to self-esteem in girls with disabilities.
	Learning	3 (Becoming Established)	Communities, parents, and schools are better aligned in commitments to improve learning outcomes for girls with disability. However, funding constraints limit access to assistive devices.
	Transition	3 (Becoming Established)	Government policy mandates 100% transition to secondary school.
	Policy Environment	2 (Emerging)	Policies supporting inclusive education exist. However, there have been many challenges to implementation.
	Attendance	3 (Becoming Established)	The MoE is implementing the Education for All policy which mandates enrollment in school and will encourage better attendance.
School	Teaching quality	2 (Emerging)	Support from BOMs and peer learning among teachers and with SBITs and EARCs helps to improve teacher capacity. But transfers of trained teachers out of the region and large class sizes sets process back.
	Community Awareness	2 (Emerging)	Though there's improvement in the community and most of these children are going to school, there is still denial and cultural practices that do not support it. Some people feel disability is a bad omen and hide children with disabilities. More awareness efforts in Chiefs' <i>Barazas</i> and churches should be created.
	Self -Esteem	2 (Emerging)	Self-esteem has improved, but pervasive cultural and gender

Level	Outcome	Sustainability Score ³⁹⁴ (1 to 3)	Group Explanation
			stereotypes bar further improvements.
	Learning	2 (Emerging)	Learning has improved but more needs to be done to make accommodations, particularly for children with learning difficulties. Due to large class sizes, IEP are not fully implemented.
	Transition	3 (Becoming Established)	100% transition government policy will ensure consistent transitions, with a few exceptions by case.
	Policy	2 (Emerging)	Policies supporting inclusive education exist. However, implementation is not consistent.
	Attendance	2 (Emerging)	Issues with stigma and low self-esteem continue to impact attendance. The creation of awareness and counselling for learners with disabilities needs to continue.
System	Teaching quality	2 (Emerging)	The methodology has been adopted. However, the teacher-student ratio is too high to allow for implementation of IEPs. Teachers are not properly trained to identify disabilities early on.
	Community Awareness	2 (Emerging)	Stakeholders are aware courtesy of the project, and there's a lot of awareness. There is a strong capacity among EARC staff and education officers to continue outreach, however, there are not sufficient resources to continue implementing community awareness efforts.
	Self -Esteem	2 (Emerging)	Increased community awareness and parent attitudes facilitate self-esteem, but there are not enough

Level	Outcome	Sustainability Score ³⁹⁴ (1 to 3)	Group Explanation
			resources to continue addressing these factors.
	Learning	1 (Latent)	IEPs cannot be implemented due to large class sizes, and there are not enough funds to continue buying assistive devices.
	Transition	2 (Emerging)	Learner transition to the next level is smooth thanks to national policy. However, schools are not always prepared to accommodate children with disabilities transitioning in.
	Policy	2 (Emerging)	Policies for inclusion are strong, but insufficient budget allocations bar effective implementation.
	Attendance	2 (Emerging)	Inclusive education increases the number of students with disabilities who attend school, but more awareness efforts are needed to continue encouraging parents to enroll children with disabilities.

6. Conclusions

What contribution did the project make to key outcomes for girls with disabilities and what worked to improve target outcomes?

The project successfully contributed to improvements in **literacy and transition** rates for girls with disabilities. This was largely brought about through targeted support to enable girls to successfully transition to vocational training and secondary schools, and through the adoption of inclusive practices in schools.

Improvements were supported by inclusive education practices, teacher training, extra exam time, individual attention from teachers, supportive environments for asking for help, improved self-esteem, empowerment to participate in class, and community safety, respect, and acceptance.

Throughout implementation, girls with disabilities were **attending school** as regularly as girls without disabilities. The project supported girls with disabilities to attend school by facilitating a welcoming environment, improving accessibility, and reducing stigma. The project's work to facilitate access to sanitary wear, assistive devices, and psychical adaptations to school buildings improved accessibility and promoted higher attendance, according to qualitative evidence.

The project supported teachers to **learn about and implement inclusive education strategies**, filling acknowledged gaps in their teaching pedagogy. Teachers were able to provide specific examples of accommodations and modifications made to make lessons more inclusive, including the use of individual education plans, providing targeted and individualized support to children with disabilities, adjusting the physical classroom environment, adjusting curriculum expectations to meet children at their level of ability, and relying on a wider range of teaching strategies. Across domains reviewed, lessons at Endline were more likely than lessons at Midline to adopt inclusive education practices at statistically significant levels. The project also strengthened relationships between teachers trained, EARCs, and parents to develop individualized strategies to support children with disabilities and provide a holistic perspective on their needs.

Project activities positively influenced the **support that parents and communities give children with disabilities**. Parent Support Groups (PSGs) encouraged parents to take positive action to support the education of children with disabilities by bringing children to school and investing in school materials.

The project supported a larger proportion of girls with disabilities to **sustain and improve their self-esteem** between Midline and Endline, than girls without disabilities in non-project schools. Qualitative findings suggest that self-esteem was supported by increased socialization between children with and without disabilities in Child-to-Child Clubs and through a more inclusive school environment.

With regards to the **policy environment**, the project successfully supported the passing of national legislation that enshrined a commitment to inclusive education and standardizing EARC processes. Project staff also identified ongoing gaps relating to inclusive education in teacher training and helped connect parents with existing government resources. At the county level, the project supported the drafting and passing of legislation related to disability, sexual and gender-based violence, child welfare and protection, accessibility infrastructure, and funding allocations. The project supported individual schools to launch initiatives aimed at reducing stigma and discrimination against children with disabilities, conduct outreach to parents, and allocate funding for inclusive learning materials.

How relevant was the project to needs and conditions of target groups?

The project appropriately targeted key barriers affecting girls with disabilities' attendance, learning and transition. By supporting girls with disabilities to attend school through improved access to sanitary wear, assistive devices, transport and school associated costs, the project equipped them to learn and successfully transition. Community sensitization activities were also well targeted in addressing stigma and entrenched negative attitudes towards children with disabilities.

The project also supported teachers to address key gaps in their professional development and build skills in implementing inclusive education practices. In response to findings from Midline, the project placed additional emphasis on supporting teachers to move away from using corporal punishment to discipline children with disabilities and there is some evidence this has had an effect, although a large number of girls with disabilities still report experiencing corporal punishment.

There is significant evidence that adaptations made by the project in response to school closures, including the provision of learning materials, supporting teachers to contact children, and additional psycho-social support, supported girls with disabilities to sustain existing levels of key outcomes and demonstrates the projects adaptability to changing conditions.

Despite these improvements there was also some evidence of gaps in addressing needs of target groups that should be considered in future interventions:

- The project's outreach to communities and local leaders raised awareness of safeguarding issues and has improved work to curb sexual violence against children with disabilities. However, stakeholders interviewed reported that sexual violence still poses a significant risk for girls with disabilities at the community level, suggesting additional work should continue in this area.
- Reports from students and other stakeholders show that pregnancy, young motherhood, and high chore loads still pose significant barriers to attendance that should continue to be addressed in future activities. Stakeholders in validation agreed with this finding, emphasizing the barriers that young mothers face to attending school, particularly due to stigma associated with early pregnancy.
- Young mothers with disabilities interviewed at Endline also reported experiencing goal shifts and reduced aspirations after having become pregnant, suggesting this group of girls require additional and more targeted support in future interventions.
- Despite reductions in corporal punishment being made in corporal punishment between Midline and Endline 19.7% of girls with disabilities sampled report that their teacher has physically punished them in recent weeks, indicating that corporal punishment remains a common practice in project schools.
- Although it is likely that the project supported improvements in numeracy, evidence linking numeracy improvements to project activities is less robust than evidence linking literacy improvements to project activities and the adoption of inclusive practices. This suggests additional work may need to be done to consolidate teachers' knowledge of how to apply inclusive practices in the teaching of mathematics. In addition, teachers demonstrated ongoing gaps in knowledge and resources for teaching abstract math concepts at higher levels.

To what extent will project achievements be sustained?

At the community level, participants rated supports for sustainability of project achievements as between emerging and becoming established, with the strongest factors supporting sustainability of achievements in teaching quality, learning, transition, and attendance.

Participants reported that supports for achievements in community awareness, self-esteem, and the policy environment were emerging. Participants reported that there were still negative views towards children with disabilities in communities, which would likely affect children with disabilities' self-esteem, and that although policies may have been put in place to support inclusion there are gaps in implementation and funding for these policies to play a role at the community level.

At the school level, participants rated supports for sustainability of project achievements across outcomes as emerging, although they indicated that support for achievements in transition were becoming established.

Participants reported that although improvements have taken place at the school level: (1) not all teachers adopt inclusive education practices or are equipped to implement them,(2) gaps remain to community awareness, self-esteem and attendance due to stigma against children with disabilities; (3) supports for learning improvements are emerging although there are still gaps in inclusive practices and in the implementation and wider adoption of individualized education plans (IEPs).

At the system level participants rated sustainability of project achievements across outcomes as emerging except for achievements in learning, for which they rated supports for as latent.

At the system level participants reported that (1) large class sizes and large ratios of teachers to students could inhibit the sustainability of improved teaching practices (2) lack of resources at the system level prevent wider awareness raising on stigma and community awareness towards children with disabilities which will also inhibit the sustainability of attendance improvements (3) lack of funding prevents implementation of policies that have been put into place (4) transition supports are emerging but if schools and institutes that children with disabilities transition to are not widely implementing inclusive practices, sustainability of transition achievements may be at risk. With regards to learning, participants rated sustainability of achievements at the system level as latent as there is a lack of resourcing to ensure adoption of inclusive practices and the implementation of individualized learning programs.

RECOMMENDATIONS

While the project has ended, the evaluation team would make several recommendations to education sector stakeholders working to improve quality education outcomes for girls with disabilities in Kenya's lake region in the future:

- **Continue to provide children with disabilities opportunities to socialize with children without disabilities outside of the classroom.** Child-to-Child Clubs supported girls with disabilities to develop social skills and improve their self-esteem between Midline and Endline. Qualitative evidence suggests club settings also supported girls' motivation to attend and participate in school. In addition, Child-to-Child clubs were effective mechanisms to promote attendance and transition outcomes according to quantitative analysis. Education sector stakeholders working in

the lake region should continue to provide opportunities for girls with disabilities to socialize with their peers, as these are effective avenues to support key education outcomes based on evaluation evidence.

- **Strengthen safeguarding mechanisms at the community level for children with disabilities to counter the risk of sexual violence and continue to promote sexual and reproductive health messaging for girls with disabilities given effects of teenage pregnancy on drop-out.** Qualitative evidence suggests that girls with disabilities face increased risk of sexual violence in their communities. In addition, girls with disabilities who are out of school were more likely to have been pregnant at some point, suggesting that strategies to promote SRH knowledge and prevent early pregnancy should continue to be delivered to girls with disabilities in target regions.
- **Advocate for reduced class sizes and increased lesson duration.** Teachers indicated that the length of lessons is too short to meet the curriculum expectations, particularly when adopting inclusive education strategies that require additional time to implement effectively. Teachers reported that although they have made improvements by using these strategies, they are not able to meet existing expectations for children with or without disabilities. As several of these approaches require individualized approaches for children with disabilities, curriculum delivery is hampered by large class sizes. Education sector stakeholders should advocate for longer lessons, smaller class sizes and/or professional teaching assistants to support teachers to effectively deliver the curriculum in an inclusive manner.
- **Advocate for changes to teacher and school performance review processes within the Ministry of Education for grades which have not rolled the CBC, and to the Teacher Performance Appraisal Directorate to prevent teachers from being disincentivized to implement inclusive practices. Consider raising awareness of teacher and school appraisal processes to promote continued adoption of inclusive education strategies.** While there is some evidence that the Ministry of Education is interested in the number of children with disabilities enrolled in schools, current school and teacher performance review processes evaluate performance with regards to academic outcomes, particularly for target grades in which the competency-based curriculum has not been rolled out. According to reports from teachers and school stakeholders, pressures to meet performance indicators disincentivize teachers from adopting inclusive practices as they work to raise school and class averages to align with expectations. Some teachers in validation also indicated that their peers are not aware of changes made to the appraisal processes

and wider awareness raising on this, would promote the adoption of inclusive practices.

- **Strengthen modules on “ableism” in teacher trainings on inclusion to support the empowerment of children with disabilities.** While teachers demonstrated a clear understanding of inclusion and the strategies to promote inclusive education, language used by teachers indicated that ableist mindsets are still evident. Teachers view children without disabilities as “normal” and “able”. While these attitudes may not affect the adoption of inclusive practices, language and framing on inclusion influences the extent to which children are empowered and feel capable. Future activities should strengthen learning on these concepts to promote inclusive language. Some teachers also have the perception that children with disabilities “play the victim” or have a “victim mentality”. Future activities should further consider how to challenge this perception in messaging while not promoting ableist perspectives.
- **Consider strengthening and targeting SRH messaging for girls with disabilities to prevent early pregnancy and dropout.** A higher proportion of girls with disabilities are out of school than girls without disabilities. More than half of these girls have been pregnant at some point. This suggests there may be additional need to develop targeting messaging to support the SRH outcomes of girls with disabilities and prevent the consequences of early pregnancy, including social stigma, as reported by stakeholders in validation.
- **Continue to train teachers and caregivers on alternative approaches to corporal punishment, including positive discipline.** Although the prevalence of corporal punishment decreased, 19.7% of girls with disabilities still report being physically punished in recent weeks. Although teachers in qualitative sessions indicated asking children why they engage in certain behaviours, explaining to children why these behaviours are not appropriate, and utilizing other disciplinary approaches, some teachers admitted that they now cane children outside of class instead of during class. These finding suggests that corporal punishment still takes place. Education sector stakeholders should consider the addressing this in future teacher training initiatives. In addition, means to report corporal punishment at schools or mechanisms to record discipline practices administered could improve accountability and compliance with existing regulations.
- **Consider additional support for girls with disabilities who become young mothers to support them to pursue their aspirations.** Several girls with disabilities indicated that their goals changed after they became young mothers. For example, some shared that they wanted to be teachers or continue their schooling but now have

more limited aspirations. Education sector stakeholders should consider the additional time restraints, burdens, and stigma young mothers face and continue to support these girls to realize their aspirations through targeted support and raising the visibility of role models who have been through similar experiences.

- **Continue to address high chore burdens for girls with disabilities.** Having a high chore burden limited attendance outcomes for some girls with disabilities. Education sector stakeholders should continue to address high chore burdens among girls with disabilities by engaging and sensitizing parents and caregivers to the negative consequences of high chore burdens.
- **Consider additional targeted support to reduce community stigma against girls with high degrees of functional difficulty in communicating, seeing, concentrating, and mobility.** A significantly lower proportion of girls with communicating, seeing, walking, concentrating, and learning difficulties felt included, accepted, and respected by their communities than girls without these difficulties or girls with disabilities who do not have high degrees of functional difficulties, suggesting additional community sensitization would continue to support girls who face high degrees of functional difficulty.
- **Consider additional targeted support to enable girls with epilepsy to attend school.** Some qualitative findings indicated that girls with epilepsy face additional barriers to attend school due to fears associated with having an episode and concerns that teachers or peers may not be aware how to react to episodes. Additional training on how to respond in these cases and more targeted support for these children, would likely support their attendance outcomes.

Annex 1: Project Design and Interventions

Project design and intervention

Activity	What output will the intervention contribute to?	What Intermediate Outcome will the intervention contribute to and how?	How will the intervention contribute to achieving the learning, transition, and sustainability outcomes?	Start to end date of activity	Target beneficiaries (and numbers)
Girls initially assessed, re-assessed, and provided with rehabilitative support,	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attendance Girls with disabilities have increased attendance in primary and secondary mainstream schools and vocational institutions.	girls with disabilities provided with resources as per assessment and recommendations to go to school.	May 2017 – December 2021	2776 CWD
Provision of secondary school Fees for Boarding and Special Schools/Day School	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attendance Girls with disabilities have increased attendance in primary and secondary mainstream schools and vocational institutions.	girls with disabilities provided with resources as per assessment and recommendations to go to school.	May 2017 – March 22	667 CWD
Provision of School fee for TVETs	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attendance Girls with disabilities have increased attendance in primary and secondary mainstream schools and vocational institutions.	girls with disabilities provided with resources as per assessment and recommendations to go to school.	Regular activity that happened every quarter	253
Provision of Scholastic Kits	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attendance Girls with disabilities have increased attendance in primary and secondary mainstream schools and vocational institutions.	girls with disabilities provided with resources as per assessment and recommendations to go to school.	Regular activity that happened every quarter	2776 CWD
Training for Parent Groups on governance	OUTPUT 1- Girls with disabilities have the	Attitudes and Perceptions Families, communities	providing parents with the skills to improve and manage their financial income this	Regular activity that happened	50 PSGs

	resources and tools they need to attend school	and peers proactively support girls with disabilities to go to school	will be channeled to the girls and will improve attendance and this will enable them to support their children even after the project facing out.	every quarter	
Training for Parent Groups on entrepreneurship	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	providing parents with the skills to improve and manage their financial income this will be channeled to the girls and will improve attendance and this will enable them to support their children even after the project facing out.	May 2017 – December 21	50 PSGs
Revolving loans for Parents Groups	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	providing parents with the skills to improve and manage their financial income this will be channeled to the girls and will improve attendance, and this will enable them to support their children even after the project facing out.	October 2018 – March 2020	50 PSGs
Provision of Livelihood Mentorship for Parents	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	providing parents with the skills to improve and manage their financial income this will be channeled to the girls and will improve attendance, and this will enable them to support their children even after the project facing out.	Regular activity that happened every quarter	1797 Parents
Create linkages with appropriate financial services	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	PSGs working with other appropriate financial services will enable the activities of these PSGs to continue even after the exit of the project	January 2018 – March 2019	50 PSGs
Provision of psycho-social support (in Primary & Secondary school)	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	girls with disabilities provided with resources as per assessment and recommendations to go to school.	Regular activity that happened every quarter	2523

Provide transport for Kisumu girls to attend educational institutes	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Attendance Girls with disabilities have increased attendance in primary and secondary mainstream schools and vocational institutes.	The transportation offered ensured that learners do attend school and government learned about it design so they can be able to work on a similar bus in other areas to support learners with disabilities	Regular activity that happened every quarter	59 CWD
Teacher Mentorship Programme (Primary & Secondary)	OUTPUT 1- Girls with disabilities have the resources and tools they need to attend school	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities.	Improved teaching quality ensured efficient inclusive learning and trained teachers are able to train other teachers even after the project facing out.	Regular activity that happened every quarter	30 mentors trained 670 Teachers reached
Training Teachers in IE (in Primary & Secondary)	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities.	Training teachers to have the knowledge to adapt their teaching practice to be inclusive for girls with disabilities	Regular activity that happened every quarter	670
Accessibility Audit and Adaptation of Primary, Secondary Schools & VTI	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities.	the project is able to improve the schools physical environment, this will make the girls' life in school easier by removing physical barriers so that they can concentrate more on learning	January 2018 – March 2019	17 toilets block adaptation 19 classrooms alteration 19 ramps
Provision of Accessible Learning Materials and Tools (Primary & Secondary)	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities.	through providing girls with disabilities with accessible materials and tools, the learning environment will be more inclusive	Regular activity that happened every quarter	75 schools reached

Mapping of Livelihood options with TIVETs	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities.	The findings from the mapping exercise helped in informing on choices by the beneficiaries of more relevant and sustainable sources of livelihoods in the project catchment regions	April – June 2019	5 sub counties
Train the instructors of the TIVETs on IE practice and disability	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities.	the project provides instructors with training in inclusive education this have improved the attitude, knowledge, and confidence of the instructors to support girls with disabilities in school. Thus, the girls will receive greater quality and access to learning	Regular activity that happened every quarter	164 Instructors
Equip TIVETs with necessary materials and equipment for the training	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities.	through providing with necessary materials and equipment's for training, the learning environment have been more inclusive	Regular activity that happened every quarter	8 TIVETS
Support of Starters kits to girls in the master trainer & apprenticeship Program	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Teaching Quality Improved access to quality education in mainstream schools and vocational institutes for girls with disabilities	The project provided GWD with startup kits for various trades as a booster for starting up their own businesses hence sustaining the efforts that have been made by the project	January 2018 – December 2018	120 learners
Provision of Life Skills Training in 50 Primary schools and 25 secondary schools	OUTPUT 2 - The environment, teaching and learning materials, are more inclusive for girls with disability	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	Through life skill trainings children's self-esteem is raised, they become aware of themselves and realize their potentials at school and home levels. Hence improving their school attendance.	Regular activity that happened every quarter	2523 CWD reached

Mentorship of girls in Secondary schools by positive role models with disabilities	OUTPUT 3 - Girls with disabilities have increased awareness and knowledge in lifeskills	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	girls with disabilities face many barriers to social, employment inclusion and participation they not only require academic performance but also need holistic mentorship approach to improve their school performance and to prepare them for life after school.	Regular activity that happened every quarter	667 mentees reached
Peer Sensitized to IE through Child to Child (CtC) Clubs, Study Clubs and existing club leaders trained on IE (Primary & Secondary school)	OUTPUT 3 - Girls with disabilities have increased awareness and knowledge in lifeskills	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	Inclusive education sensitization is done to improve and promote learning among learners in an inclusive setting (CtoC clubs). Peer sensitization helps to promote cohesion among children, provides away for children to talk among themselves about their feelings regarding their education and offer mutual support	Regular activity that happened every quarter	2523
Best practice guide developed for mentoring girls with disabilities	OUTPUT 3 - Girls with disabilities have increased awareness and knowledge in lifeskills	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	The best practice guide developed for mentoring GWD was distributed to various schools and institutions for current and future use	January to March 2019	400
Publication for Life Skills Manual	OUTPUT 3 - Girls with disabilities have increased awareness and knowledge in lifeskills	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	Life skills manual was published and distributed to various schools and institutions for current and future use	July – September 2019	350 Life Skills manual
Career Guidance for Girls with Disabilities	OUTPUT 3 - Girls with disabilities have increased awareness and knowledge in lifeskills	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and	equipping girls with disabilities with skills on self-awareness, and goal setting to enable them make informed decisions on considering VTIs as an alternative pathway. Career guidance also gave the girls and boys	July 2018 – March 2020	635 CWD

		future career opportunities.	an opportunity to be able to choose trades based on abilities, interests and talents that would lead to self-dependence in future, thereby improving their life chances.		
Financial literacy training (development of age-appropriate training and implementation)	OUTPUT 3 - Girls with disabilities have increased awareness and knowledge in life skills	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	The project equipped teachers with the needed skills to raise awareness of the youth on financial knowledge and money management.	January – March 2019	206 CWD
Internships/mentoring of girls with Master Artisans and successful business owners	OUTPUT 3 - Girls with disabilities have increased awareness and knowledge in lifeskills	Self-Esteem Girls with disabilities demonstrate increased voice and agency to participate in mainstream education and future career opportunities.	The project facilitated the beneficiaries to get attached to successful business owners for practical experience and in preparation of them getting into the job market. Mentorship sessions were also conducted by the successful business owners for networking purposes, and to build capacities on essential skills such as business start ups and prerequisites for employment	April 2019 – December 2021	253 Learners With Disabilities
Inception meetings in communities	OUTPUT 4 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge among families, community and peers	April – June 2017	106 community members
Inception meetings in VTIs	OUTPUT 4 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge among families, community and peers	April – June 2017	8 (50 participants) Vocational Training Centers
IE days in counties	OUTPUT 4 - Increased disability	Attitudes and Perceptions Families,	Increased disability awareness and knowledge among	Regularly happens	10 days

	awareness and knowledge among families, community and peers	communities and peers proactively support girls with disabilities to go to school	families, community, peers and government	when there is an IE day	
IE day (VTIs)	OUTPUT 4 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge among families, community, peers and government	Regularly happens when there is an IE day	10 Days
Male Mentorship Programme	OUTPUT 4 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	training up male mentors will build their capacity to influence a change in the patriarchal norms of families and communities and encourage father figures to take a core active role in supporting the education of girls with disabilities	July 2017 – March 2020	150
Communities sensitised (marked days & mobilizations events) for disabled girls transition to education and work	OUTPUT 4 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge among families, community and peers	Regular activity that happened every quarter	4000000 +
VTI communities sensitized	OUTPUT 4 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge within the VTI fraternity and peers	Regular activity that happened every quarter	4000000 +
Follow up training and sensitization with families to support girls at the end of Vocational Training	OUTPUT 4 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge among families, community and peers	Jan 2018 – September 2021	500 family members

Training for Board of Management in IE, Governance and resource mobiliation	OUTPUT 5 - Increased disability awareness and knowledge among families, community and peers	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge among the BOM in IE so that they can tailor their governance and resource mobilization on the same	Regular activity that happened every quarter	352 BOM members trained
Support child protection initiatives	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Supporting the CP initiatives technically to ensure CWD's are tackled in holistic nature.	Regular activity that happened every quarter	5 child protection initiative in 5 Sub County supported
Support children department with case management	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	This was done through safeguarding approach which focuses on proactive measures	Regular activity that happened every quarter	5 Sub County Children Offices supported
Capacity enhancement of child protection systems at National Level	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Through advocacy work done by the project at the national level	April 2018 – December 2020	225 participants
Support joint supportive supervision in collaboration with MOEST	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	reported included the development of school based literacy and numeracy strategies. The schools suggested working methods of participatory literacy and numeracy pedagogical practices.	July 2017 – December 2020	75 Visits
Targeted Advocacy at the County Working Groups	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	addressed the major challenges that stop learners with disabilities especially girls from attending school which work towards escalating the rate of school dropout within the Lake Victoria Basin Counties	January 2018 – September 2021	122 participants
Conduct targeted advocacy campaigns at the national level to ensure the effective	OUTPUT 5 - Stakeholders have increased	Attitudes and Perceptions Families, communities	Regular engagement of the national government will ensure that LC can advocate	January 2021 –	29

implementation of existing and development of new policies on disability inclusion, including an Inclusive Education policy	knowledge to incorporate Inclusive Education Approach	and peers proactively support girls with disabilities to go to school	for implementation of the policies developed	February 2022	
Publication and dissemination of IEC materials	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	Increased disability awareness and knowledge among families, community, peers and government	Regular activity that happened every quarter	800
Research on male mentors and child protection	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	The male mentorship programme was put in place to build support for girls' education amongst male role models in the community and in girls' households.	October 2019 - March 2022	2 publications
Staff Capacity Building	OUTPUT 5 - Stakeholders have increased knowledge to incorporate Inclusive Education Approach	Attitudes and Perceptions Families, communities and peers proactively support girls with disabilities to go to school	aimed at improving employees' knowledge, skills, understanding, values, attitude, motivation, and capability necessary to perform efficiently	July 2021 - September 2021	35 staffs

Table 14. Project design Assumptions

Intervention types	What is the intervention?	What output will the intervention contribute to?	What Intermediate Outcome will the intervention will contribute to and how?	How will the intervention contribute to achieving the learning, transition and sustainability outcomes?
Teacher Training	The project will train teachers across primary and secondary schools in inclusive education practices.	OUTPUT 2: The environment, teaching and learning materials are more inclusive for girls with disabilities	Teaching Quality: Adoption of IE practices will lead to improvements in teaching quality for all learners. Attendance: Improved teaching quality will lead to improved motivation to attend school.	Learning: Improvements in teaching practices will result in improved learning opportunities for girls with disabilities. Eventually translating to improved literacy and numeracy for the targeted boys and girls.

Teacher Mentorship	The teacher mentorship programme will support teachers to adopt inclusive education practices in the classroom.	OUTPUT 2: The environment, teaching and learning materials are more inclusive for girls with disabilities	Teaching Quality: Adoption of IE practices will lead to improvements in teaching quality for all learners. Attendance: Improved teaching quality will lead to improved motivation to attend school.	Learning: Improvements in teaching practices will result in improved learning opportunities for girls with disabilities. Sustainability: The mentorship programme will lead to sustained improvement in teaching practices after the project ends.
Teaching & Learning Materials	The project will provide schools with teaching and learning materials that are accessible to children with disabilities.	OUTPUT 1: Girls with disabilities have the resources and tools* they need to attend schools	Teaching Quality: More accessible teaching and learning materials will improve the quality of teaching for girls with disabilities. Attendance: This will in turn lead to improved attendance and lessons become more accessible.	Learning: Improved accessibility of curriculum content will lead to improved learning in the areas of literacy and numeracy. Sustainability: teaching and learning materials will continue to be used after the conclusion of the project. It is aimed that the target group will be equipped with more skills so as to improve their levels of engagement with society so as to eventually properly integrate them to be useful members of their communities.
Psycho-social Support	Psycho-social support will be provided education social workers who will conduct both home-based and school-based activities to support girls with disabilities on a one-to-one basis. The mentorship programme will be run in secondary schools to link girls with positive role models.	OUTPUT 4: Increased disability awareness and knowledge among families, community and other school children	Life Skills & Self-esteem: Psycho-social support will provide girls with individualized support to manage how they experience disability on a social and emotional level. This will lead to improved self-esteem. Attendance: Individualized support will enable girls to access and attend school.	Transition: improved life skills and self-esteem amongst girls will led to their successfully transition through relevant pathways (in-school, VTI).

Financial Literacy	Financial literacy training aims to improve girls' practical skills with budgeting, savings, and setting financial goals. The project delivers this training through C2C Clubs.	OUTPUT 3: Girls with disabilities have increased awareness and knowledge in life skills	Life Skills & Self-esteem: This component aims to improve the practical life skills of girls with disabilities and equip them with financial competencies.	Transition: it is expected that improved financial literacy will lead to improved chances of marginalized girls to transition to employment.
Livelihood Activities	The project conducts several livelihood support activities with Parent Support Groups. These aim to reduce the economic barriers preventing parents from supporting girl's education.	OUTPUT 1: Girls with disabilities have the resources and tools* they need to attend schools	Attendance: The project expects that reduced economic barriers will lead to improved access and attendance of girls with disabilities in school.	Learning: The project expects that improvements in attendance will lead to improved learning outcomes due to increased time spent in the classroom. Transition: The project expects that girls who improve their attendance are more likely to transition to later years of school or to other opportunities.
Peer Education	The C2C Club and Mentorship programmes will aim to improve girl's self-esteem and competencies in communication, interpersonal relationships, sexual and reproductive health, amongst other areas. This will in turn improve the self-efficacy of girls. Peer education will also promote understanding amongst others in school as to the needs of girls who experience disabilities.	OUTPUT 2: The environment, teaching and learning materials are more inclusive for girls with disabilities	Life Skills & Self-esteem: Attendance: Improved self-esteem, understanding of disability, and other life skills will be targeted through peer education. Attendance: improved self-esteem and confidence will likely lead to improved attendance.	Learning: Improved attendance is expected to lead to improved learning outcomes due to increased time spent in the classroom. Transition: improved self-esteem, self-confidence, and life skills will lead to girls transitioning to later schooling or TVET or other opportunities.
Parent & Community Initiatives	Negative community and parental attitudes result in discrimination towards girls who experience disabilities. The project will establish the Male Mentorship Programme as well as conduct several initiatives to increase awareness of the community and parents and caregivers	OUTPUT 4: Increased disability awareness and knowledge among families, community and other school children	Attitudes and Perceptions: Through the male mentorship programme and community sensitization activities the project aims to address these negative attitudes and perceptions. Attendance: Improved support	Learning: Improved attendance is expected to lead to improved learning outcomes due to increased time spent in the classroom. Transition: improved support for girls at the community and family level will encourage them to successfully transition to later

	of the needs of girls who experience disabilities.		for girls at the community and family level will lead to improved attendance.	years of schooling, TVET, or other opportunities.
Direct Support	The project will provide bursaries to support girls to attend secondary school and TVETs. The project will additionally provide scholastic kits and assistive devices to girls. In Kisumu, the project will provide a school bus to take girls to school.	OUTPUT 1: Girls with disabilities have the resources and tools they need to attend schools	Attendance: This will counter the economic and physical barriers associated with girls with disabilities attending school and promote improved attendance.	Learning: Improved attendance is expected to lead to improved learning outcomes due to increased time spent in the classroom.
Capacity Building	The project will conduct capacity building activities with several school stakeholders including EARC Officers and BoMs. The project will additionally conduct an accessibility audit in target schools. The project will also train TVET facilitators on inclusive education practices. The project is also working with Ministry of Education quality assurance teams in the region to build their capacity in monitoring and supporting of schools with various inclusive education interventions.	OUTPUT 5 : National and County government and NGO Stakeholders in education and child protection have increased knowledge to incorporate inclusive education approaches	Attendance: This will result in improved capacities of schools to accommodate girls with disabilities, and in turn result in improved attendance. School Governance & Policy: This will result in improved school governance to promote inclusive policies and practices.	Learning: Improved attendance is expected to lead to improved learning outcomes due to increased time spent in the classroom. Transition: As schools and TVETs adopt more inclusive policies and practices, girls will be encouraged to successfully transition. Also, by building the capacity of MoE officials on monitoring and support of inclusive education, the project will be able to embed IE methods within the routine MoE work.
Influencing /Advocacy Activities	The project will continue to conduct advocacy activities at the county level with County Working Groups and at the national level with relevant stakeholders including MoEST to improve the implementation of existing policies and promote the adoption of new policies in support of inclusive education.	OUTPUT 5 : National and County government and NGO Stakeholders in education and child protection have increased knowledge to incorporate inclusive education approaches	School Governance & Policy: These activities will promote the implementation of existing policies and the adoption of new policies.	Sustainability: This will in turn ensure that project achievements are sustainable, and implementation of existing and newly developed policies can be continued.
Publication & Dissemination	The project will publish several manuals and technical guidance to	OUTPUT 5 : National and County	School Governance & Policy: These activities will	Sustainability: This will document best practices and

	encourage replication of successful practices. The project will additionally disseminate learning and research findings.	government and NGO Stakeholders in education and child protection have increased knowledge to incorporate inclusive education approaches	encourage the replication of successful project components and support schools and other stakeholders to replicate best practices.	encourage the replication of these components amongst wider stakeholders, thus supporting the project to ensure its achievements are sustained.
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Annex 2: Endline evaluation approach and methodology

Evaluation methodology

The study employed a mixed-methods research design. Ideally, the evaluation would have used experimental and quasi-experimental approaches where a counterfactual sample is created in non-intervention areas within the lake region. Rather than focusing on determining project impact, the evaluation instead aims to determine the extent to which the project had an impact on closing the gap in outcomes between girls with disabilities and girls without disabilities

At Baseline, in consultation with the Fund Manager, the evaluation sampled a group of girls without disabilities in target schools. This group was the original 'comparison group'. Originally, as agreed with the FM, this group would only be sampled at Baseline to allow the evaluation to determine the extent to which the project has closed the gap in outcomes between girls with and without disabilities.

However, at Midline, after additional discussions on how best to measure project impact on closing the gap, and because the sample size for girls in upper grade levels at Baseline was small in the comparison group, the evaluation team, in consultation with the project and the FM, decided to sample a cohort of girls without disabilities in comparison schools not targeted by the project. Therefore, a sample of 259 girls without disabilities, which matched the original sample in terms of their age, grade level, and sub-county in which they live, was randomly taken from comparison schools at Midline. Comparable schools were selected based on the nearest neighbour algorithm relying on various characteristics to ensure the most similar schools within the same sub-county were chosen as target schools.

At Endline, the evaluation tracked all the girls assessed at Midline.

The Endline assessed the project along the GEC gender and social continuum. The evaluation measured changes to gender relations as experienced in the home or school space and attitudes by parents and caregivers.

The ambition for GEC projects is to be at least "GESI sensitive", which means:

- GESI Accommodating: Acknowledges but works around gender, disability or other social differences and inequalities to achieve project objectives
- GESI Transformative: Actively seeks to transform inequalities in the long term for all children despite gender, disability or other characteristics.

Gender-transformative approaches aim to move beyond individual self-improvement among women and girls and toward transforming the power dynamics and structures that serve to reinforce gendered inequalities. Gender-transformative change, framed as moving towards gender equality, was examined across three key dimensions

- **Agency:** Changes in girls's self-esteem, aspirations and self-efficacy (Sources: Girls Survey, FGDs/KIIs)
- **Relational** (intrahousehold and beyond): Tracked community violence perceptions and beliefs around the acceptability of gender-based (Sources: Household Survey and Teachers Survey, Qualitative Sessions)
- **Structural:** Gender-transformative legislative systems and institutional change (Sources: Headteacher Survey, Policy Tracker, FGDs/KIIs)

Endline data collection process

Pre data collection

The evaluation sampled both girls with disabilities and girls without disabilities. Girls without disabilities formed the study's "comparison group" while girls with disabilities formed the study's "target group". In a slight deviation from Baseline and Midline, the Endline administered Learning Assessments for the target group only. However, all other surveys were administered to both the target and comparison groups to comment on all individual level changes and the differences between girls with disabilities and non-disabled girls on key outcomes.

Girls in the target group girls are supported by Leonard Cheshire, are in schools and vocational institutes targeted by the project, and have been assessed for a disability by the EARC. Girls in the comparison group are girls without disabilities who were sampled at Midline from comparable schools, not targeted by the project.

Table 2.15 displays the composition of the sample by original cohort membership (i.e., a girls' grade level at Baseline) and by evaluation group.

Table 2.15 Evaluation Sample (tracked cohort in the target group)

Cohort Membership (Grade at BL)	Baseline		Midline		Endline	
	Target	Comparison	Target (Including replacement)	Comparison	Target (Including replacement)	Comparison (Including replacement)
Grade 5	83	59	81	66	81	66

Grade 6	91	69	103	72	103	72
Grade 7	96	61	96	67	96	67
Grade 8	58	47	47	54	47	54
Total	328	236	327	259	327	259

The Endline revised and adapted most of the tools used during Midline. Table 2.16 summarises the tools, their revisions, and the sampling procedure used to engage respondents and stakeholders.

Table 2.16 Tools used at Endline

Tool	Tool status – New at Endline or Revised/Adapted	Sampling
Quantitative		
Household Survey	Adapted from Midline Revisions made include: COVID-19 adaptations	All girls(target and comparison) assessed at Midline
Girl Survey	Adapted from Midline Revisions made include: COVID-19 adaptations	
Attendance Tool	Adapted from Midline and made minor adjustments based on school dates.	
Learning Assessments - English Literacy (EGRA/SeGRA) and Mathematics (EGMA/SEGMA)	Designed and piloted at Baseline	
Teachers Survey	Adapted from Midline Revisions made include: COVID-19 adaptations	Random selection from the list of teachers trained by the project
Lesson Observations	Adapted from Midline Revisions made include: COVID-19 adaptations	
Headteacher/School-Wide Assessments Survey	Adapted the School-Wide Assessment and added Headteacher/School Leadership Survey	Based on the schools visited by the entire data collection team.
KCPE/KCSE Results Entry Form	New	
Qualitative		
Discussion Guide	Adapted from Midline during COVID-19	Purposive sampling. We also used the snowball sampling approach to help identify key informant interviewees.

No new recruitments were done at Endline. The data collection team was drawn from those who participated in the Midline. Generally, all data collectors needed to be experienced in administering questionnaires, conducting interviews, and data entry. All data collectors were female. Finally, they were required to be residents of the lake region and fluent in at least one of the local languages, including Swahili. Therefore, the team had the required skills and experience required for the assignment.

Quantitative enumerators attended a 4-day training workshop covering best practices in tool administration, probing techniques, disability research, research ethics and child protection, learning assessment administration, cohort tracking, replacement rules and daily and weekly reporting requirements. In addition, enumerators were trained to adhere to quality assurance guidelines prepared by the evaluator closely. Sessions included a mix of taught lectures and dramatisation exercises.

Qualitative Research Assistants (QRAs) completed a 2-day training which included sessions on qualitative research in practice, probing techniques, note-taking, the main research questions, reporting requirements, disability research, session recruitment, sampling techniques, research ethics and child protection.

At this stage, the field manager programmed the tools into the KoBoToolbox system. This process involved ensuring that all the questions were in KoBoToolbox forms. In addition, skip logic and validation criteria were specified for the relevant questions.

During data collection

The fieldwork for the Endline Evaluation was conducted between 14th September 2021 and 23rd February 2022. One South LLC sub-contracted Health Poverty Action to lead on the fieldwork. Data collection covered four sub-counties(Kuria East, Migori, Mbita, Alego Usonga) and Kisumu County, where the project operates. Table 2.17 specifies the specific dates when data collection took place.

Table 2.17 Data Collection Dates

	Activity Dates
Quantitative	Training – 31 st August to 3 rd September 2021 Phase 1, fieldwork - 14 th September to 05 th October 2021 Phase 2, Fieldwork – 7 th to 14 th February 2022
Qualitative	Training - 31 st August to 3 rd September 2021 Phase 1, fieldwork – 26 th October 2021 to 18 th November 2021 Phase 2, Fieldwork – 8 th to 23 rd February 2022

The quantitative data collection team comprised 22 enumerators, one field supervisor and one Field Manager who moved together through the five sub-counties collecting data—the moving together from one sub-county to another guaranteed the safety of the data collection team.

The team consisted of 2 qualitative research assistants (QRA) under the supervision of the field supervisor, Field Manager and One South. Each QRA was required to complete the equivalent of 2 focus group discussions in a day.

The LC Team obtained Sub-county approvals before the start of the Survey. During data collection, all field staff had a print-out of the approval letter from the Sub-county education offices. Before interviewing respondents, the field staff were required to obtain informed consent. Due to COVID19 restrictions, this approval was obtained orally. Before starting data collection, all field staff underwent child safeguarding training from LC. Reminders were sent to the field staff on child safeguarding protocols and on making the necessary accommodations depending on a child's disability. Finally, as with previous evaluations, all data collectors were residents of the lake region. This ensured that the evaluation team was conversant with the language and cultural norms of the surrounding community.

The data collection process in a Sub-county began with the Field Manager contacting respective LC project officers and communicating the data collection schedule. LC's project officers played a major role in preparing the way for the data collection team. To avoid access challenges, particularly in control schools, that we experienced at Midline, the field supervisor went, some days earlier, around the schools, informing them of our intent to collect data.

At Endline, we assessed girls who were evaluated during the Midline in 2019. This information was provided in the Cohort Tracking Dataset.(CTD). The CTD is a password-protected dataset that summarises the details of every girl assessed at Midline. These are the girls who the data collectors then followed for assessment

Each enumerator was allocated a number of target girls (treatment and comparison) to track. This information was provided in a tracking sheet. Typically, the first action was to call the caregiver and arrange an appointment. However, the contact information, which was collected at Midline, was outdated in some cases. Therefore, with the help of the Field Coordinator and project staff, the enumerators had to go to the girl's school and start tracking the girl from there. Most girls were found at this stage. However, the tracking was more challenging when the girl had transitioned to secondary from primary school. If a treatment girl was not found in the school, the enumerator would contact the Field Manager to help track the girl. The following steps included getting the contacts of the missing child's guardians from teachers, neighbours or the local administration and; physically visiting the area where the girl lived.

Three attempts at re-contact were made for each treatment girl before the Field Manager replaced them. This is in line with GEC-T guidance on cohort tracking. A replacement strategy was specified at the beginning of the midline survey. Typically, the Field Manager was responsible for approving all replacements for the treatment group. This is because the Field Manager had the password-project beneficiary dataset with the details of all girls supported by the project. During replacement, the Field Manager would provide the following information to the enumerator: name, school, grade and age. For all replacements, the aim was to replace a girl with another girl who closely matched the particulars (grade, age and disability status) of the lost girl. All replacements for the treatment group were made from the beneficiary dataset. The enumerators themselves did replacements through a random procedure in the control group after approval from the Field Manager.

The overall attrition rate was 25%. The treatment group had an attrition rate of 23% while the control group had 28%.

Data quality checks were done using the protocol for survey checks where the Field Manager checked 20% of randomly selected paper copies against the electronic dataset. There were 2 checks, paper and electronic.

The Field Manager randomly selected 20% of all assessments from each enumerator's paper copies for the paper check based on their target cases. The paper check involved checking if enumerators correctly marked the learning assessments, adhering to marking rules and standard notation, and ensuring that all paper copies were complete. In the paper check, most submissions complied with the protocols. The most common error was enumerators not indicating the case number of the girl assessed. However, this was corrected to ensure that the case number also appeared on each girl's paper copy.

Upon completing data collection, data collectors would send a message to the Field Manager to conduct the first part of the electronic check. This mainly involved confirming that the cases they had entered matched what had been allocated to them. Each case tracked from Midline had a unique case number. Therefore, the electronic check involved verifying that the enumerator had filled in the correct case number assigned to them. A considerable amount of time was spent here, since some enumerators would enter wrong case numbers. Incorrect case numbers make identifying and tracking the child in subsequent surveys difficult. Finally, there were instances of duplicated cases entered. This, in most cases, was due to network problems which caused the KoBoCollect application to submit data more than once. All duplicate cases were corrected before the final datasets were submitted.

Table 2.18 shows the final sample sizes for the quantitative instruments. For qualitative instruments, 89 sessions were conducted.

Table 2.18 Final Sample Sizes Achieved (Quantitative)

Tool	Final sample size
------	-------------------

	Target	Comparison
Household Survey	327	259
Girl Survey		
Attendance Tool		
Learning Assessments - English Literacy (EGRA/SeGRA) and Mathematics (EGMA/SEGMA)	327	0
Teachers Survey	186	77
Lesson Observations	50	0
Headteacher/School-Wide Assessments Survey	66	38
KCPE/KCSE Results Entry Form	1,650	380

Post data collection

- Was the data cleaned and checked for consistency?
- How was the data stored and analysed, including relevant reflections of enumerators and researchers while in the field? What analytical process were used for the data?
- Was qualitative data transcribed and translated? If so, was translation verbatim or summarised?

In data management, validation and data quality checks may not catch all the errors. The following post-entry operations were done on the data:

- Look at the distribution of every variable and resolve outliers, logical errors, variable type (common for numeric variables to be coded as string variables)
- Label variables and their choices (where applicable)
- Resolve duplicates in unique IDs

In line with standard data management practice, we created SPSS correction syntax to update the datasets. No corrections were made on the dataset in the KoboToolbox server.

After cleaning, the datasets and syntax files were stored in One South Teams system for further analysis. Teams enforces team-wide and organization-wide two-factor authentication, single sign-on through Active Directory, and encryption of data in transit and at rest. Files are stored in SharePoint and are backed by SharePoint encryption.

All qualitative sessions were recorded, transcribed verbatim, and translated into English. Transcripts were coded to analyse findings thematically. Coding following a top-down descriptive coding scheme and a bottom up eclectic coding method by EE specialists in inclusion, gender, and education.

Challenges in endline data collection and limitations of the evaluation design

Some of the challenges experienced during quantitative data collection include:

- **Tracking of girls** – this was expected for this type of Survey. Many of the girls assessed at Midline had transitioned to secondary schools. Though many had proceeded to secondary schools within the lake region, locating these girls proved difficult due to the region's vastness. Also, following the outbreak of COVID-19, some girls and their families had relocated. Where feasible, enumerators tracked the girls to the secondary schools they had transited. In instances where the girl was far away from the target area or could not be found, a replacement was done following the protocol provided by One South.
- Obtaining historical attendance and KCSE/KCPE data was cited as a general challenge. This was more of a timing issue since Phase 1 data collection was done at the onset of end-of-term examinations. Most school heads just did not have the capacity or time to retrieve this data. As a result, the field manager had to contract additional staff to assist the school heads in going through past attendance and KCSE/KCPE data. However, some schools did not have all the exam data for the previous three years(2018, 2019 and 2020).
- Time taken to complete survey instruments. The length of the survey instruments, particularly the Girls Survey, was an issue the enumerators raised constantly.

Overall, the data collectors overcame these challenges, common in GEC-T surveys, and were able to meet their targets.

The overall attrition rate was 25%. The treatment group had an attrition rate of 23% while the control group had 28%. Though high, this was well within the 30% attrition buffer for the target group.

To further understand the attrition rate, Table 2.19 indicates the reasons for replacement. These include:

1. The child has moved outside the catchment area(64.6% of replacements) – girls who had transitioned to secondary from primary had moved to schools outside the target area but mainly within the lake region;
2. The child could not be found after multiple attempts, including attempts by the Field Manager(24.5% of replacements) – some girls could not simply be found even after concerted efforts to locate them by, including project staff;
3. The child is married (6.8% of replacements) – a standard explanation within this category by caregivers is that the girl had eloped. Though knowing the whereabouts of the married girl, most caregivers declined to provide the girl's contact details or avoided explaining the new location of the girl.

Table 2.19 Reasons for replacement

Reason for Replacement	Treatment % (n)	Comparison % (n)	Total %(n)
Child has been replaced as he/she has moved outside catchment area	52.7% (39)	76.7% (56)	64.6% (95)
No interview – Child could not be found after multiple attempts, including attempts by Field Manager	32.4% (24)	16.4% (12)	24.5% (36)
No interview - Respondent couldn't speak any language in common with the interviewer	0.0% (0)	0.0% (0)	0.0% (0)
No interview – Child is married	8.1% (6)	5.5% (4)	6.8% (10)
No interview – Child is deceased	0.0% (0)	0.0% (0)	0.0% (0)

Reason for Replacement	Treatment % (n)	Comparison % (n)	Total % (n)
Refusal - Direct refusal multiple times (including after attempt from Field Manager)	2.7% (2)	1.4% (1)	2.0% (3)
Refusal - Adults not able to interview due to severe illness or hospitalization	0.0% (0)	0.0% (0)	0.0% (0)
Other	4.1% (3)	0.0% (0)	2.0% (3)
Total	100.0% (74)	100.0% (73)	100.0% (147)

The details of the evaluation sample breakdown across the treatment groups are shown from Table 2.21 to Table 2.25.

Table 2.20 Endline learning sample and attrition

Cohort group Grade at EL	Endline sample (treatment)	Recontacted (treatment)	Attrition (treatment)	Endline sample (comparison)	Recontacted (comparison)	Attrition (comparison)
Grade 5	1	0	100.0%	0	0	0.0%
Grade 6	2	0	100.0%	1	0	100.0%
Grade 7	20	15	25.0%	7	6	14.3%
Grade 8	97	69	28.9%	79	55	30.4%
Form 1	73	61	16.4%	53	40	24.5%
Form 2	72	57	20.8%	65	48	26.2%
Form 3	35	32	8.6%	51	34	33.3%
Form 4	7	4	42.9%	0	0	0.0%
Out-of-school	20	15	25.0%	3	3	0.0%
Total	327	253		259	186	

Table 2.21 Evaluation sample breakdown (by county)

County	Intervention (recontacted)		Comparison (recontacted)	
	N	%	N	%
Homabay	32	12.6%	26	14.0%
Kisumu	43	17.0%	26	14.0%
Migori	115	45.5%	105	56.5%
Siaya	63	24.9%	29	15.6%
Girls sample size	253		186	

Table 2.22 Evaluation sample breakdown (by grade)

Cohort group Grade at EL	Intervention (recontacted)		Comparison (recontacted)	
	N	%	N	%
Grade 5	0	0.0%	0	0.0%
Grade 6	0	0.0%	0	0.0%
Grade 7	15	5.9%	6	3.2%
Grade 8	69	27.3%	55	29.6%
Form 1	61	24.1%	40	21.5%
Form 2	57	22.5%	48	25.8%
Form 3	32	12.6%	34	18.3%
Form 4	4	1.6%	0	0.0%
Out-of-school	15	5.9%	3	1.6%
Girls (sample size)	253		186	

Table 2.23 Evaluation sample breakdown (by age)

	Intervention (recontacted)		Comparison(recontacted)	
	N	%	N	%
Aged 6-8 (% aged 6-8)	0	0.0%	0	0.0%
Aged 9-11 (% aged 9-11)	0	0.0%	0	0.0%
Aged 12-13 (% aged 12-13)	11	4.3%	9	4.8%
Aged 14-15 (% aged 14-15)	96	37.9%	70	37.6%
Aged 16-17 (%aged 16-17)	111	43.9%	86	46.2%
Aged 18-19 (%aged 18-19)	32	12.6%	21	11.3%
Aged 20+ (% aged 20 and over)	3	1.2%	0	0.0%
Girls (sample size)	253		186	

Include sample size numbers in brackets

Table 2.24 Evaluation sample breakdown (by disability)

Sample breakdown (Girls)		Intervention (recontacted)	Comparison (recontacted)	Variable name
		% (n)	% (n)	
Girls with disability (% overall)				
WG Child functioning questions	Domain of functioning	<i>Provide data per domain of difficulty and in addition if using child functioning set also present data by each question</i>		
Difficulty seeing	Seeing	43% (142)	0% (0)	PS_D2
Difficulty hearing	Hearing	22% (72)	0% (0)	PS_D3
Difficulty walking or climbing steps	Walking	6% (18)	0% (0)	PS_D4
Difficulty with self-care	Cognitive	5% (15)	0% (0)	PS_D6
Difficulty with communication		8% (25)	0% (0)	PS_D1
Difficulty learning		53% (173)	0% (0)	Combination of PS_D7 and Communicating, Seeing, Hearing, Walking, Concentrating and Selfcare
Difficulty remembering				
Difficulty concentrating		15% (50)	0% (0)	
Difficulty accepting change				
Difficulty in behaviour				
Difficulty making friends				

Sample breakdown (Girls)		Intervention (recontacted)	Comparison (recontacted)	Variable name
		% (n)	% (n)	
Anxiety (feeling anxious)	Psycho-social			

Table 2.25 Evaluation sample breakdown (by disability severity) – Intervention group

Sample breakdown (Girls)		Some Difficulty	A lot of difficulty	Cannot do at all	
		% (n)	% (n)	% (n)	
WG	Child functioning questions				
Difficulty seeing	Seeing	36% (117)	8% (25)	0% (0)	
Difficulty hearing	Hearing	17% (57)	5% (15)	0% (0)	
Difficulty walking or climbing steps	Walking	6% (18)	0% (0)	0% (0)	
Difficulty with self-care	Cognitive	3% (11)	1% (3)	0% (1)	
Difficulty with communication		5% (17)	2% (8)	0% (0)	
Difficulty learning		37% (120)	16% (51)	1% (2)	
Difficulty remembering					
Difficulty concentrating		12% (40)	3% (10)	0% (0)	
Difficulty accepting change					
Difficulty in behaviour					
Difficulty making friends					
Anxiety (feeling anxious)		Psycho-social			
Multiple impairments					

Contamination and compliance

Describe any evidence of contamination of the comparison group. This could be either from the project's own interventions having spill-over effects, or through external involvement in comparison groups having a significant impact on their learning and transition outcomes.

Describe whether exposure (compliance) to the project was similar across the girls sampled in the intervention group. Or for example, if some girls were selected for specific programmes or got access to partial interventions for programmatic reasons (for example if bursaries only go to a sub-set of girls).

The only likely contamination to be taking place would be the result of the project's policy work on inclusive education outcomes at the county and national level and if teachers are transferred to comparison schools. No evidence of this was found at Endline.

Additionally, in selecting comparison schools, the project supported us to access county level datasets which included information on whether any intervention was taking place in the school. No schools with current interventions taking place were included in the comparison group. However, some schools at Midline in the comparison group were found to be delivering school feeding programs which may affect results between midline and endline. 5% of girls in the comparison group receive food through a school feeding program. This can be controlled for as part of the DiD model at Endline.

Table 26 Summary of Qualitative Sessions

No	Session Title	Session Code
1	1.1 FGD with Teachers trained by LC	1
2	1.2 FGD with Teachers trained by LC	1
3	1.3 FGD with Teachers trained by LC	1
4	1.4 FGD with Teachers trained by LC	1
5	1.5 FGD with Teachers trained by LC	1
6	1.6 FGD with Teachers trained by LC	1
7	1.7 FGD with Teachers trained by LC	1
8	1.8 FGD with Teachers trained by LC	1
9	2.1 FGD with parents who are members of PSG	13
10	2.2 IDI with English and Maths teachers trained by LC (by grade)	2
11	2.3 IDI with English and Maths teachers trained by LC (by grade)	2
12	2.4 IDI with English and Maths teachers trained by LC (by grade)	2

No	Session Title	Session Code
13	2.5 IDI with English and Maths teachers trained by LC (by grade)	2
14	2.6 IDI with English and Maths teachers trained by LC (by grade)	2
15	2.7 IDI with English and Maths teachers trained by LC (by grade)	2
16	2.8 IDI with English and Maths teachers trained by LC (by grade)	2
17	2.9 IDI with English and Maths teachers trained by LC (by grade)	2
18	2.9 IDI with English and Maths teachers trained by LC (by grade)	2
19	2.9 IDI with English and Maths teachers trained by LC (by grade)	2
20	2.10 IDI with English and Maths teachers trained by LC (by grade)	2
21	2.11 IDI with English and Maths teachers trained by LC (by grade)	2
22	2.12 IDI with English and Maths teachers trained by LC (by grade)	2
23	2.13 IDI with English and Maths teachers trained by LC (by grade)	2
24	2.14 IDI with English and Maths teachers trained by LC (by grade)	2
25	2.15 IDI with English and Maths teachers trained by LC (by grade)	2
26	2.16 IDI with English and Maths teachers trained by LC (by grade)	2
27	3 FGD with Girls with Disabilities (mixed) in C2C clubs	3
28	3.1 FGD with Girls with Disabilities (mixed) in C2C clubs	3
29	4.1 FGD with Boys with Disabilities	4
30	4.2 FGD with Boys with Disabilities	4
31	5 FGD with Girls with VI	5
32	6 FGD with Girls with Mobility Impairments	6
33	7 FGD with Girls with Hearing Impairments	7
34	8.1 FGD with Girls with disabilities who transitioned to secondary school	8
35	8.2 FGD with Girls with disabilities who transitioned to secondary school	8
36	9.1 FGD with Girls with disabilities who transitioned to vocational training	9
37	9.2 FGD with Girls with disabilities who transitioned to vocational training	9

No	Session Title	Session Code
38	10 FGD with Parents and Caregivers of Girls with Disabilities who are not in Parent Support Groups	10
39	11.1 IDI with Young Mothers with disabilities	11
40	11.2 IDI with Young Mothers with disabilities	11
41	11.3 IDI with Young Mothers with disabilities	11
42	11.4 IDI with Young Mothers with disabilities	11
43	13.1 FGD with Parents and Caregivers of Children with Disabilities who are in Parents Groups	13
44	13.2 FGD with Parents and Caregivers of Children with Disabilities who are in Parents Groups	13
45	14.1 IDI with Parents and Caregivers in Households facing extreme economic hardship	14
46	14.2 IDI with Parents and Caregivers in Households facing extreme economic hardship	14
47	14.3 IDI with Parents and Caregivers in Households facing extreme economic hardship	14
48	14.4 IDI with Parents and Caregivers in Households facing extreme economic hardship	14
49	15.1 IDI with C2C Facilitator	15
50	15.1 IDI with C2C Facilitator	15
51	15.2 IDI with C2C Facilitator	15
52	15.3 IDI with C2C Facilitator	15
53	15.4 IDI with C2C Facilitator	15
54	15.5 IDI with C2C Facilitator	15
55	15.6 IDI with C2C Facilitator	15
57	15.7 IDI with C2C Facilitator	15
58	15.8 IDI with C2C Facilitator	15
59	16.1 IDI with EARC	18

No	Session Title	Session Code
60	16.6 IDI with C2C Facilitator	15
61	17.1 IDI with Male Mentors	17
62	17.2 IDI with Male Mentors	17
63	18.1 IDI with EARC Officer	18
64	18.2 IDI with EARC Officer	18
65	18.3 IDI with EARC Officer	18
66	19.1 FGD with SBIC Members	19
67	19.2 FGD with SBIC Members	19
68	19.2 FGD with SBIC Members	19
69	20.1 FGD with Girls with disabilities Enrolled in VTI	20
70	20.2 FGD with Girls with disabilities Enrolled in VTI	20
71	21 FGD with Girls with disabilities Enrolled in Secondary School	21
72	22.1 FGD with VTI instructors trained by LC	22
73	22.2 FGD with VTI instructors trained by LC	22
74	23.1 In-depth interview with Girl with Disabilities supported to attend VTI by project	23
75	23.2 In-depth interview with Girl with Disabilities supported to attend VTI by project	23
76	24.1 In-depth interview with Girl with Disabilities who earning money through business	24
77	24.2 In-depth interview with Girl with Disabilities who earning money through business	24
78	25.1 In-depth interview with Girl with Disabilities supported by project who dropped out of secondary school	25
79	25.2 In-depth interview with Girl with Disabilities supported by project who dropped out of secondary school	25
80	26.1 In-depth interview with Girl with Disabilities who is in waged employment	26
81	26.2 In-depth interview with Girl with Disabilities who is in waged employment	26

No	Session Title	Session Code
82	FGD with SBIT trained by LC	
83	FGD with teachers with disability trained by LC	
84	KII with SNE Teacher trained by LC	
85	KII with SNE Teacher trained by LC	
86	IDI with Head teacher trained by LC	
87	IDI with Hon Esther Onana, Disability County Assembly Officer	
88	KII with Hidaya on Child Protection	
89	KII with Phelix on Policy implementation	

Annex 3: Learning Outcome Data Tables

Table 27. Changes in ORF, aggregate literacy and numeracy scores of girls with disabilities according to the assessed disability by the EARC

	Changes in ORF Scores	Change in Aggregate English Literacy Score	Change in Aggregate Numeracy Score
<i>Epilepsy</i>	N n=1	N n=1	N n=1
<i>Epilepsy & Other</i>	N n=1	N n=1	N n=1
<i>Hearing</i>	N n=34	N n=34	N n=37
<i>Intellectual</i>	N n=3	N n=3	N n=4
<i>Learning Difficulties</i>	N n=29	N n=29	N n=29
<i>Learning Difficulties & Other</i>	N n=1	N n=1	N n=1

<i>Physical</i>	N n=10	N n=10	N n=10
<i>Physical & Learning</i>	N n=1	N n=1	N n=1
<i>Physical & Visual</i>	N n=1	N n=1	N n=2
<i>Physical & Speech & Language</i>	N n=1	N n=1	N n=2
<i>Visual</i>	N n=49	N n=49	N n=49
<i>Visual and Hearing</i>	N n=9	N n=9	N n=9
<i>Visual and Learning</i>	N n=1	N n=1	N n=1
<i>Other</i>	N n=54	N n=54	N n=55

xAnnex 4: Characteristics and Barriers

Table 5.1: Girls' Characteristics & Barriers

	Intervention			Comparison			Source (Household /Girls School survey variable name)
	Baseline	Midline	Endline	Baseline	Midline	Endline	
Sample breakdown (Girls)							
Orphans (%)							
- Single orphans	18.3%	23.0%	21.1%	16.1%	16.6%	20.8%	HHS_Q32, HHS_Q35
- Double orphans	6.7%	8.2%	3.4%	3.0%	2.3%	2.7%	HHS_Q32, HHS_Q35
Living without both parents (%)							
Living in female headed household (%)	58.5%	34.7%	33.3%	52.1%	25.5%	31.3%	HHS_Q7
Married (%)	0.0%	1.2%	0.0%	1.3%	0.4%	0.0%	GS_Q112
Household faces extreme hardship	25.8%	16.5%	4.0%	17.9%	10.9%	3.9%	HHS_Q235 to HHS_Q238
Household faces moderate degree of hardship	50.5%	44.4%	17.4%	57.9%	45.3%	16.6%	HHS_Q235 to HHS_Q238

	Intervention			Comparison			Source (Household /Girls School survey variable name)
Language difficulties: - Lol different from mother tongue (%)							
- Girl doesn't speak Lol (%)	33.2%	6.4%	52.9%	31.8%	1.2%	61.0%	HHS_Q48
Parental education - Primary caregiver has no education (%)							
- HoH has no education (%)	12.2%	7.6%	7.0%	9.3%	4.6%	5.8%	HHS_Q10

Annex 5: Logframe

Attached as a separate file

Annex 6: Outcome Spreadsheet

Not relevant for this project

Annex 7: Beneficiaries tables

Table 7.1: Direct beneficiaries

Beneficiary type	Total project number	Total number of girls targeted between midline and endline	Comment
Direct learning beneficiaries (girls) – girls in the intervention group who are specifically expected to achieve learning outcomes in line with targets. If relevant, please disaggregate girls with disabilities in this overall number.	Total number of direct beneficiaries worked with over the lifetime of the project. 2100	This may equal the total project number or may be less if girls 'graduated out' after a certain grade. 2100	If the total project number has changed since baseline or midline provide an explanation of why (e.g. didn't reach all girls planned, larger class sizes then previously accounted for etc) At midline, we reported 2063 girls hence the project has had a positive attrition of 37 girls due to the robust follow-up mechanism put in place by the project to locate the girls who at midline were not accounted for.

Table 7.2: Other beneficiaries (Total over lifetime of the project)

Beneficiary type	Number	Comments
Learning beneficiaries (boys) – as above, but specifically counting boys who will get the same exposure and therefore be expected to also achieve learning gains, if applicable.	676	At midline we reported 740 boys, the variance of 64 boys has been attributed to several reasons including: transfer to nonprojected schools, family relocated to non-project area and death
Broader student beneficiaries (boys) – boys who will benefit from the interventions in a less direct way, and therefore may benefit from aspects such as attitudinal change, etc. but not necessarily achieve improvements in learning outcomes.	20490	The numbers have increased due to change of strategies which are geared towards sustainability e.g merging of C2C clubs with other clubs within the schools for the purpose of mainstreaming issues of inclusion
Broader student beneficiaries (girls) – girls who will benefit from the interventions in a less direct way, and therefore may benefit from aspects such as attitudinal change, etc. but not necessarily achieve improvements in learning outcomes.	25356	
Teacher beneficiaries – number of teachers who benefit from training or related interventions. If possible /applicable, please disaggregate by gender and type of training, with the comments box used to describe the type of training provided.	268 Female 402 Male 670 Teachers	The attrition from the number reported in the midline has been attributed to transfers of teachers from project catchment arear
Broader community beneficiaries (adults) – adults who benefit from broader interventions, such as community messaging /dialogues, community advocacy, economic empowerment interventions, etc.	18000+	

Tables 7.3 to 7.6 provide different ways of defining and identifying the project's target groups. They each refer to the same total number of direct beneficiary girls, but use different definitions and categories. The numbers in the first two rows should refer to the status at the start of the project, e.g. project worked with 500 out of school girls at the start of GEC-T (whose status may have changed over time to in school).

The last row can only be populated if survey or learning data was collected at endline. Again the total number of girls in the last row of the tables should be the same – these are just different ways of identifying and describing the girls included in the sample.

Table 7.3: Target groups - by school

	Project definition of target group (Tick where appropriate)	Number targeted through project interventions	Sample size of target group at endline
School Age			
Lower primary	✓	140	
Upper primary	✓	950	
Lower secondary	✓	430	
Upper secondary	✓	220	
Homebased	✓	3	
VTI	✓	203	
Other higher learning institution	✓	154	
Total:		2100	

Table 7.4: Target groups - by age

	Project definition of target group (Tick where appropriate)	Number targeted through project interventions	Sample size of target group at endline
Age Groups			
Aged 6-8 (% aged 6-8)	✓	27	
Aged 9-11 (% aged 9-11)	✓	268	
Aged 12-13 (% aged 12-13)	✓	473	
Aged 14-15 (% aged 14-15)	✓	571	
Aged 16-17 (%aged 16-17)	✓	304	
Aged 18-19 (%aged 18-19)	✓	297	
Aged 20+ (% aged 20 and over)	✓	160	
Total:		2100	

Table 7.5: Target groups - by sub group

Social Groups	Project definition of target group (Tick where appropriate)	Number targeted through project interventions	Sample size of target group at endline
Disabled girls (please disaggregate by domain of difficulty)	✓	2100	
Orphaned girls	✓	320	
Pastoralist girls	✓	N/A	
Child labourers	✓	N/A	
Poor girls	✓	N/A	
Other (please describe)	✓	N/A	
Total:		2100	

Table 7.6: Target groups - by school status

Educational sub-groups	Project definition of target group (Tick where appropriate)	Number targeted through project interventions	Sample size of target group at endline
Out-of-school girls: have never attended school	✓	N/A	
Out-of-school girls: have attended school, but dropped out	✓	N/A	
Girls in-school	✓	2100	These are girls in the interventional group who are specifically expected to achieve learning outcomes in line with the target
Total:		2100	

Once the project has provided information as per the guidance box and populated the tables above, the External Evaluator must:

- Review the numbers and methodology proposed by the project. Comment on the counting methodology, the assumptions that are made, the expected quality of the data underpinning the final numbers (e.g. project own monitoring data and government data).
- Was data collected, e.g. in the school survey, that enables to verify any of the assumptions made by the project in calculating the beneficiary numbers? Examples of such data would be: size and number of communities, size and number of schools, size and number of classrooms, size and numbers of girls clubs, number of disabled girls, number of girls at risk of dropping from school, dropouts in the last year etc. Present any of these data and

compare them with the project. monitoring data. You can use the sample data collected and presented in Annex 3 to elaborate.

- When the available evidence is considered, do the proposed beneficiary numbers look reliable?

Annex 8: External Evaluator’s Inception Report

Attached as a separate file

Annex 9: Data Collection Tools Used for Endline

Attached as a separate zip file

Annex 10: Datasets, codebooks and programs

Uploaded as separate files

Annex 11: Learning test pilot and calibration

Attached as a separate file

Annex 12: Sampling Framework

Attached as a separate file

Annex 13: Extended summary

PROJECT BACKGROUND

Girls with disabilities in Kenya’s lake region face barriers to enrolling, attending, learning, and transitioning in school or other pathways.

Leonard Cheshire (LC) has been working to address these barriers with the support of DFID’s Girls Education Challenge (GEC) since 2014.

The first phase of the GEC focused on promoting the enrolment, attendance and learning of girls with disabilities in the lake region. The second phase of the GEC, GEC Transitions (GEC-T), supported girls with disabilities to transition through relevant pathways and improve their learning outcomes. The project also aimed to ensure the sustainability of its achievements.

Project activities as part of GEC-T aimed to reduce barriers faced by marginalized girls with disabilities and to create an accessible and inclusive community, school, and policy environment in the lake region.

The COVID-19 pandemic caused schools in Kenya to close for 37 weeks, and this likely had a negative effect on the learning of children with disabilities.

School closures resulted in children spending significant time at home. Although learning support was provided by the government for some of this period, the learning experience was markedly different from what children would have had if schools remained open and they were surrounded by peers and had closer contact with teachers. In addition, the pandemic added economic strain on households and increased chore burdens and pressures for household members to engage in other income generating activities.

The project made several adaptations and organized additional activities to support children with disabilities to continue learning during school closures. Some of these adaptations are presented within this report. However, the majority of project activities were designed with the assumption that they would be carried out and delivered in schools and vocational institutes. Findings on the project's performance at Endline should be interpreted considering the broader context of school closures and learning disruption.

EVALUATION APPROACH

The evaluation is an external appraisal of the project's contribution, effectiveness, relevance, sustainability, and value for money. It was conducted by One South, an international development advisory firm that supports organizations in the global south to understand and deliver social change.

The endline tracked a cohort of 327 girls with disabilities in project schools and 259 girls without disabilities in non-project schools across target regions. These cohorts were tracked to understand changes in key outcomes between Midline and Endline and respond to a set of agreed evaluation questions. Originally, the project aimed to close gaps between girls with disabilities and girls without disabilities in key outcomes. However, after the pandemic, the project adjusted expectations to focus on supporting girls with disabilities to sustain key outcome achievements.

The study also conducted 264 teacher surveys and 50 lesson observations³⁹⁵ with teachers trained by the project as well as teachers in non-project schools to understand changes in

³⁹⁵ Data has been collected as part of Phase 2 and will still be analyzed

attitudes and practices regarding inclusive education. Additional qualitative sessions were conducted with project stakeholders including teachers, parents, EARC officers, headteachers, BOM members, members of County Working Groups, and project staff. The full evaluation methodology is discussed in the methodology section and in the evaluation inception report found in the annex. To understand the project's contribution to policy outcomes, the evaluation team conducted an in-country workshop with policy stakeholders.

The evaluation team with the support of the project organized a virtual validation session to gather external stakeholder feedback on key findings. Findings from discussions in validation will be integrated within the report.

FINDINGS

The project successfully supported girls with disabilities to maintain high attendance levels and to attend schools as frequently as girls without disabilities.

At Baseline, 87.5% of girls with disabilities attended school 80% of the time compared to 92% of girls without disability. At Midline, 93.3% of girls with disability attended school 80% of the time and girls without disability attended 92.5% of the time. Finally, at Endline 93.5% girls with disability attended school 80% of the time and 96.5% of girls without disabilities.

Girls with and without disabilities were equally likely to attend school 80% of the time at all periods, indicating the project has played a role in reducing attendance gaps between girls with and without disabilities and supporting girls with disabilities to sustain these attendance levels before and after school closures.

Child-to-Child Clubs and better access to sanitary wear, transport, assistive devices, bursaries, and scholastic materials supported girls with disabilities to attend school.

Girls with disabilities in Child-to-Child Clubs had higher attendance rates, at statistically significant levels, than girls with disabilities who were not club members in February of 2020 (97.23% vs. 93.22%). Furthermore, girls with disabilities in Child-to-Child Clubs experienced higher improvements in their attendance rates, at statistically significant levels, than girls with disabilities who were not club members³⁹⁶ between February 2019 and February 2021. Finally, girls with disabilities in Child-to-Child Clubs experienced higher improvements in their

³⁹⁶ 1.99% increase compared to 6% decrease respectively

attendance levels than girls with disabilities who were not club members³⁹⁷, at statistically significant levels, between February 2020 and February 2021.

Clubs provide opportunities for girls to interact with peers who do not have disabilities and develop their life and social skills. Qualitative evidence suggests that this influenced girls with disabilities' motivation to attend school as well as their comfort socializing with peers who do not have disabilities. Facilitators also reported that participating in clubs reduced stigma against girls with disabilities through increased peer socialization.

Several project activities targeting other barriers also supported attendance improvements:

1. **Sanitary Wear:** The project supported teachers to provide girls with disabilities with sanitary wear at school and during school closures. Girls with disabilities were more likely than girls without disabilities (at statistically significant levels) to report that it became easier to access sanitary wear at Endline³⁹⁸. However, findings suggest it became more difficult for girls with and without disabilities to access sanitary wear since Midline, likely due to closures associated with COVID-19 and girls' spending more times within communities.
2. **Scholastic Materials:** The project provided scholastic materials, including schoolbooks and uniforms to girls with disabilities to support them to attend and learn in school. Girls with disabilities were more likely than girls without disabilities to report that accessing scholastic materials became easier by Endline³⁹⁹, indicating that the project helped reduce this barrier. Teachers also reported that the provision of scholastic materials supported at-home learning during school closures.
3. **Assistive devices:** The project provided girls with disabilities with relevant assistive devices including eyeglasses, hearing aids, wheelchairs, crutches, orthopaedic shoes, callipers, and white canes. Qualitative findings suggest that girls with disabilities were better able to attend and participate in school because of these assistive devices. Site visits from the evaluation team indicated that some stakeholders may need better support with learning how to maintain devices, including wheelchairs.
4. **Transport:** Girls with disabilities were more likely than girls without disabilities to report that it became easier to travel to school in the last year⁴⁰⁰. The project provided a bus for children with disabilities in Kisumu to enable them to get to and from school safely.

³⁹⁷ 0.05% increase compared to 3.54% decrease

³⁹⁸ 71.4% of girls with disabilities compared to 54.4% of girls without disabilities; Chi square test $p < 0.05$

³⁹⁹ 66.9% of girls with disabilities compared to 53.6% of girls without disabilities; Chi-square test $p < 0.05$

⁴⁰⁰ 83.2% of girls with disabilities compared to 75.8% of girls without disabilities; Chi-square $p < 0.05$

Parents suggested that because schools are now inclusive, their children do not have to travel as far away as they had to when attending special schools.

Being a young mother, giving birth, and having a high chore burden suppressed attendance outcomes of girls with disabilities.

Girls with disabilities who had been pregnant had lower attendance levels in February 2020, experienced lower attendance improvements between February 2020 and 2021, and had lower attendance improvements between February 2019 and February 2021 compared to girls with disabilities who had not been pregnant, all at statistically significant levels. Young mothers reported that childcare responsibilities and chores placed additional burdens on their time and prevented them from attending school. 5.5% of girls with disabilities have been pregnant, and 4.9% of girls with disabilities are mothers.

Girls with disabilities who spend 4 hours or more doing chores each day had lower attendance levels in February 2020, experienced lower attendance improvements between February 2020 and 2021; and experienced lower attendance improvements between February 2019 and February 2021 compared to girls with disabilities who spend less time on chores, all at statistically significant levels. 6.7% of girls with disabilities spend 4 hours or more doing chores each day.

Teachers trained by the project demonstrated an understanding of inclusive education and identified several strategies they employed to support children with disabilities.

Teachers reported that training on inclusive education filled a needed gap in their professional development and helped them use several approaches to meet the individual needs of learners with disabilities. Approaches included:

- Developing Individual Education Plans (IEPs)
- Providing children with disabilities with extra time on assessments and tasks
- Providing additional contact time during lessons
- Mindfully creating seating arrangements for the classroom
- Increasing the use of manipulatives
- Modifying curriculum expectations to meet learners at their ability levels

Teachers reported that working closely with parents and EARCs supported the learning of children with disabilities. Teachers also report that parents and caregivers demonstrated increased interest in their children's education, indicating wider demand side improvements had taken place likely due to the project's ongoing work with parents and caregivers.

The project supported teachers to adopt inclusive education practices in lessons.

Lessons observed at Endline were more likely than lessons at Midline at statistically significant levels to be planned and executed with the learning of all students in mind⁴⁰¹, to provide opportunities for students to learn collaboratively⁴⁰², and to encourage the participation of all children in the lesson⁴⁰³.

At Endline, 90% of lessons in project schools were planned and executed with the learning of all students in mind, compared to 37.3% of lessons at Midline. Students were learning collaboratively in 88% of lessons at Endline, compared to 13.7% at Midline. 54% of lessons at Endline, compared to 11.8% at Midline, encouraged all students to participate.

Teachers reported several barriers to adopting inclusive education practices, including class sizes, lesson durations, and pressures from the Ministry of Education to achieve higher mean scores, exam results, and pass rates.

Teachers reported that addressing the needs of children with disabilities took additional planning and class time which often prevented them from completing the planned curriculum. This was exacerbated by the short length of lessons (30-45 minutes) and large class sizes. In addition, teachers are expected to deliver higher mean scores and higher pass rates. This pressure disincentivizes some teachers from fully adopting inclusive education practices. As one teacher summarized”

The only challenge [for inclusion] is our education system as it is arranged now... [it] is exam oriented, so at the end of the day, people are concerned with the end product: ‘How many did you take to the university?’ not ‘How many did you improve from E to C?’...That overall assessment. It creates a mentality within the system because, you know, even if you do that perfectly well and you don’t have somebody who has gone to the university, then you [are] viewed as failures. So, as much as we would want to have all these learners, [there are] challenges incorporated [in the system]⁴⁰⁴.

⁴⁰¹ 1.1) There is a lesson plan with clear learning objectives available for the lesson 1.2) The learning objectives for the lesson are made clear to the students at start of lesson 1.3) Teacher is able to explain adaptations made for learners with disabilities and they are plausible

⁴⁰² 2.1) The lesson used at least one of these strategies: paired work, group work, play-based approaches, student presentations 2.2) Min of 2 of these must be met 2.2.1) Teacher allows students to help each other to answer or solve problems 2.2.2) Lesson plan included opportunities for student to work in groups 2.2.3) Teacher changed around seating during the lesson e.g. changing groupings from/to mixed ability

⁴⁰³ 3.1) Min of 2 of these must be met: 3.1.1) Teacher asks students how they arrived at the answer 3.1.2) Teacher asks questions to challenge students of all levels 3.1.3) Teacher provides thinking time before children respond to questions 3.2) Teacher speaks to students in a friendly tone 3.3) Min of 1 of these must be met 3.3.1) Teacher made any of the following adaptations: use of visual aids, word cards, manipulatives, large print, simplified text, alternative work sheets 3.3.2) Teacher provides prompts or individual assistance to children who struggle during the course of the lesson

⁴⁰⁴

90.3% of girls with disabilities felt their learning needs were supported by their teachers at Endline compared to 85.7% at Midline and 68.9% at Baseline.

Qualitative evidence suggests that the adoption of inclusive education and positive changes in how discipline practices brought about through project activities enabled girls with disabilities to feel better supported by their teachers. A girl with a disability who is a young mother reported:

Initially, embarrassment made [children with disabilities] feel bad so it was difficult...to learn. So, if you find that at home you are being encouraged by the parent and at school you are also being encouraged by the teacher, you also feel encouraged to continue working hard and through this⁴⁰⁵.

The project supported teachers to move away from using corporal punishment to discipline girls with disabilities. However, 19.7% of girls with disabilities still reported being physically punished by their teacher in recent weeks.

At Midline, 31.7% of girls with disabilities had been physically punished by their teacher in recent weeks, and at Endline, of 19.7% of girls with disabilities had been physically punished in recent weeks. In contrast, the proportion of girls without disabilities who had been physically punished in recent weeks in non-project schools remained the same between Midline and Endline (24.7% at Endline and 25.1% at Midline).

In qualitative sessions, teachers reported that they adopted alternative strategies to discipline children with disabilities and manage disruptive behaviours in school. A popular strategy was conversing with children to understand why they engage in disruptive behaviours before disciplining them. However, some teachers still admitted to caning children with disabilities, although they sometimes do it outside of class where they think the child will not be ashamed of being caned. This practice violates national policy, and education sector stakeholders should continue to address corporal punishment in future activities.

Girls with disabilities were more likely than girls without disabilities in non-project schools to improve their self-esteem between Midline and Endline at statistically significant levels.

39.4% of girls with disabilities increased their self-esteem between Midline and Endline, compared to 31.9% of girls without disabilities.

Girls with disabilities were more likely than girls without disabilities to improve their self-esteem at statistically significant levels, indicating that the project supported girls with disabilities to experience improvements and sustain existing self-esteem levels, relative to losses they may have experienced in the absence of the project.

It is likely that school closures, suppressed girls' self-esteem between Midline and Endline because they had limited interactions with other children and self-esteem is partially derived from social context. COVID-19 also imposed challenges on children such as the death of loved ones and fears of contracting the virus in a climate of information uncertainty.

Qualitative findings suggest that Child-to-Child Clubs and inclusive school environments supported self-esteem by increasing socialization between children with and without disabilities.

Many teachers reported that in an inclusive environment, children with disabilities were motivated to participate more and engage socially with their children without disabilities. These interactions supported them to change the way they saw themselves in relation to their peers. In addition, inclusive environments provided children with disabilities the opportunities to build social skills which changed the way they saw themselves and improved their capacity to collaborate with other children. One teacher noted the difference in children with disabilities:

Right now, even those learners [children with disabilities] as they are out there, they can even greet you, 'Teacher, hi.' During the past years, the learners would shy away, such that when a learner sees you, he/she would wish that the earth opens up and covers him/her in order not to see the teacher because 'I did not achieve in life.' But now they've achieved...So, we are grateful for LC.

Teachers noticed that celebrating the success of children with disabilities and meeting them at their level of ability supported their self-esteem development and encouraged them to continue learning and challenging themselves.

According to stakeholders, schools supported by LC made efforts to recognize the performance of children with disabilities and support them to see what they can accomplish. By adjusting expectations to meet existing ability levels, children with disabilities were better able to participate, which reinforced self-esteem improvements brought about through increased socialization.

Girls with disabilities were more likely to report that their parents engage positive actions to support their education at Endline than at Midline at statistically significant levels.

81.7% of girls with disabilities at Endline reported that their parents took at least 2 positive actions to support them to stay in school. Positive actions included providing them with the necessary materials and support and speaking out to improve how the community treats children with disabilities.

Girls with disabilities whose parents were PSG members were more likely to report that their parents took at least two positive actions to support them to stay in school, compared to girls with disabilities whose parents were not PSG members.

This suggests that PSGs are an effective intervention for encouraging parents to take actions to support their children. As one PSG member explained:

Being in the [Parent Support] Group has helped me, especially when we share among ourselves. Unlike before when I was just alone with my child with a disability at home, and no one was there to advise me. I have learnt how to handle children with disabilities, which I did not know before this project's arrival⁴⁰⁶.

Qualitative findings also suggested that the project's training encouraged parents to use alternative discipline techniques and move away from using corporal punishment to discipline their children.

Although a higher proportion of girls with disabilities felt respected by their community and felt included in community events at Endline than at Midline, changes were not statistically significant. However, most girls with disabilities felt accepted by their community (85.7%) and included (80.1%) in community events, and a much higher proportion of girls with disabilities strongly agree with these statements at Endline than at Midline.

Community sensitization helped make communities safer for children with disabilities, but girls with disabilities remain at increased risk of sexual violence.

Several teachers and parents reported that the community became a safer place for children with disabilities. However, several stakeholders also indicated that girls with disabilities are at increased risk of sexual violence and abuse from community members. Interview respondents reported some cases where girls with disabilities had been taken advantage of through violent sexual acts. Sexual violence remains a barrier to the rights and safeguarding of girls with disabilities in project regions.

⁴⁰⁶ 2.1 PSG NINA

In the policy space, the project supported the passing and implementation of the Sector Policy on the Provision of Education and Training for Learners and Trainees with Disabilities, however, the policy is stalled at the county level.

The project provided technical assistance and resourcing to the MoE to support development of the Sector Policy on the Provision of Education and Training for Learners and Trainees with Disabilities⁴⁰⁷, which passed in 2018. The policy outlines Kenya's vision for inclusive education and enshrines 15 commitments aimed at holistically supporting the education of children with disabilities. Commitments include integrating learners with disabilities in schools, providing assistive devices, and engaging parents, communities, and other stakeholders.

Through the project, LC consulted on the drafting of the policy, supplied financial support for the review process, and provided technical advice on implementation to the Ministry.

The project supported the development of quality standards for EARCs.

The project provided technical assistance on the development of the EARC standards⁴⁰⁸. The project funded a launch event for the guidelines on November 24th, 2021 and made it possible for EARCs and parents from Kisumu, Siaya, and Migori to attend⁴⁰⁹.

The MoE adopted the Minimum Quality Standards for EARC Services in Kenya in November of 2021⁴¹⁰. The policy builds on the 2018 Sector Policy as well as the 2013 Basic Education Act in the endeavour to increase capacity to support students with disabilities by standardizing the operations of EARCs. The EARC guidelines dictate standards for management and accountability, infrastructure and environmental requirements, roles and responsibilities of EARC officers, required qualifications for staff, assessment processes for children with disabilities, and assessment equipment, materials, and assistive devices.

LC supported the introduction of six policies supporting inclusion in county governments.

⁴⁰⁷ Leonard Cheshire Disability, VSO Kenya, & Sense International. (2018). *An Easy to Read Version of the: Education and Training Policy and Implementation Guidelines for Learners and Trainees with Disabilities*. Ministry of Education. <https://www.education.go.ke/index.php/downloads/file/516-special-needs-education-guide-2018>

⁴⁰⁸ LC Staff Martin on National Policy Changes

⁴⁰⁹ Outcome Harvesting Workshop, Group 3

⁴¹⁰ Okoth, G. A. (n.d.). *Minimum Quality Standards for EARCs*.

The project supported the enacting of laws related to inclusive education in every county except for Kisumu. LC advocated for more than ten policies that remained in the development phase at Endline. LC's work facilitated the development of policies by sharing resources and learning, streamlining approaches to promote inclusion in policy making. However, the bureaucratic environment, discontinuity between national and county governments and insufficient government funding posed challenges for policy implementation.

At Endline, girls with and without disability were equally likely to successfully transition. Between Midline and Endline while transition rates decreased for girls without Disabilities, the project was able to support girls with disabilities to maintain their transition rates. .

At Midline, 88% of girls with disabilities successfully transitioned to the next grade level or to vocational training and 99% of girls without disabilities successfully transitioned. At Endline, 89.2% of girls without disabilities successfully transitioned through a relevant pathway and 87.5% of girls with disabilities successfully transitioned.

While at Midline, there was a statistically significant association between experiencing a successful transition and not having a disability, at Endline, this was no longer the case and both groups transitioned at similar rates.

Girls with disabilities were more likely than girls without disabilities to transition to vocational training at statistically significant levels.

While no girls without disabilities in the tracked cohort progressed into vocational training, 5.5% of girls with disabilities successfully transitioned into vocational training.

Girls with disabilities were more than 5 times more likely than girls without disabilities to be out of school at Endline.

There is a statistically significant association between being out of school and having a disability according to Chi-square tests for association. 7% of girls with disabilities at endline are out of school compared to 1.2% of girls without disabilities in the tracked cohort.

50% of girls with disabilities who are out of school at Endline have been pregnant compared to 2.5% of girls with disabilities who are in school. There is a statistically significant association between having been pregnant and being out of school⁴¹¹.

⁴¹¹ P<0.05 Chi-Square test for association

Pregnancy imposes challenges with attending school and young mothers face additional childcare responsibilities than their peers. These findings indicate that girls with disabilities who have been pregnant are at increased risk of drop-out.

Several factors supported girls with disabilities to successfully transition, including:

- **Child-to-Child Clubs:** Girls with disabilities who were members of Child-to-Child Clubs were more likely, at statistically significant levels, to experience a successful transition at Endline than non-club members. 93.4% of C2C Club members experienced a successful transition compared to 74% of girls with disabilities who were not in C2C clubs.
- **Improving girls with disabilities attendance levels** supported their likelihood to experience a successful transition⁴¹².
- **Girls with disabilities who felt respected by members of their community** at Endline were more likely, at statistically significant levels, to have experienced a successful transition. 89% of girls with disabilities who felt respected by their communities successfully transitioned, compared to 83.5% of girls who do not feel respected by their community.

The project likely supported girls with disabilities to improve their literacy levels between Baseline, Midline and Endline by helping teachers apply inclusive education practices.

On average, girls with disabilities in all grade levels, improved aggregate English literacy and numeracy scores at statistically significant levels between Midline and Endline.

Although it is likely that the project supported improvements in numeracy, evidence linking numeracy improvements to project activities is less robust than evidence linking literacy improvements to project activities and the adoption of inclusive practices. Several practices supported girls with disabilities to improve their literacy:

- **Addressing girls' individual needs:** Girls with disabilities who report their teachers addresses their individual learning needs experienced higher average improvements in oral reading fluency between Endline and Midline and had higher English literacy scores at Endline at statistically significant levels than their peers.

⁴¹² Predictive modelling using changes in attendance levels between 2019 and 2020 and between 2020 and 2021 indicate that supporting girls with disabilities to improve their attendance increases the likelihood that they experienced a successful transition by Endline

- **Extra time on assessments and exams:** Girls with disabilities who reported their teacher gives them extra time on exams or assessments experienced higher levels of improvement in English literacy scores between Midline and Endline.
- **Teacher access:** Girls with disabilities who found it easy to talk to a teacher or instructor if they needed support experienced higher average changes in oral reading fluency scores and in English literacy aggregate scores at Endline.
- **Community respect and safety:** Girls with disabilities who felt respected by members of their community had higher average changes in oral reading fluency scores. Girls with disabilities who felt safe traveling to and from school had higher average improvements in numeracy scores at Endline.
- **Male mentors:** Girls with disabilities whose households had male mentors had higher average changes in oral reading fluency than those without mentors between Midline and Endline.

Annex: GECT Project Management Response

April 2022

Impact

Despite interruption of learning and school closures due to COVID-19, Leonard Cheshire's Girls Education Transition project has had a significant impact on reducing the barriers to education for girls with disabilities; it has improved their learning outcomes and supported their transitioning to further education, thus contributing to increasing their life chances for the future.

Disability is a complex socially interdependent construct, and children - especially girls - with disabilities experience many social, financial, environmental and systemic barriers to education compared to their peers without disabilities. The Leonard Cheshire inclusive education model is designed with multiple interrelated interventions to address these barriers. This project and the final evaluation prove that the model is effective.

One of the most significant impacts of the project has been that of changing community attitudes towards disability. Through the male mentorship programme and the parents support groups, parents have been encouraged and supported to send their girls with disabilities to school. These interventions have contributed to the community being more inclusive of children with disabilities in community activities and incidents of abuse have been reduced.

Through teacher and school management training, schools are more welcoming and school improvement plans more inclusive. The evaluation has documented that school environments have become increasingly accessible and teaching methods more relevant and appropriate for children with disabilities. This social inclusion along with the capacity building and interaction of the child-to-child clubs positively impacts on the girls' feelings of security, self-esteem and confidence, which results in an increased likelihood that they will attend and perform well in school. The evaluation demonstrates that by the end of the project girls with disabilities are equally as likely to attend school as girls without disabilities. Given that children with disabilities are very often from poor families, the project supported the girls with bursaries, scholastic materials and sanitary wear. Furthermore, attendance was supported by assessment and provision of assistive devices. In one location, the project provided an accessible school bus to support the girls to travel to school. The evaluation has provided the evidence that these interventions have improved school attendance for girls with disabilities from 87.5% at baseline to 93.5% at endline.

At school level, the project has worked with teachers and provided in-service training on inclusive education pedagogy and practical skills. Schools have also been supported to

establish school-based inclusion teams. The evaluation observed that trained teachers have considerably improved their lesson planning and inclusive practices from Midline to Endline; this was confirmed by girls with disabilities who reported that their learning needs were more supported by their teachers 90.3% at Endline compared to 85.7% at Midline and 68.9% at Baseline. This impacted on the girls' learning outcomes and the evaluation found statistically significant differences in aggregate English literacy scores, which improved by 10% between Baseline and Midline, and a further 7% between Midline and Endline. The study also found statistically significant differences in aggregate numeracy scores, improving by 16% from Baseline to Midline and 8% from Midline to Endline.

The evaluation found that girls with and without disability were equally likely to successfully transition through school pathways. The project intentionally promoted vocational training as an alternative pathway for girls with disabilities - and especially girls with intellectual disability - with outstanding results. The project worked closely with government to change the negative attitudes associated with vocational training and partnered with the institutes to raise knowledge and skills around disability inclusion and adaption of the environment to ensure it was more accessible. The final evaluation demonstrated that girls with disabilities were more likely, at statistically significant levels, to transition to vocational training than girls without disabilities.

At the community level, parents' support groups (PSGs) were used for creation of awareness on disability inclusion and children rights as well as for peer support. Previously there had been a lot of focus on economic empowerment which would enable the families of the girls to become more stable and self-reliant. However, it was realized that most of the protection issues and offenders arose from the community level which were not being appropriately picked up for response. These PSGs were subsequently trained on child protection and safeguarding as well as reporting and referral pathways. This led to increased reporting by the parents directly to the government authorities as well as within the GECT reporting structures in good time to enable immediate and appropriate survivor support. This has been a strong resource for GECT as the project only came in to support through facilitation of medical support and psychosocial support based on cases received.

PSGs are community based and were able to offer local and sustainable solutions for supporting education for girls with disabilities. At endline, the parents of girls with disabilities who were members of PSGs took at least two positive actions to ensure that they stayed in school compared to girls with disabilities whose parents were not members of PSGs. The peer supports that parent of girls with disabilities offered to one another formed a strong social safety net enhancing community acceptance for girls with disabilities.

At the national level, Leonard Cheshire has been able to influence a number of policy interventions including the Sector Policy on the Provision of Education and Training for Learners and Trainees with Disabilities. Leonard Cheshire has also been able to make recommendations to the quality standards for the EARCS as well as to a number of sub-county level disability policies. The project also introduced school-based inclusion teams as a mechanism to support sustainability of inclusive education within schools. The main purpose of these teams is to champion for issues of children with disabilities at school level and to provide contextually relevant strategies for whole school and classroom change. The teams are strengthened by the curriculum support officers at sub county level to ensure continuity beyond the project timeframe. The Ministry of Education are very interested to adopt this approach nationally, and Leonard Cheshire has shared a briefing paper on SBITs to guide further rollout and upscaling.

Barriers to education

While overall the project has been highly impactful there remains some systemic barriers that it has only partially been able to address.

Corporal punishment is illegal in Kenya but is still found to be prevalent in the classroom. Through increasing awareness and training in good safeguarding practices and alternative approaches to discipline, the evaluation recorded a decline in girls with disabilities reporting corporal punishment from 31.7% at Midline to 19.7% at Endline. However, this is still worryingly high. In 2015, the government developed Guidelines for Positive Discipline in schools, alongside a teacher's handbook and accompanying training manual. A roll-out plan is currently in process, spearheaded by the Ministry of Education, Kenya Institute for Curriculum Development, Teachers Service Commission and stakeholders in the education sector. This plan includes positive discipline as a subject in the teacher training curriculum and assessed in teacher training colleges and institutions. In addition, improvement in mechanisms to record discipline practices administered and to report corporal punishment at schools could improve accountability and compliance with existing regulations.

Despite the project facilitating classes with the government-approved life skills manual (which includes sexual reproductive health), at Endline 2.8% (9) of girls with disabilities in the study were out of school. 66.7% (6) of these were out of school because they had been pregnant. Having children and increased household chores was an additional barrier to school attendance and a major reason for dropping out of school. The project worked with schools and young mothers to ensure these girls were supported to return to school. But we agree with the recommendations that there is need to strengthen SRH messaging and activities beyond life skills sensitizations in child-to-child clubs. With consideration to the ages of the beneficiaries, a more targeted approach led by the Ministry of Health on SRH (mandated service providers guided by government policies on SRH) is likely to be more effective with fewer repercussions and less resistance by community or family members.

The project did a great deal of training and awareness raising and capacity building with girls to improve safeguarding mechanisms in the school and community. In addition, Leonard Cheshire worked closely with the Department of Children's Services to ensure that they were aware of disability issues and able to provide appropriate and relevant support for children with disabilities. Communities became more aware of their rights and the mechanisms to report abuse and as a result qualitative evidence from teachers and parents confirmed that the community had become a safer place for children with disabilities. However, several stakeholders also indicated that girls with disabilities are at greater risk of sexual violence and abuse from community members. Leonard Cheshire recognises there is a need for a continuous, concerted and coordinated multi-agency approach to strengthen community-led safeguarding and protection mechanisms. This needs to be supported by increased functionality of existing governmental reporting and follow-up protocols. There is need for increased awareness on disability inclusion so that there is a better understanding of the vulnerabilities of children with disabilities, more so girls. This would enable the development of enhanced and amplified safeguards for girls with disabilities, to ensure that they not only access inclusive education but that they are able to participate in meaningful community processes geared for their individual development.

The introduction of the Basic Education Act calls for free education for all, and automatic transition to secondary education; this is in addition to various national and regional education campaigns to promote enrolment, retention, and transition in schools. These

legislative provisions have subsequently led to a rapid increase in enrolment numbers in schools which has had an impact on increased class sizes, shortage of classrooms and reduced teacher-learner ratios. While these may be seen as barriers to learning, the evaluation has shown that the inclusive strategies introduced as part of the project, such as screening and identification of children with disabilities, curriculum differentiation, Individual Education Plans and universal design, provide effective tools for teachers to reach a wider diversity of learners in regular classes. However, Leonard Cheshire recognises that more time is needed to achieve the systemic change that the project has initiated.

In August 2021 during a scoping visit to LC project schools with the Directors from the Ministry of Education (Special Needs Directorate), Kenya Institute of Curriculum Development and Teacher's Service Commission, teachers and school stakeholders raised the issue (that was also noted by the evaluation) that schools were under pressure to meet government performance indicators or 'mean scores' and this dis-incentivises schools from including children with disabilities, out of fear they will affect the means scores. Leonard Cheshire has advised partners in the education sector not to lower the expectations of educational outcomes for children with disabilities but to improve the provision and monitoring of differentiated support

Impact of Covid-19

The COVID-19 pandemic caused schools in Kenya to close for 37 weeks and had a negative effect on the learning of children with disabilities as it resulted in children spending a significant amount of time at home. Furthermore, the pandemic added economic strain on households and increased chore burdens on girls. Although some support was provided by the government for part of this period, many learners with disabilities were unable to access what the government had provided and lost contact with their peers and teachers. The fact that many learners with disabilities living in remote areas did not have access to the online classes or radio and TV lessons and also did not have textbooks at home, came as a wake-up call to government to take special measures to ensure that infrastructure is in place in rural areas to ensure participation for all.

The project made several adaptations and organized additional activities to support children with disabilities to continue learning during school closures. LC did a lot to increase knowledge and awareness of learners and families about how to look after themselves during the pandemic by sending SMS messages, maintaining weekly phone calls, distributing information packs, running radio programmes in the local vernacular, and providing PPE equipment. The project also distributed dignity and hygiene packs to every girl every quarter and provided a helpdesk for questions and answers during the distribution exercise.

Furthermore, the project supported home learning by providing accessible learning materials such as large print, tactile materials and pictures and diagrams to meet the different support needs of the learners. LC also provided solar radio sets to children with visual impairment and vulnerable households to enable children to access radio lessons: these also had a light attached to provide better lighting at home. The children were provided with instructions on how to use the radios and given the KICD programme guide so that they were informed of the time that lessons were aired on the radio. The project also established a community-based learning programme supporting teachers to hold short teaching sessions for children with disabilities in safe local venues.

The project delivered inclusive education teacher training online, using google classroom and weekly What's App sessions for follow up and support to teachers and in partnership with *Ekitab* successfully rolled out an online training for teachers in Braille and the use of the refreshable Braille devices such as the Orbit Reader for a small cohort of learners with visual impairments.

During the lockdown the project continued to safeguard girls by providing a toll-free helpline to report any cases of abuse, provided help desks at distribution points for the dignity kits and worked with the children's department to ensure they were disability inclusive.

The occurrence of the pandemic as a catastrophic event for many families, reinforced the importance of support for individual learners and their families, including sustaining motivation to continue with their learning, as well as provision of practical support (in the form of learning materials and dignity kits) and support for Parent Support Groups and C2C clubs to support the livelihoods of families.

Learnings

1) The Child-to-Child Clubs and peer mentorship have been instrumental not only in supporting girls with disabilities to develop social skills and improve their self-esteem but have also contributed to their motivation to attend and participate in school. Furthermore, they have been a means of advocacy in support of inclusive education.

2) Although the project contributed to improving teacher's capacity to implement inclusive practices, these can only be fully realised within a broader enabling environment, within which structural barriers are addressed. These include a reduced pupil: teacher ratio, and performance reviews that are responsive to differentiated teaching and assessments.

3) The project has been strongly based on a human rights approach, and the right of every child with disability to inclusive education. The paradigm shift from a charity and segregationist approach, as well as one based on "ableism" (with the assumption that able-bodied children are 'normal') towards a rights-based approach needs to be reinforced at all levels, particularly in respect of teacher training, so that learners with disabilities are empowered and feel capable and affirmed for who they are.

4) Although safeguarding was addressed as a key theme in teacher training, it is evident that changing teachers practice in respect of discipline and use of corporal punishment needs to be reinforced through a variety of different platforms. Creating an ethos within which rights of all learners are respected and there is zero-tolerance for bullying can be nurtured through school management as well as PTAs. Recording of discipline that has been administered at school can contribute to ensuring accountability and compliance with existing regulations.

5) While community awareness and advocacy has helped to create an environment supportive of the education of girls with disabilities, there is a need to include additional targeted support to reduce community stigma against girls with high levels of functional difficulty in communicating, seeing, concentrating, and mobility, as well as girls with epilepsy.

Advocacy in support of safeguarding of children (especially girls) with disabilities to reduce the risk of sexual violence and teenage pregnancy needs to go beyond schools and target

the community. At the same time, there is a need to strengthen SRH messaging for girls with disabilities to prevent early pregnancy and dropout from school. Furthermore, there is a need for advocacy among parents and caregivers regarding the high chore burdens placed on girls with disabilities, as this limits their attendance at school.

6) Although the focus of the GECT has been on girls with disabilities at school, some girls were found to drop out when they fell pregnant, and as a result gave up on aspirations for further education. This points to the need to go beyond a focus on transitions (from primary to high school to tertiary opportunities) to engage with young people who have left the education system to encourage them to continue with their studies and to realize their aspirations.

Legacy: Establishing a successful and holistic model for effective change towards an inclusive education system

Leonard Cheshire is very proud of what has been achieved through this flagship project. It has probably been one of the longest running large scale systemic programmes on the continent, tracking the learning and participation of children with disabilities in fully inclusive settings – more than 2 600 girls and boys tracked over a period of 8 years. The project was grounded in the Leonard Cheshire holistic model of Inclusive Education which has been evolving over two decades and has been **strengthened on an ongoing basis** through learning from rigorous monitoring and research.

At the centre of this **holistic and eco-systemic approach** is the child with a disability. In line with Article 24 of the Convention on the Rights of Persons with Disability, the project has proven to a large audience of stakeholders that it is possible for every child to realise their right to attend their local neighbourhood school and receive reasonable accommodation and individualised support.

In order to ensure that every child receives appropriate support we established a referral system by strengthening inter-sectoral collaboration, anchored in the **Education Assessment Resource Centre (EARC)** for which we set standards for an itinerant delivery model as well as provided equipment to be used for assessment. This will ensure that all children who have been identified are **assessed to determine the barriers they experience** and the support they need in accessing school and realising their full potential. The strengthened referral system now ensures collaboration between health, social welfare and education and also involves the National Council for Persons with Disabilities.

One of the biggest barriers to inclusion is the societal attitudes towards disability. Through **extensive community-wide advocacy** and **behaviour change** involving a range of stakeholders we brought about lasting change. From community leaders to OPDs, parents and male mentors were mobilised and capacitated to be community champions and advocates. Some additional benefits resulting from this initiative have been establishment of income generating projects and heightened awareness of and action on safeguarding of girls with disabilities which involves their increased confidence to report abuse.

Creating **enabling and accessible learning environments** requires whole school change which entails a transformation in culture, policy and practice, a commitment to removing physical, attitudinal and other barriers. The work that was done with School Management and Governance structures, local education authorities, infrastructure and transport bodies

set standards of best practice that will ensure planning will henceforth make provision for disability accessibility. The inroads made in establishing the eco-system for introducing ICTs and assistive technology will also be taken forward by the district government.

Bullying and violence towards children with disabilities remain a huge challenge. Our model of **child-to-child clubs** and peer mentoring has contributed largely to dispelling stigma, discrimination and has fostered acceptance, friendships and socialisation inside and outside the classroom.

We recognise that at the heart of successful inclusion is the teacher in the classroom. Our **investment in ongoing training, mentoring and support** has strengthened a model of delivery which will be upscaled. The building of capacity of teachers in generic and specialised skills to meet the learning support needs of children across all domains of functional difficulties has been recognised by the Kenya Institute of Curriculum Development (KICD) for application at national level. The introduction of school-based inclusion teams has further strengthened the model by introducing a culture of joint problem solving between teachers to deal with a range of contextual difficulties encountered in their day-to-day teaching practice.

The **buy-in from district offices** into the benefits of inclusive teaching methodologies to improve the quality of learning of all children, has been critical. The involvement of QASOs, EARCs and other county and district officials in the training will ensure sustainability of the intervention.

During the school closure period, we learnt a lot about the benefits of **community-based support**. Teachers living in rural communities were capacitated to reach out to learners and support parents. The school-parent collaboration model has undoubtedly been strengthened. In addition, we have equipped teachers through virtual online training in more specialized skills such as acquiring braille skills, sign language, integration of assistive technology, etc. We established professional learning communities and made use of mentor teachers. This has strengthened confidence and encouraged peer learning and sharing of best practice.

Lastly, **capacitating head teachers** to be instructional leaders and establish a culture of ongoing staff development and democratic team problem solving has had the biggest impact towards achieving sustainable change.

All of the above was done **in line with the national policies and sector plans**. Not only did we aim to strengthen the implementation of policy by creating models of best practice, we also expanded and influenced policy by demonstrating how effectively a complete transition towards full inclusion can be achieved. Our model proves that a system can move beyond segregation and integration towards teaching all children effectively in regular classes. We have left a lasting legacy that shows that inclusive education requires a process of systemic reform embodying changes and modifications in content, teaching methods, approaches, structures and strategies (CRPD General Comment 4 on Article 24, 2016).

Sustainability

At the community level, participants rated supports for sustainability of project achievements as between emerging and becoming established, with the strongest factors supporting sustainability of achievements in teaching quality, learning, transition, and attendance.

Participants reported that supports for achievements in community awareness, and self-esteem, were emerging and that there are persisting negative views towards children with disabilities in communities, which would likely affect children with disabilities' self-esteem. While LC has made inroads in this area, disability awareness is an ongoing issue that needs to be infused into all-inclusive education initiatives. Similarly although policies have been put in place to support inclusion there is still progress to be made in implementation and funding of these policies .

At the school level, participants rated supports for sustainability of project achievements across outcomes as emerging, although they indicated that support for achievements in transition were becoming established.

Participants reported that although improvements have taken place at the school level there is still a need to ensure that all teachers adopt inclusive education practices and are equipped to implement them. Supports for learning improvements are emerging although there is still a need to strengthen inclusive practices and the implementation and wider adoption of individualized education plans (IEPs).

As indicated at community level, there is still a need to address community awareness of disability, in order to ensure the self-esteem and school attendance of learners with disabilities

At the system level participants rated sustainability of project achievements across outcomes as emerging except for achievements in learning, for which they rated supports for as latent.

At the system level participants reported that large class sizes and large ratios of teachers to students could inhibit the sustainability of improved teaching practices. Class size is a systemic issue and related to shortage and unequal distribution of teachers, as well as shortages of classrooms. Class size should never be used as a reason for why schools cannot implement inclusive education. The strategies introduced as part of the project, such as curriculum differentiation and universal design for learning, should, if properly implemented, provide tools to teachers to more effectively reach a wider diversity of learners in regular classes. Together with addressing the systemic barriers, further support for teachers is needed to achieve the systemic change that the project has initiated.

Lack of resources at the system level prevent wider awareness raising on stigma and community awareness towards children with disabilities. Unless this is addressed, it is likely that the school attendance improvements of girls with disabilities will not be sustained. With regards to learning, participants rated sustainability of achievements at the system level as latent as there is a lack of resourcing to ensure adoption of inclusive practices and the implementation of individualized education plans. Furthermore, lack of funding prevents implementation of policies that have been put into place.

Transition supports are seen to be emerging but if schools and institutes that children with disabilities transition to are not widely implementing inclusive practices, sustainability of transition achievements may be at risk.