

GEM Report summary on disabilities and education

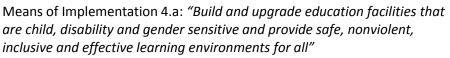
This paper contains all content related to disabilities and education in previous Global Education Monitoring (GEM) Reports since 2010. For full references, please refer back to the Global Monitoring Report referenced in the below citations. Please note that the Reports cited from 2010 and 2015 monitored countries in the Global South. The GEM Report started monitoring countries in the Global North from the 2016 Report onwards only.

A failure to address inequalities, stigmatization and discrimination linked to wealth, gender, ethnicity, language, location and disability is holding back progress towards quality education for all. Disability is strongly linked with poverty and marginalization. Children and youth with disabilities are among the most marginalised, excluded people in the world.

It is a mark of progress that the new education goal in the Sustainable Development Agenda contains a reference to disability in two Targets:



Target 4.5: "By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations"





The UN Secretary-General has said that no goal or target should be considered met unless *all* groups have met it. The 2030 Agenda for Sustainable Development offers countries a timely opportunity to improve their targeting of policies and resources and adapt related indicators to their respective national context.

Yet data remain insufficient to assess progress, leaving widespread inequality related to disabilities still concealed. The fact remains, however, whether data is available or not, that no person should be denied access to good quality education and lifelong learning due to factors such as disability.

There is a lack of concrete data showing the true scale of disabilities worldwide

- A lack of data on individuals with disabilities is severely constraining the ability of the
 international community to monitor the situation. There has been insufficient attention to
 the need to collect comparable data on different kinds of disabilities and link them to
 education outcomes.
- Cross-country comparisons are complicated by differences in classification systems. In
 education, the concept of special educational needs is commonly used, which is broader than
 the concept of disability: in some countries, it includes children from various socially
 marginalized groups. (GEM 2016)
- Only 21 countries have living standard surveys that collect data on chronic illness and disability. The UNICEF Ten Questions screen, a large set of comparable data on disability issues for low income countries, set up in 2005, provides only an indication of disability risk and may overestimate the number of children actually living with disabilities. (GMR 2015)



- Two approaches have sought to develop a common classification framework.
 - In the first, the OECD asked countries to reorganize their national classification systems into three categories: (a) 'disabilities', which have organic origins and for which there is substantial agreement about categories (e.g. sensory, motor, severe, profound intellectual disabilities); (b) 'difficulties', which do not appear to have organic origins or to be directly linked to socio-economic, cultural or linguistic factors (e.g. behavioural difficulties, mild learning difficulties, dyslexia); and (c) 'disadvantages', which arise from socio-economic, cultural and/or linguistic factors (OECD, 2005b).

This approach resulted in unexpected variation. For example, under the tightly defined 'disabilities' category, the average percentage of primary education students who received additional resources in 2001 was 2.5%, but the range was from 0.5% in the Republic of Korea and Turkey to 6.1% in the United States. The range under the other two categories was much broader (e.g. an average of 2.1% of students with 'difficulties', ranging from zero in Italy to 19% in England, United Kingdom), revealing very different applications of the terms.

2. The second approach is the International Classification of Functioning, Disability and Health (ICF), adopted by the World Health Assembly in 2001. Based on the biopsychosocial model, which defines disability as a result of the interaction between the features of a person and those of the environment in which that person lives, ICF assesses disability in terms of: body functions and structures; activities (execution of tasks or actions) and participation (involvement in a life situation); and contextual factors.

The ICF covers a detailed framework of thousands of subdomains, which in practice are difficult to measure. A set of principles is recommended for an operational measure of disability in large-scale population surveys. Questions are to focus on functional limitations (instead of disability) and responses should be scaled, instead of a yes-no choice. The Washington Group on Disability Statistics, under the auspices of the United Nations Statistical Division, has tried to adapt the ICF framework into a module that assesses six adult functioning domains: seeing, hearing, walking, remembering/concentrating, self-caring, and communicating.



The Washington Group also recognized that assessing disability among children required different methodologies, so they developed the Module on Child Functioning together with UNICEF. It includes questions to be answered by mothers or primary caregivers of children aged 2 to 4 and 5 to 17. Assessed domains included seeing, hearing, mobility/walking, attention, learning, communicating, self-care, motor skills, emotions, behaviour, play, development of relationships and coping with change. Where appropriate, respondents are asked to compare the functional difficulties of their child with those of a child of similar age. [Table 14.3]

Source: UNICEF (2016b).

TABLE 14.3: Selected questions from the Washington Group/UNICEF Survey Module on Child Functioning

Seeing domain	
1a. Does (name) wear glasses?	(If no, skip to question 1c)
1b. When wearing his/her glasses, does (name) have difficulty seeing?	Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all?
1c. Does (name) have difficulty seeing?	Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all?
Mobility domain	
2a. Does (name) use any equipment or receive assistance for walking?	(If no, skip to question 2d)
2b. Without using his/her equipment or assistance, does (name) have difficulty walking 100/500 meters on level ground?	Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all?
2c. When using his/her equipment or assistance, does (name) have difficulty walking 100/500 meters on level ground?	Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all?
2d. Compared with children of the same age, does (name) have difficulty walking 100/500 meters on level ground?	Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all?
Coping with change domain	
3. Does (name) have difficulty accepting changes in his/her routine?	Would you say (name) has: no difficulty, some difficulty, a lot of difficulty or cannot do at all?

The module underwent extensive cognitive and field testing between 2012 and 2016. For example, it was field tested with questions on 12 domains in Samoa as part of the 2014 DHS. It showed that 2.7% of 5- to 9year-olds were unable to function at all in at least one domain, while 5.3% faced a lot of difficulty in at least one domain (Loeb, 2015). A parallel validation process is incorporating the module into the next round of UNICEF's MICS. In 2016, the development of guidelines for producing statistics on children with disabilities and a user manual with technical information for implementation are due to be completed.

An operational measure of disability is important to keep the education challenges of individuals with disabilities high on the global agenda. But other steps are needed. To ensure that education is inclusive, teachers and school leaders must be better prepared and school infrastructures properly adapted to address the needs of individuals with disabilities. Monitoring these aspects is important to ensure that schools and teachers do not leave any learners behind.

Despite these challenges, significant success has been achieved in raising visibility of disability in education since the year 2000

International declarations, such as the Salamanca Statement (UNESCO, 1994) and the 2006 United Nations Convention on the Rights of Persons with Disabilities, have facilitated policy and advocacy for educating children with disabilities. Sustainable Development Targets 4.5 and 4.7 in the new 2030 Agenda also commit countries to ensure equal access to all levels of education and vocational training, regardless of disability status. Since 2000, global agencies and NGOs have developed inclusive education models and incorporated them into their education programming, with the broader goal of promoting inclusive societies. Several highprofile declarations in the past decade signaled growing regional interest in providing access to education for children with disabilities. (GMR 2015 and GEM 2016)



• The UK Department for International Development (DFID) has now committed to prioritizing disability-related programming and research, and the Global Partnership for Education has pledged to make disability a priority financing area in education planning (GMR 2015)

We know that marginalization is higher for children with disabilities, and disability is common.

- While globally comparable, reliable data are notoriously difficult to obtain, one estimate is that 93 million children under age 14, or 5.1% of the world's children, were living with a 'moderate or severe disability'. Of these, 13 million, or 0.7% of the world's children, experience severe disabilities. (GMR 2013/4)
- Around four in five children with disabilities are in developing countries. At all ages, levels of both moderate and severe disability are higher in low- and middle-income countries than in rich countries. They are highest in sub-Saharan Africa. (GMR 2010)
- The scale of disabilities is often under-reported: To take one example, a 2004 census in Sierra Leone reported only 3,300 cases of mental impairment, while a detailed national survey the year before had estimated the real figure to be ten times higher. (GMR 2010)
- The OECD states that almost one-fifth of students may develop a special educational need during their schooling years. (GMR 2015)

Available data shows children with disabilities are less likely to attend and complete primary school

- An estimated one-third of all out-of-school children at the primary level have a disability (GEM 2016)
- Aggregated analysis from 51 countries found a 10 percentage point gap in primary completion rates between people with and without disability, a likely underestimate given the undercounting of people with disabilities (GMR 2015).
- According to the World Health Survey, in 14 of 15 low and middle income countries, people
 of working age with disabilities were about one-third less likely to have completed primary
 school. (GMR 2013/4)
- Across 30 education systems in Europe, 4.6% of pupils were identified as having a special educational need in 2010. Yet monitoring is difficult because disability takes different forms and degrees. It was less than 2% in Sweden and almost 12% in Lithuania. Considerable variation can be observed even within one country in the United Kingdom, it ranged from 2.8% in England to 7% in Scotland and over time, with Estonia, for instance, reporting 19% of children having special educational needs in 2008 but 9% in 2010 when a different definition was used. (GEM 2016)
- A recent analysis conducted across 30 countries hosting Plan International sponsorship programmes found that children with disabilities were far less likely to attend school, had less accumulated schooling and were more likely to report a serious illness in the last year.



Children with hearing or visual impairments had better schooling outcomes compared with children with learning or communication impairments. (GMR 2015)

- An analysis of 15 lower income countries in Asia, Latin America and Africa using 2002–2003
 data found that in a majority of the countries, disability was significantly associated with lack
 of primary school completion and employment, and higher health expenditure (GEM 2016)
- In Bangladesh, 30% of people with disabilities had completed primary school, compared with 48% of those with no disabilities. The corresponding shares were 43% and 57% in Zambia; 56% and 72% in Paraguay. (GMR 2013/4)
- According to a World Bank analysis of India's 2002 National Sample Survey, children with
 disabilities are five and a half times more likely to be out of school than those with no
 disabilities. Almost three-quarters of children in India with severe impairments are out of
 school, compared with about 35% to 40% among children with mild or moderate
 impairments. The most likely to be excluded are children with mental illness (two-thirds of
 whom never enrol in school) or blindness (over half never enrol). (GMR 2010)
- In Malawi and the United Republic of Tanzania, having disabilities doubles the probability of children never having attended school, and in Burkina Faso it increases the risk of children being out of school by two and a half times. (GMR2010)
- In Bulgaria and Romania, net enrolment ratios for children aged 7 to 15 were over 90% in 2002 but only 58% for children with disabilities (GMR2010)

Having a parent with a disability can affect a child's chances of going to school

Children whose parents have disabilities often face tensions between schooling and care
demands at home. Having a poor parent with a disability increases the likelihood of 7- to 16year-olds never having been to school by twenty-five percentage points in the Philippines
and thirteen points in Uganda – a reminder of how poverty, disability and education interact.
(GMR 2010)

Those with disabilities are more likely to be without basic literacy skills

- In Uganda in 2011, around 60% of young people with no identified impairment were literate, compared with 47% of those with physical or hearing impairments and 38% of those with mental impairments.
- In the United States, an assessment found that those lacking basic literacy skills were more than twice as likely as an average adult to have multiple disabilities. (GMR 2012)
- In the United Republic of Tanzania, a survey found that the literacy rate for people with a disability was 52%, compared with 75% for people without a disability (GMR 2013/4)

Disability intersects with other disadvantages to exacerbate children's disadvantage

Poverty is both a potential cause and a consequence of disability



- In several countries, the probability of being in poverty rises in households headed by people with disabilities. In Uganda, evidence from the 1990s found that the probability was as much as 60% higher. (GMR 2010)
- Those with disabilities are much less likely to be working. Other family members may also be
 out of work (or school) to care for them. Inadequate treatment, along with poor families'
 inability to invest sufficiently in health and nutrition, reinforces the problems people with
 disabilities face. (GMR 2010)
- Very few young people in Kenya living with disabilities study beyond primary level. They face
 constraints in employment because of their low level of education, little or no adaptation of
 their workplaces, and limited expectations among families and employers. (GMR 2012)
- In Malawi and Swaziland, less than half of those aged 15 to 29 with disabilities had ever been to school, and employment rates among 15- to 29-year-olds were under 3% in Swaziland and 28% in Malawi. (GMR 2012)
- Kenya's 2008 National Survey on Persons with Disabilities found that 3.6% of youth aged 15 to 24 had disabilities. In the week preceding the survey, only 8% had worked for pay, and 14% had worked on the family business. Over 50% had not worked. (GMR 2012)
- A pilot survey conducted in 2009 in five urban areas of Sierra Leone found that 69% of people living with disabilities had no income at all, and 28% were living in households with no income. Youth aged 15 to 25 with disabilities were 8.5 times less likely to work than those without disabilities (GMR 2012)

Girls with disabilities can be especially marginalized.

 Recent research from western Africa found that girls with disabilities faced increased isolation, stigmatization and discrimination; experienced a lack of schooling and other opportunities to participate in communal life; and were at particular risk of abuse, including forms of sexual violence

Disability intersects with gender to exacerbate children's vulnerability to violence

 Research shows that disabled children are less likely to fend off attacks and are less likely to be believed when reporting incidences of violence. (GMR 2015)

Different disabilities create very different education-related challenges

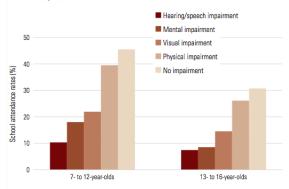
• Impairments that affect the capacity of a student to communicate and interact in ways considered normative in school can impose particularly high practical and social obstacles to participation in education. A closer look at national data often reveals markedly different consequences for various impairments:



- In Uganda, dropout rates are lower among children with visual and physical impairments than among those with mental impairments (GMR 2010)
- In Burkina Faso, children reported as deaf or mute, living with a mental impairment or blind were far less likely to be enrolled in school than those with a physical impairment. In 2006, just 10% of deaf or mute 7- to 12-year-olds were in school. (GMR 2010)
- Since 2005, Multiple Indicator Cluster Surveys have used a tool with questions screening children aged 2 to 9 for the risk of various types of impairment.
 - In Iraq, 10% of 6- to 9-year-olds with no risk of disability had never been to school in 2006, but 19% of those at risk of having a hearing impairment and 51% of those who were at higher risk of mental disability had never been to school. (GMR 2013/4)
 - In Thailand, almost all 6- to 9-year-olds who had no disability had been to school in 2005/06, and yet 34% of those with walking or moving impairments had never been to school. (GMR 2013/4)

Burkina Faso's children with disabilities face deep but varied levels of disadvantage

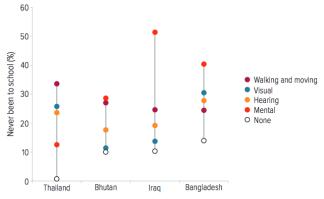
% of children aged 7 to 12 and 13 to 16 attending school, by nature of impairment, Burkina Faso, 2006



Source: Kobiané and Bougma (2009), based on data from the 2006 Burkina Faso census Recensement Général de la Population et de l'Habitation.

Children at risk of disability face major barriers in gaining access to school

Percentage of children aged 6 to 9 who have never been to school, by type of impairment, selected countries, 2005–2007



Source: EFA Global Monitoring Report team calculations (2013), based on Multiple Indicator Cluster

Reaching children with disabilities will require increased financing

- Additional resources are needed to provide teachers with specialized training and children
 with specially designed learning materials to realize their potential. Families may also require
 additional financial support. One study in Bangladesh found that the parents of children with
 disabilities faced costs for aids, appliances and health care that were three times the average
 household budget for raising children. (GMR 2010)
- Since the early 2000s, countries have used capitation grants, based on the number of students and other criteria, to finance school needs beyond teacher salaries. While some countries use enrolment data alone as the basis for capitation, others account for disadvantages faced by schools and families. Kenya's US\$14 per student capitation grant was to be used or textbooks, instructional materials and other costs, with a higher amount available for children with disabilities. (GMR 2015)



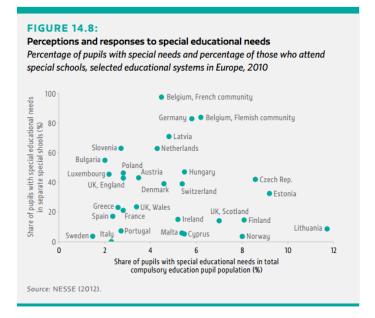
- As of 2014, 30 GPE grants have components related to supporting children with disabilities; in some cases, this has helped countries leverage support from other partners for mainstreaming and including children with disabilities. (GMR 2015).
- The long-term social and economic benefits of targeting public resources towards the
 marginalized far outweigh the costs. In Bangladesh, the reductions in wage earnings due to
 lower levels of education for people with disabilities are estimated to cost the economy
 US\$26 million per year; a further US\$28 million is lost when children forgo schooling to care
 for a disabled person. (GMR 2015)
- Schooling could also help close the poverty gap between adults with and without
 disabilities: across 14 developing countries, an additional year of schooling completed by an
 adult with a disability reduced the probability of their being in the poorest two quintiles by
 between 2% and 5%. (GMR 2015)

Education policies can counteract marginalization caused by disabilities

- Measuring progress in education must take into account all children, including those at risk for disabilities. This requires having measures based on nationally representative household surveys, rather than those only of children who are in school.
 - A 2008 survey in the United Republic of Tanzania provided a detailed profile of impairments across the country. It found marked regional disparities and a higher incidence of disability in rural areas. (GMR2010)
- 2. Governments should develop inclusive curriculum can help break down barriers faced by children with disabilities in the classroom. Separating children from their peers or families is detrimental to their development and potential.
 - Integrating children with disabilities into existing public schools can break down the
 segregation that reinforces stereotypes. Moreover, special schools are often chronically
 underfunded and lack either skilled teaching staff or the equipment needed to deliver a good
 education. But integration is not a panacea. Children with severe disabilities may require
 highly specialized support. (GMR 2010)
 - The majority of countries have begun transitioning to the social model of disability and inclusive education, although some still favour segregation. In Europe, while Cyprus, Lithuania, Malta, Norway and Portugal strongly encourage inclusive education, Germany and Belgium still rely on special education infrastructure. In practice, most countries have hybrid policies and are improving their inclusionary practices incrementally. (GMR 2015)



- More than 40% of students with special educational needs across 30 education systems in
 - Europe were in special schools, but the share was more than 80% in Belgium and Germany and almost zero in Italy and Norway (GEM 2016) [Figure 14.8]
- Some countries provide excellent models. Finland has a holistic approach to improve inclusion.
 Through its education reforms, the number of elementary students in special education decreased from an already low 2.0% in 2000 to 1.3% in 2009. Its ambitious multisector policy programme, VAMPO, aims for major structural changes and initiatives that improve the overall context for addressing disabilities. (GMR 2015)



- Viet Nam has gradually developed adequately resourced, large-scale programmes, including strategies for curriculum reform and teacher training. Rural and urban pilot projects in the early 1990s offered relatively cost-effective teacher training and technical assistance for inclusion. The success of the pilot programmes helped policy-makers see new possibilities for disability-related inclusion, and encouraged the adoption of new laws and policies. However, a persistent challenge to policy implementation has been lack of clarity over the interpretation of and strategies for inclusive education. (GMR 2015)
- In India, the RTE and the main EFA programme, Sarva Shiksha Abhiyan, created opportunities for people with disabilities to be included in mainstream schools. National estimates of enrolment of children with special needs show a sharp increase, from 566,921 in 2002/03 to 2.16 million in 2007/08, and the percentage of schools with ramps increased from 1.5% in 2004 to 55% in 2012/13. However, a large share of children with disabilities still remains out of school. In 2012/13, it was estimated that, nationally, almost half the children with mental disabilities were out of school. Still, the advances reflect emerging political attention to children with disabilities. (GMR 2015)
- Several inclusive policies have been piloted in sub-Saharan African countries with
 international support, especially from DFID. In Rwanda, two projects funded through the
 Innovation for Education Fund aim at developing standards and norms for inclusive
 education, and increase ownership at the community level to increase education access.
 Some education projects in Ethiopia, Malawi and the United Republic of Tanzania provide
 needs-based support, build schools adapted for children with disabilities, support special
 teacher training, develop textbooks in Braille and carry out awareness campaigns on
 inclusion. (GMR 2015)
- Research in Eastern Cape, one of South Africa's poorest provinces, found that inclusive
 education produced significant gains, ranging from improved physical access to support for
 specialized teaching practices and increased admission of learners with disabilities. (GMR
 2010)



- In 2003, a Bangladeshi non-government organization, BRAC, established a pre-school and primary education programme aimed at increasing participation by children with mild special needs. Training teachers, providing equipment, adapting the curriculum and improving physical access, it had reached about 25,000 children by 2006. (GMR 2010)
- In Ethiopia, with the support of the NGO Handicap International, a school for deaf students operates as both a special school and a resource centre, supporting education for deaf learners in other schools and the development of sign language. (GMR 2010)
- In Canberra, Australia, curriculum reform aims to help teachers improve attitudes regarding students with disabilities, improve the quality of interactions between students with and without disabilities, and enhance the well-being and academic achievement of students with disabilities. (GMR 2013/4)
- Coordinated, multisector approaches can help. Jamaica is assessing children's special needs, rolling out an assessment tool nationwide in the 2014/15 school year to aid pre-primary teachers in identifying children who require extra support. (GMR 2015)

3. Teachers must be supported with training and pedagogical tools to help reach children with special needs:

- Some NGOs and governments, including those of Uganda and the United Republic of Tanzania, have supported 'itinerant teaching' approaches, which enable specialized teachers, experienced in teaching children with disabilities, to reach a larger group of pupils in satellite schools, and support and train teachers. (GMR 2010)
- Teachers need training in inclusive education to help break down barriers caused by
 disabilities. The Lao People's Democratic Republic has a network of 539 schools that teach
 children with disabilities alongside their peers and provide specialized support. The schools
 give children with special needs opportunities to learn in an inclusive environment, partly
 through investment in specialized teacher training. (GMR 2010)

4. More teachers with disabilities should be hired to reduce marginalisation of children in the classroom

 Teaching often fails to recruit enough qualified people with disabilities. Mozambique has been running teacher education programmes for visually impaired primary school teachers for more than ten years. Communities have become familiar with their children being taught by visually impaired teachers, resulting in a positive change of attitude and helping create a more welcoming environment for teachers and students with disabilities. (GMR 2013/4)

5. Early childhood services should be provided by multiple sectors so as to reach children early and comprehensively.

Disabled children are a significant proportion of those marginalized. For policies to be
effective, they must target all children with disabilities and the multitude of contexts in
which they live. The earlier disability is diagnosed, the better for children and their families.



6. Approaches to support people living with disabilities should involve the community to alleviate societal barriers to progress.

- Cultural discrimination can exacerbate the undercounting of disabled children, their lack of
 access to education and other opportunities to lead a fulfilling life. Along with efforts to
 improve data collection, approaches that involve the community, parents and the children
 themselves need to be encouraged, as they are more likely to provide sustainable, locally
 relevant solutions and foster a social model of inclusion. (GMR 2015)
- The Oriang Project in Kenya aimed to change the perceptions of teachers, parents and the
 wider community by training them about the principle of inclusion. Participative approaches
 to data collection, such as listening to personal stories of children with disabilities using
 audiovisual methods, as was done in a refugee programme in Jhapa, Nepal, have also been
 shown to facilitate children's integration in schools. (GMR 2015)

7. Countries should set minimum standards on the accessibility of schools for children with disabilities

- Due to lack of consensus on a definition and often limited monitoring capacity, it is hard to
 know how many school facilities are accessible to children with disabilities. UNICEF has
 designed an Inclusive Education Rating System tool, which includes the physical environment
 as a key dimension, to enable specialists to assess national policy and the school system.
 UNICEF has also developed criteria on which to base assessments at the school level,
 including detailed guidance on getting to, entering and moving through the school; using
 water, sanitation and recreational facilities; and developing school evacuation safeguards.
 (GEM 2016).
- Article 9 of the 2006 Convention on the Rights of Persons with Disabilities calls on countries
 to '[d]evelop, promulgate and monitor the implementation of minimum standards and
 guidelines for the accessibility of facilities and services open or provided to the public' and
 explicitly refers to schools. A review in Asia and the Pacific found that at least 25 of 36
 countries had such standards for buildings, public transport or both. (GEM 2016)
- In South Africa, the Department of Basic Education issued a comprehensive set of legally binding norms and standards for all public schools in 2013. They include universal design principles on minimum space, toilets and parking spots for children with disabilities and are to be followed in all future construction work. However, the presence of standards is not sufficient. While South Africa has a National Education Infrastructure Management System, it does not appear to monitor implementation of the standards with respect to disability. Civil society groups do, however, conduct social audits and point to cases where schools do not meet the norms and standards. (GEM 2016)
- Many schools, particularly in remote rural areas or in urban slums, are physically inaccessible
 to some children with disabilities. In 2005, just 18% of India's schools were accessible to
 children with disabilities in terms of facilities such as ramps, appropriately designed
 classrooms and toilets, and transport. (GMR 2010)
- In India, the Sarva Shiksha Abhiyan programme, promoting education for all, supports ramps, railings and modification in toilets and provides manuals to village education committees.



Data in the District Information System for Education led the government to declare 82% of schools 'barrier free' in 2015. However, this assessment only captured the availability of ramps and not all aspects that should be considered before a school can be declared compliant with accessibility standards. Education management information systems are ill-prepared to collect relevant information. A review of 40 school census forms showed that only one mentioned physical infrastructure provisions for children with disabilities in each room; similarly, only one asked whether toilets were accessible to children with disabilities. (GEM 2016)

In Thailand, 61% of schools, buildings and classrooms were not adequate to serve students
with physical disabilities and in fewer than one-third of schools were teachers trained to
work with students with learning and physical disabilities. (GMR 2015)

Beyond policy formulations, there need to be clear legal frameworks for fulfilling, respecting and protecting the right to education for people with disabilities. The Convention for the Rights of People with Disabilities is the key international document that serves this purpose and it is complemented by national legislation, which precedes it or has been enacted more recently. These legal documents provide the basis for holding governments to account. The 2017 Global Education Monitoring Report, which focuses on the theme of accountability in education, will discuss examples of different mechanisms that have been put in place to defend the right to education for people with disabilities.

Links:

EFA Global Monitoring Report 2010: Reaching the marginalised

EFA Global Monitoring Report 2012: Youth and Skills: Putting education to work

EFA Global Monitoring Report 2013/4: Teaching and Learning: achieving quality for all

Figures (JPEG): Children at risk of disabilities face major barriers in gaining access to school, EFA GMR 2013/4

EFA Global Monitoring Report 2015: Education for All 2000-2015: Achievements and Challenges Global Education Monitoring Report 2016: Education for People and Planet