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**DISCRIMINATORY ISSUES FOR  
CHILDREN WITH SPECIAL NEEDS:  
THE CASE OF GHANA**

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## **Abstract**

Across all regions of Ghana, impaired children are largely victims of deep-rooted traditional/cultural beliefs on disability that exclude them from the mainstream social community and deny them the opportunity to explore their abilities and potential within inclusive educational settings. This dissertation sought to investigate how impaired students navigate their school experience of disability amid the attached restrictions and challenges and provide some insights into the delivery of educational services as welfare services in Ghana, where this cohort is largely exposed to derogatory labelling, alienation and seclusion.

Based on a quantitative research methodology using data collected from survey participants in nine of the thirty-eight public colleges of education in Ghana, the researcher aimed to understand and explain how the education system works to remove discrimination and stigma against special learners and integrate them into the mainstream.

The survey included 300 teachers scattered across all regions of Ghana, expected to have completed some degree of theoretical and practical training. Thus, with potential to offer a clear picture of their understanding of inclusive education (IE), predisposition to accommodate the needs of disabled learners by adjusting pedagogical practices, and general feelings of self-efficacy towards IE to remove discrimination and stigma.

The scholarly community from both the Global North and South has repeatedly articulated the importance of teachers in ensuring inclusivity for all students and the positive impact of mentor' training programs on improving the knowledge of impairment, inclusive practices, behaviours towards disabled children, and preparedness to create IE settings.

Our results showed that to accommodate SEN students in mainstream settings, several adjustments need to be operated to enable their understanding of course content. First, teachers must adapt the curricula to the traits and ability levels of impaired children. Second, the instruction methodology must be tailored to meet the array of personal and educational needs of disabled students. Adaptive teaching is a pivotal component of effective instruction, although, practical realities show that mentors find it challenging to reshape teaching approaches to address the requirements of CWDs in regular classrooms.

The entire research agrees with the argument that efforts to include disabled students into mainstream education via inclusive learning practices require that teacher training programs need to be explored in greater depth. Further, our findings indicated that Ghana needs to create comprehensive strategies and programs to encourage inclusive education and that the

attitude of the stakeholders is pivotal in achieving the goals of IE. The community is playing an important part in promoting the rights of disabled children and eliminating discrimination, social exclusion and alienation of this group.

Overall, the results of the analysis highlight the need for further reforms in teacher training in Ghanaian colleges of education. The barely positive approaches of disability and the traditional beliefs about the causes of impairment, coupled with the absence of meaningful experiences in delivering IE by mentors, emphasize that innovative practices are strongly required to improve the educational journey for both instructors seeking to remove discrimination against CWDs via IE, and SEN students.

***Key words:*** *Children with disabilities, special needs education, inclusive education, equality of opportunities*

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## **LIST OF ABBREVIATIONS**

CBR.....	Community-Based Rehabilitation
CWDs.....	Children with disabilities
EADSNE.....	European Agency for Development in Special Needs Education
EFA.....	Education for All
IE.....	Inclusive Education
LMIC.....	Low and Middle-Income Countries
MDGs.....	Millennium Development Goals
SEN.....	Special Education Needs
UN.....	United Nations
UNESCO.....	United Nations Education and Scientific Organisation
WHO.....	World Health Organisation

## CHAPTER 1: INTRODUCTION

### 1.1. Background

Education is a major driver of social change that often triggers upward movements in the structure of communities, narrowing the gap between the various layers of the society. It represents a fundamental right of children, irrespective of status and background, covered in several declarations (*inter alia*, Education for All, 1990; the UNESCO Salamanca Statement and Framework for Action, 1994; the Dakar Framework for Action, 2000; the Millennium Development Goals, 2000). The international dialog on core rights is not about the mere provision and access to education, but concerns its role in sustaining the optimal development of each student (Quennerstedt and Quennerstedt, 2014) including physically and mentally disabled.

Children with disabilities (CWD) are one of the most vulnerable groups, exposed to massive and extended violations of their fundamental rights. Discrimination is not only driven by their particular condition, but rather, is an outcome of the lack of understanding of its causes and consequences, fear of difference or contagion, or religious/cultural perspectives of disability (UNICEF, 2013). This state is further deepened by abject poverty, especially in isolated communities, where disabled children rights are routinely violated (UNICEF, 2012). The situation is further aggravated in the context of humanitarian emergencies and natural disasters, when disabled children get disproportionate degree of damage because of their inability to compete with health peers (UNICEF, 2015). Furthermore, CWDs are commonly exposed to the lack of proper assistance, and an unfriendly, glacial environment. Sadly, too often such groups are defined and treated by what is missing rather than what they have.

Exclusion and marginalization make them uniquely vulnerable, affecting their dignity, individuality, and chances to have a normal life (Alemu, 2014) Inequality and discrimination are the most pressing issues to be solved, as social inclusion of CWD can only be achieved when they are provided with efficient *inclusive education* (IE). Historically, the learning needs of this group were barely considered; hence, the special protection and different treatment applied relative to non-disabled peers, largely believed to conform to societal norms. Discrimination and restricted educational opportunities for CWD are the foundations of the United Nations' Standard Rules on the Equalization of Opportunities for Persons with

Disabilities (UN, 1993), because this category is a substantial part of non-enrolled population and most stigmatized within the education arena (and the larger community). They are exposed to exclusion and segregation from the mainstream, and have traditionally the last to be delivered schooling services, which is a direct violation of their fundamental right to education.

Educational inclusivity for this group means that training should be an instrument to ensure equality, justice and well-being for impaired children (Terzi, 2014; Nasir and Efendi, 2016). Nevertheless, a multi-faceted practice of the educational act for impaired children (e.g. special education (SE) and inclusive schools) can divide focus in mainstream inclusivity and thus, programs in SE must be reshaped to ensure both IE and the integration of both types of education funding (Al-Obaidi and Budosan, 2011). Other complementing initiatives such as early childhood development programs, community-based rehabilitation (CBR) programs, and teacher training, must also be established to ensure that special learners are included in society.

Despite various global and regional conventions and declarations, optimal implementation of education for children with special needs is still lagging in the emerging world. According to Adnan and Hafiz (2001), the lack of a universal definition of disability, misinterpretation of the educational paradigm for CWD and discrimination by teachers, administrative staff, and peers are the main explanations for the troubled educational environment for this group.

Over the last decades, inclusion has been often replaced with integration, a phenomenon later perceived as limited and unsatisfactory. Therefore, the inclusion of children with disabilities in mainstream education settings has become a major component of global human rights agenda. Since then, the concept has been widely explored internationally. However, accommodating the special needs of impaired students could be a major challenge, given the open debate between the supporters of inclusivity and those in favour of educational services delivered in segregated facilities. Achieving inclusivity in education can be costly for adjusting curricula, teacher training and, special learning materials and infrastructure, particularly for low-income economies such as Ghana.

However, presently, it is commonly agreed that the best way to reduce discrimination against mentally or physically impaired children is to create inclusive educational settings.



## **1.2.Rationale for studying inclusive education**

Prior to presenting the research questions, it is essential to explain the grounds for exploring inclusivity in education as a mean to reduce discrimination against disabled children and provide quality services to this cohort. In a very simplistic approach, IE is about considering all students, regardless of their physical condition, particularly those secluded, stigmatized, disabled, and minority groups. Differently stated “*inclusive education aims at reinstating the voices of disabled people and disabled children into territories where they have been historically excluded*” (Terzi, 2010, p. 71).

Therefore, I seek to highlight that IE is not just about the integration of special learners into mainstream educational settings, but about the delivery of educational services tailored to their needs, and the provision of adequate materials and human assistance to eliminate all obstacles to full social inclusion. This dissertation emphasizes the need to allocate more resources on the least advantaged children to balance the scale that is always in favour of the “normal” individuals within a community.

Inclusive education seeks to develop the full potential of disabled students in an environment of equal opportunities for all, where barriers such as discrimination, alienation and derogatory labelling no longer exist. IE is a construct largely embraced by both developed nations and developing countries, such as Ghana, which is making extensive efforts to achieve inclusivity in education.

Inclusive education, as a human rights-related issue, is pivotal to the international dialog on inclusion. Thus, it can be regarded as a political affair, since all individuals deserve an active participatory position in any democracy. This concept and its connections to the wider community, which accepts and values diversity, have reshaped the general perception and orientation of the true meaning of IE. Consequently, it is the only avenue and platform that enables equal schooling opportunities for disabled students, and fair participation in all educational activities. However, this is a challenging endeavour in terms of costs, teacher training and competence, availability of resources, and adequate educational materials for special learners.

Despite the universal right to education captured in various international declarations over the years, children with disabilities are still the most excluded group from quality services, although efforts to address the needs of special learners are clearly observable worldwide. I

consider that addressing the issues related to inclusivity in education does not only assume teacher training and attitudinal changes from all stakeholders (the human components), but also the provision of adequate learning materials (the tangible component). Thus, the rationale of this dissertation is to explore the educational journeys of impaired students, and particularly the mechanisms underpinning the delivery of inclusive education to reduce discrimination and stigma against this group. The delivery of education services to special needs learners as well as welfare assistance for disabled children has become a priority for national and global policy. However, this category is exposed to major challenges when seeking to access education and obtain assistance to accommodate their needs.

Physically or mentally impaired children are often marginalized by mentors and community; some are placed in separate school units to develop their potential, while most are widely denied their right to education. Consequently, education for children with special needs has generated a burgeoning literature and a vast international dialog among academics and policy developers.

### **1.3.Problem statement and objectives of the study**

This research has emerged driven by a genuine issue affecting children with disabilities across the world, and particularly in emerging economies, such as Ghana. The present dissertation seeks to provide some insights into the universe of impaired children and the delivery of educational services as welfare services in Ghana, where this group is largely denied access to primary education for various reasons.

Although education is recognized as a fundamental right of CWD and the government is making extensive efforts to ensure inclusivity, enrolment and participation in a classroom environment absent of discrimination and stigma are questionable and need to be treated as a priority. Altogether, these affect the development chances of disabled children, and restrain them for adjusting and being an active part of the socio-cultural local setting. In addition, the lack of basic education increases their vulnerability and social exclusion because of insufficient knowledge and abilities to facilitate the human capital formation. Hence, the scope of this analysis is to provide a comprehensive picture of discriminatory practices against impaired children. The current status of inclusive education and the legal responsibility of the factors surrounding the community of special learners in Ghana.

A survey methodology has been applied to answer the four research questions that guided the writing of my dissertation.

- **Research question 1:** *What is the preparedness level of the teachers in Ghana to create equal educational experiences for both disabled and non-disabled students and reduce discrimination?*
- **Research question 2:** *What is the approach of teachers towards ensuring material and non-material resources to achieve inclusivity in education for all students?*
- **Research question 3:** *What is the teachers' course of action to reduce discrimination and stigma against disabled learners?*
- **Research question 4:** *What is teachers' approach of disability and attitudes towards IE?*

#### **1.4. Significance of the study**

The international dialog by education forums and conference participants mirrors the efforts to reduce discrimination against physically challenged students in both developed and developing worlds. It is my hope that the findings of this research will bring a relevant contribution to the ongoing debates about the challenges of inclusive education as a mean to reduce discrimination against these cohorts and ensure equal learning opportunities for all children in mainstream settings across all regions of Ghana. Upon completion, this dissertation could be an important source of insights into the educational experiences delivered to impaired students in Ghana. In addition, recommendations to be made could be generalized to other countries in Africa presenting a similar educational environment. Finally, it will help the researcher gain a better understanding of the patterns and challenges of inclusive education to fight discrimination against CWDs in the Global South.

## CHAPTER 2: CONCEPTUAL FRAMEWORK

### 2.1. Definition of terminologies

We seek to set the boundaries of our research by defining the key terms that help one understand the concepts we built upon in the context of this dissertation. As mentioned by Jonsson and Wiman (2001), the relevant terminology in the educational arena has changed massively over the past years. For example, *disability*, used in labelling impaired children is now replaced with constructs such as *inter alia*, disadvantaged children, children with special education needs, differently abled children, or disabled children. This approach in fact includes all children for which access to basic education is challenging, impairment or non-impairment related. According to UNCRPD (2006, Article 1), disability is an ever-reshaping notion that refers to disabled individuals as to “*those who have long-term physical, mental, intellectual, or sensory impairments, which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with other*”.

The concept of access to education has had a long history, from a mere privilege to a right for all children, and international conventions have set the bar even higher (Mantey, 2014). The Salamanca Statement 1994 (and the associated framework) is a fundamental pillar and a leading principle of IE for persons with disabilities.

*"Schools should accommodate all children regardless of their physical, intellectual, emotional, social, linguistic or other conditions."* (Article 3, Salamanca Framework for Action)

*"Regular schools with this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system."* (Article 2, Salamanca Statement)

These recommendations and principles are rooted in the *Jomtien World Declaration on Education for All* (1990), and refined in the *Dakar Framework for Action* (2000):

*“In order to attract and retain children from marginalized and excluded groups, education systems should respond flexibly... Education systems must be inclusive, actively seeking out children who are not enrolled, and responding flexibly to the circumstances and needs of all learners.”* (Expanded Commentary on the Dakar Framework for Action)

Both in the developed nations and in the emerging world, **special education** can enable and reiterate negative stereotypes regarding children with disabilities. Furthermore, the exclusion of CWD from the mainstream education planning makes it impossible for their non-affected peers to understand the experience of disability, which in cascade, perpetuates stigma and isolation. Special education today imitates the discriminatory social system by confirming the hypothesis that children with specific characteristics do not fit in the community (for instance, have a hearing deficiency, when the modern technology offers a multitude of artificial solutions) and hence, treats them discriminatory.

However, the educational paradigm is under change and is now focused on some major principles, *inter alia*, equal access to education for all children, recognition of the fact that learning together produces superior results, understanding of diversity, and opportunities for participation. The current refining of the paradigm assumes the rethinking of structures, organization, learning and curriculum and assessment of the education provider to best meet the diversity of children, rather than changing the latter to fit the school (Stubbs et al., 2013).

Considering the above-mentioned, below is the definition of **inclusive education**, as formulated by UNESCO:

*Inclusive education is a process of addressing and responding to the diversity of needs of all learners through inclusive practices in learning, cultures and communities and reducing exclusion within and from education. It involves changes and modifications in content, approaches structures and strategies, with a common vision which covers all children of the appropriate age range and a conviction that it is the responsibility of the regular system to educate all children”* (UNESCO, 2005a, p.13).

This definition includes and applies to all excluded children communities, with notable success (UNESCO, 2010). Among the major obstacles affecting the provision of quality education for CWD, Peters (2004) mentioned the failure of early identification and intervention, negative attitudes, predisposition towards exclusion and stigma, inadequate

teacher conduct and training, rigid assessment procedures, inadequate administrative staff assistance, no equipment and devices adjusted to fit the needs of children, inflexible classroom environment.

Inclusive education is a fundamental human right and the cornerstone of social equality and justice (European Agency for Development in Special Needs Education, 2012). However, there is no international agreed interpretation of the concept, which makes teachers and educational systems understand the ethos of inclusion in different ways and from different perspectives. As described by Grima-Farell et al. (2011, p.118), “*IE represents a whole-school concern and works to align special education with general education in a manner that most effectively and efficiently imparts quality education to all students*”.

Inclusivity in education as described in the Salamanca Statement is rooted in the concept of social equity, similar to the social model of disability, which states that all children are different and the educational systems should be reshaped to accommodate the needs of all individual learners (Mantey, 2014). The achievement of this target requires that IE be treated as an ongoing societal endeavour and not as a single event (Swart and Pettiper, 2005; Ainscow, 2005).

The myriad of global conventions, national laws and government efforts have been important drivers of the universal access to education and opportunities for all children to contribute to the development of their local communities. Despite global debates and domestic projects, a vast amount of work is needed to promote education for special learners, as practical evidences highlight diverse forms of discrimination against CWD.

As highlighted by UNESCO (1997), the concept of *special education needs* (SEN) replaces the term *special education*, which was mainly understood as teaching services delivered to impaired children in separated/distinct facilities from regular schools and universities. Presently, a large number of disabled children are enrolled under the regular system. In addition, the notion of CWD includes more than children with impairments to cover those with poor performances in school for a myriad of reasons that block their optimal progress.

SEN has generated an extensive debate in the literature on special education, and a myriad of definitions have been suggested internationally. The Education for Persons with Special Educational Needs Act 2004 described the SEN concept as “*a restriction in the capacity of the person to participate in and benefit from education on account of an enduring physical,*

*sensory, mental health or learning disability or any other condition which results in a person learning differently from a person without that condition*". National and global efforts to guarantee inclusivity for pupils with SEN in mainstream schools are expressed in the legislation across the world, and in statements and reports from international organizations.

So far, we have explored inclusion via a disability perspective; however, this concept does not solely refer to students with various impairments. As it has been primarily a special education endeavour, one might easily believe it only targets children with disabilities. Indeed, the driving force for inclusion has originated from the mainstream, from those traditionally marginalized and excluded. Presently, IE deals with diversity more generally.

As noted by Shaddock et al. (2009), if participation in the educational experience for any pupil becomes affected by issues related to impairments, gender, religion, culture, social status, background or any other reason, the best way to deal with it is not to create special educational facilities for such cases, but tailor mainstream teaching, structures, curricula, assessment procedures and attitudes to accommodate the needs of all students. In other words, inclusivity in education for special learners cannot be achieved in the absence of full commitment from instructors and other school staff, students, families, peers, community and governments. Administration also has a contribution to the realization of inclusivity, which is a matter of school planning that embeds policies, structures, practices, training and curricula design. Inclusive practices require major attitudinal and educational changes in the approach of children with SEN, which could be challenging.

The advantages of special education and expertise are not questionable; the point is that, according to Thousand and Villa (1995), they can be applied to children in both mainstream facilities and in segregate settings. In addition, IE is not just about enrolling the children, but also maximizing their participation in the classroom activities (Barton, 1997);

IE is not an end itself, but a mean to an end. Hence, it largely contributes to the creation of an inclusive society that insures and protects the rights of this group as an essential part of policy making. Inclusive education encourages change, which is not an assimilation process, but the transformation of deep structural barriers to its realization.

To summarize, *inclusion and participation* are vital to human dignity and to the exercise of human rights. In the education arena, this means enhancing the genuine equalization of opportunity. SEN offers teaching methods beneficial for all students and builds upon the

hypothesis of *human differences normality*, and on the fact that learning must meet the needs of the child, rather than the pupil fitted to the classroom experience.

The core of IE is that all students should learn together, if possible, and that education units should identify and adjust to the diversity of learners, providing ongoing assistance and services to accommodate these needs, building solidarity between CWD and their peers. Countries should commit to establishing inclusive-not special-schools.

### **2.3. Discrimination, prejudice and stigma**

Discrimination encompasses various forms of behaviour towards individuals as a result of their impairment, whether intentional or unintentional, caused by stigma. Goreczny et al. (2011) argued that negative attitudes towards CWD act as invisible obstacles as disabled persons pursue community involvement and resources targeted to achieve a good quality of life. Disability-based discrimination refers to the distinction, isolation or restriction of impaired children, which “*has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field*” (UNCPRD, Article 2). Hence, countries should strongly commit to ensure legal protection and assistance for the wellbeing of children with special needs.

Discrimination leads to poor education outcomes that destroy their self-esteem and interaction with the society, exposing them to further abuse and exclusion. One might conclude that discrimination against CWD is widely caused by shared attitudes, values and societal beliefs that are normally created knowingly or unknowingly.

On the other hand, *stigma* is highly destructive, affecting the efficiency of inclusive education for impaired children, and it seems to be present at all layers of the society. From a sociologic point of view, stigma has been explored by Goffman (1963), subsequently underlying the study of a myriad of adult illness experiences. As noted by Becker (1981, p.81), stigma is “*a characteristic of persons that is contrary to a norm of a social unit, where a “norm” is defined as a shared belief that a person ought to behave in a certain way at a certain time*”. According to Croker et al. (1993, p.505) “*stigmatized individuals possess or are believed to possess some attribute, or characteristic, that conveys a social identity that is devalued in a particular social context*”. Discrimination and stigma are parts of a vicious cycle. Stigma



triggers discriminatory attitudes against CWD that are often mirrored in acts of discrimination towards disabled children.

Sometimes, once physical adjustments of the educational structures are performed and impairment becomes “visible”, a common observable discriminatory reaction among teachers and peers arises. For instance, as documented by Hornstra et al. (2010), the mere label of *student with a learning disability* was enough to expose the children to the risk of stigmatization by mentors. A qualitative analysis by Denhart (2008) showed that many students were not willing to use their accommodation to avoid the risk of misunderstanding from the part of their professors and of stigma because of the *learning disability* label.

Children with disabilities are affected by their condition particularly in every aspect of life, being exposed to social rejection, poverty, isolation, ignorance, lack of proper education, services and assistance. The negative attitudes and opinions about the determinants of disability and the attached limitations are too often firmly rooted and difficult to scatter, particularly in the developing world. Disability is commonly misbelieved to be the result of past sins or bad luck, and can be considered contagious.

In terms of gender discrimination, disabled boys are favoured to impaired girls when it comes to family expenditure on education. Differences in opportunities based on gender depend on cultural, social and economic factors. Disabled girls are more exposed to security and safety issues, and more vulnerable to physical and sexual abuse, which can occur at home, in the educational setting, or on the way to school. Often considered an extra burden or cause of despair, particularly in low and middle income countries, they experience more frequent violation of fundamental rights. According to Rousso (2005) women and girls with disabilities have lower academic performances compared to male with various impairments or non-disabled female counterparts. Groce (1999) showed a 1% literacy rate for this group, relative to 3% for individuals with disabilities in general. Global statistics confirm gender inequalities (Nagata, 2003).

UNESCO data cited by Mantey (2014) reveals that only 2% of disabled children are enrolled, and girls are even more underserved. In addition, CWD are less likely to attend school because of discrimination and stigma, the most distressful forces affecting the development of this group. They are treated as second class citizens and are the most marginalized of all the world’s children. Traditional beliefs about the causes of disability, misunderstanding of the

dimensions of impairment and the lack of knowledge of CWD lead to their invisibility and exclusion within the education arena and the wider community.

Although the lack of official statistics makes challenging to calibrate the extent of children discrimination, it is commonly agreed that its impact is severe. Thus, excluded children are invisible to development initiatives, which means they are denied access to medical services and education, have no opportunities for a cultural or family life, cannot participate in decision-making and experience violent conducts, poverty and isolation. The issues are even worse for children suffering multiple forms of discrimination, especially girls. Worldwide, the Convention on the Rights of the Children (CRC) and the Convention on the Rights of Persons with Disabilities (CRDP) seek to remove all types of discrimination against this community. The CRDP has created the notion of *reasonable accommodation* that requires countries to operate the appropriate adjustments to ensure equal rights both for all individuals, as long as disabled persons do not impose a disproportionate burden (UNICEF, 2012). Non-discrimination does not necessarily mean that all children should be treated the same; it is allowed if it seeks to guarantee the fundamental rights (Santos Pais, 1999). The CRPD offers legal backup to this interpretation.

Given the alarming impact of discrimination, based on the findings so far and exploration of various terminologies, the researcher notes that this phenomenon against enrolled CWD can be limited or removed if the school human environment has a greater knowledge and understanding of impairment and promotes inclusive education. Generally, the community of disabled children is affected by discrimination mainly because of the lack of knowledge and experience of living closely with them. Attitudinal barriers are challenging to overcome, but within the right context, children can be more opened to inclusion than adults.

### **2.3. Legislation related to inclusive education in a global perspective**

Globally, one may note a large number of legislative pieces related to the education of students with SEN, arising from common efforts by governments and local communities to ensure the right of special learners to services that accommodate their needs, and guarantee statutory protection, such as the Education Act (1998), the Equal Status Act (2000) and Equality Act (2004), the Education (Welfare) Act (2000), the Education for Persons with Special Educational Needs Act (2004) and the Data Protection Acts (1988 and 2003). Mentors and administrative staff should be aware of the provisions of this legislation, and

develop/adopt policies for SEN at the school level, and a tailored educational plan for each student. However, the mere existence of legislation does not assure good practices in the educational system. In addition to the availability of specialized staff/trained teachers and other resources, community acceptance of the rights of children with SEN and schools' commitment to deliver appropriate services are essential to remove discrimination and achieve inclusivity in education.

## CHAPTER 3: LITERATURE REVIEW

### 3.1. General overview

Over the past years, considerable academic research documents the right of CWD to receive inclusive education and its effectiveness for special learners (*inter alia*, Ferguson, 1992; Lipsky and Gartner, 1997; Allan, 1999; Dyson and Forlin, 1999; Sailor, 2002; Peters, 2003; Mittler, 2003; MacArthur, 2009; Mitchell, 2010). International conventions such as the CRDP require all states to ensure inclusivity at all stages, motivated by a plethora of benefits.

A rising literature has evidenced that with proper assistance, CWD can achieve performance in an inclusive classroom setting. According to UNESCO (2008) report, the costs of IE and special schools were similar, but the results in inclusive facilities were better. Inclusion allows CWD to grow up within their family and social setting rather than within a distant unit. Inclusive education is based on the principle of accommodating all children, regardless of their condition. Simply having a child with a disability into a classroom without providing for his special needs is far from the act of full, equitable and inclusive education. IE means an active participation to the adjustment of traditional policy, culture and practice within the school. As noted by Seinfeld (2005), CWD educated alongside their colleagues have better chances of becoming productive adults and being included in their community. Research on human capital formation reveals an important loss of GDP in the emerging world because of the lack of education of individuals with disabilities and the resulting non-participation in the labour arena. World Health Organization (2011) study showed that this loss of income in Bangladesh was estimated at \$1.2 billion per annum or 1.7% of the country's GDP.

Despite considerable research on educating disabled children, scholars have adopted different perspectives of exploring the issue.

#### 3.1.1. Education and disability

A survey of 750 teachers and 400 parents from 75 states performed by Laurin-Bowie (2009) revealed that *Education for All* (EFA) is not an efficient approach for CWD, particularly for children with intellectual impairments. The author defined *inclusive education* as a process that requires positive and enabling conducts for inclusive, special training for teachers, flexible curriculum and assessment procedures, and a supportive school environment. The

findings of Laurin-Bowie (2009) analysis indicated the under-development of all these factors, and the result is *entrenched educational exclusion*.

An extensive global assessment of the status of inclusive education by Rieser (2012) highlighted that despite cases of good practice, there was a failure to include CWD in EFA programs and a general belief that such efforts were interrupted by the ramification of the international turmoil. New perspectives, of considering education a commodity in the highly competitive worldwide marketplace, are becoming popular, whereas inclusion advocates for collaboration and caring. The work of Forlin (2012) confirms this idea, despite the author's active implication in a successful state inclusion initiative in Hong Kong, and identifies an upward trend of private education in Asia.

As the existence of such education providers is grounded on a financial model, and their role is to ensure high academic performance, there is no incentive for them to meet the needs of learners with a particular condition, that can be expensive and daunting to the standards of examination, and consequently, to the results. Similarly, Slee (2011) research documented a strong nexus between the macro-economic approach of the World Bank (WB) and the IMF, and the rising of the neo-conservatism and consumerism, and the barriers affecting the development of inclusive education. However, the author argued that it is not too late to counter this tendency by acknowledging exclusion and committing to reverse the trend.

An analysis by UNESCO Bangkok (2009) of four Asia Pacific states reaffirmed variations in the definition and understanding of IE. In 2000, the government of Samoa commissioned a survey to identify all special learners and included a SEN curriculum at the National University of Samoa to enable primary school instructor graduate with a SEN specialty-an effort subsequently followed by the creation of six SEN departments in primary education settings. However, at the time of the UNESCO Bangkok research, 97% of schools had no type of SEN assistance, and those having such establishments were supported by resource centres. The broad definition of IE in Samoa was not in line with the practical evidenced by UNESCO review, one again showing that despite the change in words, practices on the ground improved in a small number of schools.

### 3.1.2. Inclusive Education for Disabled: A Challenge

In Thailand, UNESCO Bangkok (2009, p.77) indicated the same government commitment to ensure the right of CWD to education and many efforts to create “*an integrated system moving towards inclusion*”. The national legislation provides that all CWD have access to twelve years of free, basic education, despite its costs and complexity identified as main obstacles to progression. However, the education of teachers to meet the needs of special learners and the capacity of schools is lagging behind.

UNESCO Bangkok (2009) report sought to identify the causes of the slow progress in Asia towards CWD inclusion and highlighted that this group is still exposed to discrimination and stigma at almost all levels in terms of access to services, including education and health, and participation to community social life. Available statistics on the number of CWD enrolled confirm this finding. In parallel, there is rising recognition that a human-right based approach must be embraced by governments that seek to remove such issues. As many countries across the globe are at the beginning of this transition, the characteristics of the national legislation mirror uneven provisions. This shift from the traditional perspective on CWD to the inclusive alternative may require the adoption of a *twin track* approach, which assumes that the overall legislation recognizes, ensures and promotes their rights. According to Miles and Singal (2010), opportunities do exist globally to align inclusive education with EFA initiatives to craft a more coherent and sustainable strategy towards the educational needs of CWD.

Peters et al. (2005) stressed that inclusive education seems to be a concept differently understood by planners and developers, which is expressed in even more varied notions and practices by teachers and administrators. Hence, after identifying largely untested specifications of IE, and a lack of consumer confidence, the author argues for a model of *disability rights in education (DREM)*. The core notions and principles of IE envisioned by disabled individuals, as one of the main groups excluded from schooling are often lost in translation. The main challenge of planning IE within local contexts is to customize norms for CWD while maintaining general rules of educational rights included in the EFA frameworks. Peters et al. (2005) constructed a DREM based on the input of disabled individuals that seeks to offer a cross-cultural setting for assessing IE initiatives. While the model is focused on disability, this group includes the poor, girls and other marginalized communities. This does not mean that disability features prevail, but a framework centered on such needs may be relevant for other stigmatized clusters.

In the Arab World, Amr (2011) argued that inclusion was considered a luxury, and as providing separate education for CWD in small facilities. In the Balkan states, Mirosevic (2007) identified a slow move towards a more social model, replacing integration in the mainstream (where CWD are expected to accommodate) with inclusion (where barriers to special learning are removed).

World Vision (2007) report found many inefficiencies and drawbacks of the EFA Fast Track initiative (known as the Global Partnership for Education) in terms of addressing the special condition of CWD, which highlighted the need for a twin approach. Disability issues should be recognized as such and included in the general development agenda, and, in parallel, countries need to have a specific track around impairment specific problems.

This was envisaged as an addendum to IE more generally and not as a factor that would lead to a rise in separate special needs provision. According to Operti et al. (2009), EFA should focus on quality inclusion for all rather than on enrolment figures, and identified four areas of concern. First, IE is a phenomenon that should be perceived as presence, participation and achievement; second, there should be continuous efforts on finding the best way to manage diversity; third, all obstacles to learning and participation should be removed, and fourth, the governments should prioritize policies and initiatives towards learners with special needs, affected by stigma, exclusion or discrimination.

CWD are still struggling with educational exclusion, and present worrying drop-out rates, as teaching models, assessment procedures, and curricula are not tailored to accommodate their needs (UNESCO, 2009). A study by the World Bank (2007) highlighted that CWD in India are five times more likely to abandon school in rural areas compared to children from the lowest caste backgrounds. As outlined by the World Health Organization (WHO, 2012) analysis, the gap in primary completion between CWD and non-impaired children is large across all age brackets and statistically significant. These findings reinforce the belief that EFA and the attached initiatives of IE have not proved efficient in reaching CWD, as expected. Therefore, international conversation recognizes the need to retain some disability focus within the IE frameworks.

O' Gorman (2010) explored the inclusion process in Ireland, a state that has only in recent past engaged in inclusion efforts and evidenced that all instructors need specific training to accommodate the condition of CWD to remove marginalization and stigma, as the education

model was exclusionary at the time of the analysis. The rethink and reshape of the system would require a shift in the teaching strategy, where all students, irrespective of status, are provided with the same educational experience. One might add that the continuous exclusion of CWD means more reasons for embracing an impairment specific-approach, to complement (not replace) the public trust of an inclusive curricula and pedagogy to meet the needs of all learners.

In the light of the above-mentioned, a second track that targets a particular cluster of excluded children starts to gain popularity. This offers appropriate assistance, access, accommodation and programs including Braille, sign language, pictograms, alternative and refined communication, differentiation and other teaching/learning procedures to ensure quality education and appropriate classroom environment for CWD. Hence, effective instruction for inclusion must cover both tracks. Without accommodating for their condition, the education of CWD is doomed to fail (Peters et al., 2005).

Adjustments should include physical facilities such as ramps, customized desks, adaptive equipment such as letter boards or number lines, language and print adaptations, social facilities, *inter alia*, increased interaction opportunities and positive approach of impairment, and pedagogic fitting to accommodate all learners. Research has emphasized the connection between the education system and CBR and underlined the critical role of a twin-track approach of impaired children. CBR is an essential part of a complex, twin-track comprehensive strategy that is needed. No matter the strong training of the instructors and the inclusive school setting, if the disabled child is not supported by the family, is denied access to proper assistance, aid and equipment, or if the community and parents are not involved, then he will either non-enrol or leave school before completion (WHO, 2010). Although education is a fundamental human right, worldwide recognized to develop human capital, increase economic results and provide individuals with better opportunities and life choices, IE for most CWD remains elusive, despite sufficient examples of successful good practices that show its potential (Epstein, 2010). Diversity in the classroom environment is positive for all learns, as it improves the educational experience and the understanding and addressing of stereotypes.



### **3.2. Access to education for children with special needs in the emerging world**

The global target of universal access to primary education cannot be discussed without including children with disabilities, although a large number is denied this fundamental right, and its attached benefits, *inter alia*, labour opportunities, social and economic security, and full participation in the life of the community. According to UNESCO (2007), only a tenth of all impaired children are in school and of this number, half complete the primary education because many abandon courses after a short period, as the gains are minimal and do not justify the efforts required by this experience.

Unfortunately, large number of CWD remains invisible to local communities and schools because of stigma and marginalization that leads to exclusion and lack of access to fundamental life services. Official surveys in many regions of the world severely underestimate the dimensions of the CWD group, often suggesting statistics in the 1-3% corridor (Stubbs et al., 2013). Recent research by the World Bank (2011) noted that 6% of all children in developing nations are impaired and 15% of those over 15 years represent CWD, figures far exceeding local censuses. This substantial underreporting has had a major disturbing impact on government planning and on the EPA view of international agencies. Although an accurate estimate of CWD globally seems impossible, if one uses a conservative figure of 5% of all children, based on UN (2005) population data, there would be around 91 million of impaired children aged 0-14, over 10 million in the developed world and 81 million in the emerging countries (Stubbs et al., 2013). The total would reach 100 million if children in the 15-18 age brackets are included.

Global statistics are alarming and vary with the source, but evidence shows that the numbers of not-enrolled or excluded children is rising (Mantey, 2014). The gap in primary school attendance between disabled and non-disabled swings from 10% in India to 60% in Indonesia; for secondary school, the figures vary from 15% in Cambodia to 58% in Indonesia (Coe, 2013). Around 4 in 5 impaired children are in the developing world. For all age brackets, both moderate and severe disabilities are higher in low and middle income countries (LMIC) nations compared to developed states, reaching a peak in sub-Saharan Africa (EFA Global Monitoring Report, 2010). The magnitude of disabilities is often inaccurate and under-reported; for instance, a 2004 census in Sierra Leone identified only 3,300 children mentally impaired, while a detailed national survey in 2003 evidenced the real number ten times higher (EFA, 2010).

Figures for Malawi, Namibia, Zambia, and Zimbabwe revealed that between 24%-39% of CWD have never attended school, compared to 9%-18% of children without an impairment that have never been enrolled (Eide et al., 2003; Eide and Loeb, 2006; Stubbs et al., 2013). Filmer (2008) study of 14 low-income nations showed that CWD are among the most vulnerable groups, often being marginalized within their own family, school and local community. In cascade, social stigma and isolation of children with a degree of physical or mental impairment triggers poor health and education outcomes.

There is no global dataset calibrating the effect of disability on enrolment. An analysis by the World Bank (2007, p.16) showed that 40% of CWD in India have never been to school, compared to 8%-10% of children in Scheduled Tribes or Castes. In Malawi and Tanzania, having a disability doubles the likelihood of non-enrolment. In Bulgaria and Romania, the overall enrolment rates exceeded 90%, but were only 58% for CWD, with noticeable differences in school attendance according to the type of disability. UNESCO (2010, p. 181) report noted that in Burkina Faso, just 10% of children with a hearing and speech deficiency enrolled in 2006, compared to over 45% of children without a disability; of these, 22% were visually impaired and 38% physically impaired students attended school. Recent analyses pointed out that the magnitude of non-attendance for children with disability is a much bigger concern that needs to be addressed and included in national education planning and teacher' instruction. In Bhutan, 21% of children aged 2-9 was found to have some impairment in a functional area; mild disability stood at 19%, with a large share presented an intellectual impairment (Bhutan National Statistics Bureau, 2012, p.1).

Statistics are important not least so that governments can distribute a proper share of resources to certain areas of interest. However, some studies note that getting these numbers can be a costly and time-consuming effort (Peters, 2003, 2004). Instead, what is essential is to identify disabled children as early as possible, include them in appropriate educational programs, and collaborate with their families and local communities to remove stereotypical attitudes (Peters, 2003; WHO, 2011). In short, global research has emphasized that a large number of children with various impairments are massively excluded and denied educational access to primary and secondary enrolment.

All over Africa, families with CWD and disabled students are marginalized and stigmatized (Hasan, 2006). Too often, the dominant belief is that children' impairments are caused by witchcraft and other superstitions, which, combined with poverty, leads to low enrolment

rates. A recent work by D'Aiglepierre (2012) underlined these realities and their effects on primary school attendance of CWD. Despite the lack of relevant statistics, educational units can change the context if committed to inclusion. For example, in Madagascar, an IE initiative for impaired children has been halted because of the political tensions. However, UNICEF has started a large mapping exercise in 3,400 schools, with children describing their community and identifying unenrolled peers (Stubbs et al., 2013). The parents of the latter are visited by instructors to help them understand the benefits of school attendance. Over 400 teachers have been already prepared to accommodate the needs of this special group of students. In 2013, 73% of all children were enrolled in Madagascar.

World Bank (2007) indicated a powerful nexus between disability and non-enrolment, with a stronger impact compared to gender or socio-economic condition. Filmer (2008) noted that in Malawi and Tanzania, the existence of a disability doubles the likelihood of child non-enrolment. Furthermore, Robson and Evans (2005) study found that millions of CWD are not included in educational planning because of the lack of data and knowledge on how to integrate this group into national implementation plans. This is a phenomenon particularly severe in rural regions and poor urban areas (UNICEF, 1999). The context is even worse for some groups; children of the nomadic, ethnic, and linguistic communities are more exposed to not receiving an education, even compared to CWD in the broader social arena.

For instance, in West Africa, disabled children are exposed to extreme poverty, marginalization and discrimination, widely denied their right to education and access to protection services. Stigmatization is a widespread phenomenon, largely mismanaged by the education providers, parents, peers, religious leaders and governments. Thereby, Plan West Africa<sup>1</sup> commissioned a complex literature review and research to explore islands of good practices in the region and highlight major issues in four countries, namely Guinea, Niger, Sierra Leone, and Togo.

Although all Governments in West Africa are working to assist CWD via ratifications of relevant UN conventions and some adopted inclusive policies, most have not yet implemented the legislation on the rights of individuals with disabilities. Thus, the inclusion and development of impaired children in the region is lag behind, and most are still excluded from formal education. Statistics on the matter are generally unreliable because of many reasons

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<sup>1</sup> Plan International works in 13 countries in West Africa, giving children better access to quality health and education and lifting them out of poverty.

*inter alia*, low birth registration of CWD, discrimination, stigma, or the drawbacks in data collection process. Coe (2013) findings revealed massive reluctance at all levels towards including children with disabilities in mainstream schools, from mentors, administrators, parents, colleagues, community, and education leaders. In addition, the physical structure of schools, curricula and instructors training are vital factors to the effective inclusion of children with special needs, but they are not enough to produce a substantial effect, unless positive attitudes regarding CWD are widespread. Research has showed many efforts are still needed to include CWD into education, remove discrimination and make protection work in West Africa a reality. Regional governments must guarantee the rights of impaired children and particularly the implementation of UN provisions on equal opportunities for individuals with disabilities. Actions to limit and remove stigma and discrimination against CWD must become a priority and eliminate the drivers of exclusion from the education and protection systems. IE practices must be common and supplied with adequate resources. Families with CWD must be advised and assisted to enrol their children. West Africa also needs to show better awareness of the right to protection of this group, and work to implement the existing protection measures.

The legal arrangements signed by all West African states have yet to be transposed into practice and development projects including the required financial and human resources to meet obligations within various laws and conventions. Initiatives to facilitate social inclusion of children with special needs in the four countries subjected to analysis were identified to be delegated mainly to non-state players, international non-governmental organizations, and to the civil society entities. As indicated by the findings of the study, Togo is making significant progress, primary due to strong government commitment to remove discrimination against CWD and support inclusive education, and to larger-scale CBR projects. Some progress has also been noted in Sierra Leone and Niger, where the crafting of an IE strategy has been essential in transposing government engagement into action. However, both countries struggle with a lack of proper infrastructure and traditional negative beliefs about disability, major obstacles to the social inclusion of CWD.

The current lack of statistics impedes efforts to increase enrolment rates of children with disabilities. Despite the scarcity of data, it is commonly known that in most parts of the world (other than North America and the EU) large cohorts of CWD are not attending school, or if they are, they are not being provided serviced accommodated to their needs. This raises a

pertinent question: what are the most efficient methods to educate teachers for the task of offering quality IE and removing discrimination for disabled children?

### **3.3.Barriers to inclusive education for special learners worldwide**

Considerable academic research documents the factors hindering inclusive education, *inter alia*, stigma, the lack of time, difficulty in organizing individualized teaching, inadequate training of mentors, unavailability of resources, no school assistance, perception that accommodating the needs of special learners compromises the learning of others, failure to prepare CWD for the real world, the attitude of the society, and parental involvement (Shaddock, 2006; Forlin et al., 2009; Sharma et al., 2011; Mantey, 2014).

Discriminatory legislation is one of the major factors, as it often fails to recognize or rules out CWD from national education planning. To illustrate, some states have laws that indicate certain such groups as uneducable; in some cases, responsibility for access to education is considered the responsibility of ministries other than education, which further deepens the segregation and marginalization of CWD. Impaired children are often refused enrolment, as the family has low expectations. In case they do start going to school, examples of abandon are frequent, because of stigma, isolation and inappropriate treatment from instructors, parents and peers, rather than intellectual abilities.

Globally, most schooling units have no physical facilities to meet the needs of special education for CWD and lack the hygiene and sanitation conditions, communication systems, logistics and transportation to assist class participation of this group. Families with several children often favour those without disabilities in terms of providing books or school uniforms, and assume that special education is less relevant. Even where a large number of CDW complete primary education, the share accessing the next level is significantly lower relative to their non-impaired colleagues, mainly because of the lack of resources, teacher/parental assistance, awareness of the role of special education to the child' future development.

In addition, matters are worsened by educational systems depending on standardized exams that make it impossible for CDW to participate, as a result of inaccessible administration and grading. Furthermore, if tertiary education is available, students in this cluster have limited study opportunities and specializations. In Ireland, for example, the academic community restricts the enrolment in the full array of courses for young individuals with disabilities

(Shevlin et al., 2002). Another research, by Groce (2004), highlights that in China, special learners are not permitted to major in most sciences, because of a sense of *degree waste* on a person who will never be an active presence in the domain.

### **3.4. Quality of educational services to disabled children: global perspectives**

The attitude of mentors towards disabled students and their special education requirements, and the need to deliver IE services in mainstream facilities have been internationally understood as essential to achieve inclusive education.

#### **3.4.1. Teachers' attitudes towards disability and inclusivity in education**

Disability awareness, training, and education are essential requirements for all professionals. Instructors need to possess a complete understanding of the dimensions of particular impairments for the learning experience when working with special learners. As mentioned by Lodge et al. (2004), education providers often fail to identify, recognize or understand a child's disability.

Globally, recent research has indicated significant efforts from teachers, public, and communities to express positive attitudes towards children affected by various impairments. However, at a closer look, specific behaviours, if explored, may be exposed as negative (Hernandez et al., 2000). For instance, although theoretically instructors agree with inclusion projects for this group, practically, in the classroom they are only minimally committed and reserved (Scruggs et al., 1996; Genesis, 2007).

The position of teachers towards disabled children has a major impact on the overall educational experience (Kenny et al., 2000; Lodge et al., 2004; Genesi, 2007; Stubbs et al., 2013). Although legal provisions state that CWD may participate in regular classrooms, these do not guarantee acceptance or fear treatment from instructors or peers (Marks, 1997). Hence, schools need to eliminate pervasive societal attitudes of rejection and discrimination against these vulnerable groups. The literature spotlights that inclusion could fail to deliver the expected results for special learners because the prejudice remains (Cook et al., 2000). The stereotypical beliefs about CWD can strongly impede the development of children who are simultaneously exposed to both blatant and subtle conversation that affects their integrity as

students (Gleason, 1991; Derman-Sparks, 1993; Genesi, 2007). Many will never achieve their full potential because of their discrimination and marginalization.

The self-esteem of the mentor is an essential factor in the perception of self-efficacy; in other words, if the instructor has a high/low sense of estimate, he/she can influence other teachers', and ultimately the quality of inclusive education. Thus, if the positive attitude of the educators drives, among others, the success of the IE experience, a negative attitude translates into unsuccessful practice of IE, aggravating further the position of disabled children in school. This is confirmed by the findings of Allodi (2000), who explored the nexus between psychological matters and the teachers' approach of disability and revealed that attitudes of the latter influence the overall learning environment of disabled pupils, re-affirming that children achieve superior results in an educational setting absent of discrimination, exclusion and negativity.

Moreover, the teacher is regarded as a role model endorsing the true values of education; thus, learners imitate that behaviour. Furthermore, mentors have a vital contribution to the management of impaired children education. Donald et al. (2001) asserted that events at home and relationships with peers can influence learners' reaction in schools, with substantial impact on teaching practices. Similarly, Berk (2001) claimed that the self-efficacy and educational performance of CWD are in the first stance driven by the family setting, as believes and attitudes within the latter have a direct major bearing on the development of disabled children.

Children are more likely to enjoy IE if the mentor understands his pivotal role in the management and support of education for the disabled. Therefore, the achievement of IE depends on the interactions between teachers and school administrators and curriculum adjusted in a way to involve the student. Despite the benefits of inclusion, some studies highlight the difficulty for secondary school establishments to accommodate the needs of special learners within a mainstream class (Wishart and Manning, 1996; Llewellyn, 2000; Hemmingson and Borell, 2002). One reason is that staff often believed they lack the necessary skills or the time needed for the adaptation of curricula to meet the requirements of children with SEN. Other authors (e.g. Sebba and Sachdev, 1997; Butler, et al., 2001) identified no substantial impact of mainstream education on the performance of disabled children. The positive effects of inclusivity mainly include improved social interplays, peer role models, better academic results, higher expectations, tighter collaboration among school

staff and higher integration of families with disabled children into the local community (MacArthur et al., 2005; De Graaf et al., 2011).

A study performed by Special Olympics (2004) of 4000 middle school students from Japan investigated their opinions and behaviour towards peers affected by an intellectual impairment and highlighted an overall underestimation of the capabilities of the latter, and interaction hesitations from the former. However, they were willing to accept students with intellectual disabilities as their colleagues.

Norins-Bardon et al. (2005) offered a complementary analysis to identify the differences in attitude between the U.S. and Japan students and documented a higher willingness of American students to interact with peers affected by disabilities relative to their Japanese peers. In addition, the authors evidenced a better perception of North American youth of CWD abilities as the results of their higher exposure to students with various impairments. Despite large misperceptions in both states, all respondents were open to higher inclusion of learners with special needs.

The findings were in stark contrast with Siperstein et al (2003) survey of adults' perception of individuals with intellectual disabilities, which covered 10 states (Japan, the Republic of Ireland, Northern Ireland, the United States, Brazil, China, Egypt, Germany, Nigeria and Russia). Adults were discovered to held more misbeliefs about these groups; for instance, 60% of adult Japanese argued that such communities should be educated separately from non-disabled pupils. The fact that young individuals in both states understood the value of their peers and were more willing to accept greater inclusion mirrors an opportunity for changing attitudes.

Rao (2004) provides an interesting review of the extant literature exploring the behaviour of teachers and university staff towards students mentally or physically impaired. At the time, the literature on the nexus between attitudes of staff and the willingness to accommodate the needs of special learners found no clear connections between the two, requiring further research avenues. Rao (2004) findings showed that instructors should be better informed about students with disabilities to change their attitude, a factor that could be vital to the success or failure of the educational experience for this special group.

The analysis of Rohland et al. (2003) presented the report of a collaborative training project in the U.S. seeking to help faculty and administrators at the University of Rhode Island create a



more inclusive and friendly learning setting for students with disabilities. The scope of the program was to train at least one faculty member in each academic department and one administrator to become a disability resource mentor to peers and thus, create a connection to Disability services. The final goal was to build a multi-institutional network of such assistive units throughout the State. Mentors should learn to explore attitudes and actively engage in the identification of special learners, so that their needs would be properly accommodated. One of the assumptions underlying the projects was that participants respected one another and hence, could be essential in the process of reshaping attitudes towards individuals with disabilities. The long-term effects of the training session included university policy redesign and better communication.

Lewis et al. (2006) noted that overall, impaired students were experiencing both negative and positive treatment from their teachers, administrators, peers, family and community. The main conclusion of their analysis was the importance CWD attach to being approached sensitively, listened and having their “experiences treated as authentic and credible” (Lewis et al, 2006, p.1855).

Practical evidences and the extant literature highlight significant discrepancies between the international understandings of inclusion, as reflected in global policies, and the national/local teacher education practices and norms (European Training Foundation, 2007). Schaeffer (2009) review of such definitions and specifications in Asia documented major differences between theory and practice in teacher education institutions. Such findings were later reaffirmed by Forgacs (2012). Similarly, Ehsan (2011) indicated a medical deficit model of disability in Bangladesh blended with features of inclusion and suggestions for a separate training entity to provide special education to CWD. MOET (2009) research on Vietnam identified a top down approach of inclusion, considered to include special needs and disability-despite the wording change, the interpretations remain the same. Singal (2005) explored the Indian major studies on training for inclusive education and noted recurring focus on theoretical constructs with no practical applications. Moreover, instructor education covered only a single type of disability, which meant that although teachers were opened to higher inclusion of special learners in the classroom, they did not possess the required skills to accommodate their needs effectively. Forgacs (2012) noted that, where IE was explicitly referred to within teacher education organizations, it covered only disability and special needs. In other words, general instructor education (with the exception of separate training on inclusion) was primarily focused on the needs of normal students. Both Schaeffer (2009) and

Forgacs (2012) findings highlighted that rigidity prevailing in schools, classrooms and in the overall educational experience, severely limiting the notion of inclusion. This is found to be a common issue with all pre-service teacher education in the under-developed nations, where the dynamic interplay between college-based learning and its practical application is the exception, and not the rule (Schwille et al., 2007). This creates a major discrepancy between theory and the actual teaching practice, and provides little more than a repetition of secondary education, but times more expensive (Mattson, 2006). For instance, in Botswana, despite a clear inclusion policy by the government, the understanding of IE is limited to special and integrated education (Chhabra et al., 2010).

### **3.4.2. Teacher preparedness to accommodate disabled learners**

The training of instructors to commit to inclusive education is a recurrent topic in the extant literature (Wapling, 2016). Ahsan et al. (2012) argued that in order for IE to work, teachers should be prepared to accommodate the needs of all learners and promote positive attitudes towards inclusion. It is important to note that because IE is a relatively new concept, there is no international agreed understanding or approach. Therefore, many primary educators in LMIC, for instance, have no training or experience with instructing special learners. In these parts of the world, the teaching workforce includes traditional instructors of mainstream classes and educators focused on special needs pupils. Many do not have the practical or theoretical knowledge to provide inclusive education (Donohue and Bornman, 2015). This lack of skills of those responsible for the delivery of IE is putting high pressure on teachers and leads to major concern about the practice on the ground of inclusion (Emam and Mohamed, 2011; Hettiarachchi and Das, 2014; Donohue and Bornman, 2015).

Various studies showed the importance of this fact, as more experienced instructors are predisposed to be less positive about inclusive relative to newly qualified staff, younger people more opened to change (Moburg and Savolainen, 2003; de Boer et al., 2010; Emam and Mohamed, 2011; Muwana and Ostrosky, 2014). Although training does improve the behaviour of teachers towards special learners, some argue that the current content of courses fails to provide the relevant practical skills (Emam and Mohamed, 2011; Hettiarachchi and Das, 2014).

A survey by Nketsia & Salovita (2013) in Ghana of final year student mentors highlighted that only 1/3 felt confident about accommodating the needs of special learners, despite the

fact that pre-service training encompasses IE and the general understanding was high. Muwana and Ostrosky (2014) study revealed that although tutors largely supported the principle of IE, the vast majority stated that CWD should be assisted by specialists, as the overall teaching experience requires substantial changes to mainstream practices. Pre-service training is highly relevant to ensuring teachers' positive attitudes and beliefs in their abilities to meet the needs of CWD.

Some authors note that although at the beginning attitudes are generally positive, during courses the enthusiasm diminishes (Oswald and Swart, 2011; Muwana and Ostrosky, 2014; Wapling, 2016). It is a well-documented fact that mentors having a special education module in their training are much more likely to maintain a positive approach towards IE and a better capacity to adapt classroom practices to accommodate all students (Hettiarachchi and Das, 2014; Muwana and Ostrosky, 2014; Wapling, 2016).

A large literature explores training experiences, as there is a strong nexus between self-efficacy and tutors' perception of inclusion (Miles and Singal, 2009; de Boer et al., 2010; Emam and Mohamed, 2011). Arbeiter and Hartley (2002) study evidenced that mentors with negative attitudes towards integration were less committed to accommodate the needs of impaired children. If educators are exposed to CWD in the pre-service training, during the teaching experience they will be more likely to display positive approaches of inclusion (Donohue and Bornman, 2015).

Although theoretically, inclusive classes will increase the social acceptance of students with various impairments by peers and mentors, improve social justice and reduce stigma, this is not always the case in practice (Rydstrom, 2010). As social marginalization can have severe consequences in the long run, particularly affecting the mental health and academic performance of CWD, inclusion should be managed with extreme attention (De Boer et al., 2012). If disabled children are to be provided with equal treatment as their colleagues, stereotypes and negative attitudes by both educators and peers must be changed, otherwise social segregation is simply preserved in the way special learners are treated. Instructors can, consciously or not, discriminate and perpetuate social exclusion by the way they draw attention to CWD, by their behaviour of expectation they have about their capabilities (Singal, 2008; Rydstrom, 2010; Wapling, 2016). Many islands of good practices across the world have proved the efficiency and social benefits of inclusive programs; however, one must understand the major determinants of positions towards children mentally or physically impaired. Boer et al. (2012) documented four essential factors that influence the behaviour of

non-disabled students in relation to their disabled colleagues, namely gender, age, experience, and knowledge.

All these studies seek to point out it is essential that IE focuses on the attitudes of educators, administrators, student fellows and family towards CWD prior to their enrolment. One of the key aspects is ensuring an adequate collection of opportunities to explore and understand impairments, the needs of special students, and importance of diversity within a positive right-based learning environment.

In general, despite positive teacher attitudes towards inclusion, there is overwhelming concern among academics that in practice, they do not possess the necessary skills to include children with disabilities in the mainstream educational experience (Moberg and Savolainen, 2003; De Boer et al., 2010; Muwana and Ostrosky, 2014). One of the aggravating factors is the prevailing pedagogy, the predisposition of mentors to use a didactic approach to the teaching practice (Arbeiter and Hartley, 2002). IE assumes that instructors apply a child-focused strategy, identify (where the case) and understand the needs of special learners and adjust the delivery of curriculum. A study in the context of Uganda by Arbeiter and Hartley (2002) highlighted a series of actions taken by teachers to create an inclusive classroom environment such as giving individual attention, grouping, and bringing children with hearing deficiencies at the front, sign language, commonly noted in practice.

The findings of Singal (2008) suggested that although in India some tutors did apply inclusion strategies, for instance peer-mentors (pairing a disabled with a non-disabled student), the general belief was that teachers are not vitally important in promoting the inclusion of CWD in the mainstream educational experience, but rather this was the responsibility of specialized staff or family. Although special learners were included in regular classes, they were not actually a part of the learning session. Global evidences suggest that good practice in IE should consider an array of factors. For instance, in Australia key strategies are focused on in-class assistance. Overall, school level efforts accommodate the needs of special learners include the adjustment of structures, policies, culture and teaching approaches, funding support and equal learning opportunities for all children. The changing of perspectives at the in-class level involves the differentiation of the curricula/introduction of alternative curricula, universal design, use of assistive technologies, tailored planning via the individual education plan, and quality teaching for all pupils. However, global statistics on the impact of these islands of good practice on the academic performance of impaired children is largely missing.

### 3.5. Summary

The review of the scholarly analyses to the purpose of my dissertation indicated differences across countries in the approach of inclusive education, based on domestic interpretations of the path to ensuring *education for all*. The extant literature highlights significant international and local efforts to reduce marginalization, alienation, and discrimination against special learners *via* inclusive education. Moreover, considerable academic studies identify IE as the most efficient means to remove stigma and narrow the gap of inequalities in the delivery of education worldwide.

In other words, IE helps create a unified society, which disapproves on the practice of preferential treatment of some cohorts based on their condition and background in the detriment of others. Academics also underlined the importance of the teachers' role in the implementation of any education policy. Their abilities to adjust, alter, and reshape the learning environment to accommodate the needs of impaired children, in collaboration with other stakeholders such as parents, siblings, school peers or other administrative staff, are having a positive impact on the educational journey of disabled students and strengthen the delivery of quality services.

Children physically challenged should be assisted by people close to them such as parents, educators, and school mates to gradually overcome difficulties in performing a given task in the daily education routine. Furthermore, educational materials and physical adjustments should be provided to impaired children based on fair distribution and equity.

After presenting the global perspectives on IE as a mean to efficiently remove discrimination and offer disabled children equal opportunities as their non-disabled peers, I will turn my attention to the Ghanaian inclusive education arena.

## **CHAPTER 4: ACCESSIBILITY TO INCLUSIVE EDUCATION FOR DISABLED CHILDREN IN GHANA**

### **5.1. Introduction**

The international community increasingly recognizes the need to focus on children with disabilities within global efforts targeted at poverty alleviation. Although education has been an essential component of this endeavour, the particular learning needs of impaired students have been often been neglected by domestic policies and programs, especially in the context of the developing world.

Available statistics show that over 80% of the population affected by some form of disability is living in the global south (WHO and World Bank, 2011). During 2001-2004, the disability rate in Ghana was nearly 13% (WHO and World Bank, 2011), or around 27 million. UNICEF (2015) data also indicates that 98% of disabled children in the area are not-enrolled. A recent analysis underlined that between 10% and 19.9% (around half million) of primary school age children in Ghana do not attend school, making this country one of the regions with the highest non-enrolment rates (UNESCO-UIS, 2015 cited by Nketsia, 2017, p. 54). Over one quarter of non-enrolled children in the 6-14 age brackets live with at least one known form of disability, and most of them are excluded from mainstream education units or have the lowest literacy rates (Ametepee and Anastasiou, 2015).

To gain a nuanced appreciation and a deeper understanding of young disabled people in Ghana, the present dissertation draws on the extant literature on CWDs in this country to shed light of their educational journeys and dominant perceptions of impairment. The research emphasises the barriers affecting the access to education of this group and the quality of the educational act provided by the system, the attached challenges and national efforts seeking to ensure inclusivity for all students. Although school enrolment has been widely recognized as vital to leading a better life, unequal educational opportunities are a major cause for the wide gap between disabled children and their non-disabled peers. Going one step forward, while the huge majority of the Ghanaian population is aware of the role of education in accessing employment, this is not translating into reality, as young disabled adults are exposed to both physical and attitudinal factors that restrict their chances of economic and social participation in the near community (Nketsia, 2017). Therefore, the policy arena needs to come up with

systematic changes to enable young impaired individuals take their rightful place in the mainstream society (Singhal et al., 2015).

## **5.2. Setting the stage: Government of Ghana Inclusive Education policy**

The major goal of the Ghanaian government IE policy is to create an adequate learning environment for disabled children to succeed in school and reach their full potential to become productive citizens. Access to education and quality teaching for impaired students are pivotal to GOG policy (MOE, 2003); as cardinal issues of the UNESCO inclusive policy, these two objectives have been at the core of national education policy programs.

IE policy is not a new development in the Ghanaian education arena, but can be traced back to the Accelerated Development Plan (ADP) of 1951, which made basic primary education accessible to all children, irrespective of their condition. Since that, the government has created a myriad of acts and frameworks to accommodate the educational needs of all Ghanaian students. This plethora of legal documents (i.e. SEN Policy Framework 2005; Persons with Disabilities Act (PDA) 2006, the Disability Act 2006; the Education Act, 2007) reiterate the need for the Ghanaian children, particularly those disabled and coming from disadvantaged backgrounds, to enjoy equal educational rights and quality services without any discrimination. The conceptualization of disability in policy frameworks has a major impact on the estimates of disability prevalence and the types of educational programs available for disabled individuals.

Although the PDA carries a strong message to parents, instructors, and authorities about the role of IE for impaired students, its implementation is not satisfying. Practical evidences reveal that since that enactment of the PDA in 2006, CWDs have not been offered major improvements in their educational and social life. It is still challenging for disabled children to access public schools, free and quality healthcare services, and accessible transport (Kuyini, 2013). Furthermore, mainstream education does not accommodate their learning difficulties (Kuyini and Mangope, 2011; Kuyini, 2013).

The Ghanaian Government has made extensive efforts to ensure inclusive education for all students. In 2003, the GOG launched a pilot program for IE in two of the ten regions of Ghana, currently extended to eight regions of the country. Other major initiatives include the FCUBE, targeted at delivering inclusive education to all children since 1992. Furthermore, various education policies have been crafted to ensure the access of disabled children and

other disadvantaged cohorts within the social community to formal education, such as the Capital Grant (CG) and Ghana School Feeding Programme (GSFP) (Casely-Hayford et al., 2011). These acts seek to improve current educational policies, increase enrolment and school retention for vulnerable children at risk of dropping out school, and provide free food for them while in school.

The Ghanaian Government offers free learning materials, school uniforms, and technical support for children within disadvantaged communities, with the goal of eliminating schools under trees in most rural and semi-urban areas (Casely-Hayford et al., 2011).

In mainstream education units, mentors are encouraged to tailor curricula and pedagogical practices to accommodate the special learning needs of CDWs. They are recommended to adopt the National Literacy Accelerated Program (NALAP) suggestions for inclusive education, which states that effective teaching and course content understanding occurs if learners are encouraged to participate in group work, activity-based teaching, all in their mother tongue (Casely-Hayford et al., 2011; Kuyini, 2013).

However, Kuyini (2013) research findings highlight that only a handful of instructors get training opportunities via NALAP and other inclusive teaching approaches. Despite all national efforts, it is still difficult for disabled children to access formal education and complete compulsory basic classes. Furthermore, repetition and enrolment exit among impaired students are severe and prevalent in the three northern regions of the country, particularly among young girls (Kuyini, 2013).

One possible explanation is that CDWs cannot understand the course content. One of the major issues for the Ghanaian education arena is the rising number of children with learning difficulties at the basic school level, a category at high risk of abandoning school prior to the cycle completion (Kuyini and Abosi, 2011). Therefore, practical evidences indicate that the government is unlikely to achieve inclusive education without, *inter alia*, equipping instructors with the competence in adaptive teaching to accommodate SEN students in mainstream classrooms.

### **5.3. Disability in Ghana: conceptualization and underlying models**

A deeper examination of the extant literature on *disability* reveals the absence of a unique understanding of the concept. Most studies engaged in competitive debates, approaching disability from a different angle.



Thus, disability can be defined based on various conceptual frameworks, such as the *social model*, the *medical/individual model*, and the WHO's *International Classification of Functioning, Disability and Health (ICF) model*.

The *medical model* describes disability as a personal condition driven by various impairments, health problems, or personal trauma that must be addressed by professionals (Oliver, 2013). This paradigm positions impairment, learning difficulties and deficiency within CWDs rather than in the school environment, culture, curricula or pedagogical approaches (Booth and Dyssegaard, 2008). According to this view, mentors believe that children identified as having some form of disability or SEN are different, and thus, must be provided education services in segregated, special units.

By contrast, the *social model* considers that disability is a socially-rooted issue driven entirely by oppressive social barriers against individuals mentally or physically impaired within the community. The lives of disabled people can be improved by advancing the common interest of such cohorts and their fundamental civil rights to education, medical services, etc.

All UNICEF work is based on the *social model* of approaching disability, which explains the latter as the outcome of the interplay between an individual's impairment and the surrounding social/cultural/political environment. According to the model, disability is a societal issue and the person affected is seen as a victim of social prejudice. Therefore, disability is considered a socio-political matter, whereby the attitudinal and institutional obstacles that are inherently present within the community discriminate and exclude mentally or physically impaired people. The social model of disability emerged from a refined understanding of the barriers to the participation of impaired individuals in the community decision making, and as a critique to the medical model. It states that disability is not a product of bodily pathology but of specific social structures (Anastasiou and Kauffman, 2013), generated by systematic exclusion embedded into the community's nature.

What is essential about this model is that it destabilizes the location of the determinants of disability, from the person to society. It treats the condition of disability as a collective responsibility of the community rather than of the individual. The academic streams defending this model stress that disability arises from the human environment and argue that the social settings can influence the level of disability observed (Llewellyn and Hogan, 2000).

Opposed to the medical model, the social model links the society requirements with whether a particular physical or mental condition becomes a handicap or not. According to Michailakis

(2003), all the negativity experienced by impaired individuals is not caused by biological or psychological factors, but is culturally, socially and economically constructed. In addition, much of the restrictions inflicted upon disabled persons are neither natural nor inevitable outcomes of their state, but rather the consequences of a poor social policy or of the failure of social actors to manage particular human conditions. Therefore, disability could be seen as a form of oppression by social and institutional entities that malfunction in terms of dealing with various physical, emotional, and intellectual differences.

Research has documented that impaired individuals consider they are marginalized by the attitude of the community more than by their loss of function (Llewellyn and Hogan, 2000; Mamah, 2016). Avoke (2002) also underlined that social barriers are the ones creating disability, and that difficulties faced by impaired persons are driven by discrimination and stigma, rather than the impairment *per se*. Generally, the social model connects disability to “*all the things that impose restrictions on disabled people; ranging from individual prejudices to institutional discrimination, from inaccessible public buildings to unusable transport systems, from segregated education to excluding work arrangements, and so on*” (Avoke, 2002 p.772). The critics of the social model argue that by seeking to deliberately oppose the main ideas of the medical paradigm of disability, this approach had ignored the “*corporeality of painful and problematic mind–bodies*” (Holt, 2004 cited in Mamah, 2016, p. 22).

The ICF/WHO or bio-psycho-social model seeks to remove the limitations of the two mentioned frameworks by exploring disability as a dynamic interplay between and impaired individuals the contextual environmental and personal settings (Nketsia, 2017). This paradigm, broadly used by the United Nations and other global entities, does not attribute disability solely to the affected person, but also includes the relationships between students, the learning arena and the curriculum (WHO and World Bank, 2011; UNICEF, 2013).

Although existing programs on inclusive education in Ghana have been built upon the WHO model (MOE, 2015), research has documented that the medical model is quite frequent in many policy notes related to IE (Anthony, 2011; Lamptey et al., 2015), thus leading to limited improvement in the quality of educational services delivered to disabled students. The extent literature indicates large number of segregated special schools for SEN children with specific condition, such as visual or hearing impairments and mentally/ emotionally disabled (Avoke, 2001; Anthony, 2011; MOE, 2015).

However, with the paradigm shift to embrace the social model over the past decades it has become obvious that an inclusive, barrier-free education arena, from basic to higher education-is the only way to remove most of the obstacles CWDs are exposed to, from enrolling to being delivered quality education, as well as participation on an equal basis with their non-disabled peers.

Therefore, the social model is gaining gradual popularity within the context of Ghana, a country which understands that the policy arena, official institutions, and state organizations are pivotal in the emergence of structures struggling to remove barriers for impaired persons. Ghana's commitment to ensuring fair chances to a decent life for disabled individuals is mirrored in the various policy adjustments over the recent years. For illustrative purposes, to indicate only a few, the enactment of the Disability Act (Act 715), allocation of 3% of District Assemblies Common Fund to the community of disabled, and inclusive education (Mamah, 2016). Non-governmental actors and civic society entities are also advocates of change in the societal attitudes towards disability.

#### **5.4. Overview of disability magnitude in Ghana**

The construct of *learning difficulties* is relatively new among African educators, although some similar phrases such as slow learners are not (Abosi, 2007; Aro et al., 2011). The community of African academics in the area of special and inclusive education has not provided a clear definition of learning disabilities, only local terminologies describing children who exhibit symptoms of such condition, irrespective of its origins (Julie and Peter, 2005; Kuyini and Abosi, 2014). In addition to the biological and psychological determinants of learning difficulties, school-related aspects such as pedagogy, teacher factors, culture and language of instruction, family-related factors, the system characteristics, discrimination and isolation are another potential cause.

Impaired Ghanaian children are one of the largest vulnerable categories; many come from poor families, receive below par education and limited medical services, and a large share has been reported to have difficulties feeding themselves (Kassah, 2008; Singhal et al., 2015). As adults, they are provided with limited employment opportunities and are often denied any participation in decision-making regarding personal matters.

Considering the right to education of this group, Morley and Croft (2011) highlighted that in most sub-Saharan states, disability at least doubles the likelihood of non-enrolment, and children who do attend classes are exposed to rising risks of school exit prior to completing basic education. The context for impaired children in Ghana is not substantially different from many sub-Saharan countries. According to Kassah (2008) findings, the reason for most CWDs dropping school is discrimination and the lack of monetary resources to pay the fees, which results in more children bagging on the streets as a means of livelihood. Tuakli-Wosornu and Haig (2014) also documented that when compared to non-disabled peers, CWDs have higher rates of under education, in part driven by instructors' lack of training and competence in working with SEN students.

As indicated by a 2013 report of the Ghana Statistical Service (GSS), numbers from the 2010 Population and House Census highlight that nearly 3% of the population is having a form of disability, which means that over 700,000 individuals are mentally or physically impaired. Among the youth population in the 0-29 age bracket, the prevalence of disability decreases to two percentages. If one looks at the WHO (2011) figure of 15% of the population living with some form of impairment, such numbers in the case of Ghana indicate a gross under-estimation of the problem magnitude. Many researchers (i.e. Mont, 2007; Singhal et al., 2015) note that national and global data on the prevalence of disability may be unreliable and cannot be compared because of the variations in the definitions, data gathering procedures, and the quality of the reporting process. A fact that is also applicable to Ghana.

The provision of educational services to impaired children has always been the task of the government in this country (Anthony and Kawadade, 2006). According to Avoke (2001, p.39), the “*growth of special education in Ghana has not developed significantly from the original model of educating CWDs that was introduced in the 1960s*”, which mainly included specialized residential provision. Nevertheless, the extant literature showed that over the past two decades, the policy arena has made extensive efforts to promote the rights of impaired students. The 2010 census statistics indicate that the total number of children enrolled in basic education is around 5.5 million; although there is no official data on CWDs in education, Singhal et al. (2015) calculations using figures provided by the Ghanaian Ministry of Education (MOE) point out that 3-4% of children offered basic education are having a form of disability. In addition, one has to consider that a substantial number of children currently in

basic schools across Ghana display unidentified learning issues (Anthony and Kawadade, 2006).

The national Education Strategic Plan (ESP) for 2010-2020 includes the improvement of access to quality educational services for impaired learners as one of its major policy objectives and has crafted various strategies to ensure the inclusion of CWDs in the mainstream community. Hence, Ghana should have achieved an IE system by 2015, so that all children irrespective of gender, with non-severe SENs, would be integrated into regular school settings; furthermore, the ESP also seeks to provide special education units for severely impaired students. However, it is of interest to note that ESP has never clearly defined the term SEN, rather than its common meaning of *special educational needs* or how one could segregate between severe and non-severe disabled children. Although the policy arena focused on IE, the investigation of secondary data reveals that the official number of children in mainstream educational units has declined substantially from over 34,000 in 2007 to less than 17,000 in 2013 (MOE, 2013) because of the irregularities in the enrolment figures of CWDS in regular schools, attributed to recording inconsistencies. On the other hand, enrolment in special facilities has remained unchanged, with a modest increase over a 7-year time window from around 5,000 in 2007 to 6,100 in 2013 (MOE, 2013). The ESP proponents understand that the mere review of special school provision and the setting of targets to enlarge special units in mainstreams schools are not enough to accommodate the needs of disabled learners.

Singhal et al. (2015) identified an unexpected trend regarding the population labelled as without any schooling. The analysis highlighted that among the latter group, the gap between impaired individuals and non-impaired counterparts is higher for the younger than the older population. Despite hopes that intensified efforts towards educational enrolment would have equal benefits for CWDs-findings suggest this has not happened in practice. Although the number of non-enrolled children dropped, the disparity between impaired and non-impaired peers has enlarged, meaning that while the latter have been reached by enrolment efforts, it is the former category that remained not-included.

An interesting conclusion based on 2010 Census data analysis provided by Singhal et al. (2015) is that, as a share, more disabled children are reaching middle school level or above compared to non-disabled peers. This indicates that if CWDs are enrolled, they are more likely to complete the cycle. While academics cannot explain this pattern, it could be that

given the limited employment opportunities for young individuals with disabilities they tend to stay in school, or it is possible that impaired students (more likely to be enrolled in special units) enjoy more specialized care and instruction, which make them less likely to exit the educational system.

### **5.5. Patterns and challenges of adaptive instruction in Ghana**

The extent literature provides mixed findings on the attitudes of teachers towards accommodating the needs of impaired students in regular facilities in both developed and developing worlds. In the context of Ghana, Kuyini and Mangope (2011) found that mentors are more inclined to focus on children with mild and minor impairments than on those with severe disabilities.

Research by Kuyini and Desay (2008) on instructional adaption for CDWs in the mainstream system in Ghana showed that mentors make limited adjustments to curricula and pedagogical practices to accommodate the needs of special learners, and in some cases, such efforts are largely missing. Similarly, Agbenyega and Deku (2011) explored the Ghanaian mentors' practices in the regular educational settings based on a focus group of 21 teachers and documented that current models are prescriptive, inflexible and do not value variety of learning styles of students. Kuyini and Abosi (2011) highlighted that most street children in the capital city, Accra, exit enrolment because of highly inflexible teaching methods, which fail to accommodate their special learning needs.

In other words, SEN pupils cannot understand the course content, achieve poor academic performance, and display high school dropout rates. The authors argued that providing what is needed for street children in terms of feeding and education-related needs is a strategy that should be widely implemented to increase course attendance and ensure retention of street children. These efforts should be complemented by adaptive approaches such as explicit teaching, cooperative learning, and social skills instruction that could improve the learning outcomes of street children and should be applied for other categories of special learners.

Agbenyega (2006) investigated the practice of corporal punishment in the inclusive educational settings in Ghana using a sample of 100 participants and noted that although schools should be one of the safest places for children, disabled students are often exposed to poor treatment and other abusive pedagogies. The study showed that instructors use corporal

punishment as a means of motivating and disciplining children with low academic performances. According to Kuyini (2013) analysis in the Northern Ghana, most teachers still consider caning as one of the best ways to motivate children with special needs to learn.

Kuyini and Abosi (2014) findings showed that Ghanaian instructors have limited to moderate abilities in adaptive teaching, which means that regular mentors are unlikely to significantly address the needs of special learners within mainstream educational settings.

Gaining the attention of students is pivotal to the success of any inclusive teaching practice (Westwood, 2004). Therefore, a solid theory of teaching would be unsuccessful in the absence of a close interplay between instructors and pupils, and adaptive pedagogical models that would gain students attention during the class. This is in line with the results obtained by Kuyini and Desai (2008), who emphasized that most teachers are not engaged in significant instructional adaptation for CDWs in regular units.

In the same vein, Agbenyega and Deku (2011) noted that mentors included in the sample underlying their analysis were found to be more focused on completing curricula and reluctant to adjust the pedagogical practices to address the special needs of CWDs. In practice, based on this finding, one may assert that teachers in Ghana lack the required abilities to effectively accommodate the needs of disabled students. Kuyini and Abosi (2014) documented that the delivery of inclusive education is closely intertwined with pedagogical competence in instructing impaired pupils in regular classrooms, which means that adaptive instruction skills are essential for mentors to provide quality education services to CWDs in mainstream facilities.

Ghana Education Services (GES) has to recommend its teachers increase instructional adaptation efforts otherwise the needs of special learners will not be met. The authors found that only a small share of instructors in the sample have strong adaptive abilities, and proper competence in IE; most display rather poor skills and limited competence in working with SEN students. These findings confirm the results of other analyses in Ghana, Vietnam or Albania, which showed that CWDs often exit enrolment because they are not being offered adaptive educational services or actively included in class activities, but marginalized and discriminated by mentors and peers (Agbenyega and Deku, 2011; Kuyini, 2013).

Nketsia (2017) found that disability is perceived by teachers as the interplay between biological and environmental factors. In addition, the findings showed that instructors felt comfortable working with disabled children. However, the analysis documented

imperceptibly positive attitudes towards inclusive education, with some having deeply-rooted cultural and religious beliefs about mental/physical impairment.

Kuyini and Abosi (2014) also sought to determine whether teachers' ability to provide inclusivity for disabled students is influenced by background factors such as gender, size of the class, location of the school and teaching experience. The analysis revealed that except for gender and class size, competence in adjusting pedagogical practices vary substantially because of facility location, experience, and education and training. The results suggest a major difference between the abilities of urban teachers and that of rural teachers, in the sense that the latter are more unlikely to have the required skills to accommodate the needs of CWDs in rural mainstream schools compared to their peers in urban centres. There could be many reasons explaining this state.

First, instructors in the rural or semi-urban regions are exposed to more severe economic and social conditions; they lack large medical centres, portable drinking water, electricity or good roads, and often commute long distances to schools. If the weather is unfavourable, they often come very late because of distance, teach more than one class because of the lack of staff, and lack adequate training.

Most certain, the blended effects of rural factors are likely to influence the abilities of teachers in providing inclusive education, and their willingness to adjust pedagogical practices to meet the needs of impaired students, particularly in an over-crowded setting. Hence, the lower level of competence of instructors in the rural regions of Ghana relative to their peers in urban areas...Consequently, it is the poor rural disabled child who suffers.

Kuyini and Abosi (2014) found no substantial difference between female and male mentors in terms of competence towards inclusive education in regular facilities, nor between the abilities of teachers instructing large (45+) classes and those instructing small (less than 45 students) classes. However, instructing a high number of pupils often brings a myriad of challenges, and mentors are less likely to engage in adaptive practices to support SEN students (Kuyini, 2013; Mukhopadhyay et al., 2012). In addition, large size classes could make them unable to adjust learning materials or apply differentiated instruction and peer-assisted teaching models, and interact effectively with special learners (Kuyini, 2013).



Instructors with many years of experience are more likely to be properly equipped with the abilities required for meeting the needs of special learners in regular facilities than their inexperienced peers (Mukhopadhyay et al., 2012; Kuyini and Abosi, 2014). Hence, experience is pivotal to the delivery of quality education for disabled students. Mentors who lack experience and training in inclusive practices find it challenging to work with impaired pupils in mainstream facilities. Therefore, the Ghanaian Government should re-examine the pedagogical set of skills of trained and untrained instructors, a concern that has been raised by the EADSNE for many European states.

### **5.5.1. Obstacles to inclusive education in Ghana**

Most recently, one may note a shift from the medical model to the social model, as the underlying paradigm for inclusive education and removal of discrimination against children with disabilities, due to its potential to celebrate difference, provide adaptive learning and respond to individual needs (UNESCO, 2009). The Ghanaian Ministry of Education has recently launched a national policy act on IE to accommodate the needs of SEN students and remove the main causes of discrimination, alienation and social exclusion of impaired children. This framework is about ensuing inclusive education for all children with mild and severe learning difficulties at all education layers, and requests mainstream teachers to provide quality education for all students, irrespective of their condition. According to MOE (2015), the country has been progressing with the adoption of IE practice, and has extended the IE pilot program from 29 districts in 2011 to 46 districts nation-wide in 2015. However, efforts to deliver inclusive education to CWDs have been disturbed by factors such as inflexible curricula, rigid assessment criteria, architectural barriers, lack of adequate learning resources, insufficient supply of teaching materials, severe prevalence of untrained instructors, over-sized classes, and inadequate mentor training (Kuyini and Mangope, 2011; Ametepee & Anastasiou, 2015; Singhal et al., 2015).

Another obstacle to the development of adaptive education services to children with disabilities is the deep-seated, dominant religious/magical/cultural view on disability that threaten to maintain or worsen discrimination and exclusion against impaired children (Avoke, 2002; Anthony, 2011; Naami and Hayashi, 2012). As a consequence, Ghanaian disabled children are often kept in isolated rooms or even killed, away from the public eyes or

placed in segregated units from mainstream education, such as religious camps or special schools (Baffoe, 2013). Many families admitted hiding their impaired children from the community view, particularly those with Autism or Down syndrome, because of shame, and still dominant myths and superstitions in the Ghanaian society that sees such children as possessed by evil spirits.

Altogether, these resulted in discrimination, alienation, social exclusion, stigma, derogatory labelling, abuses of the fundamental human rights, and segregation of CWDs into residential special units (Anthony, 2011; Kassah et al., 2012; Botts and Owusu, 2013). As documented by Agbenyega (2003), those enrolled in mainstream facilities are mistreated by their instructors and non-disabled peers; there are often referred to as lazy, stupid, idiotic and exposed to excessive corporal punishments such as knocking, caning pinching or ears pulling.

Therefore, Ghana is making extensive efforts to ensure inclusive education as a strategy to address these discriminatory behaviours that lead to the alienation and exclusion of impaired children from learning activities in the classroom, and to identify non-enrolled CWDs and bring them to school (MOE, 2015).

The Ghanaian educational arena has proved unsuccessful in accommodating the needs of students with learning difficulties in mainstream settings. Poor performances, enrolment exit, streetism, and antisocial attitudes are among the most severe outcomes. The lack of adequate training for teachers, and consequently, the absence of competences in adaptive instruction is one of the main drivers of such social anomalies (Kuyini and Abosi, 2014). This research is conducted during a difficult period for teachers, whose competence in meeting the special educational needs of impaired children is called into question by the general masses, parents, and the policy arena. The abilities of education providers are widely criticized in the light of negative outcomes and many failures of the Basic Education Certificate Examination, the nation-wide final year examination for enrolled children (Kuyini and Abosi, 2011).

The fundamental belief is that often, teachers lack the skills and necessary training or materials to effectively accommodate the needs of students with learning disabilities in mainstream classrooms (Henne, 2013). To make the matter even worse, some mentors consider that learning difficulties are caused by children disabilities or deficiencies and the lip services the government pays to teachers. Often, CWDs are blamed by instructors and even

severely punished for failing to comprehend course content, with the aim of motivating them to work harder (Kuyini, 2013).

The extant literature asserts that usually, teachers do not see the need to adjust the curricula, the pedagogy, or the type of instruction in mainstream setting, and do not reflect on supportive learning materials and communication styles used to deliver the educational message (i.e. Kuyini and Abosi, 2011; Kuyini, 2013). Therefore, SEN students do not benefit from the teaching methods and materials explored in the regular classroom (Avoke and Avoke, 2004; Agbenyega and Deku, 2011). Hence, Ghana is urged to create teacher training schemes to enhance the provision of inclusive education. In order to achieve this, mentors need to adjust their practices and include adaptive instruction methods (Kuyini and Desai, 2008; Agbenyega and Deku, 2011; Kuyini and Abosi, 2011).

### **5.5.2. Causes of discrimination and stigma in the Ghanaian context**

Without any doubt, in terms of education, disabled children remain a neglected cohort. The marginalization of impaired students is primarily driven by social and cultural factors such as blatant discrimination, stigma, negative labelling, and diluted expectations about their intellectual abilities and potential (UNICEF, 2012; Baffoe, 2013).

The different cultural communities in Ghana have their own interpretations and understanding of the sources and practices concerning disability (Groce, 1999). Complementing the reach of the individual model, religious/magical and cultural/traditionalist views have been shown to influence the perception of disability, driven by magic and witchcraft associations, punishment from the gods from own or ancestors' sins, evil spirits and ghosts (Avoke, 2002; Agbenyega, 2003; Appiagye-Atua, 2006; Anthony, 2011; Botts and Owusu, 2013), leading to massive social exclusion. These beliefs are dominant in most of the sub-Saharan region (Anthony, 2011).

Within the education arena, Morley et al. (2010) argued that most pressing problems affecting impaired students enrolled in higher education range from the lack of physical adjustments to access the built environment and the unavailability of learning resources to negative attitudes, stigma and prejudice. In addition, despite progressive legislation, various authors exploring the Ghanaian context identified issues in teacher preparation and their confidence in including impaired students in mainstream classrooms, such as incompetence in adjusting instructions,

lack of training and inadequate resources, or inflexible, mechanistic mentor practices (Agbenyega and Deku, 2011; Nketsia and Saloviita, 2013; Kuyini and Abosi, 2014).

Anthony (2010) analysis of attitudes towards children affected by autism in Ghana documented they were widely treated as “*useless and not capable of learning, stubborn, lazy, or wilfully disobedient*” (pp. 12-13). The Ministry of Education, Sport and Sciences (MOESS) has calibrated the social prejudice associated with disability-driven educational disadvantages and noted some major findings, *inter alia*, the under-valuation of education for CWDs by their families, the lack of awareness about CWDs potential, unequal treatment of impaired children in mainstream settings compared to non-disabled peers, and over-emphasis on academic performance and examination as opposed to all round development of CWD.

Most of the experiences of CWDs in mainstream classrooms have been described as negative; many impaired students recalled hours of sitting ideal, unable to understand the courses thought, and the lack of adequate learning materials and adjusted teaching models. Others indicated the heavy reliance on non-impaired colleagues (Singhal et al., 2015).

As documented by Singhal et al. (2015), Ghanaian women show the lowest levels of schooling, in part driven by the additional obstacles that disabled girls are exposed to when accessing education service. Rural and urban gaps are also obvious among impaired children-for instance, authors showed that none of the children with visual impairments within rural communities had attended school. These could be caused by the lack of education units or by the large distance to schools.

The analysis of the educational journeys of enrolled children has made it clear that students with hearing impairments have exclusively attended special schools, while visually-impaired children have attended both mainstream and special facilities. By contrast, physically-impaired students were more likely to transfer to vocational units. A significant fact is that the type of school CWDs attended was not a matter of choice but the outcome of various factors within the mainstream system and of the availability of special schools. Broadly, the main factor of schooling decision was the role of the family, which either impinged on CWDs enrolment, or was vital in supporting them along the educational journey.

This research has showed that to accommodate SEN students in mainstream settings, number of adjustments need to be operated to enable their understanding of course content. First, teachers must adapt the curricula to the traits and ability levels of impaired children. Second, the instruction methodology must be tailored to meet the array of personal and educational needs of disabled students. Adaptive teaching is a pivotal component of effective instruction, although, practical realities show that mentors find it challenging to reshape teaching approaches to address the requirements of CWDs in regular classrooms (Westwood, 2004; Kuyini, 2013).

## CHAPTER 5: METHODOLOGY

The previous sections explained the theoretical constructs underpinning the dissertation and their application in the educational environment of Ghana. This chapter details the methodology underlying the dissertation; it describes the context, the research design, the data collection process and analysis. I will further present the ethical consideration and the limitations of the paper.

### 4.1. Research design

Social research assumes some decisions about the most suitable method to be applied so that the author can collect the data needed to answer the research questions. As noted by Bryman (2008, p. 31), a research method is a “*simply a technique for collecting data. It can involve a specific instrument, such as self-completion questionnaire or a structured interview schedule, or participant observation whereby the researcher listens to or watches others*”.

One of the major findings resulted from the review of the literature is that teacher training is critical to the implementation of inclusive education practices. However, the literature on mentors’ preparation to deliver IE has not been extensively investigated in the context of Ghana (Casely-Hayford et al., 2011; Nketsia and Saloviita, 2013; Nketsia, 2016, 2017). The entire dissertation is constructed around the idea that the international conversation on inclusivity highlights the pivotal role of teacher competence and preparation for inclusive education. The scope was to identify and assess the current level of preparedness of Ghanaian educators for IE to remove discrimination against special learners, and to explore the factors that could promote inclusivity in the national education system.

A survey methodology has been applied to answer the four research questions that guided the writing of the present dissertation. Some of the most powerful attributes of quantitative survey research are its ability to draw conclusions supported by large datasets and its ability to generalize the results to larger populations.

***Research question 1:*** *What is the preparedness level of Ghanaian teacher for creating equal educational experiences for both disabled and non-disabled students as a means to reduce discrimination?*

The study seeks to explore instructors' attitude towards disability, which influences the quality of the educational act for CWD. The first research question investigates the extent of mentors' preparedness to engage in inclusive education practices, their understanding of the IE concept, special learning needs and pedagogical adjustments to accommodate SEN learners, and their assessment of self-efficacy regarding inclusive teaching. The results of the analysis point out that most participants have been introduced to the notion of IE, and demonstrate good knowledge of the concept.

***Research question 2:*** *What is the approach of teachers towards ensuring material and non-material resources to achieve inclusivity in education for all students?*

The primary goal is to identify the inclusive practices, values and understanding that instructors gained a result of their training in SEN, their views on the role of this course in assisting the delivery of inclusive education services, and the attached challenges.

***Research question 3:*** *What is the teachers' course of action to reduce discrimination and stigma against disabled learners?*

The major objective is to highlight the attitudes of educators towards the implementation of IE at the national level, the perception of their role, the types of IE knowledge and pedagogical skills gained by teachers due to SEN training to dilute the negative experiences of CWDs.

***Research question 4:*** *What is teachers' approach of disability and attitudes towards IE?*

This aims to explore the views and beliefs related to the common cultural and religious determinants of children disability, the conceptualization of the problem, the level of comfort while interacting with impaired students and the impact of independent factors on the social understanding of IE provided to special learners.

## **4.2. Methodological Approach**

According to Gall et al. (2003), researchers must first deliver an accurate description of the current state of educational settings; otherwise, they will lack a solid basis for explaining or adjusting it. The purpose of the dissertation was to generate a deep analysis of how discrimination, stigma and teachers' and other stakeholders' attitudes towards disability influence the access and quality of the educational experience for children with various impairments. Thus, the scope of the study dictates the methodology and the design of the

work (Cohen et al., 2000); hence, the application of descriptive and causal comparative approaches in the quantitative research tradition for the dissertation.

A descriptive technique was chosen to offer a detailed assessment of how discrimination and stigma affects the fundamental right to education for disabled children in Ghana, of how insufficient material resources hinder the participation of impaired students in inclusive classrooms, of how the attitude of the instructors towards disability influences the quality of the educational experience for CWD, and their level of understanding of the phenomenon.

In addition, to answer all the research questions, a causal-comparative approach has been considered to explain the interplay between dependent and independent variables (Cohen et al., 2000; Gall et al., 2003).

A descriptive study assumes the application of questionnaires in the shape of survey research and collects data at a particular moment in time, seeking to portray the current state of the phenomena. The underlying data collection instruments include, *inter alia*, structured or semi-structured interviews, attitude scales, questionnaires and test scores that facilitate comparisons between categories and offer valuable insights and statistics on opinions, beliefs and common practices (Nketsia, 2016). The survey method involves the administration of questionnaires to a representative population sample, allowing for the generalization of the data analysis. In this case, the researcher is clearly an outsider. Descriptive surveys are a component of the objectivist (positivist) perspective of the social community, which considers knowledge as objective and tangible and attaches an observer role to the researcher (Cohen et al., 2000). According to Gall et al. (2003), positivism is an epistemological construct saying that physical and social events are independent of observers and that observation of such realities is unbiased and represents scientific knowledge.

The methodological approach used in this dissertation also relies on secondary data. Hence, I explored a myriad of published researches such as books, journal articles, publications from official websites, white papers by international organizations, e.g. UNESCO, UNICEF, United Nations or World Bank to name a few, newspaper articles and other works. The role of secondary data as documentary sources in social science research has been widely documented by Miller and Brewer (2003). Therefore, these sources assisted the researcher in drawing relevant insights as part of gathering information for the analysis. An exploration of various papers on disability in Ghana served as a backdrop.



### **4.3. Participants and Sampling Techniques**

The hypothetical groups underlying the generalization of the findings were instructors and teacher educators in the Ghanaian public schools, selected via purposeful sampling procedures. The latter involve the choosing of respondents with a certain level of knowledge of the topic, with common traits and the ability to provide relevant insights, which serve the aim of the study (Gall et al., 2003; Nketsia, 2016).

The survey included 300 teachers scattered across all regions of Ghana working in nine public colleges of education (out of a total number of 38), expected to have completed some degree of theoretical and practical training. Thus, with potential to offer a clear picture of their understanding of IE, predisposition to engage in inclusive education and accommodate the needs of disabled learners by adjusting their pedagogical approaches, and general feelings of self-efficacy for providing IE to remove discrimination and stigma for impaired children.

### **4.4. Research Instruments**

As noted by various authors (e.g. Cohen et al., 2000; Gall et al., 2003; Nketsia, 2016), quantitative methodologies, such as descriptive surveys, are best suited for analyses intended to identify and assess the views, core beliefs and perceptions, attitudes, understanding and practices of participants towards specific phenomena. This is a common method applied by scholars who aim to investigate major facts about curriculum course, skill sets, pedagogical approaches and learning experiences of inclusive education and teacher training targeted at eliminating stigma and creating equal educational opportunities for both impaired and non-impaired learners (Salend, 2010). The overall data collection process for the dissertation is based on surveys and questionnaires, research instruments that enable participants to control the data gathering; they can complete the questionnaire at their own convenience, take as much time as needed in various sessions, answer questions in any order (or even skip some), and make marginal comments (Gall et al., 2003).

The data collection questionnaire included semi-structured, open-ended questions measuring the instructor's knowledge of special education needs, their understanding of inclusive education for impaired learners, IE approach, challenges and aims, the role of teacher training in the implementation of IE, the attached experience in working with CWD, and a number of closed-ended types of items on the background of respondents, level of self-efficacy, or the adequacy of special education training. Several questionnaire items also required participants

to select predetermined IE knowledge and pedagogy adjustments; in addition, they were provided with opportunities to specify other alternatives not mentioned by the researcher.

Closed-ended questions in the Likert scale have also been designed to assess the knowledge about IE and SEN, perception on the benefits of inclusive education, mentors' readiness to create inclusive classrooms and their awareness of their role in removing discrimination and offering equal education chances for impaired children, opinions on traditional/cultural beliefs on disability, the level of discomfort while working with special needs learners.

#### **4.5. Data Collection and Ethical Considerations Relating to the Study**

The tools assisting data collection process translated the research questions into specific analysis targets, accomplished based on findings from the self-administered questionnaire. It is important to note that, to achieve stated research goals, each question transmitted to participants the main ideas behind the research objectives. In addition, the selection of the data collection method is backed by several reasons. Self-administered questionnaires are commonly applied as data collection instruments within quantitative analyses and allow the gathering of standardized data for the work. The researcher has ensured validity and reliability via a pilot test that facilitated the cleaning of errors prior to the main research. This is in line with the recommendation of Radhakrishna et al. (2003), who argued that reliability could be achieved by using a pilot test to collect data from 20-30 respondents not included in the sample.

Furthermore, the instruments design was carefully aligned with the research goals and the questions went to panel expert validation (supervisors), which ensured its reliability. In addition, the questionnaire calibrated what it sought to measure, mirrored the content of the work, was appropriate to the population selected and comprehensive enough to offer the data needed to answer the research questions, and meet the scope of the study.

The process of data gathering with the assistance of human participants has to be based on strategies in line with current ethical standards and legislation that protect respondents' integrity from all possible harmful factors (Buchanan and Hvizdak, 2009; Nketsia, 2016). The researcher followed certain procedures to gain permission for the analysis and cooperation from participants in the survey. Letters of introductions with clear, detailed description of the scope of the survey and the instruments to be used have been electronically sent to all principals in selected public school in Ghana for approval. In addition, a cover

letter has been assigned to each questionnaire informing each respondent about the pure academic purpose of the research, thus, ensuring the confidentiality and anonymity of all participants in all phases of the analysis. As indicated by Gall et al. (2003), disclosure to the participants of the intended use of the data to be gathered is one of the main conditions of the survey instrument in quantitative research.

Furthermore, confidentiality should be ensured by not using the name or location of participants in publications stemming from the research, unless otherwise stated by parties. Hence, to protect the privacy of survey participants, and assure full anonymity, the researcher has not requested any personal data, and respondents were notified not to include their names and addresses of the education facilities they were serving. In addition, the names of the Ghanaian public schools have not been included in the present dissertation or in any other publication for privacy and anonymity purposes.

#### **4.6. Limitations of the Study**

The 38 public colleges of education in Ghana are scattered across the ten regions of the country. This dissertation was limited to nine of the 38 units from five of the ten zones. Therefore, the generalizability of the findings is subject to such geographical limitations. In addition, this analysis has not used sophisticated statistical instruments such as structural equation modelling, which could have added more depth to the research and outcomes. Furthermore, many constructs I have worked with were calibrated via a single question or a small number of questions, whereas the application of scales reflecting several items might have led to more reliable conclusions. Despite these limitations, this study used a pure quantitative methodology based on a fair number of participants.

However, according to some academics (Danforth and Morris, 2006; Bryman, 2004), the exploration of marginalized cohorts, such as CWDs might be better assisted by qualitative enquiry, which captures more accurately their experiences and helps the researcher gain a clearer understanding of the facts. As argued by Danforth and Morris (2006), a qualitative approach should be used in investigating the universe of marginalized people, as it encourages a contextual conversation between researchers and teachers/school staff/policy makers about the education of impaired students, who are often excluded and discriminated. Regarding the community of physically/mentally disabled children, marginalization is a phenomenon that

might be socially constructed by individual participants (Bryman, 2004). Hence, the blending of various methods enhances the collection of in-depth information from the sample population.

Qualitative research assumes that the respondent gives a detailed description of the particular case under observation rather than general information on the subject, and facilitates the examination of research questions from various angles, leading to a better understanding of IE in Ghana. Moreover, according to Robson (1993), the use of more than one method in a single exploration can have a series of advantages, despite the higher amount of time involved, as it helps to crosscheck data gathered via various methods, ensuring the validity and reliability of findings. This is in line with Bryman (2004) assertion that mixing two methods increases the validity of the results if they can provide mutual confirmation. Further, quantitative instruments are associated with the researchers' perspective, but qualitatively, the topic under investigation is seen through the eyes of the subjects.

On the other hand, some scholars (Hughes, 1998; Bailkie, 2000) criticized the application of mixed methods within a study, as research methods involve epistemological commitment that needs to be respected. In addition, quantitative and qualitative instruments are difficult to combine as they carry different epistemology and ontology considerations.

Therefore, the researcher has opted for a pure quantitative methodology to achieve the goals of the present study.

## **CHAPTER 6: ANALYSIS AND DISCUSSION**

### **6.1. Introduction**

The scholarly community from both the Global North and South has repeatedly articulated the importance of teachers in ensuring inclusivity for all students and the positive impact of mentor training programs on improving the knowledge of impairment, inclusive pedagogical practices, behaviours towards disabled children, and preparedness to create inclusive educational settings (Arbeiter and Hartley, 2002; Campbell et al., 2003; Sharma et al., 2008; UNESCO, 2009).

The dissertation sought to examine the quality of education services provided to impaired students in the context of Ghana by investigating their daily educational journeys amid disability-related restrictions, such as discrimination, stigma, alienation and lack of inadequate assistance to accommodate their special needs.

The entire research agrees with the argument that efforts to include disabled students into mainstream education via inclusive learning practices require that teacher training programs have to be explored in greater depth.

### **6.2. Teacher preparedness to remove discrimination via inclusive education**

The first research question investigates the extent of mentors' preparedness to engage in inclusive education practices, their understanding of the IE concept, special learning needs and pedagogical adjustments to accommodate SEN learners, and their assessment of self-efficacy regarding inclusive teaching. The findings evidenced that most participants (90% of the 300 participants from nine of the 38 public colleges) have been introduced to the notion of inclusivity. Overall, they proved a solid understanding of the construct of IE; those who have indicated their familiarity with the concept of IE displayed higher knowledge scores than those who noted they have not been introduced to this phenomenon. The analysis revealed differences between public colleges in terms of teacher familiarity with inclusive education practices. The features of IE most commonly mentioned by participants point out its meaning as a new educational paradigm seeking to make all students welcomed, regardless of their physical/mental condition, cooperation between instructors and other school staff to deliver

quality services for impaired children, a good understanding of diversity as a response to the same tasks, willingness of non-disabled learners to help their disabled peers, and the importance of communication between mentors and parents and siblings of SEN students. However, respondents were least familiar with the fact that inclusivity is not only about impaired children. Furthermore, participants were asked to indicate some disability conditions they can identify, and the prevalent types of disability they encountered during the educational journey. The SEN conditions most easily noticeable referred to visual impairment (59%), hearing difficulties (55%), intellectual disabilities (36%), learning difficulties (34%), followed by attitudinal and emotional issues (3%). In terms of the most common particular conditions respondents have been exposed to over their teaching practice years, most participants (73%) highlighted learning disabilities (30%) and visual impairments (25%). However, only around half of them have been able to provide some type of special assistance to SEN students they encountered in the form of rearrangements of the classroom physical settings (38%), individual focus (20%), the creation of adjusted learning tasks for all (13%), seeking for advice from other professionals (10%).

Again, the delivery of support services for impaired children revealed different patterns among the colleges considered. Consequently, only 25% of participants argued that they possessed high self-efficiency towards accommodating the needs of special learners. Around 40% felt somewhat prepared and 27% felt unprepared. Thirty percent of teachers who have encountered disabled learners during their practice noted they have a high preparedness level to work with SEN students. The strong nexus between self-efficacy and teaching experience was once again confirmed by the fact that most instructors (85%) who provided some type of assistance to disabled children over their teaching practice noted high or good preparedness to meet the educational requirements of SEN students. In contrast, only 45% of those who had no experience with working with impaired learners noted they were highly or to a certain extent prepared to address the needs of SEN.

In a similar vein, the levels of self-efficacy indicated varied among the selected institutions, with most those who felt unprepared coming from one college. In addition, respondents were asked to rank a set of items on pedagogical approaches originally explored by Gyimah (2010) according to personal preferences. All points were ranked by 70% of respondents in line with the order requested. The most often cited pedagogical practices of participants referred to the creation of a comfortable educational experience for all students, irrespective of their condition, the selection of learning tasks considering the learning needs of impaired

individuals, the selection of adequate teaching materials so that all children would be included in learning activities, individual focus on SEN students, and the establishment of education targets to cover disabled children too.

Finally, among the main challenges towards ensuring inclusivity for impaired students into mainstream education, participants mentioned the absence of proper training, unavailability or scarcity of educational materials, discrimination and stigma against special learners, low levels of self-esteem among SEN children, lack of physical adjustments, weak cooperation between teachers, siblings and other school staff.

### **6.3. Teacher approach to deliver inclusive education**

The primary goal is to identify the inclusive practices, values and understanding that instructors gained as a result of their training in SEN, their views on the role of this course in assisting the delivery of inclusive education services, and the attached challenges.

In terms of inclusive values, the most-often cited were patience, tolerance and empathy. The inclusive knowledge acquired during training highlighted by respondents as relevant for their work with CWDs in mainstream facilities included the nature of special needs, causes of learning difficulties and inclusive teaching practices. Most survey participants required more training about the identification of specific needs, and only a few noted the need for deeper insights on special education policies. The research revealed a nexus between mentors' experience and their understanding of inclusive values. Individuals with previous teaching experience mentioned *empathy* and *equal treatment and fairness* as major inclusive values more often than peers with no such experience. However, the latter indicated the importance of *tolerance* and *love* more often their experienced colleagues, who emphasized the relevance of inclusive knowledge in terms of disability nature, special needs identification, and impairment drivers.

Related to the perception of IE pedagogical approaches, most training participants indicated they gained abilities in terms of discourse, writing boldly and better demonstration. Only a fraction of respondents pointed out improvements in the activity method and brainstorming. A limit number highlighted IE practices such as sitting arrangements, cooperative learning, peer learning, and task analysis. In addition, when aspects believed pivotal to the implementation of IE were presented to training participants, they noted that constructs extensively debated during programs created to assist SEN students included *learning difficulties and disabilities*

and *emotional and behavioural issues*. Ten percent of participants specified that the fundamental right to education of all children was covered by the program; moreover, only a small percentage of respondents (7%) emphasized that aspects such as *equity in education and communication and cooperating with the family and siblings* were discussed during the SEN training. Overall, many of the participants (71%) confirmed the benefits of SEN training in equipping them with the array of skills needed to identify different types of mental and physical disabilities and work with impaired children. However, a large share of respondents (87%) noted the weaknesses of the course in terms of providing sufficient inclusive knowledge and practices to accommodate special learners. Furthermore, teachers highlighted a series of issues with the SEN program and its delivery, *inter alia*, the too theoretical nature (34%) or inadequate teaching and learning resources.

Finally, participants made recommendations as to what the training should include to effectively assist instructors create inclusive education experiences for disabled children. Fifteen percent mentioned practical training in an inclusive environment, 46% suggested the incorporation of an IE course, and 5% proposed involving other school staff with practical experience to work with CWDs. The findings of the analysis revealed a strong positive nexus between the availability of learning materials for SEN students and the educational involvement. The scarcity of supporting materials was found to be related with the low participation of all categories of children, particularly severe for impaired students.

#### **6.4. Teachers' views on inclusive education**

The major objective is to highlight the attitudes of educators towards the implementation of IE at the national level, the perception of their role, the types of IE knowledge and pedagogical skills gained by teachers due to SEN training to dilute the negative experiences of CWDs.

Most respondents seemed to have a good knowledge level about SEN (90), IE (87%), and the general role of inclusive education (82%). Only a small proportion revealed adequate understanding of the purpose of IE, as a phenomenon that seeks to integrate special learners into mainstream settings (38), to deliver quality education to all students (30%), acceptance (24%), social inclusion (20%), to ultimately remove stigma against SEN children (16%), and dilute discriminatory behaviours towards CWDs (16%). The results of the survey emphasized



overall positive attitudes related to inclusive education and positive views on teacher training programs. The majority of participants were in favour of inclusive teaching practices, recognized the role of IE in ensuring equal education opportunities for impaired and non-impaired children, and stressed the importance of having previous experience in working with special learners.

However, most subjects (64%) suggested that Ghana has recorded very little progress with the implementation of IE practices; 32% noted that the country is ready to some extent to deliver inclusivity, and only 4% highlighted that the Ghanaian education systems is not ready at all to ensure the integration of SEN children into mainstream facilities. Among the major determinants, participants indicated inadequate settings (44%), ineffective teacher training (30%), and lack of adequate educational materials (28%), societal beliefs (11%), poor public education (11%), and lack of political commitment towards achieving IE (6%).

The main concerns of participants related to the implementation of IE in the context of Ghana were found to be quite similar: 40% highlighted ineffective mentors' training, unavailability of teaching materials (27%), insufficient emphasis on training for inclusive education (22%), high workload for instructors and lack of public education (12%), and misplaced focus, on students without special needs in the detriment of impaired children. As highlighted by respondents, the main roles of training programs included preparation to work with CWDs (76%), delivery of knowledge about SEN (28%), the organization of work sessions for teachers to develop SEN-related abilities (21%), workshops on IE practices (11%), improvement of mentors' collaboration (9%), help instructors use assistive technologies for disabled children (8%), recruitment and training of impaired teachers (8%), stimulation of positive attitudes towards CWDs to remove discrimination (7%), deliver public education (5%), advocate for support systems (5%).

The bulk of survey participants (58%) revealed non-significant experience working with SEN students, 35% indicated the lack of previous experience in teaching impaired CWDs, and 20% argued they have a solid experience in providing inclusivity to disabled learners. Twenty-one percent of instructors having some form of experience in IE noted this helped them focus on every individual case of impairment; 19% stressed they provided practical examples of how to accommodate CWDs during the classroom activities, and 14% noted they struggled to meet the needs of SEN children.

Regarding the education system efforts to ensure IE training and create inclusive settings, 19% cited SEN training, 15% educational visits to special schools, 4% IE work sessions for

teacher educators, and 3% noted more materials on accommodating SEN children. Furthermore, the data analysis show that the bulk of instructors (58%) possessed limited knowledge on inclusive methods or pedagogical models to ensure inclusivity in mainstream schools and remove discrimination, 26% noted no such knowledge, and only 22% emphasized good knowledge on how to achieve quality education for impaired students.

Among the IE teaching avenues/pedagogical approaches identified by those with good competence on inclusivity, the findings identified activity-based learning (12%) and segregation of tasks and demonstration (9%), and rarely role-play, cooperative instruction and peer tutoring (few mentions only). The most often applied teaching methods/strategies in regular classrooms covered the lecture model (51%), discussions (40%), demonstration (30%), activity (29%), and to a lower extent group work, brainstorming, case studies, experiments and project activities (12%).

The results of the analysis underlined that training programs mostly focused on learning difficulties and disabilities (48%), emotional and behavioural issues (44%), learning models (22%), equal rights to education for all children (19%), communication and cooperation with the family and siblings (12%), multiple intelligences (12%), and equity in education (8%). The pedagogical practices mentioned by survey respondents referred to shared learning (38%), peer grouping (36%), individual assistance to disabled learners (24%), peer-assisted learning activities (24%), addressing behaviour issues (23%), peer instruction (20%), collaborative problem solving (19%), adaptation of curricula (16%), use of communication techniques and technologies (14%), customized student tasks (9%), differentiated teaching (8%), individual educational programs (7%), and universal instruction (3%), all applied to deliver inclusivity and eliminate discrimination against CWDs.

## **6.5. Teacher approach of disability and attitudes towards IE**

The researcher sought to explore the views and beliefs related to the common cultural and religious determinants of children disability, the conceptualization of the problem, the level of comfort while interacting with impaired students and the impact of independent factors on the social understanding of IE provided to special learners.

The findings revealed that most instructors' attitudes approve some of the Ghanaian deeply-rooted traditional beliefs about the determinants of disability to some extent (51%) or to very little extent (35%). Most respondents (59%) disapprove such cultural beliefs, but 26% agree,

and 15% were uncertain. The overall mean score on *acceptance of cultural beliefs* regarding the drivers of disability was 3.57, uneven across colleges. The overall analysis of all survey participants on all items related to mentors' conceptualization of impairment scale showed an overall mean of 5.13, with male teachers achieving higher mean scores (4.30) compared to female peers (3.99). The analysis of all 300 participants returned an overall mean of 2.97 on the factors reflecting the level of comfort of working with disabled children and a mean of 3.36 on all items displaying the attitude of teachers towards IE.

The general attitude of mentors towards inclusivity ranged between *neutral* and *agree*, with a higher predisposition towards *neutral*. Instructors revealed more positive attitudes towards interacting with children with *physical impairments* (mean of 3.85) and *behavioural issues* (mean of 3.57), followed by *hearing difficulties* (with a much lower mean of 2.50) and *visual losses* (mean of 2.70) in mainstream educational facilities.

The analysis pointed out more positive attitudes about the benefits of inclusivity of male mentors (mean of 4.10) compared to female colleagues (mean of 3.89). Teachers who have had friends or past experiences working with impaired students were found to be more positive about the delivery of IE (mean of 4.15) than those never exposed to such situations (mean of 3.90). Educators who have not yet completed training showed higher mean scores (mean of 2.90) on IE management compared to those who have completed their SEN training (mean of 2.80). The findings also highlighted that teachers with friends of students with disabilities are more positive towards working with SEN children affected by specific forms of impairment (mean of 3.5) than those never exposed to interacting with such groups (mean of 3.20). Finally, mentors who have completed IE training (mean of 3.28) expressed more positive opinions about teaching SEN students compared to those who have not yet finalized their SEN training (mean of 3.10).

Nevertheless, confirming the findings of previous analyses from Ghana (e.g., Kuyini and Mangope, 2011; Nketsia, 2016, 2017), the results showed a barely positive overall attitude of teachers towards the delivery of inclusive education. Although impairment was perceived as an interplay between children with a health condition and the contextual events (personal and environmental), and teachers were found to have a lower level of discomfort in working with CWDs, some of them did not firmly reject the cultural beliefs that disability is driven by magical practices, witchcraft, or the results of the offences against God or ancestral spirits.

The analysis also indicates the inefficiency of SEN training in rejecting deep-rooted cultural opinions and its low impact on promoting positive attitudes among educators. These beliefs,

which disturb the understanding of disability of some respondents, might lead to derogatory labelling, discrimination, stigma, and seclusion of SEN students from inclusive settings.

Overall, the results of the study indicate the need for further reforms in teacher training in Ghanaian colleges of education. The barely positive approaches of disability and the traditional beliefs about the causes of impairment, coupled with the absence of meaningful experiences in delivering IE by mentors, emphasize that innovative practices are strongly required to improve the educational journey for both instructors seeking to remove discrimination against CWDs via IE, and SEN students.

## CHAPTER 7: CONCLUSION AND RECOMMENDATIONS

### 7.1. Summary

According to Chapter 5 of the 1992 Constitution of Ghana, education is a fundamental right of all children, who should enjoy the same opportunities and facilities, irrespective of their condition. Over the years, the Ghanaian government crafted various policies and programs to achieve this target. Among these, inclusive education initiatives are intended to provide disabled children with quality educational services and create a level-playing field for all students.

The results of this dissertation highlight that the teacher preparedness to accommodate special learners removing discrimination and stigma is one of the major obstacles to inclusive education in the Ghanaian context. Given that IE has become a national policy goal, the findings of this paper have several practical implications for ensuring inclusivity into the mainstream of disabled students and the reform of teacher training programs.

First, this research offers additional arguments about the inadequate focus and integration of efficient teacher training strategies in Ghana's public schools. These weaknesses of the education system might explain the widely observable mentor-centred approach by mainstream instructors and their inflexibility/inability to adjust the curricula and their pedagogical practices to accommodate the learning needs of disabled students. This educational arena requires better policy development to achieve inclusivity for all children, irrespective of their condition and the reshape of instructional practices within school curricula to strengthen the implementation of IE.

Second, the findings suggest that most teacher educators display a weak understanding of inclusive education and its role, as well as poor pedagogical practices and experience in creating inclusive settings. Training programs should promote a better understanding of inclusivity, diversity, and student-oriented pedagogical practices, and enable instructors access an array of practical experiences with SEN children in regular facilities. Altogether, these strategies will greatly increase the level of teacher's preparedness to work with CWDs

and ensure inclusivity in mainstream education. Practical realities in Ghana show a stringent need for reform of many pivotal aspects in public schools, inter alia, unavailability of resources, the deep-rooted examination-centred approach, and the inflexibility of the curricula that are challenging educators' efforts toward adjusting and modelling SEN-oriented inclusive teaching practices.

Given the main objectives of IE, namely, the reshape of the physical school settings and the delivery of equal learning opportunities for all children to remove stigma and discrimination against CWDs, this research suggests that IE is a positive action for the integration of impaired students into the mainstream education, and broadly into the social community. However, the national context presents a series of challenges, which means that the mere inclusion of these learners into regular facilities does not automatically mean they are enabled to fully exercise their fundamental right to education. A large number of schools have been found to lack the equipment needed to accommodate CWDs. In some regions worldwide, the literature indicates that IE is mainly focused on opening enrolment, and professionals are less interested in creating an education system that would ensure equal opportunities for all children, regardless of their condition (Mamah, 2016).

In a similar vein, the study found that although disabled children in Ghana do have access to mainstream education services, technically, they face exclusion and discrimination driven by their particular condition. The practical realities in schools make it a challenge for them to feel comfortable and participate in learning activities at the full potential, given that normative institutional practices may exclude some individuals from community decision making, on the basis of their impairment. This work highlights that structural difficulties and certain practices prevent physically or mentally disabled students from full participation in learning activities, thus, restricting their benefits from the educational act. The findings suggest that schools are not properly equipped to accommodate the needs of SEN students.

To increase teachers' competence in inclusive education, the Ghanaian government needs to provide special training programs in adaptive instruction, particularly for mentors in rural and semi-urban areas. These sessions should include macro and micro level adaptive instruction, specific models and strategies, and adaptive pedagogical approaches (Lee and Park, 2008). Teachers should be trained to develop adaptive skills, adjust curricula and pedagogical practices to accommodate the learning needs of impaired students in regular facilities, and apply specific instructional techniques that would suit the characteristics of disabled children.

Overall, the inclusion of mentally or physically impaired children in regular education units has represented a positive, laudable trend in Ghana over the recent past, partly fuelled by the global movement in education seeking to improve the living standards. Research has claimed that although CWDs are included in mainstream facilities, these cohorts still face many obstacles to adaptive education services (Mantey, 2014). While with the free education policy, more impaired children are being offered opportunities than ever before, some are still hidden from the community eyes and non-enrolled.

Ghana commitment to provide inclusive education for all CWDs in line with the global agenda via its various policy acts cannot be overstressed. Many of the legal frameworks and policies crafted and enacted proved unsuccessful, leaving practically unchanged the situation of impaired students. The notion of inclusive education is rather limited and thus, it cannot reach its full potential in providing appropriate service for children with disabilities. This could be the results of a myriad of factors such as the lack of appropriate materials, low level of teacher training and competence, discrimination and stigma, insufficient government policies and commitment from stakeholders to accommodate the needs of special learners.

It is concerning that many years after the Salamanca statement and the adoption of the national disability law in 2000, Ghana still lacks separate frameworks and programs to guarantee the fundamental education rights of impaired children. This research has found that CWDs are often denied equal opportunities to receive meaningful education in regular schools. Attitudes must be massively changed-otherwise there will be no successful provision of inclusive education in Ghana. Although IE practices do exist, evidences reveal a lot of limitations around their application.

The societal understanding and views on disabilities have maintained barriers and the non-progress in the lives of impaired children. The domestic perspectives on IE reveal a superficial approach of the cultural uniqueness of the Ghanaian society in terms of traditional education and community development. Despite the gradual acceptance of these cohorts in mainstream schools, the structural and attitudinal factors stemming from traditional beliefs need to be removed for successful adaptive education practice.

This work has indicated that Ghana needs to create comprehensive strategies and programs to encourage inclusive education and that the attitude of the stakeholders is pivotal in achieving the goals of IE. The community is playing an important part in promoting the rights of disabled children and eliminating discrimination, social exclusion and alienation of this group.

## **7.2. Recommendations**

Although the Ghanaian government is working hard to improve the lives of the disabled citizens, particularly children, via the ratification of international convention and the creation of national policies, practical evidences reveal major implementation setbacks. Among the main causes, one may note the inadequate supervision, monitoring and assessment, the lack of involvement of the various stakeholders and difficult bureaucratic practices. Hence, in addition to elaborating written documents, officials must develop better mechanisms for implementation. Although IE is a significant step for the integration of disabled students into regular education, and generally into the mainstream social community, research has showed that schools are not optimally equipped with the physical, material and human resources to deliver equal education opportunities for all children, regardless of their condition. This finding suggests that education facilities should be adjusted to accommodate the learning needs of impaired young individuals.

A large literature highlights that impaired children are competent social agents that are capable of building their lives and making an important contribution to the society. Differently stated, although they are restricted by their condition to a certain extent, they are not completely incapable and dependent exclusively on other for survival. Therefore, the Ghanaian government and non-governmental entities should create social policies targeted at developing such skills to their full potential.

This dissertation highlights that despite the general progress towards including disabled children into mainstream education and wider community, the socio-cultural understanding of impairment and the negative attitudes still lead to discrimination, stigma and alienation of this vulnerable cohort. The complete integration of disabled children into the Ghanaian education system and society requires that all stakeholders, from teachers, parents, and siblings to non-disabled peers and administrative school staff, to continually support and accommodate the needs of special learners.

This study also documented that although disabled children have access to education, they are not reaping the full benefits of their rights, as a result of the system's inability to accommodate their needs in mainstream facilities. Considering the analysis presented above,



the following recommendation can be suggested to address the issues in the national education system for successful IE practices.

*First*, the community should radically change its view on children with disabilities to reduce stigma and discrimination against impaired students. This is pivotal, because the attitudes of instructors, peers and school administrators set the stage for the behaviour and understanding of others in relation to disabled children within the school environment and broader surroundings. This means that the societal beliefs influence the interaction between disabled and non-disabled, and the responsibilities of the mentors and school staff. Differently stated, the school environment reflects the society; thus, the acceptance of CWDs will dilute the traditional negative opinions on the causes of impairment and improve the quality of the interaction among those involved.

*Second*, instructors, non-disabled peers and other school staff should be encouraged to display positive attitudes towards accommodating special learners. Even more important, teachers, as ones standing at the forefront of practical IE implementation, need to reconsider their view and values to ensure effective adaptive instruction for all students. The current programs should be redesigned to efficiently meet the requirements of all diverse pupils in mainstream education units. Altogether, these factors would enable a better understanding of disability and facilitate quality education services for all children, regardless of their condition. The training of mentors and all implementers should be focused on providing the best assistance possible to these categories of pupils in regular classrooms. The existing special education module of teacher training projects must be adjusted to promote IE practices. Again, changes in teachers' approach of instruction for the disabled will refine their understanding of the education plight of such cohorts and decrease the low expectations. Regular school tutors must work harder to provide opportunities for CWDs given their unique education requirements and reduce discrimination.

*Third*, the Ghanaian policy making arena needs to show and promote an attitudinal change towards the traditional understanding of disability, which is affecting CWDs chances to quality educational services. The negative perception of impairment represents a major challenge to achieving inclusivity in education and thus, requires an urgent solution.

Successful IE teaching practices ask for a fundamental reshape of the cultural and historic social beliefs about disability. Furthermore, the country should have a universal policy for disabled individuals in general and a unique education perspective towards accommodating the needs of special learners in regular settings. The government should allocate separate resources from the main budget to encourage inclusive education practices and cover the attached demand. Ghana should craft a funding strategy targeted at achieving inclusivity for all students, irrespective of their condition, which should be tailored according to local/regional specific factors. Instructors should be consulted on IE-related decisions, such as the creation of IE policies to address educational difficulties and deliver quality services to impaired students. Nevertheless, to remove the factors that hinder such policy work, the Ghanaian government should be actively engaged in the financial development of IE and remove institutional barriers. In addition, authorities should provide families with some level of financial assistance to ease the cost of educating impaired children. The government should also promote the right to quality education and full participation for all disabled children.

*Fourth*, IE efforts are pivotal to creating an inclusive social community; hence, the education system needs to be reshaped to ensure inclusivity and equal opportunities for impaired students. IE should provide a major avenue to address the particular needs of CWDs, meet the modern societal demands, and improve the living standard for disabled children. IE should be available without discrimination and integrate CWDs into mainstream educational facilities. All children have equal rights to quality education services that would lay out the foundation for lifelong learning, with no exception. In addition, IE practices must address the deep-rooted traditional values and negative beliefs about impaired children. The same is true for all stakeholders (e.g. teachers, parents, siblings, peers and other school staff), which must understand this particular human condition and work together to achieve inclusivity in schools and the wider community. Class size must be limited and the physical settings should be adjusted to help impaired children reach their full participation potential in regular learning activities. The education system must create flexible curricula to accommodate SEN children, who should be encouraged to pair with non-disabled children to that friendship can be build, discrimination removed, and diversity accepted.

*Fifth*, the involvement of parents and siblings should be essential when it comes to decisions concerning the education of their disabled children; in addition, the former should always

honour invitations from teachers or school administration. Families of CWD need to change the perception about enrolment of impaired children driven by poverty-related belief that this would be a waste of already scarce resources. They should be educated about the potential of disabled children, and be explained the importance of involvement of CWDs in school activities.

In light of the findings from this dissertation, it is obvious that Ghana needs to further improve its education system in terms of teacher training to accommodate SEN students, planning and adjusting curricula and examination procedures to ensure inclusivity for all students in regular settings. Altogether, these would improve teaching practices and ensure accessibility to quality education for Ghanaian CWDs.

This research has indicated major loopholes in IE practices, such as the misplaced focus on reshaping school culture as against ensuring resources and capacity of both special and mainstream units to unlock opportunities for children with learning difficulties. Furthermore, deep-rooted beliefs about disability, attitudes and behaviour of instructors influence the delivery of IE, the quality of learning materials and services impaired students receive. The results showed that regular school teachers who felt unprepared to work with SEN children display a certain level of frustration, anger and negativity towards IE.

### **7.3. Future research avenues**

The stream of academics exploring the research methodology has asserted that analyses on views, attitudes, abilities, competence or knowledge are best executed via quantitative methods (.g. Cohen et al., 2000; Gall et al., 2003; Salend, 2010; Nketsia, 2016). Other scholars noted the difficulty of noting from outside the reactions of teachers to individual differences; in some cases, observers have no knowledge on the particular circumstances of teachers thinking, which limits their actions on planning and past experiences (Florian and Black-Hawkins, 2011). In addition, the presence of an observer could lead to biased results, as teachers could artificially model their behaviour to demonstrate inclusive practices.

Further investigations on the topic could apply experimental and longitudinal models to offer a high-level picture of the impact of instructors' attitude, skills, competence and self-efficacy towards the delivery of inclusive education for disabled children. Furthermore, teacher educators should carry out more analyses to capture the type of skills and knowledge required by mentors to develop inclusive education practices in the context of Ghana. They must

examine the rising literature on IE to identify, via action or experimental research, what is the array of effective abilities and values that would enable the creation of inclusive education settings, given the Ghanaian country-specific factors. Based on such findings, the education system can determine the content of IE curricula.

## REFERENCES

1. Abosi, C. O. 2007. Educating children with learning disabilities in Africa. *Learning Disability Research & Practice*, 22: 167-172.
2. Adnan, A.H., Hafiz, I.A. 2001. A Disabling Education: The Case of Disabled Learners in Malaysia. *Disability & Society* 16 (5): 655-669.
3. Agbenyega, J. 2003. The power of labelling discourse in the construction of disability in Ghana. Monash University.
4. Agbenyega, J., Deku, P. 2011. Building new identities in teacher preparation for inclusive education in Ghana. *Current Issues in Education*, 14(1): 1-36.
5. Ahmed, T. 2005. The population of persons with disabilities in Pakistan. *Asia Pacific Population Journal*, 10(1): 39-62.
6. Ahsan, T., U. Sharma, and J. Deppeler. 2012. Challenges to prepare pre-service teachers for inclusive education in Bangladesh: beliefs of higher educational institutional heads. *Asia Pacific Journal of Education*, 32: 241-257.
7. Ainscow, M. 2005. Developing inclusive education systems: what are the levers for change? *Journal of Educational Change*, 6(2): 109- 124.
8. Alemu, Y., 2014. Impact of Rehabilitation Centre on the psycho-social Condition of Children with Physical Impairment.  
<http://etd.aau.edu.et/bitstream/123456789/5514/1/Yeshimebet%20Alemu.pdf>
9. Allan, J. 1999. *Actively Seeking Inclusion: Pupils with Special Needs in Mainstream Schools*. London: Falmer Press.
10. Al-Obaidi, A., Budosan, B. 2011. Mainstreaming Educational Opportunities for Physically & Mentally Disabled Children & Adolescents in Iraq. *Advances in School Mental Health Promotion*, 4 (1): 35-43.
11. Ametepee, L. K., & Anastasiou, D. 2015. Special and inclusive education in Ghana: Status and progress, challenges and implication. *International Journal of Educational Development*, 41: 143–152.
12. Amr, M. 2011. Teacher education for inclusive education in the Arab world: The case of Jordan. *Prospects*, 41: 399-413.
13. Anastasiou, D., and Kauffman, J., 2013. The Social Model of Disability: Dichotomy between Impairment and Disability. *The Journal of Medicine and Philosophy*, 38(4), 441 – 459.
14. Anthony, J. 2011. Conceptualizing disability in Ghana: Implications for EFA and inclusive education. *International Journal of Inclusive Education*, 15: 1073–1086.
15. Anthony, J. H. 2010. Access to education for students with autism in Ghana: Implications for EFA. Background paper prepared for the Education for All Global Monitoring Report.
16. Appiagyei-Atua, K. 2006. A New Disability Law in Ghana: The Way Forward. A paper presented at the second Annual CHRAJ-GBA-CHRI Lectures, 2006, Accra.
17. Arbeiter, S., and S. Hartley. 2002. Teachers' and Pupils' Experiences of Integrated Education in Uganda. *International Journal of Disability, Development and Education*, 49: 61-78.

18. Aro, T., Jere-Folotiya, J., Hengari, J., Kariuki, D., & Mkandawire, L. 2011. Learning disabilities. In T. Aro & T. Ahonen (Eds.), *Assessment of learning disabilities: Cooperation between teachers, psychologists and parents* (pp. 13-29). Turku, Finland: University of Turku and Niilo Mäki Institute, Jyväskylä
19. Avoke, M. 2001. Some historical perspectives in the development of special education in Ghana. *European Journal of Special Needs Education*, 16(1): 29-40.
20. Avoke, M. 2002. Models of disability in the labelling and attitudinal discourse in Ghana. *Disability & Society*, 17: 769–777.
21. Avoke, M., Avoke, S. 2004. Inclusion, rehabilitation and transition services in special education. Winneba, Ghana: Department of Special Education, University of Education.
22. Baffoe, M. 2013. Stigma, discrimination & marginalization: Gateways to oppression of persons with disabilities in Ghana, West Africa. *Journal of Educational and Social Research*, 3(1): 187–198.
23. Barton, L. (Ed.) 1997. *The Politics of Special Educational Needs*. Lewes: Falmer.
24. Batool, T., and Mehmood, H. 2000. Attitudes of Visually Impaired Children toward their Inclusion in the Schools of Normal Children. Master's thesis, University of the Punjab.
25. Becker, G. 1981. Coping with stigma: lifelong adaptation of deaf people. *Social Science and Medicine*, 15(1): 21–4.
26. Blaikie, N. 2000. *Designing social research: the logic of anticipation*. Cambridge, UK. MA: Polity Press: Blackwell.
27. Booth, T. and Dyssegaard, B. 2008. Quality is not enough – The contribution of inclusive values to the development of Education for All. Ministry of foreign affairs of Denmark (Danida).
28. Botts, B. H., Owusu, N. A. 2013. The State of Inclusive Education in Ghana, West Africa. *Preventing School Failure: Alternative Education for Children and Youth*, 57(3): 135–143.
29. Bryman, A. 2004. *The SAGE encyclopaedia of social science research methods*. Thousand Oaks, CA: SAGE.
30. Bryman, A. 2008. *Social Research Methods* (3rd ed.). Oxford: Oxford University Press.
31. Buchanan, E., and Hvizdak, E., 2009. Online survey tools: ethical and methodological concerns of human research ethics committees. *Journal of Empirical Research on Human Research Ethics*, 4(2), 37-48.
32. Butler, F. M., Miller, S. P., Lee, K., Pierce, T. 2001. Teaching mathematics to students with mild-to-moderate mental retardation: A review of the literature. *Mental Retardation*, 39: 20–31.
33. Campbell, J., Gilmore, L., Cuskelly, M. 2003. Changing student teachers' attitudes towards disability and inclusion. *Journal of Intellectual and Developmental Disability*, 28, 369–379.
34. Carroll, A., Forlin, C., Jobling, A. 2003. The impact of teacher training in special education on the attitudes of Australian pre-service general educators towards people with disabilities. *Teacher Education Quarterly*, 30: 65–79.

35. Casely-Hayford, L., Quansah, T., Tetteh, P., Adams, R., & Adams, I. 2011. Inclusive education in Ghana: A look at policy, and practice in Northern Ghana: Associates for Change.
36. Casely-Hayford, L., Quansah, T., Tetteh, P., Adams, R., Adams, I., 2011. Inclusive Education in Ghana: a look at policy, and practice in Northern Ghana. Voluntary Service Organisation (VSO, Ghana).
37. Chhabra, S., Srivastava, R., Srivastava, I. 2010. Inclusive Education in Botswana: The Perceptions of School Teachers. *Journal of Disability Policy Studies*, 20: 219-228.
38. Coe, S. 2013. Outside the circle: A research initiative by Plan International into the rights of children with disabilities to education and protection in West Africa. Dakar: Plan West Africa
39. Cohen, L., Manion, L., & Morrison, K. 2000. *Research methods in education*. 5th Edition. Routledge; Falmer.
40. Cook, B.G., Tankersley, M., Cook, L., Landrum, T. 2000. Abstract of Teachers' Attitudes toward their included students with disabilities. *Exceptional Children* 67(1): 115-135.
41. d'Aiglepieyre, R. 2012. Exclusion Scolaire et Moyens d'Inclusion au Cycle Primaire à Madagascar. Antananarivo, UNICEF.
42. Danforth, S., Morris, P. (2006). Orthodoxy, heresy and the inclusion of American students considered to have emotional/behavioural disorders. *International Journal of Inclusive Education*, 10(2-3), 135-148.
43. Dart, G. 2006. 'My eyes went wide open' – An evaluation of the special needs education awareness course at Molepolole College of Education Botswana. *British Journal of Special Education*, 33: 130–138.
44. de Boer, A., S. J. Pijl, and A. Minnaert. 2010. Regular primary schoolteachers' attitudes towards inclusive education: a review of the literature. *International Journal of Inclusive Education*, 15: 331-353.
45. de Boer, A., S. J. Pijl, and A. Minnaert. 2012. Students' Attitudes towards Peers with Disabilities: A review of the literature. *International Journal of Disability, Development and Education*, 59: 379-392.
46. de Graaf, G., van Hove, G., Haveman, M. 2011. More academics in regular schools? The effect of regular versus special school placement on academic skills in Dutch primary school students with Down syndrome. *Journal of Intellectual Disability Research*.
47. Denhart, H. 2008. Deconstructing barriers: Perceptions of students labeled with learning disabilities in higher education. *Journal of Learning Disabilities*, 41(6): 483-497.
48. Derman-Sparks, L. 1993. Empowering children to create a caring culture in a world of differences. *Childhood Education*, 70 (2): 66-71.
49. Donohue, D., and J. Bornman. 2015. South African Teachers' Attitudes toward the Inclusion of Learners with Different Abilities in Mainstream Classrooms. *International Journal of Disability, Development and Education*, 62: 42-59.

50. Dyson, A., Forlin, C. 1999. An international perspective on inclusion. In Wengelbrecht, P. (Ed.) *Inclusive Education in Action in South Africa*. Pretoria: van Schaik.
51. EFA Global Monitoring Report, 2010. Reaching the marginalized.
52. Ehsan, A.M. 2011. Follow-up Review of Primary Teachers Training Program in Bangladesh: Final report. UNESCO Bangkok.
53. Eide A.H., van Rooy, G., Loeb, M.E. 2003. *Living Conditions among People with Disabilities in Namibia: A national, representative study*. Oslo: SINTEF.
54. Eide, A.H. & Loeb, M.E. 2006. Living Conditions among People with Activity Limitations in Zambia. Oslo: SINTEF.
55. EL-Ashry, F. 2009. General education pre-service teachers' attitudes toward inclusion in Egypt (Unpublished doctoral dissertation). University of Florida, Florida.
56. Emam, M. M., Mohamed, M. 2011. Preschool and primary school teachers' attitudes towards inclusive education in Egypt: The role of experience and self-efficacy. *Procedia - Social and behavioral Sciences*, 29: 976-985.
57. Epstein, A. 2010. Making the Case for an Equity Focus in Education. New York: UNICEF.
58. European Agency for Development in Special Needs Education. 2012. The inclusive education in action project. <https://www.european-agency.org/agencyprojects/iea>.
59. European Training Foundation. 2010. Mapping policies and practices for the preparation of teachers for inclusive education in contexts of social and cultural diversity: Former Yugoslav Republic of Macedonia. Country Report - Working Document.
60. Ferguson, D. 1992. Regular Class Participation System (RCPS): A Final Report. Eugene: University of Oregon.
61. Field, S., Sarver, M. D., & Shaw, S. F. 2003. Self-determination: A key to success in postsecondary education for students with learning disabilities. *Remedial and Special Education*, 24: 339–349.
62. Filmer, D. 2008. Disability, Poverty, and Schooling in Developing Countries: Results from 14 Household Surveys. *World Bank Economic Review* 22(1): 141–163.
63. Florian, L., Black-Hawkins, K., 2011. Exploring inclusive pedagogy. *British Educational Research Journal*, 37(5), 813-828.
64. Forgacs, R. T. 2012. Strengthening Teacher Education to Achieve EFA by 2015: How are student teachers prepared to adopt inclusive attitudes and practices when they start teaching? Consultancy report, UNESCO.
65. Forlin, C. 2012. Responding to the need for inclusive teacher education: Rhetoric or reality?. In C. Forlin (Ed.), *Future Directions for Inclusive Education*, (pp1-12). London: Routledge.
66. Forlin, C., Loreman, T., Sharma, U., Earle, C. 2009. Demographic differences in changing preservice teachers' attitudes, sentiments and concerns about inclusive education. *International Journal of Inclusive Education*, 13(2): 195-209.
67. Gaad, E. 2004. Cross- cultural perspectives on the effect of cultural attitudes towards inclusion for children with intellectual disabilities. *International Journal of Inclusive Education*, 8(3): 311-328.



68. Gall, M, Gall, J., & Borg, W. 2003. Educational Research: An Introduction (7th ed.), Person Education.
69. Gleason, J. 1991. Multicultural and exceptional student education Separate but equal. *Preventing School Failure* 36 (1): 47-49.
70. Goffman, E. 1963. *Stigma: Notes on the management of spoiled identity*. Englewood Cliffs, NJ: Prentice Hall.
71. Grima-Farrell, C. R., Bain, A., & McDonagh, S. H. 2011. Bridging the research-to-practice gap: A review of the literature focusing on inclusive education. *Australasian Journal of Special Education*, 35(2): 117–136.
72. Groce, N. 2004. Adolescents and Youth with Disabilities: Issues and Challenges. *Asia Pacific Disability Rehabilitation Journal*, 15(2):13–32.
73. Groce, N. E. 1999. Disability in cross-cultural perspective: Rethinking disability. *Lancet*, 354: 756–757.
74. GSS. 2013. 2010 Population and Housing Census: Demographic, Social Economic, &
75. Haimour, A. I. 2012. Undergraduate universities student's attitudes toward disabled persons in Saudi Arabia. *European Journal of Educational Studies*, 4: 269–280.
76. Hammad, T., Singal, N. 2015. Education of women with disabilities in Pakistan: enhanced agency, unfulfilled as pirations. University of Cambridge. *International Journal of inclusive education*, 1-31.
77. Hasan, R. 2006. Situational analysis and assessment of education for disabled children in Bangladesh, South Asia, East Asia and South Africa'. In B. Albert (Ed), *In or Out of the Mainstream? Lessons from research on disability and development cooperation* (pp. 193-203). Leeds: Disability Press.
78. Hayat, R. 1994. The attitudes of the Physically Disabled Students and their Teachers towards Integration of Disabled in School for Normal Children. Master's thesis, University of the Punjab.
79. Hemmingson A, Borell H. 2002. Environmental barriers in mainstream schools. *Child Care Health Development*, 28: 57–63.
80. Henne, A. 2013. Teacher absenteeism cause of BECE failure. The Ghana News Agency. Available from [www.ghanaweb.com](http://www.ghanaweb.com)
81. Hernandez, B., Keys, C., Balcazar, F. 2000. Employer attitudes toward workers with disabilities and their ADA employment rights: A Literature. *Review Journal of Rehabilitation*, 66 (4): 4-16.
82. Hettiarachchi, S., Das, A. 2014. Perceptions of 'inclusion' and perceived preparedness among school teachers in Sri Lanka. *Teaching and Teacher Education*, 43: 143-153.
83. Holt, L. 2004. Children with mind–body differences: performing disability in primary school classrooms. *Children's Geographies*, 2(2), 219-236.
84. Hornstra, L., Denessen, E., Voeten, M., van den Bergh, L., & Bakker, J. 2010. Teacher attitudes toward dyslexia: Effects on teacher expectations and the academic achievement of students with dyslexia. *Journal of Learning Disabilities*, 43(6): 515-529.
85. Hughes, J. 1990. *The Philosophy of Social Research*. 2nd edition Longman: Harlow.

86. Julie, W., Peter, B. 2005. Mainstreamed students with learning difficulties: Failing and underachieving in the secondary school. *Australian Journal of Learning Disabilities*, 10(2): 43-49.
87. Kassah, A. 2008. Begging as work: A study of people with mobility difficulties in Accra, Ghana. *Disability & Society*, 23(2): 163-170.
88. Kassah, A., Kassah, B., Agbota, T. 2012. Abuse of disabled children in Ghana. *Disability & Society*, 27: 689–701.
89. Kenny, M., McNeela, E., Sevlín, M and Daly, T. 2000. Hidden Voices: Young People with Disabilities speak about their second level schooling, Ballincollig, Co. Cork: The South West Regional Authority
90. Kuyini, A. 2013. Teachers' pedagogical competencies in including children with learning difficulties in primary schools in Ghana (Unpublished PhD thesis). University of Brunei Darussalam, Bandar Seri Begawan.
91. Kuyini, A., Abosi, O. 2011. The 2nd Generation Street Children (SGSC) in Accra: Developing teaching strategies to enhance positive learning outcomes in schools. *World Journal of Education*, 1(2): 161-171.
92. Kuyini, A., Abosi, O. 2014. Teacher Effectiveness in Adapting Instruction to the Needs of Pupils with Learning Difficulties in Regular Primary Schools in Ghana. *SAGE Open* 4(1): 1-16.
93. Kuyini, A., Desai, I. 2008. Providing instruction to students with special needs in inclusive classrooms in Ghana: Issues and challenges. *International Journal of Whole Schooling*, 4(1): 22-39.
94. Kuyini, A., Mangope, B. 2011. Student teachers' attitudes and concerns about inclusive education in Ghana and Botswana. *International Journal of Whole Schooling*, 7(1): 1-18.
95. Lamptey, D., Villeneuve, M., Minnes, P., McColl, M. 2015. Republic of Ghana's policy on inclusive education and definitions of disability. *Journal of Policy and Practice in Intellectual Disabilities*, 12: 108–111.
96. Lari, Z.S. 2000. Self-empowerment of women with disabilities in Pakistan. International Special Education Conference. University of Manchester: UK.
97. Laurin-Bowie, C. 2009. Better Education for All: When We're Included Too. A Global Report, Inclusion International, [http://inclusion-international.org.cluster.cwcs.co.uk/wp-content/uploads/Better-Educationfor-All\\_Global-Report\\_October-2009.pdf](http://inclusion-international.org.cluster.cwcs.co.uk/wp-content/uploads/Better-Educationfor-All_Global-Report_October-2009.pdf)
98. Lee, J., Park, O. 2008. Adaptive instructional systems. In J. M. Spector, M. D. Merrill, J. van Merriënboer, & M. P. Driscoll (Eds.), *Handbook of research on educational communications and technology* (pp. 469-484). New York, NY: Taylor & Francis.
99. Lewis, A., Parsons, S., Robertson, C. 2006. My school, my family, my life: Telling it like it is. DRC: London (available at [www.drc-gb.org](http://www.drc-gb.org))
100. Lipsky, D. K. & Gartner, A. 1997. *Inclusion and School Reform: Transforming America's classrooms*. Baltimore: Paul H. Brookes Publishing Co.
101. Llewellyn, A. 2000. Perceptions of mainstreaming: A systems approach. *Developmental Medicine and Child Neurology*, 42: 106–115.

102. Llewellyn, A., Hogan, K. 2000. The use and abuse of models of disability. *Disability & Society*, 15(1), 157-165.
103. Lodge, A., Lynch, K. 2004. *Diversity at School*, Dublin: Institute of Public Administration
104. MacArthur, J. 2009. *Learning Better Together: Working Towards Inclusive Education in New Zealand Schools*, IHC New Zealand.
105. MacArthur, J., Kelly, B., Sharp, S., Gaffney, M. (2005). Participation or exclusion? Disabled children's experiences of life at school. A paper presented at the Children's Issues Conference, Dunedin, New Zealand.
106. Majid, M., & Khan, G. S. 1994. Attitude of the Parents and Teachers towards Education and Rehabilitation of Visually Impaired Children. Master's thesis, University of the Punjab.
107. Malak, M. 2013. Inclusive education reform in Bangladesh: Pre-service teachers' responses to include students with special educational needs in regular classrooms. *International Journal of Instruction*, 6: 195–214.
108. Mamah, M., 2016. Disabled But Not Unable; Agency and Children with Physical Disability, a Case Study in Ghana. Norwegian Centre for Child Research, <https://brage.bibsys.no/xmlui/bitstream/handle/11250/2401974/Mamah%20Mispah.pdf?sequence=1>
109. Mantey, E., 2014. Accessibility to inclusive education for children with disabilities: a case of two selected areas in Ghana. University of Siegen, <http://d-nb.info/1068362936/34>
110. Marks, S.B. 1997. Abstract on reducing prejudice against children with disabilities in inclusive settings. *International Journal of Disability Development*, 44: 117-131.
111. Mattson, E. 2006. *Field-based Models of Primary Teachers Training: Case studies of student support systems from sub-Saharan Africa*. London: DFID.
112. Michailakis, D. 2003. The Systems Theory Concept of Disability: one is not born a disabled person, one is observed to be one. *Disability & Society*, 18(2): 209-229.
113. Miles, S., and N. Singal. 2009. The Education for All and inclusive education debate: conflict, contradiction or opportunity? *International Journal of Inclusive Education*, 14: 1-15.
114. Miller, R., Brewer, J. 2003. *The A-Z of Social Research*. London: Sage.
115. Ministry of Education (MOE). 2008. Preliminary Education Sector Performance Report, Ministry of Education, Science and Sports, Accra, Ghana, 60–61.
116. Ministry of Education (MOE). 2013. Education Sector Performance Report. Accra: MOE.
117. Ministry of Education and Training (MOET). 2009. Review of Inclusive Education in Teachers Preparation for Primary Education Level, within JFIT funded project 'Strengthening teacher training to achieve EFA'. Ha Noi: MOET.
118. Ministry of Education, Science and Sports (MOESS). 2008. Preliminary Education Sector Performance Report. Accra, Ghana: MoESS.

119. Ministry of Education. 2015. Final inclusive education policy. Ministry of Education, Republic of Ghana.
120. Mirosevic, J. K. 2009. Inclusive education in Croatia. Paper presented at Regional preparatory workshop on inclusive education, Eastern and South Eastern Europe, Sinaia, Romania. UNESCO, International Bureau of Education.
121. Mitchell, D. 2010. Education that Fits: Review of international trends in the education of students with special educational needs. Christchurch: University of Canterbury.
122. Mittler, P. 2003. International experience in including children with disabilities in ordinary schools. Paper prepared for UNESCO.  
[http://www.eenet.org.uk/resources/docs/internat\\_exp.php](http://www.eenet.org.uk/resources/docs/internat_exp.php)
123. Moburg, S., and H. Savolainen. 2003. Struggling for inclusive education in the North and the South: Educators' perceptions on inclusive education in Finland and Zambia. *International Journal of Rehabilitation Research*, 26: 21-31.
124. Mont, D. 2007. Measuring Disability Prevalence, Social Protection Discussion Paper Series, The World Bank, No. 0706, 1-42.
125. Morley, L., Croft, A. 2011. Agency and advocacy: Disabled students in higher education in Ghana and Tanzania. *Research in Comparative and International Education*, 6(4): 383- 399.
126. Morley, L., Leach, F, Lussier, K., Lihamba, A., Mwaipopo, R., Forde, L., Egbenya, G. 2010. Widening Participation in Higher Education in Ghana and Tanzania: Developing an Equity Scorecard. Brighton, UK: University of Sussex.
127. Mukhopadhyay, S. H., Johnson Nenty, H. J., & Abosi, O. 2012. Inclusive education for learners with disabilities in Botswana primary schools. *SAGEOpen*, 2(2): 51-58.
128. Mutua, K., Swadener, B. 2011. Challenges to inclusive education in Kenya: Postcolonial perspectives and family narratives. In A. J. Artiles, E. Kozleski, & F. Waitoller (Eds.), *Inclusive education: Examining equity on five continents* (pp. 201-221). Cambridge, MA: Harvard Education Press.
129. Muwana, F., and M. Ostrosky. 2014. Factors related to pre-service teachers' attitudes towards inclusion: a case for Zambia. *International Journal of Inclusive Education*, 18: 763-782.
130. Naami, A., Hayashi, R. 2012. Perceptions about disability among Ghanaian university students. *Journal of Social Work in Disability & Rehabilitation*, 11: 100–111.
131. Nagata, K. K. 2003. Gender and disability in the Arab region: The challenges in the new millennium. *Asia Pacific Disability Rehabilitation Journal*, 14(1): 10-17.
132. Nasir, M., Efendi, A. 2016. Special education for children with disabilities in Malaysia: Progress and obstacles. *Malaysian Journal of Society and Space*, 12(10): 78 – 87.
133. National Statistics Bureau. 2012. Two Stage Child Disability Study Among Children 2-9 years. [www.nsb.gov.bt](http://www.nsb.gov.bt)

134. Nawaz, N., and Saeed, R. 1999. The Study of the Level of Acceptability among P.T.C. Female and Male Teachers to Include the Hearing Impaired Children in Normal Schools. Master's thesis, University of the Punjab.
135. Nisreen, A. 2013. The pros and cons of inclusive education from the perceptions of teachers in the United Arab Emirates. *International Journal of Research Studies in Education*, 2(1): 55 – 66.
136. Nketsia, W., 2016. Initial Teacher Preparation for Inclusive Education in Ghana: Status and Challenges. *Jyväskylä Studies in Education, Psychology and Social Research* 573.
137. Nketsia, W., 2017. A cross-sectional study of pre-service teachers' views about disability and attitudes towards inclusive education. *International Journal of Research Studies in Education*, 6(3): 53-68.
138. Nketsia, W., and T. Saloviita. 2013. Pre-service teachers' views on inclusive education in Ghana: Journal of Education for Teaching. *International research and pedagogy*, 39: 429-441.
139. Noor, N., Khokhar, S. 2000. The Study of the Problems Faced by the Physically Handicapped Students in the Normal Educational Institutions. Master's thesis, University of the Punjab.
140. Norins-Bardon, Matsumoto, Siperstein. 2005. US students attitudes to students with intellectual disabilities at the Global Youth Summit, Nagano, Japan, February 2005 (available at [www.specialolympics.org](http://www.specialolympics.org))
141. O'Gorman, E. 2010. The context of professional learning for inclusion: A 4-ply model. *International Journal of Whole Schooling*, 6(1): 32-59.
142. Ocloo, M., Subbey, M. 2008. Perception of basic education school teachers towards inclusive education in the Hohoe District of Ghana. *International Journal of Inclusive Education*, 12: 639–650.
143. Oliver, M. 2013. The social model of disability: Thirty years on. *Disability & Society*, 28, 1024–1026.
144. Opertti, R., Brady, J., Duncombe, L. 2009. Moving forward. *Prospects*, 39: 205-214. doi:10.1007/s11125-009-9112-3
145. Oswald, M., and E. Swart 2011. Addressing South African Pre-service Teachers' Sentiments, Attitudes and Concerns Regarding Inclusive Education. *International Journal of Disability, Development and Education*, 58: 389-403.
146. Peters, S. 2003. *Achieving Education for All by including those with Disabilities and Special Needs*, Washington DC: World Bank Disability Group.
147. Peters, S. 2004. *Inclusive Education: An EFA strategy for all children*. Washington: World Bank.
148. Peters, S.J., Johnstone, C., Ferguson, P. 2005. A disability rights model for evaluating inclusive education. *International Journal of Inclusive Education*, 9(2): 139–160.
149. Quennerstedt, A., Quennerstedt, M. 2014. Researching Children's Rights in Education: Sociology of Childhood Encountering Educational Theory. *British Journal of Sociology of Education*, 35 (1): 115-132.

150. Radhakrishna, R. B. Francisco, C. L., & Baggett, C. D. 2003. An analysis of research design used in agricultural and extension education. Proceedings of the 30th National Agricultural Education Research Conference, 528-541.
151. Rao, S., 2004. Faculty attitudes and students with disabilities in higher education: A literature review. *College Students Journal*, 38: 191-198.
152. Rieser, R. 2012. Implementing Inclusive Education: A Commonwealth Guide to Implementing Article 24 of UN Convention on the Rights of Persons with Disabilities, Second Edition. London: Commonwealth Secretariat.
153. Robson, C. 1993. *Real world research*. Oxford, UK: Blackwell.
154. Robson, C. and P., Evans. 2005. Educating Children with Disabilities in Developing Countries: The Role of Data Sets. Huddersfield, UK: OECD.  
<http://www.childinfo.org/>
155. Rohland, P., Erickson, B., Mathews, D., Roush, S. E., Quinlan, K., & Smith, A. D. 2003. Changing the culture (CTC): A collaborative training model to create systemic change. *Journal of Postsecondary Education and Disability*, 17(1): 9.
156. Rydstrom, H. 2010. Having 'learning difficulties': the inclusive education of disabled girls and boys in Vietnam. *Improving Schools*, 13: 81-98.
157. Sailor, W. (Ed.) (2002). *Whole-School Success and Inclusive Education: Building partnerships for learning, achievement, and accountability*. New York: Teachers College Press.
158. Salend, S. 2010. Evaluating inclusive teacher education programs: A flexible framework. In C. Forlin (Ed), *Teacher Education for Inclusion: Changing Paradigms and Innovative Approaches* (pp. 208–214). Abingdon: Routledge.
159. Santos Pais, M., 1999. A human right conceptual framework for UNICEF. United Nations Children's Fund International Child Development Centre Florence, Italy.
160. Schechtman, Z., Or, A. 1996. Applying counselling methods to challenge teacher beliefs with regard to classroom diversity and mainstreaming: an empirical study. *Teaching and Teacher Education*, 12(2): 137-47.
161. Schwille, J., Dembele, M., Schubert, J. 2007. Global Perspectives on Teacher Learning: Improving policy and practice. Paris: UNESCO, International Institute for Education Planning.
162. Scruggs, T. E., Mastropieri, M. A. 1996. Teacher perceptions of mainstreaming inclusion, 1958–1995: A research synthesis. *Exceptional Children*, 63: 59-74.
163. Sebba, J., Sachdev, D. 1997. What works in inclusive education? Iford.
164. Shaddock, A., MacDonald, N., Hook, J. Giorcelli, L. & Arthur-Kelly, M. 2009. Disability, diversity and tides that lift all boats: Review of special education in the ACT. Chiswick, NSW: Services Initiatives.
165. Shaddock, T. 2006. Students with disability in the mainstream: What works for teachers and students? Paper presented at the Cheri Conference, Westmead, NSW.
166. Shaeffer, S. 2009. A Review of Pre-service Teacher Education and Inclusive Education in Asia. Bangkok: UNESCO.

167. Sharma, U., Forlin, C., Loreman, T. 2008. Impact of training on pre- service teachers' attitudes and concerns about inclusive education and sentiments about persons with disabilities. *Disability & Society*, 23: 773–785.
168. Sharma, U., Loreman, T., & Forlin, C. 2011. Measuring teacher efficacy to implement inclusive practices: An international validation. *Journal of Research in Special Educational Needs*, 12(1): 12-21.
169. Shevlin, M., Kenny, M., McNeela, E. 2002. Curriculum Access for pupils with Disabilities: An Irish Experience. *Disability and Society*, 17(2):159–169. <http://www.ingentaconnect.com/content/routledg/cdso/2002/00000017/00000002/art00004>
170. Singal, N. 2005. 'Mapping the field of inclusive education: a review of the Indian literature'. *International Journal of Inclusive Education*, 9(4): 331-350.
171. Singal, N. 2008. Working towards inclusion: Reflections from the classroom: *Teaching and Teacher Education*. 24: 1516-1529.
172. Singal, N., Bhatti, F., Malik, R. 2011. Counting the invisible: understanding the lives of young people with disabilities in Pakistan. *Disability & Rehabilitation*, 33 (11): 908- 921.
173. Singal, N., Jeffery, R. 2011. Inclusive education in India: The struggle for quality in consonance with equity. In A. J. Artiles, E. Kozleski, & F. Waitoller (Eds.), *Inclusive education: Examining equity on five continents* (pp. 161-183). Cambridge, MA: Harvard Education Press.
174. Singal, N., Salifu, E., Iddrisu, K., Hayford, L., Lundebye, H. 2015. The impact of education in shaping lives: reflections of young people with disabilities in Ghana. University of Cambridge.
175. Siperstein, G.N., Norins, J., Corbin S., Shriver, T. 2003. Multinational study of attitudes towards individuals with intellectual disabilities. SO Washington, US
176. Slee, R. 2011. *The Irregular School: Exclusion, schooling and inclusive education*, Routledge: London.
177. Special Olympics. 2004. *A Study of Youth Attitudes about Intellectual Disabilities* (<http://www.specialolympics.org>)
178. Steinfeld, E. 2005. Education for All: The cost of accessibility. Quoted in UNICEF, 2013, *State of the World's Children: Children with Disabilities*. New York.
179. Stubbs, S., Myers, J., Lewis, I., Kumar, K. 2013. *Teacher Education for Children with Disabilities Literature Review*. UNICEF REAP Project.
180. Swart, E., Pettipher, R. 2005. A framework for understanding inclusion. in E. Landsberg, D. Kruger & N. Nel (Eds.) *Addressing barriers to learning: A South African perspective*, 3–23, Van Schaik Publishers, Pretoria.
181. Terzi, L. (2010). *Justice and Equality in Education: A Capability Perspective on Disability and Special Educational Needs* (1st ed.). New York: Continuum.
182. Tuakli-Wosornu, Y., Haig, A. 2014. Implementing the World Report on Disability in West Africa: challenges and opportunities for Ghana. *American Journal of Physical Medicine & Rehabilitation*, 93(1): S50-S57.
183. UNESCO Bangkok. 2009. *Teaching Children with Disabilities in Inclusive Settings*. Specialized Booklet Part of Embracing Diversity: Toolkit for creating

- inclusive, learning-friendly environments. Bangkok: UNESCO.  
[http://www2.unescobkk.org/elib/publications/243\\_244/Teaching\\_children.pdf](http://www2.unescobkk.org/elib/publications/243_244/Teaching_children.pdf)
184. UNESCO. 1997. International Standard Classification of Education. Paris: UNESCO
  185. UNESCO. 2002. Flagship initiative on the right to education for persons with disabilities: towards inclusion.
  186. UNESCO. 2005. Guidelines for Inclusion: Ensuring access for all. Paris: UNESCO. <http://unesdoc.unesco.org/images/0014/001402/140224e.pdf>
  187. UNESCO. 2007. EFA global monitoring report: EFA. Strong foundations: Early childhood care and education. Paris: UNESCO.
  188. UNESCO. 2008. Inclusive education: the way of the future. Paper prepared for the International Conference on Education, Geneva.
  189. UNESCO. 2009. Policy guidelines on inclusion in education. Paris: Author.
  190. UNESCO. 2010. EFA Global Monitoring Report: Reaching the marginalized. Paris: UNESCO. [www.unesdoc.unesco.org/images/0018/001866/186606e.pdf](http://www.unesdoc.unesco.org/images/0018/001866/186606e.pdf)
  191. UNICEF, 2013. Children and Young People with Disabilities Fact Sheet. [https://www.unicef.org/disabilities/files/Factsheet\\_A5\\_\\_Web\\_NEW.pdf](https://www.unicef.org/disabilities/files/Factsheet_A5__Web_NEW.pdf)
  192. UNICEF, 2014. Conceptualizing Inclusive Education and contextualizing it within the UNICEF Mission. [http://www.inclusive-education.org/sites/default/files/uploads/booklets/IE\\_Webinar\\_Booklet\\_1\\_0.pdf](http://www.inclusive-education.org/sites/default/files/uploads/booklets/IE_Webinar_Booklet_1_0.pdf)
  193. UNICEF. 1999. An Overview of Young People Living with Disabilities: Their Needs and Their Rights. Inter-Divisional working group on young People Program Division. New York: UNICEF.
  194. UNICEF. 2012. Global Initiative on Out-of-School Children: Ghana Country Study. Accra: UNICEF.
  195. UNICEF. 2015. Youth with disabilities fact sheet. <http://unsdn.org/youth-with-disabilities-fact-sheet/>
  196. United Nations. 1993. Standard Rules on the Equalization of Opportunities for Persons with Disabilities. 85<sup>th</sup> plenary meeting.
  197. United Nations. 2005. World Population Prospects The 2004 Revision Highlights New York, United Nations.
  198. Villa, R., Thousand, J. 1995. Creating an inclusive school (Alexandria: VA, Association for Supervision and Curriculum Development).
  199. Wapling, L. 2016. Inclusive Education and Children with Disabilities: Quality Education for All in Low and Middle income Countries. CBM
  200. Westwood, P. 2004. Effective teaching, to reduce failure. A modified and updated version of the paper Australian. *Journal of Teacher Education*, 21(1): 78-89.
  201. Wishart, J. G., Manning, G. 1996. Trainee teachers' attitudes to inclusive education for children with Down's syndrome. *Journal of Intellectual Disability Research*, 40.
  202. World Bank Human Development Unit, South Asia Region. 2007. Disability in India: From commitments to outcomes. Washington: World Bank.
  203. World Bank. 2010. Pakistan country partnership strategy 2012-13. The World Bank, Washington, DC: USA.



204. World Health Organisation (WHO) & World Bank. 2011. World report on disability. Geneva, Switzerland: Authors.
205. World Health Organization (WHO). 2010. Community Based Rehabilitation CBR Guidelines: Education. New York: World Health Organization.  
[http://whqlibdoc.who.int/publications/2010/9789241548052\\_education\\_eng.pdf](http://whqlibdoc.who.int/publications/2010/9789241548052_education_eng.pdf)
206. World Health Organization (WHO). 2011. World Report on Disability New York: WHO.
207. World Vision. 2007. Education's Missing Millions: Including disabled children in education through the EFA FTI process and national sector plans. Summary Report and Proposals. Milton Keynes: World Vision.
208. Zaman, M.Q. 1999. Religious education and the rhetoric of reform: the madrasa in British India and Pakistan. *Comparative Studies in Society and History*, 41(2): 294-323.