Introduction

The need to include children who are vulnerable in education as early as possible is evident if countries are to achieve the Education for All (EFA) targets and Sustainable Development Goals (SDGs).

Understanding Children with disabilities

Disability refers to a loss or reduction in the functional ability to perform an activity in a manner considered usual for other persons. Disability results from having impairment, but is worsened by environmental factors that limit opportunities to participate in society's activities at the same level with others. Children with disabilities include: children with hearing, visual, physical, communication, emotional, autistic, cognitive and intellectual impairments. They also include children with health conditions such as Cerebral Palsy, Spinal Bifida, Muscular Dystrophy, trauma, spinal cord injury, Down’s Syndrome dyslexia, dyscalculia and others. It is noted that it is also possible for children to have multiple impairments, such as being deaf-blind.
This paper will highlight Uganda’s position on provision of Early Childhood Care and Education (ECCE) to children with special needs (especially those with disabilities), outline the challenges that have persistently curtailed access to ECCE, and suggest strategies for the mainstreaming of special needs in ECCE centres and programmes.

**Background**

The Convention on the Rights of the Child (CRC, 1989) and the Convention on the Rights of Persons with Disabilities (CRPD, 2006) indicate that children with disabilities must have the same rights as other children. This includes access to health care, nutrition, education, social inclusion and protection from violence, abuse and neglect. However, there are still more than 150 million children with disabilities aged 3 to 5 who do not have access to pre-primary education, with 80% of these children living in low-income countries.

Section 4 of the Education (Pre-primary, Primary and Post Primary) Act (2008) states that, provision of education and training to the child shall be a joint responsibility of the state, the parent/guardian and other stakeholders. For all children, ECCE provides an important window of opportunity to prepare for lifelong learning and participation. For children with disability, it is a vital time in their lives, helping to ensure access to interventions which can help them to reach their full potential.

Despite these provisions, young children with disabilities are often excluded from mainstream programmes and services designed to ensure child development. They do not receive the specific support required to meet their rights and needs.

**Early Childhood Development in Uganda**

The Government of Uganda recognises the importance of Early Childhood Development (ECD), as one of the most important levels for accelerating the attainment of EFA goals and the SDGs. EFA goal number 1 obligates signatory Governments to expand and enhance a comprehensive ECD programme which is essential to the achievement of the basic education goals. SDGs state in Goal 4, Target 4.2, that by 2030 every country should ensure that children with disabilities under five years of age are included in disability-responsive ECD programmes. There are approximately 11,827,000 children with disabilities in Uganda below the age of 9, which is approximately 37% of the total population of under 9 year olds (Bakehena 2010). These children have needs ranging from protection, food and nutrition, health care, interaction and stimulation, sanitation and hygiene, affection, security, and learning, which are being met by various stakeholders, or are not being met at all.

While some children with disabilities have accessed ECCE, it seems their needs are not being met due to lack of special needs education skills among ECCE teachers. A study by Cambridge Education (2017) to review the 2007 Education Sector ECD Policy indicated that only one teacher in the 143 sampled ECCE centres confirmed that they had some skills and knowledge on special needs education. The study further revealed that no Centre had any special provisions for learners with special needs. Generally, children with disabilities lack access to specialised facilities and devices such as braille, wheelchairs, hearing aids, walking sticks and white canes. This limits them from accessing ECCE at an appropriate age. During 2015, only 1% of the 477,123 (Statistical Abstract 2016) children that received at least one year of pre-primary education were disabled. This indicates a huge access issue given the total population of disabled children. The most common impairments among those children currently accessing ECCE centres was mental impairment (28%) followed by those with a hearing impairment (25%), visual impairment (22%), physical impairment (16%), autism 5%, and those with multiple handicaps e.g. deaf-blind (4%) (Statistical Abstract 2016).
Rationale for Inclusion of Children with Disabilities in ECCE

Evidence-based research and multi-country experiences provide a strong rationale for inclusion of children with disabilities in ECCE. The main arguments are:

**Human Rights:** The CRC, CRPD and Education Act (2008) state that all children with disabilities have the right to develop “to the maximum extent possible”. These instruments recognise the importance of focusing not only on the child’s health or impairment but also on the influence of the environment as the cause of under-development and exclusion.

**Economic:** Children with disabilities who receive good care and developmental opportunities during early childhood are more likely to become healthy and productive adults. This can potentially reduce the future costs of remedial education, medical care and other social spending.

**Scientific:** The first three years of a child’s life are a critical period. They are characterised by rapid development, particularly of the brain, and thus provide the essential building blocks for future growth, development and progress. If children with disabilities are to survive, flourish, learn, be empowered, participate and survive secondary disabilities, their exposure to ECCE is essential. Early identification and intervention is more meaningful and effective than later interventions.

**Programmatic:** ECCE programmes can lead to improved rates of survival, growth and development, and ensure later education programmes are more effective. Well-organised, inclusive ECCE programmes for young children with disabilities can provide parents with more time to engage in productive work and enable girls and boys with disabilities to progress to primary school at the correct age.

**Social Acceptance:** Children with special needs are more likely to be accepted by the entire community and school community once they are in school (Wauters and Knoors, 2007).

Challenges of Access for Children with Special Education Needs

The following factors affect the access of children with special needs to ECCE Centres:

- **Stigma and Discrimination:**
  
  Children with disabilities are among the world’s most stigmatised and excluded children. Limited knowledge about disability and related negative attitudes can result in the marginalisation of children with disabilities within their families, schools and communities.

- **Shortage of specialised facilities, teachers, learning materials and support devices:**
  
  Lack or absence of special facilities and teaching and learning materials in Special and Inclusive ECCE Centres. These include Braille papers, Perkins Braille machines, Brailled text books, embossers, hearing aids for the deaf, white canes, magnifiers, and so on.
• **Teacher's knowledge and skills:**

There is often inadequate knowledge and skills among teachers to manage children with special needs in ECCE Centres. Particular problems relate to the ability of teachers to assess the needs of children and to identify their disabilities, and the capacity of teachers to use specialised equipment or facilities.

• **Teaching methods:**

All too often teachers use teaching methods which are not suitable to learners with special needs. It is rare for teachers to use differentiation, task analysis and collaborative teaching, all of which are more suited to learners with special needs.

• **Data on learners with special needs:**

There is lack of data/information on learners with special needs both in ECCE Centres and out of schools. Only those with visible special needs tend to be counted and considered.

• **Teacher pupil ratio:**

High teacher pupil ratios in many ECCE Centres ignore the Ministry of Education and Sports policy that the teacher pupil ratio for learners with SENs should be at 1:10 for children with moderate disability in ECCE Centres, and 1:3 where children are disabled or have severe/profound disability.

• **Accessibility:**

Most schools are not accessible for children with physical disabilities, and usually have latrines which learners with special needs cannot use. The ECCE Centres are usually unfriendly environments for learners with special needs.

• **Location and distances:**

The spread of present ECCE Centres across the country is skewed in favour of urban areas. This means that where the need is often greatest, in deep rural areas, the provision is lowest.

• **Age boundaries:**

The age for accessing ECCE Centres is standardised at 3 to 5 years, but some learners with disabilities can only perform tasks of a 3 to 5 year old at the age of 10 or even older. Unfortunately, there is no provision mentioned on age for ECCE for learners with special needs and the ECCE system sometimes rejects them as they fall outside the accepted age range, but are not ready to attend primary school.

• **Affordability and policy arrangements:**

In policy, provision of ECCE is predominantly a private sector issue. However, private owners are under no pressure to prioritise access for children with disabilities. Access is expensive for most learners, including those with special needs. Furthermore, owners often avoid enrolling children with special needs as they fear that they will have to incur extra costs to accommodate these children e.g. if a child has hearing impairments they will need an interpreter or a teacher with skills in sign language, or those with physical disabilities may require modification of infrastructure to ensure accessibility. The Cambridge Education study indicates many of the present private ECD Centres enroll just one or at most two children with special needs, and do not necessarily adjust their facilities to specifically cater for these children.
Proposed strategies for enhancing inclusion of children with special education needs in ECCE

- Promoting development in young children with disabilities requires a twin-track approach. This approach recognises that children with disabilities and their families have ordinary needs and must have access to mainstream programmes and services such as health care, child care and education.

- Strategies need to be set from home where parents/guardians play a big role in supporting inclusion of their children with disabilities and other special needs in mainstream schools. This can be done by a) enrolling their child; b) providing scholastic materials and all other basic needs, feeding, sanitation, hygiene, medical care, shelter, clothing, parental love and care for children; and c) supporting their child’s development at home and providing general information about their children to support other professionals and to guide them on how to enhance their child’s development in terms of communication, guidance and counselling, rehabilitation etc.

- A wide range of sectors should be involved in and share responsibility for identifying children with disabilities, providing ECD services and guaranteeing support for their families.

- For all inclusive ECCE and learning interventions, positive attitudes through community sensitisation regarding ECCE and interaction with peers, teachers, school administrators, other school staff, parents and community members are critical in supporting the inclusion of learners with disabilities and other special needs.

- Assessing and monitoring ECCE and school environments for promoting inclusion is an important part of guaranteeing appropriate educational opportunities for young children with disabilities.

- Multi-sectoral approaches with effective coordinating mechanisms between such sectors as education, health and social welfare are required to ensure early identification efforts, promote holistic responses and link school-based learning with home and community interventions.

- Expansion of professional development of ECCE service providers and actors is required through capacity building and ongoing support. ECCE training programmes must include a slot on special needs education for all students to get some knowledge but this is not enough. Therefore, making special needs education a full course unit would help in enhancing inclusion of children with disabilities and other special needs in ECCE.

- ECCE Centres should be registered and subsidised to absorb all eligible SEN learners so that all can get the opportunity to prepare for formal learning, which in turn reduces social prejudices and bias towards them.

- Affirmative action for increased SEN learner opportunities is required, so that parents and school managers in partnership with the Government collectively ensure all learners go through early learning.

- Intersectoral policies on ECCE interventions are required (NIECD Policy Action Plan 2016-2020).
References