Barriers to Parental/Family Participation in the Education of a Child with Disabilities in Kenya

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Abstract

In Kenya, the subject of parental participation has not received much attention in terms of research, and roles of parents in their children's education are not normally well defined (Njeru, 2015). Based on observations, reports and research, parental participation remains low especially in the rural areas. This paper will discuss the barriers to parental/family involvement in the education of a child with a disability and suggest possible steps towards empowering families of children with disabilities to take active roles in their education. This paper is expected to primarily benefit policy makers, parents and everyone on the frontline of implementation of special education laws and policies. It could also provide ammunition for advocacy groups and non-governmental organizations for spurring the government and the Ministry of Education into action that is tailored towards improving the education of children with disabilities in Kenya.

Keywords: Special Needs Education, Disabilities, Inclusive Education, Community Based Programs, Special Schools & Integrated Units.
Introduction

The guiding philosophy of education in Kenya is the concern that every Kenyan has an inalienable right to education regardless of ability or disability status. The vision of the Kenya government is to have “a society in which all persons regardless of their disabilities and special needs achieve education to realize their full potential” (Republic of Kenya: The National Special Needs Education Policy Framework, 2009, p.5). Special education is a vital tool for individuals with disabilities to realize their goals of equal opportunity, full participation in community life and economic self-sufficiency. In supporting the implementation of the Constitution of Kenya (Republic of Kenya, 2010), the Ministry of Education developed the Basic Education Act (Republic of Kenya, 2013). Articles 30 and 31 of this act spell out the duty of the parent or guardian of a person with a disability thus “every parent shall ensure his/her child attends public school which offers free and compulsory education” (Republic of Kenya 2013, p. 240). Further, the Ministry of Education adopted a national policy on special needs education in 2009. The Kenyan government is also a signatory to various international conventions and declarations such as Convention on the Rights of the Child (United Nations, 1989), World conference on Education for All (EFA (United Nations, 1990), World Conference on Special Needs Education (UNESCO, 1994), Dakar Forum for Action (United Nations, 2000), and the UN Convention on the Rights of Persons with Disabilities (2006). Additionally, the government has made a commitment to provide Universal Primary Education (UPE) by the year 2015. Children's right to basic education (including special needs education) is also provided in the Children's Act of 2001 (Republic of Kenya 2016).

Families of children/individuals with disabilities do not participate actively in the education of their children in Kenya especially so among the rural communities. Lack of parental/family participation in the education of a child with a disability is a major problem facing special education provision in Kenya (Abilla, 1988). Many parents of children with disabilities are unable to access vital services for their children due to stigma, poverty and a lack of useful knowledge of the existence of resources and services. Children with special needs are taken to school and left in the care of teachers who are overwhelmed by the large number of children in the classes, that they do not pay much attention to the child with disabilities. People with disabilities in Kenya like in many developing countries are a marginalized population and face problems as a result of their disability. Most have no access to education, health, employment or rehabilitation (African Child Policy Forum, 2011).

Research has repeatedly proven that parental participation in the education of their children plays a major role in their academic performance and general development (Emerson, Fear, Fox & Sanders, 2012). Children whose parents and families in general stay engaged in their education have been shown to perform better than those who do not receive such family support.

The barriers for those living with a disability and their parents/families are both physical and psycho-social. According to the State of Disabled People’s Rights in Kenya Report (African Union of the Blind, 2007), the lives of people with disabilities in Kenya are marked by experiences of discrimination, prejudice and inequality. For children with disabilities, the obstacles include stigma which is still attached to disability, a lack of suitable transport to enable all children to make the journey each morning to the classroom, lack of appropriate technology and assistive devices to enable access to the curriculum, and a continued lack of resources, including adequately trained teaching staff. Early detection of disability efforts is still a challenge.
as most parents seek help as the last resort. People living with disabilities face barriers ranging from discriminatory attitudes, abuse and violence and barriers to access that lead to segregation and exclusion in the family context, at work, school and in the society, where disability is often regarded as a burden and shameful (African Union of the Blind, 2007).

There are currently 1.3 million people living with a disability in Kenya (Republic of Kenya, 2008). Of this number only 39% and 9% have attended a regular primary school and high school respectively. The enrolment of learners in special institutions and units is currently 102,749 students. Out of this, 21,050 are in special schools while 81,649 are enrolled in integrated special units at both primary and secondary schools (Republic of Kenya, 2012). This enrollment figure represents about one third of the expected number of learners with special needs according to estimates.

Parental empowerment and inclusion in the education of their child with a disability is very important. For example, parents can provide very valuable prenatal, perinatal and postnatal history during the assessment process for a child with a disability. The Kenya National Special Needs Education Policy Framework (Republic of Kenya, 2009) identified a number of barriers to the education of children with disabilities/special needs. Some of the barriers identified in this document include issues related to access, equity, attitude, stigma, discrimination, cultural taboos and poverty (p.15). These issues create barriers to participation of parents in the education of their child with a disability. The barriers to active parent/family involvement are discussed in the section below.

Absence of strong special education laws/policies:

While there are many cases of initiatives by the Kenya government to include children with disabilities in education, a lack of clear legislation, policy, targets and plans tend to be major obstacles in efforts to provide education for all. The gaps in policy that are common in these efforts include a lack of financial and other targeted incentives for children with disabilities to attend school, and a lack of social protection and support services for children with disabilities and their families. The Kenya government introduced the Free Primary Education (FPE) in 2003. This move increased the enrollment from 5.9 million to 7.2 million (Republic of Kenya, 2009). This increased enrollment also meant that students with special needs had more access to schooling. The Kenya constitution of 2010 guaranteed people with disabilities the same rights and opportunities as their non-disabled peers (Republic of Kenya, 2010). However, the constitution does not guarantee equal access to inclusive schools and other infrastructure that support the education of children with disabilities. Kenya is also a signatory to many international committees and agreements such as the Convention on the Rights of Persons with Disabilities (United Nations, 2006), the Salamanca Statement (UNESCO, 1994), World declaration of Education for All (United Nations, 1990), and the Convention on the Rights of the Child (United Nations, 1989) among others. Despite the existence of domestic laws as well as the international commitments, more work is still required to drive the inclusion agenda.

Domestically, there is a lack of clarity in the inclusive education policy in Kenya (Adoyo & Odeny, 2015). For example, there is no “zero reject” requirement as part of the Kenyan law on inclusion, this means that parents may seek an inclusive education for their child, but the schools may still determine the child to be uneducable and decline to admit into the school. This situation may have the effect of discouraging the parents from seeking assessment and other special education related services. There can be no meaningful intervention or any effective mechanisms for the promotion and protection of the rights of children and people with disabilities in the
absence of sound policy and legislation out of which programs that empower and protect them can be developed. The Kenya government has provided a foundation for the promotion and protection of people with disabilities and their rights for inclusion in mainstream society but more work still needs to be done to bring the disability issues to the international standard. In the absence of specific laws and guidelines on their role, parents still remain marginalized by professionals. Most parents are unable to access the knowledge and skills that would facilitate their involvement in their child’s education. The National Education Sector Support Program (Republic of Kenya, 2012) has increased the government’s focus on access to education for learners with disabilities and special needs. However, there is still a big focus on special schools, special units and integrated classrooms with less emphasis on inclusive education with increased parental/family participation.

**Negative attitudes and beliefs towards individuals with disabilities:**

Beliefs and prejudices constitute barriers when the school, teachers and the community do not see the value of educating children with disabilities and when family members have low expectations of their children with disabilities. A good majority of people still believe that a disability is retribution for past wrong deeds committed (United Disabled Persons of Kenya, 2003). The low parent motivation to educate a child with disability is a major obstacle to active involvement by the parents. The main problems encountered by parents in educating their children with disabilities are stigmatization, negative attitudes from members of the society and parental ignorance (Mwangi & Orodo, 2014). Such a child is a shame to the whole family, hence their rejection by the family or the community. Children who are met by these beliefs and attitudes can hardly develop to their full potential. They get less attention, less stimulation, less education, less medical care, less upbringing and sometimes less nourishment than other children (Kenya Society for the Physically Handicapped, 1999). From a cultural point of view, therefore, there are many specific circumstances that have influenced the living conditions of persons with disabilities, including people's attitudes towards them. Ignorance, neglect, superstition and fear are social factors that have exacerbated isolation of persons with disabilities. Attitudes towards individuals with disabilities in Kenya, like in other East African countries have both positive and negative aspects and are often associated with beliefs about the causes of disability. Attitudes and cultural prejudices towards disability and persons with disabilities still continue to interfere with efforts aimed at educating children with disabilities (African Child Policy Forum, 2011).

**Discrimination**

Discrimination on the basis of disability is defined in the Convention on the Rights of Persons with Disabilities as any distinction, exclusion or restriction based on disability 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 (United Nations 2006). Discrimination may manifest itself in the form of cultural prejudice, socio-economic activities and practices, legislation and administrative practices as well as environments that are inaccessible to individuals with disabilities. Discrimination may result from stigma against a person with a disability, a family member or someone associated with a person with a disability (United Nations- DSPD, 2016). Stigma and discrimination may lead to persons with disabilities facing exclusion and dehumanizing treatment. For individuals with disabilities and their families, stigma can often result in diminished status in the society (United Nations, 2016).
Children with disabilities face extreme disparities and daunting challenges to the enjoyment of academic, social, and community participation. These forms of discrimination have the potential of keeping their parents away from actively getting involved in their education. Stigma can lead to discrimination against a person with a disability, a family member or someone associated with a person with a disability. As a result of stigma and discrimination, persons with disabilities may face exclusion and negative treatment in many aspects of their lives such as educational institutions.

**Negative Societal Perceptions of disability and lack of knowledge and understanding of disability:**

Despite sustained efforts by the Kenyan government and non-governmental organizations aimed at creating heightened awareness of disability, traditional and cultural beliefs still influence and shape people’s beliefs and attitudes about disability. Societal influences and cultural beliefs interfere with identification of children with disabilities (Bruce & Venkatesh, 2014). Families may be reluctant to seek identification because they view disability as a curse from the gods or even as possession by the devil, leading to a sense of shame and concealment of the child with a disability (Kiare, 2004). Traditional beliefs that view disability as a curse or the result of witchcraft are still present as well as the belief that disability is contagious (Bi & Taylor, 2013). According to these the authors “*it is the fear of the unknown that seems to drive the negative perceptions of the community with regard to persons with disability*” (p. 30). The negative attitude towards disability in the communities is a significant barrier to parents’ willingness to enroll their children with disabilities in school (Bi & Taylor, 2013). The fear of stigma and discrimination often means that parents would prefer to hide their child with disabilities indoors than to allow them to be seen and associated with the family. These harmful beliefs about disability are due to a lack of understanding and awareness of disability, misconceptions or social constructions concerning causes of disability, and reinforcement of prejudice. The traditional and cultural beliefs surrounding disability and inaccurate information fuel such beliefs.

Societal negative attitude has been cited as one of the major challenges to inclusive education in Kenya (Adoyo & Odeny, 2015). Negative perceptions in society can create feelings of shame among families who may keep their child with a disability away from public view. In some cases, children with disabilities are hidden away or forbidden from taking part in social activities due to stigma or negative perceptions. Sometimes children with disabilities are kept way from school. False and harmful beliefs about disability can have implications for all aspects of the lives of persons with disabilities and their families. Fear and ignorance about the nature of disabilities have had negative impact on the parents’ ability to enroll their children with disabilities in the schools. The low motivation is partly due to the negative societal perspectives towards individuals with disabilities (Muchiri & Robertson, 2000). Mutua and Dimitrov (2012) found that parental expectations about social acceptance and their beliefs about the benefits of educating a child with disabilities influenced their decisions about school enrollment and participation. In some cases, due to cultural perceptions of disability in Kenya, and a lack of knowledge of available services, parents delay taking their children for evaluation and diagnosis. A late diagnosis and intervention significantly reduces the efficacy of these efforts.
High poverty levels

Poverty is a significant factor which impacts on parents’ ability to send their children to school. Since 2003, the Kenya government has allowed for free primary education (FPE), but despite this, parents are still required to pay for uniforms, books, materials and other levies (Bii & Taylor, 2013). These costs are often out or reach for many families in low income areas such as rural communities and urban poor areas. Studies about poverty and disability show that the added costs of meeting the healthcare, rehabilitation and other needs of children can overburden family resources (Bii & Taylor, 2013). Parents of children with disabilities are challenged in their efforts to raise and educate their children. Poverty and disability strongly correlates, for example, poverty may increase the likelihood of a disability and may also be a consequence of disability. Poverty is considered as both a cause and consequence of disability and is one of the main barriers to education for children with disabilities in Kenya (Global Campaign for Education, 2015). Children with disabilities may have extra expenses associated with their education which includes the need for educational assessment, support and care, assistive technology, transportation and medical costs. The additional burden placed on families of children with disabilities exacerbates the impact of economic poverty. Parental beliefs about the potential benefits of schooling impact their decisions about assessment and school enrollment (Mutua & Dimitrov, 2012).

Effects of poverty on people with disabilities are enormous as poverty deprives them the basic necessities of life (Mukobe, 2013). Evidence shows that majority of individuals with disabilities and their families have inadequate or lack access to education, employment, health care, and other necessities of life such as reliable water, food and clothing which are a basic means of livelihood. Sending their children to school may require payment of school fees and extra affiliated costs such as books, uniform, transportation and meals at school.

Disability often affects families that are already poor, particularly those in remote rural locations. It takes a lot of persuasion to encourage such parents to participate in the activities related to the education of their child with a disability since they feel trapped in the vicious cycle of poverty. In some instances, geographical distance between schools and homes requires the parents of children with disabilities to take their children to school daily and pick them up at the end of the school day. Some parents have found this very cumbersome and as a result some of these parents have opted to keep their children at home to avoid the inconveniences (Mwangi & Orodho, 2014). Not only is the cost a barrier for children with disabilities but there is also the added concern by the parents about the safety of their child with a disability. It is also worth noting that in Kenya, scarce educational resources are allocated to those who are likely to benefit the most, for this reason, the views about disability influence referral, identification and school attendance for a child with a disability (Mukuria & Korir, 2006).

Limited/lack of knowledge of available services

A lack of access to useful and usable information has been cited as a major barrier to accessing services by individuals with disabilities and their families (Republic of Kenya, 2008). In some cases the parents of children with disabilities are not even aware of services available to their children or where to seek help (Kiarie, 2007). Some parents/families may feel intimidated by the school system and may not feel they have anything of value to contribute towards the education of their children with disabilities. Many parents of children with
disabilities, especially those in the rural communities often lack means of communication and mutual support system with other parents. Many parents do not know what choices are available for their children in either special schools or inclusive schools, or how to access services. They are often unaware of how to access educational services appropriate to the needs of their child with a disability, particularly in early intervention and early childhood education. Many parents have no or limited information about procedures for funding or personal support and do not know what pre-schools, primary/secondary or any of the post-school services can provide for the student. Many children with disabilities live in rural or remote areas, which limit their ability to access available services. Many services that are available are usually located in major population centers such as urban areas and cities. Children with disabilities living outside these centers have difficulty getting any services. Because of costs and lack of knowledge about available services, families from remote and rural areas may never access health care professionals and services for their children with disabilities.

**Limited knowledge of disability types/categories:**

Parents may not be formally educated, or may lack the knowledge, at the birth of their child, to help them cope with their difficulties. Parents may also not know how to access outside help to overcome these difficulties. Some parents have been found to be ignorant about their child’s disability/special needs since they have not taken their children to the area assessment and placement centers. (Mwangi & Orodho, 2014). Many parents of children with disabilities do not know what to do or where to go if they notice their child is not developing normally (Bii & Taylor, 2013). For example, knowledge of autism spectrum disorder is relatively limited in many families. Most parents do not have adequate knowledge of autism or how it manifests itself. This incapability limits the success of intervention services due to a lack of follow up by the parents. In some cases, parents lack information on what to look out for as signs of disability during a child’s developmental stages. As a consequence, impairments/disabilities are identified too late for any corrective measures to be successful. Community stigma surrounding disability means that parents are scared to reveal their child and to look for help. There is a lack of information available on the identification and rehabilitation services, this means that parents do not have access to information on the available services, what services are provided and how to access them for their children. Sometimes parents and teachers may also not have positive interactions related to the child with a disability.

**Summary**

Including a child with a disability in society begins with access to everyday experiences in the home setting with parents playing a major role. Unfortunately, most schools are not sufficiently collaborating with families and communities that they are serving. Partnership with parents/families is essential for effective and efficient delivery of quality education for children with disabilities. Parents of children with disabilities should be sensitized against cultural practices and beliefs that impact negatively on formal education of children with disabilities. Some parents are ill informed about who may be able to help their children with disabilities. New attitudes can be boosted through knowledge of disabilities and their causes. There is a great need to empower parents so that they can be actively involved in their child’s education.
Suggested Solutions/Remedies
Advocacy groups/organizations

There is need to focus on addressing cultural barriers to inclusion and integration of people with disabilities in the society. The Kenya government should focus on developing and supporting information dissemination and advocacy programs. This will help in combating negative perceptions of disability within communities and help promote inclusive practices. The Kenya government must engage with political and community leaders to address the continued stigma faced by children with disabilities (Global Campaign for Education, 2015). The government and political leaders should work with disability advocacy groups such the Kenya Disability Parliamentary Caucus so as to promote this agenda. Civil society, religious groups and community organizations should advocate for inclusion. Inclusive education is a relatively new concept that requires considerable community education and awareness creation. Professionals should begin to advocate more for children with disabilities and their parents. Educators and other professionals should assist families in identifying agencies and organizations that can support children with disabilities and their families.

Awareness/sensitization campaigns

Educating parents to increase their level of awareness of disabilities will not only reduce their anxiety associated with the care of the child with a disability, but will also increase the level of involvement in their education, care and interventions. There should be a renewed focus on increasing knowledge and understanding on disability issues. The Kenya Special Education Policy should include guidelines and information on disabilities and provide practical recommendations on how to include children with disabilities and their families in education. National campaigns on disability and inclusion should be part of government efforts. This can be done through the use of mass media to create awareness, to reduce negative attitudes and stigma and to improve the understanding of disability issues. Parents/caregivers need to be informed about available services for children /individuals with disabilities. The government should increase its efforts towards reaching out to parents of children with disabilities in the rural communities to orient them towards viewing the education of such children as a right of these children. They must take advantage of the opportunities offered by the government’s mandatory system of free and compulsory education. Pre-schools, primary and secondary schools should provide information for parents about what resources are available locally, regionally and nationally for their children including the organizations that can help them. Parents and families should be educated about children with disabilities and their needs. This would have the effect of minimizing the feelings of self-blame, helplessness and loneliness. The roles of families, community leaders as well as the level of family involvement in the education of their children with disabilities should be clearly defined and anchored in the law. Community health and social workers should help in empowering parents. Parents of children with disabilities must be persuaded into viewing education as a right for their children.
Support for families of children with disabilities

The government should continue to recognize the important role of families of children with disabilities and the heavy responsibility and burden they carry. Supporting family members of children with disabilities in their own homes to become more confident, competent and knowledgeable about their child’s development should be a top priority. Parents can be assisted through home visits by professionals from several backgrounds such as teachers, social workers or occupational therapists who work with them on prioritizing the developmental needs of the child with a disability. Funds should be made available to families in difficulty to help with fees, school levies, books, transportation and other associated costs. The nature of these supports should both be financial in addition to other capacity building and strengthening efforts. Social protection for children with disabilities and their families should be a priority.

The family of a child, young person, or adult with disability probably knows more about the student's abilities, deficits, learning style and personal characteristics than anyone else. Teachers need to encourage parent participation, to explain the processes and procedures more clearly to parents and to listen to parents far more. In developing curriculum plans and education goals, these issues very important for a student with disability than for students without, because they can be limiting or enabling factors which the educators would benefit from knowing about. Parents should be compelled to take their children for early assessment before they start school. Schools and community organizations should provide support to families of children with disabilities and to encourage them to send their children to school. They need to ensure that parents/families are fully involved in decisions about their children’s schooling. A close relationship is needed in order for the school and the family to work in partnership for the sake of the child with disability. Families should be educated and informed on the rights of their children with disabilities to education and equal opportunities.

Establish and Strengthen Parent Groups:

In order to provide support to families of children with disabilities, parent groups should be encouraged with mentors to give support and advice to parents on how to access services, overcoming stigma and how to advocate for the rights of children with disabilities. Parents’ organizations can have the potential of promoting positive attitudes towards children with disabilities as well as being advocates for change. The Kenya government with support from the non-governmental organizations and the donor community should support the establishment of parent groups in addition to other support systems for parents of children with disabilities and special needs. Parents’ organizations can play a crucial role and should be strengthened so that children with disabilities are valued and supported by their families and communities. The Kenyan schools and school communities should encourage the development of parent clubs to promote the involvement of parents in the learning of their children. These involvements should include sports days, open days and other parent’s days. School committee members and Parents Teachers Associations should include representatives from parents of children with disabilities either individually or as members of groups. The government should encourage and facilitate regular parents’ meetings for purposes of providing peer to peer support as well sharing ideas for joint advocacy for the rights of their children. Parents should have a powerful role to play towards the inclusion of their children with disabilities in schools.
Policy on Special Education:

Kenya has put in place legislative and policy frameworks geared towards protecting and promoting the rights of people with disabilities. These documents and pieces of legislation should be translated into mandatory laws in regards to services and rights to individuals with disabilities. Children with disabilities and their families continue to struggle to access education and services that they need. There is need for a strengthened system of strong legal frameworks to be put in place to protect people with disabilities from discrimination. The Special Needs Education Policy, which addresses matters relating to institutional capacity and special needs of children and learners with diverse forms of disability, when fully implemented, is expected to improve the quality and access to education provided to children with special needs. The Ministry of Education should strengthen the education of children with special needs and aggressively move towards the development and implementation of a more inclusive education policy. Kenya has provided a foundation for the promotion and protection of people with disabilities, their rights for inclusion in mainstream society but more work still needs to be done to bring the disability issues to the international standards.

Strengthening Home and Community Based Programs:

The role of community-based organization/programs is to mobilize the community to ensure that negative attitudes and behaviors towards people with disabilities and their families change and that disability is mainstreamed across all development sectors. In many communities across Kenya, there are barriers which impact on the quality of life of people with disabilities and their family members. These include physical/environmental, attitudinal, cultural, system and policy barriers. It is important that community-based programs are able to identify and understand the barriers in the community which impact on people with disabilities and their families. A lot of progress will be made towards mainstreaming disability if community supports are built up and the different sectors of society become actively involved in the process of change. Community based programs can use community mobilization efforts to bring together stakeholders in the community, e.g. people with disabilities, family members, self-help groups, organizations for people with disabilities, community members, local authorities, local leaders, and policy-makers, to address barriers within the community and ensure the successful inclusion of people with disabilities and their families in their communities with equal rights and opportunities. It is also necessary to build strong partnerships between parents and professionals to ensure focused services for children with disabilities.

Increasing the capacity of Educational Assessment and Resource Centers (EARC):

The Educational Assessment and Resource Centers have been set up for early identification, assessment, intervention and placement of children and young people with special needs and disabilities. Investing in early intervention for children with disability before they get to school gives them the best chance of reaching their full potential. In Kenya, there are district based EARC involved in assessment and advice of the parents of children with disabilities. EARC’s main objective is to equalize education opportunities for children with special needs and facilitate their full integration into the school system and their community. This approach includes early identification of children with special education needs, sensitization, counseling and training of children with disabilities and their families, parents, teachers, local administration and others in meeting the special needs of these children. Currently there are 200 operational
EARC’s in Kenya (Bii & Taylor, 2013). The government should work towards setting up more EARC’s and increasing their capacity to include parent guidance and counselling. Parents of children with special needs and disabilities require information and guidance on how to cope and train with their children’s condition. Parents can be invited to visit these centers again after initial assessment. Staff from the centers should also be equipped with the capacity to reach out to the parents especially those in remote rural and inaccessible areas.

Conclusion

Children with disabilities are still underrepresented in the Kenyan education system in spite of the existence of legal frameworks to ensure access to education. More needs to be done towards implementing and enforcing these legal frameworks. A lot of effort should be expended on collection of accurate and up to date data on the number of children with disabilities in the school systems including transition and dropout rates. The lack of policy and proper funding compounded with cultural attitudes towards individuals with disabilities, have continued to hamper efforts towards addressing critical issues pertinent to those individuals with special needs in Kenya. The existing policies seem to be contradictory, due to lack of designated supervisory and implementation mechanisms. While Kenya government recognizes the need to educate all children, including those with exceptional needs, there seems to be a lack of mechanism for ensuring and overseeing that all students have equal access to education. While the government has put in place institutions such as schools, teacher training and special units geared to providing services to individuals with disabilities, it has not reached the point of utilizing the entire process of assessment that includes identification and referral, categorization, procedural safeguards and individualized plans. To effectively deal with disability issues in Kenya it is important to have accurate and up-to-date data on disability in order to establish the numbers, the type of disability and the general needs for purposes of including them in the planning system. Presently there is no accurate data on the number of persons with disabilities in Kenya (African Union of the Blind, 2007). Lack of data on children with disabilities both in and out of school makes it difficult to monitor progress and to measure the quality of educational outcomes of these children and their families. It is therefore important to establish accurate data for purposes of planning and service provision.

Recent international and national legislation has cast increasing light on the philosophy of inclusion and inclusive schooling. Grounded in UNESCO’s education policy, adopted at the Salamanca Conference 1994 (UNESCO 1994), inclusive education is progressively being accepted as an effective means by which biased attitudes towards student with disabilities may be reduced. It is important to note that during the last decade, approaches to disability issues have changed from a medical model to a social approach with a current emphasis on a social model and human rights-based approach focusing on the removal of barriers created by the society. It is important to note that the Ministry of Education in collaboration with key stakeholders has made a commitment to review the special needs policy every 5 years to ensure that the policy remains relevant to changing national and international environments (Republic of Kenya, 2009).
References:


