**Multi-Country Study on Inclusive Education (MCSIE)**

Nepal Literature Review

Sub-award under 7200AA18CA00009

Produced by Inclusive Development Partners

**Submitted July 2020**

**DISCLAIMER**

The authors’ views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development (USAID) or the United States Government.

# Acknowledgements

This document was developed with the support of the United States Agency for International Development (USAID) through the Multi-Country Study on Inclusive Education (MCSIE). The lead authors of the document are Stephanie Peña and Anne Hayes. We would also like to thank Padam Bahadur Pariyar for his review of the document to ensure accuracy as well as the review and support of Valerie Karr, Hayley Niad, Eileen Dombrowski, and Emily Kochetkova. Thank you also to Catherine Frazier for her thoughtful review and editing of the document.

# Abbreviations

ADHD Attention Deficit Hyperactivity Disorder

AHF Australian Himalayan Foundation

AIR American Institutes for Research

AQ-10 Autism Spectrum Quotient – 10

ARNEC All-Round National Education Commission

CBRP Community-Based Rehabilitation Programs

CEHRD Center for Education and Human Resource Development

CRPD Convention on the Rights of Persons with Disabilities

DEC Disabled Empowerment Communication Center

DEC Development Exchange Clearinghouse

DPO Disabled Persons Organization

DRC Disabled Rehabilitation Center

ECED Early Childhood Education and Development

EGRA Early Grade Reading Assessment

EMIS Educational Management Information System

HI Humanity and Inclusion

ICT Information and Communication Technology

IEMIS Integrated Educational Management Information System

IEP Individualized Education Plan

KAP Knowledge, Attitudes, and Practice

MCSIE Multi-Country Study on Inclusive Education

MoE Ministry of Education

MoEST Ministry of Education, Science, and Technology

NAWB Nepal Association for the Welfare of the Blind

NEPC Nepal National Education Planning Commission

NESP National Education System Plan

NFDN National Federation of the Deaf Nepal

NGO Non-Governmental Organization

NIRT National Institute for Research and Training

NLSS Nepal Living Standards Survey

ODI Overseas Development Institute

PPC Pre-Primary Classes

RCDC Resource Center for Rehabilitation and Development

RTI Research Triangle Institute

TQ Ten Questionnaire

UNESCO United Nations Educational, Scientific, and Cultural Organization

UNICEF United Nations Children’s Fund

USAID United States Agency for International Development

WE World Education – Nepal

WCDO Women and Children’s District Office

WHO World Health Organization

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# Executive Summary

Children with disabilities are one of the most marginalized groups in terms of access to education, participation, and learning achievement (USAID, 2019a). In 2006, the United Nations General Assembly adopted the Convention on the Rights of Persons with Disabilities (CRPD), which clearly provides an international normative framework promoting the full and equitable education of students with disabilities. As a result, many countries, such as Nepal, are working to strengthen their educational system to be more inclusive of students with disabilities. The purpose of this literature review is to provide relevant background information on disability and inclusion efforts in Nepal, as part of USAID’s Multi-Country Study on Inclusive Education (MCSIE), described further in Section 2.

The Nepalese government’s Department of Education, now named the Center for Education and Human Resource Development (CEHRD), defines inclusive education as “the developmental process of an education system that provides the right for all children to have useful education in a non-discriminatory environment of their own community by upholding multicultural differences of the country” (Australian Himalayan Foundation [AHF], 2016, p. 20). Additionally, the department has identified the following as the target groups of its inclusive education policies: girls, Janajati children (ethnic and linguistic groups), children with disabilities, street children, child laborers, children affected by conflict and trafficking, orphans, children living in poverty, children with HIV/AIDS and leprosy, Kamaiya or bonded-labor children, children studying in Madrasa Gumba or monasteries, and refugee children (AHF, 2016). Responding to one of CEHRD’s target groups, this report focuses specifically on inclusive education as it pertains to children with disabilities.

Since 2012, the government of Nepal has defined a “person with a disability” as “a person who has long-term physical, mental, intellectual or sensory disability of functional impairments or existing barriers that may hinder his or her full and effective participation in social life on an equal basis with others” (Government of Nepal, 2017 p.1). Additionally, the government has classified disability into ten categories: “1) physical disability; 2) visual impairment: blind and low vision; 3) hearing impairment: deaf and hard of hearing; 4) deafblind; 5) speech impairment; 6) mental or psychosocial disability; 7) intellectual disability; 8) Hemophilia [*sic*]; 9) Autism [*sic*]; and, 10) multiple disabilities” (Hunt & Poudyal, 2019, p. 16; United Nations Children’s Fund [UNICEF], 2017 p. 2). These categories are reflected in the Nepalese government’s 2017 Act Relating to the Rights of Persons with Disabilities (Government of Nepal, 2017).

Nepal has made significant strides towards the promotion of inclusive education since it ratified the CRPD in 2010, such as the provision of free education for all age groups of persons with disabilities, the provision of reservation quotas for students with disabilities to receive scholarships in government schools and higher education, as well as the provisions for accommodations for students with disabilities within the classroom and during examinations (Dynamic Institute of Research and Development, 2014), However, a substantial amount of literature suggests the educational system in Nepal still struggles to adequately meet the learning needs of diverse learners, including children with disabilities (AHF, 2016; Dynamic Institute of Research and Development, 2014; Ministry of Education [MoE], 2016; National Institute for Research and Training [NIRT] & American Institute of Research [AIR], 2017; Banks et al., 2019; Shrestha, Gnyawali, & Upadhyay, 2012; USAID, 2019a). More specifically in Nepal, schools’ poor physical infrastructure[[1]](#footnote-1), limited teaching and learning practices[[2]](#footnote-2), a shortage of trained and motivated teachers, the lack of assistive devices and learning materials, and the local stigma associated with disabilities currently hinder the learning of children with disabilities in Nepal (UNICEF, 2003). This literature review will highlight past and current efforts towards inclusive education for children with disabilities in Nepal in order to comprehensively analyze the current state of inclusive education in Nepal.

The main findings from the literature review include the following:

**Finding 1: Disability identification practices.** Nepal uses disability identification cards as a means of systematizing requirements for disability diagnosis, which in turn drives the provision of services and funding; however, there are some documented limitations to accessing the system and the appropriate referral mechanisms needed to identify disability. The ability of public hospitals in provincial headquarters to conduct vision and hearing screening makes such services available at a larger scale within major cities. Data regarding disability prevalence is often contradictory, and there remains a poor understanding of the 2015 earthquake’s impact on the incidence of disability.

**Finding 2: Teacher training.** Teacher training on inclusive education reaches a small quantity [[3]](#footnote-3)of educators in Nepal, and multiple reports document the limitations in supporting teachers to develop the skills they require to effectively educate children with disabilities. The only teachers who receive a specialized 45-day training [[4]](#footnote-4)on disability are resource teachers, and even then, this time is reported to be insufficient to develop foundational skills such as sign language fluency. Additional constraints include a lack of refresher training, or training to any educators who work in an inclusive setting.

**Finding 3: Attitudes.** Discriminatory attitudes towards persons with disabilities in Nepal are well-documented. Despite a legislative environment which acknowledges the rights of persons with disabilities, the literature cited indicates that more genuine transformation of society for children with disabilities may be thwarted by discriminatory sociocultural beliefs, some locally held religious perspectives, and guardians’ poor awareness of educational opportunities for children with disabilities. Children with intellectual or multiple disabilities face particular marginalization, and parents of children with intellectual disability are more likely to favor segregated education than parents of children with visual or physical disabilities. There are multiple reports of humiliation, neglect, and discrimination of children with disabilities in school settings. Research indicates that guardians with higher degrees of education are more likely to have positive perceptions about the education of their children with disabilities than guardians without education.

**Finding 4: Education for specific disability groups.** The limited existing research on ways in which children with disabilities are educated in Nepal suggests that there is unequal access to the national curriculum for some children with disabilities, especially children with intellectual disability, as compared to their peers without disabilities. Resourcing is constrained, including a lack of braille texts for some students who are blind, and resource teachers with limited sign language proficiency entrusted to teach children who are deaf. Dropout rates for children who are deaf or blind are extraordinarily high, with a vast majority not completing education. While the legislative environment recognizes the needs for disability accommodations, and extra time is provided to students on exams, examinations are not available in braille.

**Finding 5: Additional classroom supports.** While Nepalese policy ensures that students have access to education in their local language, in practice this is not universal, and may contribute to learning difficulty for children. An inflexible national curriculum and poor guidelines for continuous assessment are attributed in part to the poor levels of academic achievement for children with and without disabilities. Lack of accessible school infrastructure and long distances to school are documented challenges, especially amongst children in hill and mountain regions. From the literature reviewed, IEPs and assistive technologies have no documented use in Nepal.

**Finding 6: Intersectionality.** An estimated 770,000 children are out of school in Nepal, among whom as many as 80 percent are estimated to have disabilities. Although these statistics derive from different sources, if combined, they would suggest that approximately 600,000 children with disabilities are out of school in Nepal. Girls with disabilities experience intersectional vulnerabilities, and are more likely than boys with a disability to be out of school, drop out, and have lower academic achievement. In addition, girls with a disability are more vulnerable than girls without a disability to physical, emotional, and sexual violence, and child marriage. The poorest overall educational outcomes for learners with disabilities are is poorly understood.

These findings, along with many other themes generated from the literature review, are elaborated in greater detail in Section 5 of this report.

# Introduction

This section describes the purpose of this literature review, and the broader aims of the MCSIE study.

## **Purpose**

As part of the “inception” phase of the MCSIE, supported by USAID, the research team conducted three comprehensive literature reviews to focus on each of the three countries within the study: Cambodia, Malawi, and Nepal. The purpose of this literature review is to provide relevant background information on disability and inclusion efforts in Nepal. This review is intended to draw attention to gaps that may warrant further attention, and to shed light on the achievements and progress to date on the inclusion of children with disabilities in the education system.

## **Multi-Country Study on Inclusive Education**

Through the Long-Term Assistance and Services for Research Partners for University-Led Solutions Engine (LASER PULSE) mechanism led by Purdue University, Inclusive Development Partners (IDP) will conduct a three-and-a-half year, $3.585 million evaluation of three USAID inclusive-education activities in Cambodia, Malawi, and Nepal. The study will investigate USAID programming in these three countries in order to identify what works to sustainably advance teaching and learning outcomes for children with disabilities in varying contexts and ultimately inform current and future programming through recommendations to current implementing partners (IPs) at midline and broader recommendations for USAID at endline.

Five key themes provide a framework for the current study (process, identification, training, instruction, and consequences). The following questions inform the evaluation of individual country programs, as well as the evaluation of programming across the three countries:

1. What worked well/poorly in the process of setting up an efficient, effective, and sustainable system to focus on improving the quality of education for learners with disabilities? (Process)
2. What methods worked best to identify learners with disabilities? (Identification)
3. What training model(s) worked best to provide teachers with the resources and support they need to best meet the needs of learners with disabilities? (Training)
4. What instructional models worked best to improve classroom instruction and reading outcomes among learners with disabilities? (Instruction)
5. Were there any unintended consequences of the activity? What were they? (Consequences)

Each question includes the following sub-questions:

* How does the method/model work?
* Why does it work/not work?
* How costly is it?
* In which contexts is it likely to work best?
* How sustainable (both in terms of capacity and financial resources) is it? What is the impact on gender?

This literature provides a context of past and current programming, services, and research conducted in Nepal.

# Methodology

## **Literature Review and Analysis**

The literature review was conducted December 2019 through January 2020. The following search terms relating to disability, education, and policy in Nepal were used: education; inclusive education, assess; special needs; “disab”; blind; deaf; intellectual, cognitive, developmental; impair; identification, screening, vision, hearing, institution, DPO (disabled persons organization), gender, girls, boys; young, youth, adolescents, children; “discrim”; barriers; exclusion; inclusion; aid; supports; enabling, enable; teacher, instructor, classroom; and training, resources. A snowballing technique was used to identify relevant published articles, reports, and grey literature. The research team found additional resources about Nepal on international databases, including reports on past and current projects. In addition, the research team used USAID Development Exchange Clearinghouse (DEC) to obtain recent reports for USAID early grade reading and inclusive-education programs in the country.

Initially, the research team found a total of 44 research or journal articles related to Nepal, followed by 39 related reports online. Of those sources a total of 70 references were used for this document, which can be found in the Cited References below. Altogether, 85 sources of information were included as part of the research on Nepal. Content was coded primarily through a deductive thematic analysis, utilizing categories of inquiry aligned with the various headings and subheadings of this paper. A total of 11 broad themes guided the review, such as *attitudes, identification practices,*and *teacher training*. An additional 49 sub-themes were listed within these 11 themes; for example, the category of *teacher training* included sub-themes of *general teacher training, inclusive pre-service training, inclusive in-service training,*and *special education.*Each theme and sub-theme was defined in a literature review protocol to promote consistency of coding amongst authors. Inductive thematic coding was also utilized to add additional categories of review according to the themes generated in the literature, such as the topic of poverty, which was not on the original list of categories. The authors populated these codes using NVivo 12 software to assist in analyzing the data; the final literature review includes findings from this analysis.

## **Limitations**

This literature review is subject to several limitations related to scope and the desk nature of the review. This review is limited to journal articles, reports, policies, or other documents published in English. Documents that have not been published online for public access, or reports produced in languages other than English, are not included in this analysis. For example, information on government webpages was primarily in Nepali, and if translated to English the translation was often difficult to understand.

Furthermore, many programs and organizations have published reports over the years which may now contain outdated information, but follow-up reporting on the current status of activities is not consistently available. As inclusive education efforts continue to grow, the educational structure was difficult to comprehend, as some literature presented outdated information. Additionally, information regarding specific disabilities, such as developmental disabilities, was often lacking in the research and limited research on intersectionality was available as well.

Ultimately, the most thorough validation of these findings would be through key informant interviews and other interpersonal communication with key stakeholders, which was outside of the scope of this literature review. The MCSIE program more generally has identified several gaps in knowledge emanating from the literature that may be further investigated through other data collection activities.

# Background

The purpose of this section is to provide context for the Multi-Country Study on Inclusive Education, specifically the Reading for All Program. Past and current programming efforts conducted in Nepal are highlighted here. The implementing partners of the program include USAID, Humanity and Inclusion (HI), World Education Nepal, along with organizations they have partnered with such as: the Nepal Association for the Welfare of the Blind (NAWB), the National Federation of the Deaf Nepal (NFDN), and the Disabled Empowerment and Communication Center (DEC). Organizations that implementing partners have collaborated with in past projects are also presented, including the B.P. Eye Foundation and Research Triangle Institute (RTI) International. A breakdown of the activities completed and those still in progress is also provided here.

## **USAID Funded Programming**

USAID’s Reading for All Program is a three-year (2018-2021), $3.88 million program that aims to improve early grade reading outcomes for children with disabilities in grades 1-3. This program is being implemented in 6,775 schools in the 16 National Early Grade Reading Program focus districts (including Banke, Surkhet, Bhaktapur, Kaski, Dhankuta, Saptari, Parsa, Rupandehi, Manang, Mustang, Bardiya, Dang, Dolpa, Kailaki, Kanchanpur, and Dadeldhura). The goal of the program is to strengthen the Government of Nepal’s institutional capacity at the federal, provincial, and local levels to implement its constitutional and policy commitments to disability-inclusive education.

For this program, USAID has primarily partnered with HI and World Education Nepal, along with the following local disabled persons organizations (DPOs): the Nepal Association for the Welfare of the Blind (NAWB), the National Federation of the Deaf Nepal (NFDN), and the Disabled Empowerment and Communication Center (DEC). The program aims to improve data quality on children with disabilities; enhance institutional and technical capacity to deliver quality reading instruction and support to children with disabilities; and pilot-test inclusive reading instruction models that can be scaled for specific groups of children with disabilities (USAID, 2019a).

USAID has a demonstrated history of working towards inclusive education in Nepal. Between 2014-2018, USAID provided two grants focusing on inclusion for children who are blind or have low vision. Partnered with B.P. Eye Foundation, USAID’s Child Blindness Program trained 175 secondary school students on how to screen their classmates for vision challenges; once identified, children with abnormal visual acuity were referred for further assessment by optometrists. A total of 10,744 children were screened, and 466 students were successfully identified. The success of this initiative led the government of Nepal to incorporate student screenings into the National Eye Health Policy (USAID, 2019b).

One of USAID’s recently completed programs, the Early Grade Reading Program, collaborated with Research Triangle Institute (RTI) International in 2015. The program focused primarily on improving reading skills for children in grades 1-3 through better instruction, service delivery, and parent and community engagement. Progress reports from the program show the collaboration with Reading for All, as both programs share similar goals and are working in the same 16 focus districts. For example, in the final months of 2018, the Early Grade Reading Program held a presentation for Reading for All where it introduced Reading for All to government agencies and presented Reading for All’s approach on teacher training and instructional improvement, including a new ongoing teacher support model. Additionally, the Early Grade Reading Program provided information about working with different agencies, especially the CEHRD, which should enable Reading for All to better collaborate with the CEHRD to incorporate components related to student disabilities into the Integrated Educational Management Information System (IEMIS). The two programs also compared their respective data on the 16 focus districts and discussed some discrepancies that appeared (USAID, 2019d). This collaboration between programs will help to minimize duplicated efforts and allow for more sustainable efforts towards quality education for all learners.

While Reading for All initially planned to complete two academic sessions (2019/2020-2020/2021) within the classroom, multiple delays have shifted the timeline of activities. Reading for All will now provide one year (one academic session) of actual classroom-based intervention (USAID, 2019c). The first table (Exhibit 1) below provides an analysis of completed activities and is followed by a second table (Exhibit 2) that describes ongoing activities for Reading for All.

**Exhibit 1: Activities for Reading for All**

|  |  |  |
| --- | --- | --- |
| **Activity** | **Description** | **Status** |
| Data collection and analysis of students in 360 community schools completed | Data/Study | Completed |
| Data in 421 community schools updated | Data/Study | Completed |
| Knowledge, Attitudes, and Practice (KAP) Study [[5]](#footnote-5)has been completed | Data/Study |  |
| Pretesting of early detection tool has been completed in 16 schools | Assessment/Tool | Completed |
| Early grade teachers’ capacity assessment completed in four focus Municipalities | Assessment/Tool | Completed |
| Community disability workers identified children with disabilities and referred them for resource classrooms/disability card | Assessment/Tool | Completed |
| Five models of individualized education plans (IEPs) were pre-tested with 35 students with different types of disabilities in 12 schools | Assessment/Tool | Completed |
| 234 students were screened using the Washington Group Questions | Assessment/Tool | Completed |
| Field testing of the Education Response System Flowchart completed to ensure efficiency | Assessment/Tool | Completed |
| Teacher training packages for Inclusive Education orientation and subsequent trainings created | Assessment/Tool | Completed |
| Provincial level IEMIS Sub-System development consultation workshop conducted with participation from 39 provincial and local-level government stakeholders | Workshop/ Meeting | Completed |
| Education resource system consultations helped train teachers to identify the type of support a child with a disability would best benefit from | Workshop/ Meeting | Completed |
| Inception visit and kickoff completed | Workshop/ Meeting | Completed |

Source: USAID, 2019c

**Exhibit 2: Ongoing Activities for Reading for All**

|  |  |
| --- | --- |
| **Activity** | **Timeline** |
| DPO selection with the final three districts | Completed December 2019 |
| Training manual, including visual training material, on inclusive education | Drafted to rollout January 2020 |
| The Inclusive Education training package development | In final stages |
| Training rollout for teachers will be pushed to the next academic year | Project year 3 |
| Early Grade Reading Assessment (EGRA) tool is still being adapted and tested to be used | Project year 3 |

Source: USAID, 2019c

## **Background on Implementing Partners**

Prior to the Reading for All program, HI (then known as Handicap International), along with the Resource Center for Rehabilitation and Development (RCRD) and with support from World Education Nepal (WE) and UNICEF, had been working towards inclusive efforts in Nepal since 2000. For example, HI implemented the Inclusion Project from 2007-2011 throughout 15 different districts in Nepal. During this project, teachers were trained on inclusive education and methods for teaching children with disabilities. Schools that participated in the project were given educational supports by teachers and community disability workers for the development of Individualized Education Plans (IEPs) (P. Pariyar, personal communication, 2020). More recently, in November 2016, HI conducted a pilot screening program to support and inform the Government of Nepal’s efforts to identify, diagnose, and treat functional disabilities among children early in their development. A sample of 2,804 children in Grade 3 classes in 40 public schools across Achham, Bajura, Kalikot, and Mugu (Mid-Western and Far-Western districts) were screened by measuring their ability to perform tasks on a four-level scale (“no difficulty”, “some difficulty”, “a lot of difficulty”, and “cannot do at all”). Initial findings indicated 26 percent of children were at risk of limited participation in society due to one or more functional limitations. Additionally, 9.4 percent of children screened were 99-100 percent likely to be formally diagnosed with a disability (UNICEF, 2017).Research has shown early identification, diagnosis, and referrals to appropriate medical providers help to avoid disability progression for children at risk. In addition to improving the overall quality of the lives of children, this process will also allow for a cross-sectoral database of information on disability in Nepal. Not only would this allow for better tracking of persons with disabilities throughout their lives, but this would also allow for stakeholders to collect and share information and coordinate efforts (UNICEF, 2017).

Although IPs have made successful strides in supporting inclusive education in Nepal, they have encountered multiple challenges along the way. One key challenge has been the lack of reliable data (USAID, 2019a). Nepal has been scrutinized for not having accurate data on disability, and this impacts multiple sectors, including education. Another challenge has been the development of an efficient screening tool, as Nepal has not created the screening tools and implementation processes required to identify children with disabilities (UNICEF, 2017). A third key challenge, cited often in the literature, is a lack of communication between the various stakeholders working on inclusive and special education initiatives (USAID, 2019a, 2019b, 2019c).

The most frequently mentioned challenge, specific to Reading for All, is that the Government of Nepal Ministry of Education, Science, and Technology (MoEST) is often delayed in granting approvals; therefore, the project has seen many delays and shifts in timeline. As previously mentioned, these delays will only allow one year of classroom-based implementation instead of the two years initially proposed; HI has shifted the timeline of key activities and added several quality control activities to allow for proper MoEST engagement and ownership by the government at all levels. New activities have been added under a consortium partner and two implementing partners in Banke and Surkhet, with an intent of strengthening the capacity of DPOs and thereby enhancing quality and, eventually, contributing to the sustainability of program activities (USAID, 2019c).

## **General Background on the Situation of Education in Nepal**

With an adult literacy rate of 65.9 percent, the education system in Nepal is considered one of the least developed in South Asia (AHF, 2016). One of the concerning aspects regarding the education in Nepal is its unequal access, with certain groups experiencing less access and participation in quality education; these groups include children with disabilities, children from marginalized groups, Dalits, and ethnic minorities (Ministry of Education [MoE], 2016; NIRT & AIR, 2017). The purpose of this section is to provide historical background, explain the current structure, and provide relevant statistics to better understand the current educational system in Nepal.

## History and Background

Prior to the fall of the Rana oligarchy in 1951, education in Nepal only catered to the royal family and the ruling class (Regmi, 2017). As one of the youngest modern educational systems in the world, Nepal began with only 9,000 students in primary school and 1,700 in secondary school (Mathema, 2007). While Nepal’s public education system is roughly seven decades old, within this short period of time, there have been significant increases in the number of schools and enrollment rates. Education has expanded because of the highly diverse needs of the country due to socio-demography and culture changes during a period of political reform and restructuring (MoE, 2016). In 1956, in order to expand the educational system, the Government of Nepal formed the Nepal National Educational Planning Commission (NEPC) to lay the foundation for a national education system within the framework of national unity, democracy, and development; NEPC ensured free compulsory primary education for students as well as an adequate number of teachers for schools (MoE, 1956). The All-Round National Education Commission (ARNEC) was later formed in 1962, adding nationalism and the prevailing political ideology to the national education system, followed by the National Education System Plan (NESP) in 1971 (Regmi, 2017). Together, these commissions have worked to increase access to education throughout Nepal, including access for children with disabilities.

For example, the National Education System Plan created a special needs education council as an apex body for running the special education program and suggested establishing a uniform national education system by incorporating all components and levels of education with respect to the development of special education. In addition, the plan stated that education should be provided to those who have disabilities and, although it may not have been possible to provide for such special education throughout the country at the time, steps should be taken to provide education for children with disabilities in more densely populated areas like Kathmandu (Kafle, 2002).

Prior to 1964, there were no schools with special/segregated or inclusive settings that could accommodate the needs of children with disabilities. However, in 1964, education for students who are blind and have low vision formally began in an inclusive setting in the Laboratory School in Kathmandu (Prasad, 2003). In 1967, the first school for students who are deaf or hard of hearing was initiated at Balmandir, Naxal, and Kathmandu, followed by the establishment of several segregated schools for students who are deaf, have speech challenges, and, at the time, were considered to have an intellectual disability (UNICEF, 2017).

In the late 1980s, the government of Nepal formed special education organizations, with support from non-governmental organizations (NGOs), including the Nepal Disabled Association, the Nepal Association for the Welfare of the Blind, the Association for the Welfare of the Mentally Retarded, and the Welfare Society for the Hearing Impaired (AHF, 2016). As part of the move towards a more inclusive educational system, integrated schools were first piloted in 2006 and have now spread across the country as a means of increasing educational opportunities for children with disabilities (Barriga, 2011).

## Current Structure of Education

The current structure of education in Nepal consists of early childhood education (3-5 years old), basic education (grades 1-8), secondary education (grades 9-12), and higher education (university). A total of 35,121 early childhood education and development (ECED) centers operate in Nepal; of these, 30,034 (85.5 percent) are running as community-based early childhood development centers (ECDCs) and community school-based ECDCs/pre-primary classes (PPCs). The remaining 5,087, or 14.5 percent, operate within institutional schools. Although there is an overall increase in access, disparities remain, especially in certain geographic areas, for children with disabilities, and for children from certain caste and ethnic groups (NIRT & AIR, 2017), and research shows that children with disabilities, in particular, experience the greatest challenges in terms of access, participation, and learning outcomes in the education sector (MoE, 2016 p.11). Schools are divided by public and private in Nepal. Public schools are also known as government schools and are run by an allocated budget from the government of Nepal, while private schools support themselves financially. As of 2017, there are 35,223 schools including 735 religious schools within the country, of which 29,630 are public and 5,593 are private (Regmi, 2017).

Children with disabilities do not all experience inclusive education in the same manner, and children with various types of disabilities encounter unique barriers. In Nepal, there are three types of educational settings available for children with disabilities: segregated (or special), integrated, and inclusive. To clarify the terminology used in this section, each setting is described below in Exhibit 3.

**Exhibit 3: Descriptions of Educational Settings for Children with Disabilities in Nepal**

|  |  |
| --- | --- |
| **Setting Type** | **Description** |
| Segregated | Also known as “special schools” for children with more severe disabilities, these schools typically have hostels provided for students and are grouped by one type of disability (e.g., a school for the blind). This allows schools to provide disability-specific instruction. |
| Integrated | Mainstream institutions are equipped with resource classrooms that support children with varying disabilities, which are sometimes used in the hope of transitioning these children into inclusive classrooms full-time. |
| Inclusive | Mainstream institutions provide support for all children, regardless of their abilities, within an inclusive classroom. |

Segregated schools are also known as special schools and are managed directly by the government for children with the same disability; these types of schools have been developed in government primary schools typically with hostel facilities[[6]](#footnote-6). Integrated schools are mainstream institutions which children with a variation of disabilities are able to attend; these institutions are often equipped with “resource centers” which serve as classrooms for children with disabilities and work to prepare these children to transition into mainstream classrooms. As of 2016, there were 380 resource classes throughout the country with more than 4,000 students with disabilities being supported in various mainstream schools by resource classes (Eide, Neupane, & Hem, 2016; Government of Nepal, 2016). Many of these students also receive scholarships from the government. Inclusive schools[[7]](#footnote-7) reside under the precedence that all children, regardless of their ability, are provided with the necessary support they need to be successful within the classroom (AHF, 2016).

The Department of Education, now renamed CEHRD, is responsible for managing education throughout the country. Likewise, the key function of the Curriculum Development Center is to develop textbooks and other learning materials including materials for children with disabilities, and the National Center for Educational Development is primarily responsible for conducting the training of school teachers under the CEHRD, as well as conducting research activities in education. The Government of Nepal has made a special organizational structure within the educational system to implement inclusive education (See Appendix A).

## Relevant Education Statistics, Including Data with Regard to Gender and Access to Education

Statistical data in Nepal is often contradictory, and qualitative data is often specific to a particular geographic area and lacks accurate national representation (Hunt & Poudyal, 2019). The data in this section are delivered from multiple sources and help to describe important information around disability in Nepal. A recent report showed Nepal’s progress towards achieving universal primary education, with net enrolment rates rising from 64 percent in 1990 to 95.3 percent in 2013 (NIRT & AIR, 2017).

Exhibit 4 provides the number of children enrolled in basic and secondary education, disaggregated by gender. The same report found the overall teacher-student ratio in Nepal is, on average, one to 24.8 in primary and one to 27.4 in secondary schools, which is within South Asian norms; however, the low teacher to student ratio is not correlated with higher achievement of learning outcomes when compared to other South Asian country statistics (NIRT & AIR, 2017).

**Exhibit 4: Number of children in Basic and Secondary Education**

|  |  |
| --- | --- |
| **Basic Education (Grade 1-8)** (ages 5-12) | **Secondary Education (Grade 9-12)** (ages 13-16) |
| Boys: 51 percent (1,635,176 children) | Boys: 51.2 percent (1,111,791 children) |
| Girls: 49 percent (1,569,683 children) | Girls: 48.8 percent (1,057,613 children) |
| Total: 100 percent (3.2 million children) | Total: 100 percent (2.17 million children) |

Source: NIRT & AIR, 2017

Nepal’s 2011 census reported only 1.94 percent of children from birth to 14 years of age having disabilities, totaling 92,012 (CBS, 2011a). However, the World Health Organization (WHO) estimates 5.8 percent disability prevalence among children from birth to 14 years of age worldwide (WHO & World Bank, 2011), which would indicate a figure of between 250,000 and 735,000[[8]](#footnote-8) children with disabilities in Nepal, depending on which prevalence rate was applied (NIRT & AIR, 2017; USAID, 2017). Many mild disabilities are hardly identified in Nepal, and examples include low vision, hard of hearing, dyslexia, dyspraxia, and attention deficit hyperactivity disorder (ADHD) (NIRT & AIR, 2017; USAID, 2017). Furthermore, approximately 650,000 children in primary school need glasses, and at least 65,000 of those children cannot access them(NIRT & AIR, 2017). The number of children with disabilities is expected to have increased following the 2015 earthquake (Hunt & Poudyal, 2019). The earthquake caused nearly 9,000 casualties and 22,00 injuries; such injuries are expected to have influenced the number of people with physical disabilities in the country[[9]](#footnote-9) (UNDP, 2016). It is also important to mention the common link between disability and poverty: in Nepal, higher levels of disability have been found in the lowest income quintile (Overseas Development Institute, 2018).

Children with disabilities in Nepal experience challenges and barriers in terms of access, participation, and learning outcomes in the education sector. While there is limited data on education outcomes for this group to inform targeted interventions, diagnostic and referral mechanisms and the collection and analysis of more disaggregated data needs to be strengthened within the Education Management Information System (EMIS) (MoE, 2016). Because school grants are provided based on per capita funding, many schools inflate the number of students attending; however in an attempt to minimize reporting errors, the CEHRD has introduced a student tracking system with unique codes for students. Also, an Integrated EMIS (IEMIS) system, which addresses the need for individual student level data and informs equity-based education indexes and targeted allocations, allows tracking of the distribution of scholarships and school grant funds (NIRT & AIR, 2017; MoE, 2016). EMIS has been used to derive Flash Reports, which provide snapshots of “enrolment, pass rates, repetition and survival rates of students at all levels of the school education system in disaggregate [*sic*] forms-by eco-zone and by districts” (Government of Nepal, 2010, p. 4). Sections within such Flash Reports provide data specific to children with disabilities.

The 2011 census stated that girls and women make up 51.5 percent of the total population in Nepal. However, the percentage of females in primary and lower secondary age groups is only 48.8 percent. Furthermore, among children not attending schools in primary and lower secondary age groups, 47.6 percent are boys and 52.4 percent are girls, and studies show there are more out-of-school girls than boys regardless of students’ age (NIRT & AIR, 2017). The Gender Inclusion Index values are generally lower than the values of other indices except for the Political Inclusion Index. Newari women and mountain/hill Janajati women enjoy the highest levels of gender inclusion. The lowest levels of gender inclusion are experienced by Terai Dalit women and women from other Terai castes. The index also shows high levels of social cohesion (or non-discrimination) enjoyed by hill Brahmans and Newars but low levels for Terai and hill Dalits (NIRT & AIR, 2017). See section 5.6.1 for information on the intersectionality between gender and disability.

# Findings

This section provides a summary of the findings from the literature review, organized into the following sections: 1) disability identification practices, 2) teacher training, 3) attitudes toward disability, 4) education efforts for specific disability groups, 5) additional classroom supports, and 6) intersectionality of disability with other marginalizing factors.

## **Disability Identification Practices**

**Finding 1:** Nepal uses disability identification cards as a means of systematizing requirements for disability diagnosis, which in turn drives the provision of services and funding; however, there are some documented limitations to accessing the system and the appropriate referral mechanisms needed to identify disability. The ability of public hospitals in provincial headquarters to conduct vision and hearing screening makes such services available at a larger scale within major cities. Data regarding disability prevalence is often contradictory, and there remains a poor understanding of the 2015 earthquake’s impact on the incidence of disability.

The goal of identifying students with disabilities at the classroom level is to understand if a student has a disability or a barrier to learning, with the aim or providing them with appropriate services and supports. Many low-and middle-income countries report challenges with identifying students with disabilities (Hayes, Turnbull, & Moran, 2018). It is widely acknowledged there is a lack of good quality data on disability in Nepal, and the inadequacy of data and information strains policy formulation and planning for educating children with disabilities (Banks et al., 2019). The purpose of this section is to provide information regarding identification practices for persons with disabilities in Nepal. Practices that have shown to be successful in recent research are also highlighted here.

## General Information on Identification Practices in Country

Approximately 80 percent of persons with disabilities live in low- and middle-income countries. Research has shown the lack of proper identification tools for disability, especially within this context, has resulted in a wide variety of prevalence estimates (Trani, Babulal, & Bakhshi, 2015) that are often inaccurate. This has the potential to significantly affect the livelihoods of people with disabilities. Within the context of Nepal, the primary way the government identifies persons with disabilities is through the dissemination of Disability Identification Cards. In order to be eligible for government support, persons with disabilities must first undergo a seemingly complex assessment of disability (Banks et al., 2019). More specifically, applicants must apply for their disability card through the Local Coordination Committee, a 11-member committee coordinated by the Deputy Mayor or Vice Chair of the local body including 4 representatives from DPOs or persons with disabilities. The application consists of: 1) a letter from the applicant’s Ward Office, verifying their identity and place of residence, 2) a letter from the public health institutions explaining the disability, 3) a birth certificate or citizenship card, 4) photographs, and 5) a completed application form outlining the type and severity of the disability, any difficulties the person faces due to their disability, and the need for assistive devices. In addition, medical documentation and references from DPOs can also be included, and requested, to support the application. Applicants must then participate in an in-person evaluation which assesses the applicant’s level of difficulty to complete daily tasks.

Upon completion, one of four levels of cards are distributed to the applicant: red (*ka*), blue (*kha*), yellow (*ga*), or white (*gha*) (Overseas Development Institute [ODI], 2018). The color of the card indicates the severity level of the disability. Red is the most severe level, categorized as a “complete disability”, for those who are unable to live their lives without full support of others; these people are typically blind and mute, cannot physically move on their own, or have a severe intellectual disability. Blue cards are given to those considered as having a “severe disability” in that they require continuous support but are mobile and able to communicate. Yellow cards are given to those who appear to have a “moderate disability”, in that applicants are able to perform daily activities and participate in social life if the environment is barrier-free. Lastly, those who qualify for white cards are considered to have a “mild disability” (Banks et al., 2019). All those who hold a disability card are entitled to access numerous programs and services such as social assistance, scholarships, assistive devices, health and rehabilitation services, and specialized education (ODI, 2018). However, only cardholders with red and blue cards are eligible to receive a disability allowance (ODI, 2018).

Currently, at the national level, the lack of identification and screening for children with disabilities has prevented, and continues to prevent, the government from effectively budgeting and developing responsive implementation plans across sectors. Therefore, at the local level, without accurate data, communities and service providers are not able to adequately contextualize and implement responsive mechanisms supporting effective instruction and learning as a result (USAID, 2017). Nepal faces a number of barriers to screening and identifying limitations, which may contribute to the low disability prevalence found in the 2011 census. Some of the most notable factors include: 1) a significant lack of teacher training for screening students as well as the allotted time teachers have to complete such trainings; 2) a lack of resources needed by the MoEST to successfully run assessment centers in the 62 districts throughout Nepal; 3) the government’s distribution of disability identity cards is largely confined to district headquarters, which makes it difficult for many eligible children in rural areas to apply; and 4) Nepal lacks the proper referral mechanisms to send children with functional limitations to service providers for proper diagnosis and treatment (UNICEF, 2017).

## Vision Screening and Testing

There are an estimated 45 million people who are blind worldwide. Around 1.4 million are children under 16 years of age with 75 percent of these children living in developing countries (Shrestha, Gnyawali, & Upadhyay, 2012). Under the Nepal Constitution of 2015, students who are blind or have low vision have the right to free education with the medium of braille script being provided though the school (NIRT & AIR, 2017). However, in order to access this right, children must be adequately screened and identified, which can be problematic in Nepal as the literature reflects a need for scaling up services at health facilities to access screening (Shrestha, Gnyawali, & Upadhyay, 2012).

A three-year comprehensive study (Shrestha, Gnyawali, & Upadhyay, 2012) tested a total of 778 students from all 67 integrated schools for the blind in Nepal, using the World Health Organization/Prevention of Blindness Eye Examination Record for Children with Blindness and Low Vision. Results found that among the students examined, 85.9 percent were blind, 10 percent had significant low-vision challenges, and 4.1 had low vision with fewer vision challenges. More than one-third of students screened had vision-related challenges for potentially avoidable reasons, indicating a lack of eye health awareness and eye care services in Nepal. Similarly, a Nepal pediatric ocular disease study found approximately two-thirds of the cases of vision-related disabilities were due to preventable causes (Adhikari, Shrestha, Adhikhari, Maharjan, & Shrestha, 2015). Both studies indicate that screening children early is important for children’s health and education (Shrestha, Gnyawali, & Upadhyay, 2012; Adhikari et al., 2015).

## Hearing Screening and Testing

Hearing screenings are often coupled with vision screenings in Nepal and are typically provided in medical and not school settings. Public hospitals in all seven provincial headquarters have vision and hearing screening facilities available. Other hospitals run by civil society organizations also provide vision screening and eye care facilities. These include the Eastern Regional Eye Care Programme (EREC-P) which runs 16 eye care centers, and the Himalaya Eye Hospital which runs 12 such centers (EREC-P, 2019; Himalaya Eye Hospital, 2018). Studies have shown that NGOs train and educate eye care workers in administering hearing tests in addition to vision tests (Thakur et al., 2012; Thakur, Singh, Mahato, & Singh, 2015). For example, WHO collaborated with CBM International to promote combining eye and ear services for tackling the problem of hearing loss and has launched Sound Hearing 2030 for South East Asia, a program which aims to reduce the prevalence of hearing loss with the philosophy of combining eye and ear services. WHO realizes there is a significant lack of manpower and resources, which inhibits the prevention and treatment of hearing challenges in low-income countries such as Nepal. However, WHO believes that combining existing infrastructure and resources by training eye care workers to detect hearing loss and ear disease will allow these workers to provide additional ear screening to their current eye care patients, as well as provide primary treatment and place referrals when deemed necessary. In addition, health education about early detection and prevention of hearing loss can be disseminated throughout the communities in a much more efficient manner, by training and working with eyecare doctors (Thakur et al., 2015).

## Identification of Students with Intellectual or Learning Disabilities

Identifying children with functional limitations or disabilities as early as possible enables teachers and schools to adapt their teaching practices to better support those students and refer them for further medical treatment or other support services. However, school-based referral mechanisms for students with functional limitations or disabilities are weak or non-existent in Nepal (USAID, 2019a).

There are two known techniques that have been used to screen for intellectual disability in Nepal: the Portage Guide and the Autism Spectrum Quotient. The Portage Guide was one of the first tools used to assess the cognitive development of children in Nepal, and was developed by the United Nations Educational, Scientific, and Cultural Organization (UNESCO). The Portage Guide is considered an early intervention “package”, which consists of a checklist of developmental skills for children from birth to age six. This package was modified and adopted to suit the Nepali context and was used to assess children during school. Follow-up included household visits and periodic medical checkups covered by the program. After a child was identified with a disability, parents received counseling and training, and in some cases, children were admitted to child development centers (UNICEF, 2003). Portage and Rehabilitation Association Nepal (PRAN) remains active in Nepal, supporting 1,431 young children with its early intervention program since the organization’s inception in 2002 (PRAN, 2020).

A recent study (Heys et al., 2018) used a Nepali version of a screening tool for autism, known as the Autism Spectrum Quotient – 10 (AQ-10). According to this study, if the tool is as accurate for the Nepali population as it is for the United Kingdom, an estimated three in 1,000 students, meaning a total of 34,803 children and young people currently living in Nepal (range 23,203–58,007), have a potential diagnosis of autism[[10]](#footnote-10). Of the children who screened positive for autism symptomatology, nearly all screened positive for physical, learning, and behavioral disabilities as well. Given the fact these two screening tools were delivered approximately six months apart, the authors believe this would indicate the modified AQ-10 used is a valid measure of atypical child behavior. In addition, this finding suggests that children who screened positive for autism symptomatology on the AQ-10 have evidence of multiple disabilities and, therefore, most likely need higher levels of support (Heys et al., 2018).

Additional research conducted in 2007 on disability screening in low-income countries showed that the Ten Questionnaire (TQ) was the most commonly used screening tool. The screening tool was first developed in 1984 for screening children aged two-to-nine years in resource-poor settings in order to identify disabilities and refer screen-positive children for further clinical evaluation and intervention (Wu et al., 2010). The tool asks parents and caregivers 10 questions regarding their child’s functional abilities and developmental milestones; a child tests positive if a parent answers yes to one or more of the questions. The tool has been used in over 20 countries including Nepal[[11]](#footnote-11); however, because much literature has shown discrepancies with the tool, it has been suggested that the TQ needs to be supplemented by another more detailed assessment, including one or more disability-speciﬁc tools in order to capture a more broad range of disabilities as well as help identify the degree of the disability (Maulik & Darmstadt, 2007). Additionally, the tool is best understood for identifying children with developmental delays or who have an increased risk of disability (Wu et al., 2010).

## **Teacher Training**

**Finding 2:** Teacher training on inclusive education reaches a small quantity of educators in Nepal, and multiple reports document the limitations in supporting teachers to develop the skills they require to effectively educate children with disabilities. The only teachers who receive a specialized 45-day training on disability are resource teachers, and even then, this time is reported to be insufficient to develop foundational skills such as sign language fluency. Additional constraints include a lack of refresher training, or training to any educators who work in an inclusive setting.

As stated within the USAID Universal Design for Learning Toolkit, “inclusive education cannot be achieved through a single education but rather by a group of dedicated leaders, parents and students” (Hayes, Turnbull & Moran, 2018, p 29). Within the education sector, teacher training is often known as teacher education and seen as a method to develop professionalism and teach best practices for teachers (Regmi, 2017). As teachers are vital in effectively implementing inclusive education, teacher training is important both prior and during the establishment of inclusion (Sharma, 2015). There is an abundance of research discussing the need for better teacher training in Nepal, specifically when it comes to the betterment of children with disabilities’ enrollment, retention, and success in school (Dynamic Institute of Research and Development, 2014).

A recent study in Nepal conducted by USAID found that “most teachers are not trained on disability-inclusive approaches for teaching fundamental skills such as reading, and this contributes to poor learning outcomes for students with functional impairments or disabilities” (USAID, 2019a, p.1). While a majority of students with disabilities are enrolled in mainstream classrooms, teachers who are not trained on inclusive approaches and pedagogies are not able to identify these students within their classrooms, which severely impacts the educational attainments of such students (USAID, 2017).

In Nepal, there is currently a course within the Bachelor of Education curriculum that includes a component on inclusive education (P. Pariyar, personal communication, 2020). While there is no data on the total number of teachers trained on inclusive education, one study surveyed 15 schools within three districts of Nepal (Kathmandu, Kaski, and Banke), and found that overall only 16 percent of teachers have received in-service training on inclusive education (Regmi, 2017). Currently, the National Center for Educational Development conducts certification and recurrent training courses for primary and secondary education teachers through education training centers and other training providers (MoE & UNESCO, 2015). The National Center for Education Development also provides a one-year general education teacher training course in addition to the courses needed for the minimum academic qualification for teacher posts. However, a report has questioned whether the minimum academic qualification plus the one-year teacher training course is adequate to produce teachers who exemplify the standards for effective practice (NIRT & AIR, 2017). In fact, the report suggested that universities design educational programs within their curriculum such that students aiming to become teachers have the opportunity to take a course on disability and education (NIRT & AIR, 2017). Reports outline further concerns regarding the frequency of training for special educators, citing instances of teachers for children with hearing disabilities who have not received sign language training (Dynamic Institute of Research and Development, 2014; UNICEF, 2017; NIRT & AIR, 2017).

Under the supervision of the CEHRD, there are seven Education Training Centers, one for each of the seven Nepalese provinces (P. Pariyar, personal communication, 2020). Education Training Centers monitor schools under their jurisdiction and organize trainings for teachers. Currently, *only* resource teachers in integrated schools receive a 45-day mandatory training dedicated to working with children with a specific type of disability[[12]](#footnote-12) (NIRT & AIR, 2017). For example, teachers are instructed how to teach a student based on their disability; however, instruction in sign language is minimal, which can hinder learning for deaf students (Hunt & Poudyal, 2019). In addition, refresher courses are extremely limited, and there is a drastic need for more training, coaching, mentoring, and supervision (USAID, 2017). While there is some expectation that resource teachers will train other teachers in their schools, stakeholders reported there is no formal process or requirement to do so (Banks et al., 2019).

Multiple sources suggest that general training programs for general education teachers need to include training to enhance their skills to teach in inclusive classrooms (Banks et al., 2019; Hunt & Poudyal, 2019; UNICEF, 2003). In addition, disability-specific training should be added into ongoing general training programs. This would allow for mainstream teachers to be better prepared when a child with a disability enters their classroom. Training content could include pedagogical aspects, such as teaching techniques, technology and materials development, and knowledge on disability, so that teachers can later teach children with the use of individual education plans (Lamichhane, 2017). A recent UNICEF report (2017) suggested that all certified teachers in Nepal should be trained to identify suspected limitations among their students and refer them to health providers who can ensure that students’ physical and mental needs are met. Minor adjustments to teacher trainings and materials would raise awareness of disability issues and make classrooms friendlier to students with limitations. In addition, Nepal could further support educators by providing a platform for sharing knowledge about inclusive education; research suggests that this would allow educators to develop strategies to apply inclusive practices within their local contexts (Beutel, Tangen, & Carrington, 2019).

## **Attitudes Toward Disability**

**Finding 3:** Discriminatory attitudes towards persons with disabilities in Nepal are well-documented. Despite a legislative environment which acknowledges the rights of persons with disabilities, the literature cited indicates that more genuine transformation of society for children with disabilities may be thwarted by discriminatory sociocultural beliefs, some locally held religious perspectives, and guardians’ poor awareness of educational opportunities for children with disabilities. Children with intellectual or multiple disabilities face particular marginalization, and parents of children with intellectual disability are more likely to favor segregated education than parents of children with visual or physical disabilities. There are multiple reports of humiliation, neglect, and discrimination of children with disabilities in school settings. Research indicates that guardians with higher degrees of education are more likely to have positive perceptions about the education of their children with disabilities than guardians without education.

Attitudes on disability can impact the effectiveness of inclusive education within a country (Hayes, Turnbull & Moran, 2018). Historically, many in Nepal held the belief that disability is a result of an individual’s sinful past. While the government has endorsed a plethora of legislation and policies to protect persons with disabilities, local attitudes and perceptions of disability have not made a significant shift. Local beliefs and a lack of awareness may be leading contributors to this mindset (AHF, 2016). In this section, we discuss the impact of historically held perspectives of disability and, specifically, the attitudes of teachers, parents, and children with disabilities.

## Local Perspectives and Attitudes Toward Disability

A recent study on inclusive education in Nepal found that social and traditionally held local beliefs impact upon negative attitude towards disabilities, which is considered one of the key problems hindering the success of inclusive education (Regmi, 2017). The pervasiveness of stigma, discrimination and violence are often associated with persons with disabilities in Nepal (Banks et al., 2019). Traditionally held local beliefs and poor understanding of the needs of persons with a disability within the family have led some parents to be overprotective and ashamed, even hiding their children, particularly when these children have intellectual or multiple unique needs (USAID, 2017).

Some people in Nepal feel as though children with disabilities, specifically intellectual disability, are “possessed” by evil spirits (Crishna & Prajapati, 2008). Citing religious beliefs, some families in Nepal perceive disability as a result of a past sin which may result in marginalization of the child from their community and school. In such cases, families often turn to religious ceremonies and rituals to cure the individual (Shrestha & Weber, 2002). Pollat (2011) argues that while resources and improved infrastructure are necessary, the most important factors contributing to inclusion are the local perceptions and attitudes of schools and communities. Ultimately, if a school or community expresses disregard and prejudice toward differences and disabilities, then discriminatory practices will continue.

## Teacher Attitudes

In a recent study of teacher perspectives on disability, teachers commonly questioned whether children with disabilities could receive or were receiving a meaningful education in mainstream schools and, therefore, were more reluctant to invest energy into teaching students with disabilities. These attitudes appeared to be pronounced for children with intellectual disability and/or with behavioral problems (Banks et al., 2019). Some teachers admitted to feeling overwhelmed and not able to provide the proper resources and time towards children with disabilities, and as a result, many children were upgraded to higher grades without passing (Banks et al., 2019). A study on teacher’s perceptions of inclusive education found the most common problems reported were the lack of special education materials, teachers’ inability to speak the children’s mother tongue, difficulty in assessing disability, lack of disability-friendly infrastructure, and high dropout rates from school (Regmi, 2017).

In the same study (Regmi, 2017), teachers generated strategies to increase the perceptions of inclusion at their schools. These included training teachers on inclusive education, incentivizing teachers, developing disability assessment skills, and ensuring the availability of instructional materials in schools. In addition, teachers suggested that enhancing their roles to include teachers in curriculum design, maintaining good relations between the school and community, preparing and using student-specific teaching materials, developing positive attitudes of teachers, working with special needs education teachers, implementing rewards and punishments effectively, and providing training on local languages would support successful inclusion in schools (Regmi, 2017).

## Parent Attitudes

Within the context of Nepal, guardians have often been reluctant to send their children with disabilities to school, as some do not see or understand the value education could have for their children and fear their children would not receive a quality education even if they did attend school (Banks et al., 2019). Similarly, guardians of children without disabilities reportedly used to think that their children might become disabled if they studied with children with disabilities; however, attitudes have changed (UNICEF, 2003).

A study conducted in Kathmandu Valley, which covers the three districts of Kathmandu, Lalitpur, and Bhaktapur, found that the level of education of guardians of children with disabilities positively correlated to their perception of their children’s education (Lamichhane, 2013). This means that guardians with more years of education tended to positively perceive their children’s education, and those with fewer years of education perceived their children’s education more negatively. A similar correlation was found in guardians’ understanding of their children’s rights; guardians with more years of education understood their children’s rights more than those with fewer years of education. While disability scholarships are available to help finance education, children must obtain a disability card; some parents in a recent study (Banks et al.,2019) reported that it is difficult to obtain disability cards due to their location, while others expressed they were unaware of the card’s benefits. Therefore, even the parents who wish to send their children with disabilities to school sometimes lack the awareness and resources to do so.

It is important to mention that just as children with disabilities are not homogeneous, neither are their parents. In fact, some parents tend to have different views on education based on the disability of their child. For example, those who have children with visual and physical disabilities tend to be in favor of inclusive schools, as they recognize a positive change in their children’s development after joining the school. However, while some parents of children with intellectual disabilities may feel satisfied with the performance of their child and the attitudes of teachers and peers, they still believe that special schooling would be better for their child (UNICEF, 2003). They feel their children’s pace of learning is not similar to that of other children. The Dynamic Institute of Research and Development (2014) suggests that an effective consciousness-raising program for parents and families of children with disabilities is necessary in order to make parents and families aware of the policy, plan, program, and system of education for their children, and that ultimately, parental involvement in education is essential.

## Children’s Attitudes

While many studies on children with disabilities in Nepal tend to focus on the views and attitudes of the community, teachers, and guardians of children with disabilities, little research has been done to examine the views of the children themselves. To leave out the voice of the children most affected by inclusive education seems to be counterproductive and a seemingly naïve approach towards the agenda of inclusion.

One qualitative study in Nepal (Banks et al., 2019) realized this gap in research and confronted it in the research design. Funded by Plan International, the study took place within areas where Plan International Nepal operates[[13]](#footnote-13). A total of 21 families were sampled in the study, with 15 child interviews[[14]](#footnote-14). The overwhelming ﬁnding[[15]](#footnote-15), expressed by the children themselves, was that they were enthusiastic about going to school. While some children expressed that physically getting to school was extremely difficult and others stated their struggle to understand or communicate with the teacher was challenging, children enjoyed being in school and learning. One consistent area of concern was bullying, but even then, children wanted to attend, as many believed it was the only pathway to a better life.

Alternatively, another study in Nepal that interviewed parents found that almost all children with disabilities felt either humiliated, ignored, or discriminated against within their school (Eide, Neupane, & Hem, 2016). In addition, half of the respondents experienced some kind of difficulties due to an inaccessible environment. While these studies do show there is a mixture of feelings towards inclusive education from children with disabilities, it is important to include all voices within the conversation in order to better understand and address existing challenges to successful inclusion of all children in schools.

## **Education Efforts for Specific Disability Groups**

**Finding 4:** The limited existing research on ways in which children with disabilities are educated in Nepal suggests that there is unequal access to the national curriculum for some children with disabilities, especially children with intellectual disability, as compared to their peers without disabilities. Resourcing is constrained, including a lack of braille texts for some students who are blind, and resource teachers with limited sign language proficiency entrusted to teach children who are deaf. Dropout rates for children who are deaf or blind are extraordinarily high, with a vast majority not completing education. While the legislative environment recognizes the needs for disability accommodations, and extra time is provided to students on exams, examinations are not available in braille.

The 2011 Nepal Living Standards Survey (NLSS) reported a breakdown of the percentage of each disability represented in the census for all age groups. Exhibit 5 presents the findings.

**Exhibit 5: Disability Prevalence in 2011 NLSS**

|  |  |
| --- | --- |
| **Type of disability** | **Percentage of prevalence** |
| Physical | 29.2 |
| Visual | 22.3 |
| Hearing | 23.4 |
| Vision/Hearing Related | 2.4 |
| Speech Related | 8.6 |
| Multiple | 7.3 |

Source: CBS, 2011b

Available data suggests that school attendance differs by disability type, with the highest out-of-school rates for children with multiple disabilities (52.5 percent), intellectual disability (38.0 percent), mental[[16]](#footnote-16) (47.1 percent), and voice/speech disabilities (33.2 percent) (UNICEF, 2016).

This section provides an overview of education by disability type listed in alphabetical order.

## Education for Students Who Are Blind or Have Low Vision

A midterm review of Vision 2020 estimated there are currently 30,240 children who are blind and another 90,000-120,000 with low vision in Nepal (Shrestha et al., 2012). Prior to 1964, Nepalese who were blind had no access to education, as there were no schools in either special or inclusive settings that could accommodate their individual needs (Lamichhane, 2013). Since 1964, students who are blind or have low vision have been studying together with their peers without disabilities in an integrated educational setting. One of the main innovations in Nepal’s education program is the introduction of skill-based classes for students who are blind or have low vision prior to their placement in inclusive classes (Lamichhane, 2010).

There are nine areas of the Expanded Core Curriculum that state what children who are blind or have low vision learn in resource classrooms. These include skills such as access, career education, independent living skills, orientation and mobility, recreational and leisure skills, self-determination skills, social-interaction skills, the use of assistive technology, and sensory-efﬁciency skills. Students who are blind or have low vision remain in these resource classes until they gain necessary skills, such as the use of braille. Once students enter mainstream classrooms, they follow the same curriculum as the rest of the classroom and study subjects such as Nepali language, mathematics, science, social studies, English language, and population and environment; difficulties arise when teachers within general education classrooms have little-to-no training or experience teaching students who are blind or have low vision, like for instance the frequent use of blackboards without also providing oral instructions (Lamichhane, 2013).

One study (Lamichhane, 2013) found the difficulties in inclusive education for students who are blind or have low vision increased with their level of education. Specifically, exams were not yet available in braille, and the lack of additional braille supplies, such as dictionaries, makes it difficult for blind students to succeed and hinders their quality of education. Additionally, the study found that students who are blind or have low vision felt that when they joined the inclusive classroom, they had difficulty keeping up in school as a result of the school’s inability to provide braille textbooks and felt that teachers were not adequately prepared to diversify their teaching strategies to help students with vision challenges. The same study highlighted the importance of school friends in helping the students navigate throughout the school.

## Deaf Education Including Sign Language

One study, with a total of 409 persons with a disability from Kathmandu Valley[[17]](#footnote-17),showed that the majority of the 151 participants who are deaf or hard of hearing did not complete their full 10 years of school education. Specifically, the average length of schooling for participants with hearing impairments was 6.9 years; 12.5 percent completed five or fewer years; an additional 15.8 percent of participants did not complete more than eight years; and a mere 4.9 percent of participants who are deaf or hard of hearing successfully completed 10 full years of schooling. Of these respondents who are deaf or hard of hearing, 59.1 percent attended special schools, 27.3 percent attended mainstream schools and 13.6 percent attended integrated schools. Of the integrated and special schools in the three districts in the most urban part of Kathmandu Valley, there is only one school for students who are deaf or hard of hearing; nationwide as of 2013, there were 16 special schools for students who are deaf or hard of hearing (Lamichhane, 2013).

In Nepal, children who are deaf and their guardians prefer special schools over inclusive mainstream schools (Lamichhane, 2013). This is often associated with the lack of sign language training for teachers in mainstream schools. Students who are deaf or hard of hearing struggle to adjust to mainstream classrooms, as teachers in the mainstream—and even resource classrooms—rarely have suﬃcient proﬁciency in sign language; additionally, teachers tend to use the standard lecture-style of teaching, and when sign language interpreters are not available, it is nearly impossible for students to understand the lesson. However, in special schools for students who are deaf or hard of hearing, students reported being instructed in sign language for employment-related skills, such as computers, as well as in math and science (Lamichhane, 2013). Additionally, and very importantly, students who were deaf and attended inclusive schools were especially vulnerable to rape because they had diﬃculty in communicating their experiences and advocating for themselves (Banks et al., 2019).

## Students with Intellectual Disability and Complex Support Needs

Children with intellectual disability are marginalized within the whole disability sector and the government does not currently recognize that persons with intellectual disability often benefit from specialized care and rehabilitation programs (Crishna & Prajapati, 2008). Some parents believe their children are not able to keep up with their peers without disabilities, and therefore, opt to send their children to special rather than inclusive schools (UNICEF, 2003). In Nepal, the high prevalence rates of students with intellectual disability can be associated with certain geographical regions. One study indicates that the highest prevalence of persons with intellectual disability exists in mountainous regions (New ERA, 2001), generally because of the inaccessibility of health facilities, poor economic status, and the high incidence of cretinism (Shrestha & Weber, 2002).

In the school visit component of their research, Banks et al. (2019) visited a school with a resource classroom in Kathmandu that had teachers with extensive training and resources for children with intellectual disability[[18]](#footnote-18); this school, however, received its additional funding and resources from NGO resources and not the government of Nepal. While this sole example shows the impact of investing in training, the majority of literature in Nepal shows that even when children with intellectual disability do attend mainstream school, they commonly face negative attitudes from peers and teachers, and there is a scarcity of specialist resources and teacher training available (Banks & Zuurmond, 2015). In Nepal, one report states that when students with intellectual disability do attend school, they tend to learn primarily basic life skills such as how to wash themselves and get dressed; however, they do not typically learn subjects like literacy, math, and science or other elements of the curriculum made available to students without disabilities (Human Rights Watch, 2016).

## Students with Learning Disabilities

Limited research was found specifically on students with learning disabilities in Nepal, stating that children with learning disabilities such as dyslexia, dyspraxia, and attention deficit hyperactivity disorder, along with students with less apparent disabilities[[19]](#footnote-19), such as poor eyesight or hearing, often go undetected. If left unaddressed, these can pose significant obstacles and prevent children from learning effectively (NIRT & AIR, 2017; USAID, 2019a).

## Students with Physical Disabilities

Children with physical disabilities face significant disadvantages when it comes to accessing schools, specifically in regard to transportation and school infrastructure. In Nepal, cerebral palsy was considered the most common cause for severe motor disability, but the earthquake in 2015 is believed to have increased the prevalence of other physical disabilities (USAID, 2019d). Children with physical disabilities reported that getting to school and moving around school was a challenge, especially for those without assistive devices (Banks et al., 2019). There are currently no special schools in Nepal that cater specifically to children with physical disabilities. The main barriers hindering educational attainment for children with physical disabilities remain to be categorized under physical barriers, such as inaccessible school infrastructures, distance, and the lack of safe and accessible roads by which to commute (Lamichhane, 2013).

A study conducted by the Disabled Rehabilitation Center (DRC) on inclusive education in Nepal found that parents sometimes have to make a difficult decision between schooling and family time when it comes to educating their children with disabilities (Banskota, Poudyal, Khadka, & Khadka, 2017). The study shows that many “inclusive” schools are often located far away, and the decision to send children to schools far away may require relocation or having children live in a facility. Additionally, many schools’ infrastructures are inaccessible for children with disabilities at all levels of education. The lack of disability-friendly infrastructure, such as ramps and safe and accessible toilet facilities, hinders children with disabilities, in particular those with visual and physical disabilities, from accessing education (Banks et al., 2019). While the government adopted the Accessible Physical Structure and Communication Services Directive in 2012, the recently-established structures (roads, public buildings, and schools) do not strictly follow the guidelines and persons with disabilities are the ones who suffer the most from the lack of compliance (Eide, Neupane, & Hem, 2016).

## **Additional Classroom Supports**

**Finding 5:** While Nepalese policy ensures that students have access to education in their local language, in practice this is not universal, and may contribute to learning difficulty for children. An inflexible national curriculum and poor guidelines for continuous assessment are attributed in part to the poor levels of academic achievement for children with and without disabilities. Lack of accessible school infrastructure and long distances to school are documented challenges, especially amongst children in hill and mountain regions. From the literature reviewed, IEPs and assistive technologies have no documented use in Nepal.

The educational system in Nepal does not adequately meet the learning needs of diverse learners, specifically children with disabilities. The existing schools’ physical infrastructure, the teaching and learning practices, the shortage of trained and motivated staff, and the lack of assistive technology and adapted learning materials in mainstream and special schools do not adequately support the learning of children with disabilities (Banks et al., 2019; Dynamic Institute of Research and Development, 2014; UNICEF, 2003). Additionally, there are limited resources to ensure an inclusive learning environment and teaching and learning process for all (USAID, 2017).

## Inclusive Education Efforts

There have been a number of inclusive education efforts throughout Nepal in the past several years; some that have proven to be successful are highlighted here. The Basic and Primary Education Program conducted by UNICEF was a pilot program for inclusive education from 1992-1999 and was comprised of a Special Education Unit in charge of heading the efforts for children with disabilities through establishing integration structure, teacher training, human resource capacity building, community engagement, and provision of residential facilities for children with disabilities. This program focused mostly on implementing resource classrooms. The second round of the program (1999-2004) focused on providing technical support for teachers and providing appropriate teaching/learning materials designed to ensure effective inclusion of students with disabilities in general education primary schools. Five schools and rehabilitation centers partnered with UNICEF in this successful endeavor: the Daleki School, Tribhuvan Madhyamik Vidhyalaya, Community-Based Rehabilitation Organization [CBRO] – Bhaktapur, Adarsha Child Development Centre, and Shree Bindeshwori Primary School – Bidhuwa. Together, these schools and facilities trained teachers[[20]](#footnote-20), modified curriculum, increased learner outcomes, and raised awareness and early identification as well as community involvement and parental support (UNICEF, 2003).

The Australian Award Short Course program for inclusive educators from South Asia conducted a 10-day inclusive education training for teachers, organizations, and government officials working with children with disabilities in Nepal, Bangladesh, and Sri Lanka (Beutel, Tangen, & Carrington, 2019). Of the 21 total participants in the program, 17 were from Nepal, 9 of whom worked in the government (including policy makers, teacher trainers, and teachers working with students with disabilities), with the remaining 8 Nepalese participants working for a disability-specific NGO in Nepal. Results included an increased understanding in the meaning and implementation of inclusive education and in the different types of support available for children with a range of disabilities. Participants engaged in workshops on trends and policies in inclusive education around the globe, covering a variety of disabilities including autism, intellectual disability, and learning diﬃculties, and were introduced to a range of inclusive models to support diverse learners. The intense training was followed by two school visits six months after training completion. The study found increased inclusive practices in curriculum and teaching practices, as well as policy creation[[21]](#footnote-21) regarding inclusive education.

## Instructional Approaches

One study by Beutel, Tangen, and Carrington (2019) showed the impact of conducting an inclusive education training with teachers working with children with disabilities in Nepal. Prior to the program, participants could identify basic strategies towards working with this demographic of students; however, after the program, teachers were able to consider a broader range of strategies, including the need for IEPs, information and communication technology-based teaching (ICT), pictorial teaching material, using tactile materials for students who are blind, and disabled-friendly teaching materials to cater to specific needs of students. Another study (Regmi, 2017) showed a “clear and visible gap between policy provisions and its practice, as well as between knowledge of teachers on inclusive education and the application of this knowledge in classroom teaching” (p. ii). Additionally, despite the fact that the Nepal Constitution of 2015 lists teaching students’ mother tongue in schools as a directive, it is not necessarily implemented, and this is yet another negative impact on education for children with disabilities from poor families without materials in their mother language.

## Access to Curriculum

The national curriculum in most countries sets the standards related to teaching and learning but often students with disabilities do not have access to the same curriculum as students without disabilities, which can result in challenges related to lower learning outcomes (Hayes, Turnbull & Moran, 2018). In Nepal, research has indicated that some children with disabilities remain excluded from the curriculum, particularly in mainstream settings (Banks et al., 2019). One study found the current curriculum objectives are not formulated in terms of standards specifying performance, conditions of performance, and acceptable level of performance; this makes it difficult to align the curriculum with assessment and instruction. Without effective continuous assessment, the system is deprived of data about how students are learning in real time. This further undermines the ability of teachers to design data-based remedial work that addresses learning difficulties in a timely manner (NIRT & AIR, 2017).  Additionally, for children with disabilities who follow the same curriculum, this has a more significant impact on their educational attainment. Adapted curriculum, coupled with special resources and teacher training, was highlighted as a need in a study on system-wide challenges in providing successful schooling for children with disabilities (Banks et al., 2019).

## Individualized Education Plans (IEPs)

An IEP is a “written plan that sets the learning goals for students with disabilities, and addresses the services or accommodations that will be provided by the school” (Hayes, Turnbull & Moran, 2018, p 38). A recent study (UNICEF, 2017) showed that while hearing aids, glasses, and other technological devices may help educational efforts, the majority of students assessed in Nepal would benefit most from IEPs. Moreover, students with disabilities need teachers to adjust their lesson plans and teaching strategies to address their learning needs (Lamichhane, 2017). A recent report (UNICEF, 2017) stated:

In addition to knowing how to produce IEPs for children whose limitations require them, school administrators and teachers should be familiar with instructional strategies that accommodate learners with functional limitations and disabilities. Teachers should be trained to incorporate activities into their lesson plans that are responsive to the needs of students with limitations in all domains, such as the use of large manipulatives for students with challenges in hearing and visual domains and mnemonic devices for children with difficulties in the learning and remembering domain.

While IEPs are not generally utilized in Nepal, research suggests the implementation of IEPs would be beneficial for students with disabilities (Lamichhane, 2017). As previously mentioned, inclusive education efforts in Nepal have incorporated trainings involving IEPs, however, the literature does not reflect teacher implementation of IEPs within their classrooms.

## Transportation

One of the major barriers in the accessibility of education is the lack of transportation available for children with disabilities, most notably those with physical disabilities (Barriga, 2011). A third of families surveyed in a study (Banks et al., 2019) stated transportation as a common factor in hindering their child from attending school, impacting those in mountain and hill regions the most. Almost all households (99.3 percent) in urban areas and 93.4 percent of households in rural areas have primary schools within a 30 minute distance. The mean time for reaching the nearest primary school is seven minutes, although it is almost double this for the poorest households at 13 minutes (MoE & UNESCO, 2015). People with disabilities also face additional costs for transportation as they are often denied education within their local schools and therefore need to travel further; while disability cardholders are entitled to a disability allowance for transportation, many families are unaware of such benefits, and the procedure for qualifying for a disability card is quite complex (Banks et al., 2019).

## Accommodations and Technology

The CRPD defines reasonable accommodation as “necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms” (United Nations, 2006, Art 3). In Nepal, there are some instructional approaches to inclusive education that have been beneficial for students with disabilities, one in particular being the additional time for exams allotted to children with disabilities as a result of a mandate from the Department of Education. This mandate allows students to have up to an additional hour and a half if they have shown difficulty in completing their school exams (Department of Education, 2002).

Studies have shown a need for more technology utilization in and outside of the classroom for students with disabilities (Lamichhane, 2017; Eide, Neupane, & Hem, 2016; Lamichhane, 2013). Nevertheless, none of the research reviewed mentioned any technology currently being used in Nepal for this purpose. Significant emphasis was put on the potential for technology to amendmany of the difficulties faced by persons with disabilities (Poudyal, Banskota, & Khadka, 2018). More specifically, studies emphasized including technology focused on advancing communication for those living with functional limitations.

## Other Professional Supports

In countries with sufficient resources, additional professional services such as therapies and access to additional experts are provided within the school setting without additional cost to the family (Hayes, Turnbull & Moran, 2018). In Nepal, parents are often unaware of the different benefits available to students with disabilities and ways to best support their child (i.e. physiotherapy and speech therapy skills, Nepali sign language training, etc.) (USAID, 2017). While the Constitution of Nepal, as well as the legislation, policy plans, and international mandates agreed to by the government, state that the country will provide rehabilitation centers for people with disabilities, there is a wide gap between the demand and the accessibility of such support (Crishna & Prajapati, 2008). However, one study found that for the small number of children who did receive assistive devices, rehabilitation, and other needed healthcare, their improved functioning led to a noticeable increase in well-being and participation, including in education as indicated by improved performance (Banks et al., 2019). One UNICEF report (2017) therefore suggests that all certified teachers in Nepal should be trained to identify suspected limitations among their students and refer them to health providers who can help ensure these physical and intellectual needs are met (UNICEF, 2017).

## **Intersectionality of Disability with Other Marginalizing Factors**

**Finding 6:** An estimated 770,000 children are out of school in Nepal, among whom as many as 80 percent are estimated to have disabilities. Although these statistics derive from different sources, if combined, they would suggest that approximately 600,000 children with disabilities are out of school in Nepal. Girls with disabilities experience intersectional vulnerabilities, and are more likely than boys with a disability to be out of school, drop out, and have lower academic achievement. In addition, girls with a disability are more vulnerable than girls without a disability to physical, emotional, and sexual violence, and child marriage. The poorest overall educational outcomes for learners with disabilities are poorly understood.

Students with disabilities as well as those from poor, remote families considered low-caste, from disadvantaged ethnicities such as Chepang, and girls are disproportionately affected by access to education in Nepal (NIRT & AIR, 2017). However, children with disabilities are not a homogenous group, and therefore, this section aims to focus on the intersectionality of disability and the unique impact of these differences.

## Gender and Disability

In general, studies have found girls consistently perform at lower levels than boys and are more likely to dropout or repeat across all grades (NIRT & AIR, 2017; UNICEF, 2003; UNICEF, 2016). This indicates that systematic barriers may exclude girls from learning environments more so than boys; moreover, primary net enrollment rates show that girls from marginalized groups, such as lower castes (i.e., the Dalits, Tamangs, and Sunuwars in the hills and the Musahars and Chamara in the Terai) are at an even higher risk of greater marginalization. Additionally, some parents seem to find it more beneficial to educate a son with a disability than a daughter with a disability, as boys are viewed as having more opportunity for success and independence (Pherali, 2011).

Girls with disabilities are also more likely to be victims of violence as a result of their vulnerability; this includes emotional, physical, and sexual violence. In fact, around the world, an estimated 40 to 70 percent of girls with a disability will be sexually abused before they reach 18 years of age (USAID, 2017). The severity and type of disability may play a factor in how at-risk these girls are, and parents may exclude girls with disabilities from education as a means of protection (Banks & Zuurmond, 2015; Banks et al., 2019). Additionally, some parents may force girls with disabilities into child marriages at an earlier age than girls without disabilities in the hope of securing a stable future for a girl before her disability is identifiable (Poudyal, Banskota, & Khadka, 2018).

## Rural and Urban Differences in Access to Education

Studies on educational outcomes in Nepal point to high drop-out rates and comparatively low-achievement rates for children with disabilities, particularly in rural areas (USAID, 2019a, UNICEF 2016). One report (Eide, Neupane, & Hem, 2016) described a 4,000-household survey in 59 districts, representing all five development regions of Nepal: eastern, central, western, mid-western, and far-western regions (see Appendix B). This study found that among persons with disabilities 41 percent were literate, compared to 61 percent of persons without disabilities. Furthermore, the study identified that literacy rates for persons with disabilities were lowest in mid-western regions and highest in eastern and western regions. With regard to the ecological zones[[22]](#footnote-22), literacy rates for individuals with disabilities were lowest in the mountain and Terai zones and substantially higher in the hill zone (Appendix C). Additional research supports the disadvantage that affects rural children with disabilities in particular, where the 83 percent of children with disabilities who live in rural areas are also less likely than urban children with disabilities to enroll in school (ODI, 2018; Banks et al., 2019). Although Nepal has created policies to address inclusive education, implementation has been especially difficult in rural areas where teachers may not have access to training or necessary resources to provide an inclusive education experience (Lamichhane, 2017).

Rural areas have also been identified as being more conservative with caste-based discrimination practices, specifically affecting Dalit people (Khanal, 2015)[[23]](#footnote-23). In urban areas, however, one of the factors contributing to higher literacy rates is an increased awareness and opportunity for persons with disabilities to integrate more with their peers; a recent study correlated this by finding these children felt less discriminated against, whereas children with disabilities and their caregivers reported they felt more stigma or discrimination towards disability in rural areas (ODI, 2018).

## Poverty, Ethnicity and Disability

Students who come from a poor family, have a different spoken language at home, and have a disability experience more learning barriers in school in comparison to other students (Regmi, 2017). As mentioned earlier, many schools lack the capacity to provide materials in children’s local language, even though it is mandated by law, which often causes these students to drop out of school at earlier ages. The caste system also still plays a significant role in Nepalese education as well as everyday life. For example, children from Dalit communities have the lowest access to basic education (88 percent); as far as the inequity by caste and ethnicity with regard to children who complete basic education, hill Dalits, Terai Dalits, and Muslims are the least likely to complete. Children from the Chepang ethnic group are the most severely marginalized ethnic or linguistic group, with only 50 percent enrolled in basic education (NIRT & AIR, 2017). Additionally, some teachers admittedly still practice caste-based discrimination towards this demographic of children (Khanal, 2015).

## Refugees, Internationally Displaced Persons, and Disabilities

A recent study conducted by the Women’s Refugee Commission in 2017 applied a participatory model to examine the intersections of sexual and reproductive health and disability in Kenya, Nepal, and Uganda; results from the study showed that in Nepal there has been a lack of interest and dialogue on refugee inclusion in national disability advocacy (Tanabe, Pearce, & Krause, 2018). Another study (Thapa & Hauff, 2012), found a high prevalence of post-traumatic stress disorder among Bhutanese refugees with disabilities in Nepal, ultimately finding correlations between mental health challenges and disability in an internationally displaced population.

## Out-of-School Children

There is a lot of unclear data on out-of-school children in Nepal as these children are difficult to survey. However, an estimated 770,000 out-of-school children between ages five and 18 live in Nepal, including 570,000 of children aged 5-9 years (MoE, 2016). A second source suggests that more than 105,000 of the estimated 179,000 children with disabilities are out of school (NIRT & AIR,2017). In another source from 2015, the National Federation of Disabled Nepal considered more than 80 percent of out-of-school children were children with disabilities (Prasai, 2015, as cited in Hunt & Poudyal, 2019).

The dropout rate in Nepal is estimated at 7.53 percent for children with disabilities in primary education. However, the rate varies according to disability: the dropout rate for students who are deaf or blind is 72.59 percent, followed by 14.78 percent for students with physical disabilities, and finally the lowest dropout rate for children with speech and communication-related disabilities[[24]](#footnote-24) (Poudyal, Banskota, & Khadka, 2018).

The literature shows that there are many contributing factors resulting in low school enrollment and high dropout rates amongst children with disabilities in Nepal; for example, a recent study showed there was the lack of an inclusive environment, the lack of disability-friendly curriculum and teaching materials, insufficient assistive devices, and a lack of modern technology in classrooms (Eide, Neupane, & Hem, 2016). Another main factor of dropout for children with disabilities in non-specialized schools, largely in rural areas, is because schools were ill-equipped to accommodate them. Although the Ministry of Education has discussed increasing the number of special school and resource centers, the majority of schools still reside in Kathmandu (ODI, 2018). Gender, as previously mentioned, is also a factor with out-of-school children, as 52.2 percent of out-of-school girls are expected to never enter school, compared to 32.7 percent of boys. In addition, dropout rates are also slightly higher for girls than for boys in general (35.2 percent versus 31 percent) (Hunt & Poudyal, 2019).

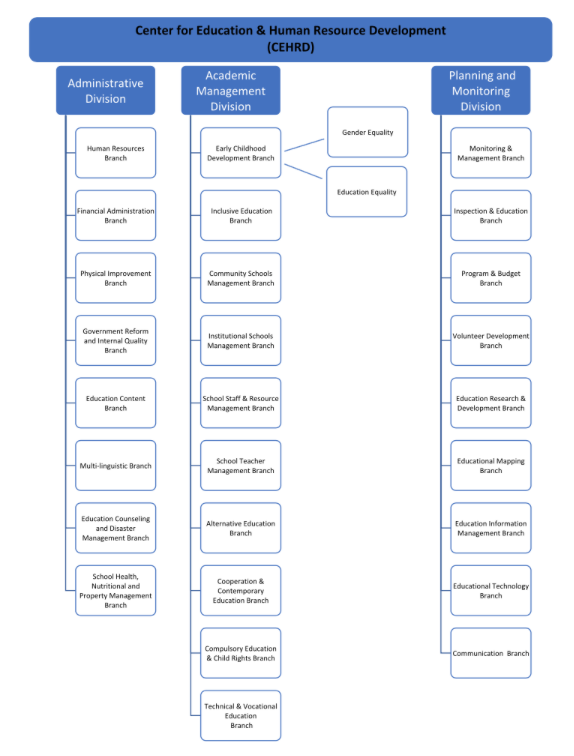
## Conclusion

Across 30 low-income countries, children with disabilities were on average 10 times less likely to attend school than children without disabilities, and even when they did attend, their level of schooling was below that of their peers (Kuper et al., 2014). With an estimated 15 percent of the world’s population having a disability (WHO and World Bank, 2011), inclusive education is more important than ever. The purpose of this literature review was to provide a deeper analysis of past and current efforts within the field of inclusive education in Nepal. A comprehensive review of the educational structure and history was presented for general, special, and inclusive education. In addition, many factors contributing to Nepal’s difficulties in implementing inclusive education were discussed, such as poor data collection, limited identification and screening, lack of teacher training, views and stigma of disability and inclusive education, and intersectionality. Additionally, successful attempts at inclusive education were highlighted, along with suggestions provided by recent reports and scholars.

## Appendices

# Appendix A: Center for Education & Human Resource Development Organization Chart

Also referred to as the Department of Education (DOE), the CEHRD is the executive department of the MoEST. The CEHRD has been established as a body to effectively implement and monitor policies, plans, and programs operated by the MoEST in a rapidly evolving and expanding perspective on the country's educational sector ([Government of Nepal, 2020a](https://www.doe.gov.np/content/about-center-for-education-and-human-resource-development.html)). Below is the organization chart for CEHRD, created and translated from the original produced in Nepali (Government of Nepal, 2020b).

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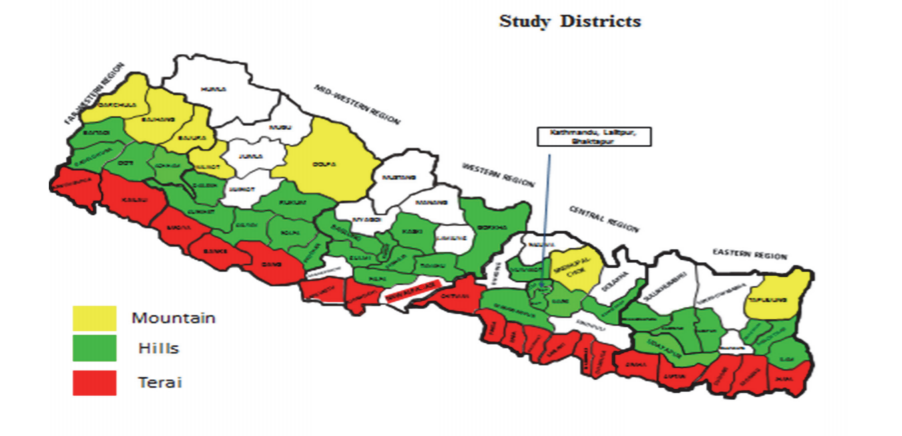
# Appendix B: Nepal’s 5 Developmental Regions

Below is a map that shows all 5 developmental regions of Nepal for better context on the research presented in this literature review (We All Nepali, N.D.).



# Appendix C: Map of Ecological Zones from the Study

Below is a map of the ecological zones from one study (Eide, Neupane, & Hem, 2016) presented in this literature review.



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1. Poor school infrastructure refers to a school’s lack of accessibility for people with disabilities. [↑](#footnote-ref-1)
2. Limited teaching and learning practices refers to limited pedagogy for teaching and learning. [↑](#footnote-ref-2)
3. Percentage of teachers trained was not available in the literature reviewed. [↑](#footnote-ref-3)
4. Training type (pre-service or in-service) was not specified in the literature reviewed. [↑](#footnote-ref-4)
5. Participants included key stakeholders: local level elected representatives, schools, teachers, children with and without disabilities, parents and concerned agencies of Provincial and Federal Governments related to education. [↑](#footnote-ref-5)
6. There is no consistent evidence for the number of segregated schools presented in the literature. Although the Inclusive Education Policy (Government of Nepal, 2016) provides some metrics, these are inconsistent across other sources. [↑](#footnote-ref-6)
7. According to the Inclusive Education Policy, there are 380 resource classes, 32 special schools, and 22 integrated schools throughout the country (Government of Nepal, 2016) but the number of inclusive schools is not specified in the literature. [↑](#footnote-ref-7)
8. The percentage of children with disabilities in Nepal (1.94) is dissimilar to the WHO estimate (5.8); because data collection is poor in Nepal, it can be argued that the 5.8 percent is a more accurate representation, in which case the number of children with disabilities in Nepal could be closer to 735,000. [↑](#footnote-ref-8)
9. The number of additional disabilities that resulted from the 2015 earthquake is not provided in the literature. [↑](#footnote-ref-9)
10. 95 percent confidence interval: incidence of 2-5 in 1000. [↑](#footnote-ref-10)
11. The report referred to Nepal as one of the 20 countries but no direct information about Nepal was presented in the report. [↑](#footnote-ref-11)
12. From the literature review, it is unclear whether teachers receive 45 days of training total or if these 45 days of training are focused only on educational support for one type of disability. [↑](#footnote-ref-12)
13. Plan International Nepal currently operates in Karnali, Banke, Sindupalchowk, Makwanpur, Sindhuli, Rautahat, Sunsari, and Morang. [↑](#footnote-ref-13)
14. Disability type of children interviewed includes: Intellectual (8), Physical (6), Vision (2), Hearing (2), among whom 9 have multiple disabilities. [↑](#footnote-ref-14)
15. Percentage was not specified in the literature. [↑](#footnote-ref-15)
16. The source cited does not clarify who is considered to have a “mental” disability. [↑](#footnote-ref-16)
17. Districts include Kathmandu, Lalitpur, and Bhaktapur. [↑](#footnote-ref-17)
18. Student outcomes were not presented in the literature. [↑](#footnote-ref-18)
19. Less apparent disabilities refer to disabilities that are not easily detected by teachers. [↑](#footnote-ref-19)
20. The number of trained teachers was not specified in the literature. [↑](#footnote-ref-20)
21. The specific policies were not provided in the literature. [↑](#footnote-ref-21)
22. Nepal is divided into three main ecological regions: the mountains in the north (Mountains), the central hilly regions (Hills), and the jungle region in the south (Terai). Map in Appendix C. [↑](#footnote-ref-22)
23. Dalits are the people belonging to the lowest groups in the traditional caste hierarchy. [↑](#footnote-ref-23)
24. The report does not provide specifics on the actual rates. [↑](#footnote-ref-24)