



# Using disability data to adapt education programs in marginalised contexts - A Case Study from the Girls Education Challenge (GEC) Project in Zimbabwe.

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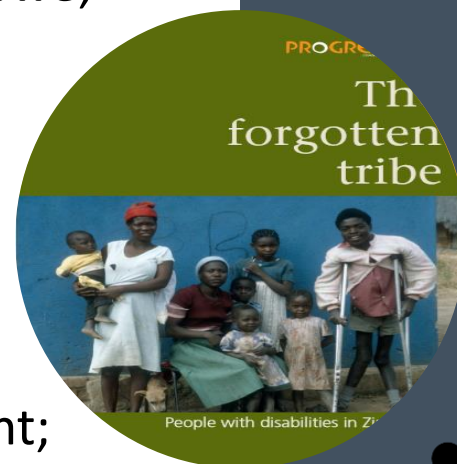
London School of Hygiene and Tropical Medicine, London - UK



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- Background and statistics on Disability in Zimbabwe;
- Girls Education Challenge Project in Zimbabwe;
- Using data on Disability for Adaptive Management;
- Lessons Learned, Best Practices and Way Forward;



# Constitution, Legislation & Disability

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## Zimbabwe Constitution - 2013

### Section 22 of the Zimbabwean Constitution of 2013

- Section 22(1) of the Constitution of Zimbabwe<sup>24</sup> states that the Zimbabwean government and its agencies must recognise the rights of persons with physical or mental disabilities, in particular their right to be treated with respect and dignity.
- Section 22(2) of the Constitution of Zimbabwe mandates the state and all its institutions to assist persons with physical or mental disabilities to achieve their full potential and to minimise the disadvantages suffered by them.<sup>25</sup>
- Section 22(3) of the Constitution mandates the state to:
  - (a) Develop programmes for the welfare of persons with physical or mental disabilities.
  - (b) Consider the specific requirements of PWDs in the formulation of developmental plans.
  - (c) Encourage the use and development of forms of communication suitable for persons with physical or mental disabilities.
  - (d) Foster social organisations that are aimed at improving the quality of life for PWDs.
- Section 22(4) of the Constitution further mandates the Zimbabwean government to take the necessary measures to ensure accessibility by PWDs, of all buildings to which other members of the public have access.

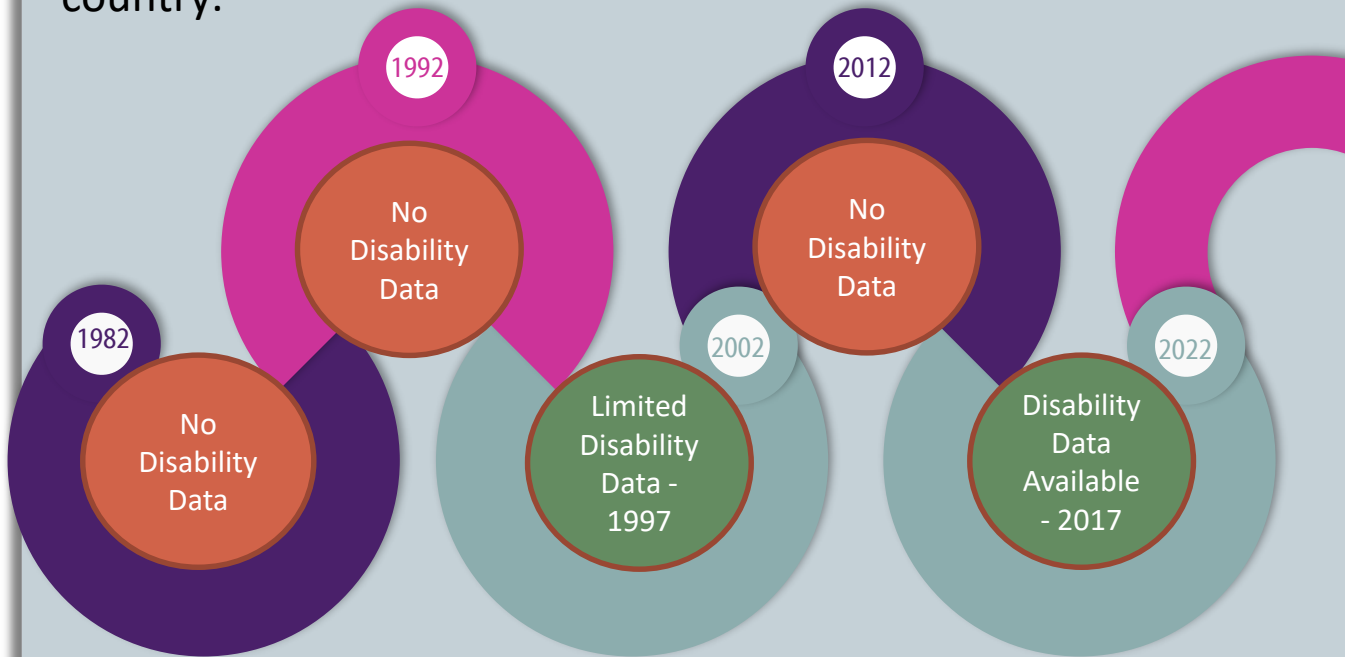
- **Section 83 of the constitution** – focuses on resourcing, provisions, protection and participation;
- **Disabled People's Organisations** – Albino, Blind, Deaf, Education, Vocational Skills, Legal Support, Handicapped, Mental and Advocacy – mentioned under DPA ;

### The Disabled Persons Act [Chapter 17:01]

- The Disabled Persons Act (DPA) is the primary law that addresses disability in Zimbabwe. This Act provides for the welfare and rehabilitation of PWDs.
- The Act establishes the National Disability Board and sets out the functions of this body.
- The Act creates the Office of Director for Disabled Persons' Affairs whose duties include liaising with ministries and local authorities to ensure the implementation of the policies and measures formulated by the National Disability Board, and co-ordinating the activities of organisations which are involved in working with PWDs

# Timeline of Disability Records in Zimbabwe

Zimbabwe has had four censuses since attaining independence in 1980. However, none of the censuses provided statistics on the prevalence of disability in the country.



\*Data on disability is collected through Inter-Censal Surveys (1997) and the Zimbabwe Housing and Population Census Reports.

\*Zimbabwe is a state party to the Convention on the Rights of Persons with Disabilities (CRPD). It ratified the CRPD and its Optional Protocol on 23 September 2013. Zimbabwe has not fully domesticated the CRPD.

## 01 1980 - Independence

\*1982 was the first census, Population was **7.4 Million**, Median age 15.1 years and 21.6% urban population

## 02 1990

\*1992 was the 2<sup>nd</sup> census for Zimbabwe was **11.0 Million** people. 62% of population U25 years of age  
\*Inter-censal survey in 1997

## 03 2000

\*2002 Census was **11.6 Million**, 33% urban population

## 04 2010

\*2012 Census conducted and reported **13.0 Million** people,  
\*2013 & 2015 Living conditions among people with disability, Survey

## 05 2020

\*Inter Censal Survey 2017 done by UNFPA  
\*UN 2019 population estimates to be around **14.7 Million**,

# Disability Data – Zimbabwe Inter-Censal Demographic Survey 2017

## Survey Instrument (Washington Group on Disability)

### Washington Group Questionnaire

### Causes of disability

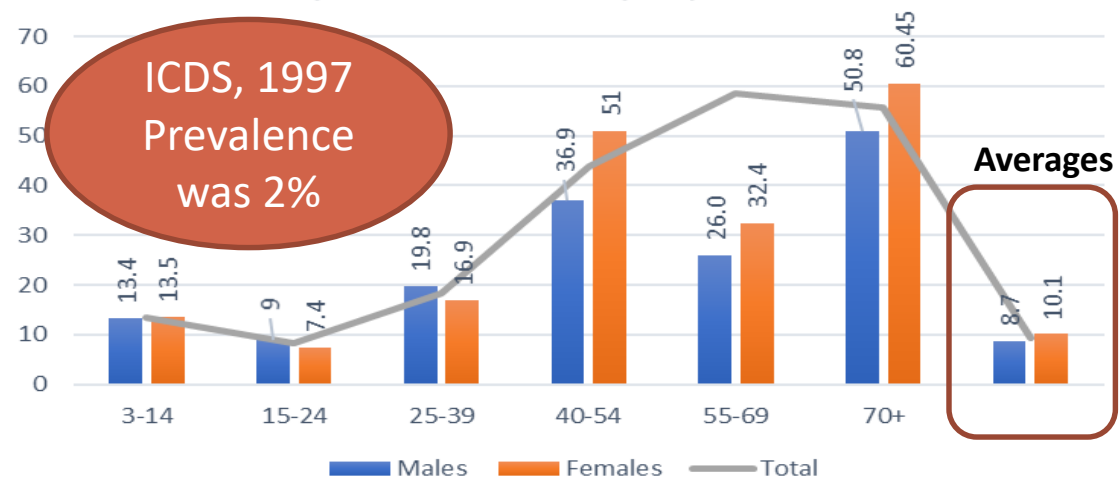
- ICDS (UNFPA) is carried out 5 years after the decennial Population and Housing Survey.
- Disability Prevalence The country's disability prevalence is 9 percent and it is high among females (10 percent) as compared to males (8 percent).
- Prevalence by age – lower for children and higher for adults.
- Prevalence is higher in Mashonaland (northern parts) with averages of 13% compared to Matebeleland with prevalence of 4%. 75% lived in rural areas and 25% urban
- Economically active group (60%), 15 years and above, the majority of people living with disability are involved in the agriculture sector (own account worker), around 75%.

CHILD FUNCTIONING (AGE 5-17)	
CF1. I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT DIFFICULTIES YOUR CHILD MAY HAVE.	
DOES (name) WEAR GLASSES OR CONTACT LENSES?	Yes .....1 No .....2
CF2. WHEN WEARING HIS/HER GLASSES OR CONTACT LENSES, DOES (name) HAVE DIFFICULTY SEEING?	No difficulty .....1 Some difficulty .....2 A lot of difficulty .....3 Cannot do at all .....4
CF3. DOES (name) HAVE DIFFICULTY SEEING?	No difficulty .....1 Some difficulty .....2 A lot of difficulty .....3 Cannot do at all .....4
CF4. DOES (name) USE A HEARING AID?	Yes .....1 No .....2
CF5. WHEN USING HIS/HER HEARING AID, DOES (name) HAVE DIFFICULTY HEARING SOUNDS LIKE PEOPLE'S VOICES OR MUSIC?	No difficulty .....1 Some difficulty .....2 A lot of difficulty .....3 Cannot do at all .....4

Causes	0-4 years (%)	5-15 years (%)
Disease	61.5	60.1
Accident	9.6	23.0
Abnormal birth	7.3	4.1
Malnutrition	9.6	1.7
Heredity	1.9	2.8
War	1.9	5.1

(Adapted from Department of Social Services, 1980)

### Disability Prevalence by Age (ICDS, 2017)





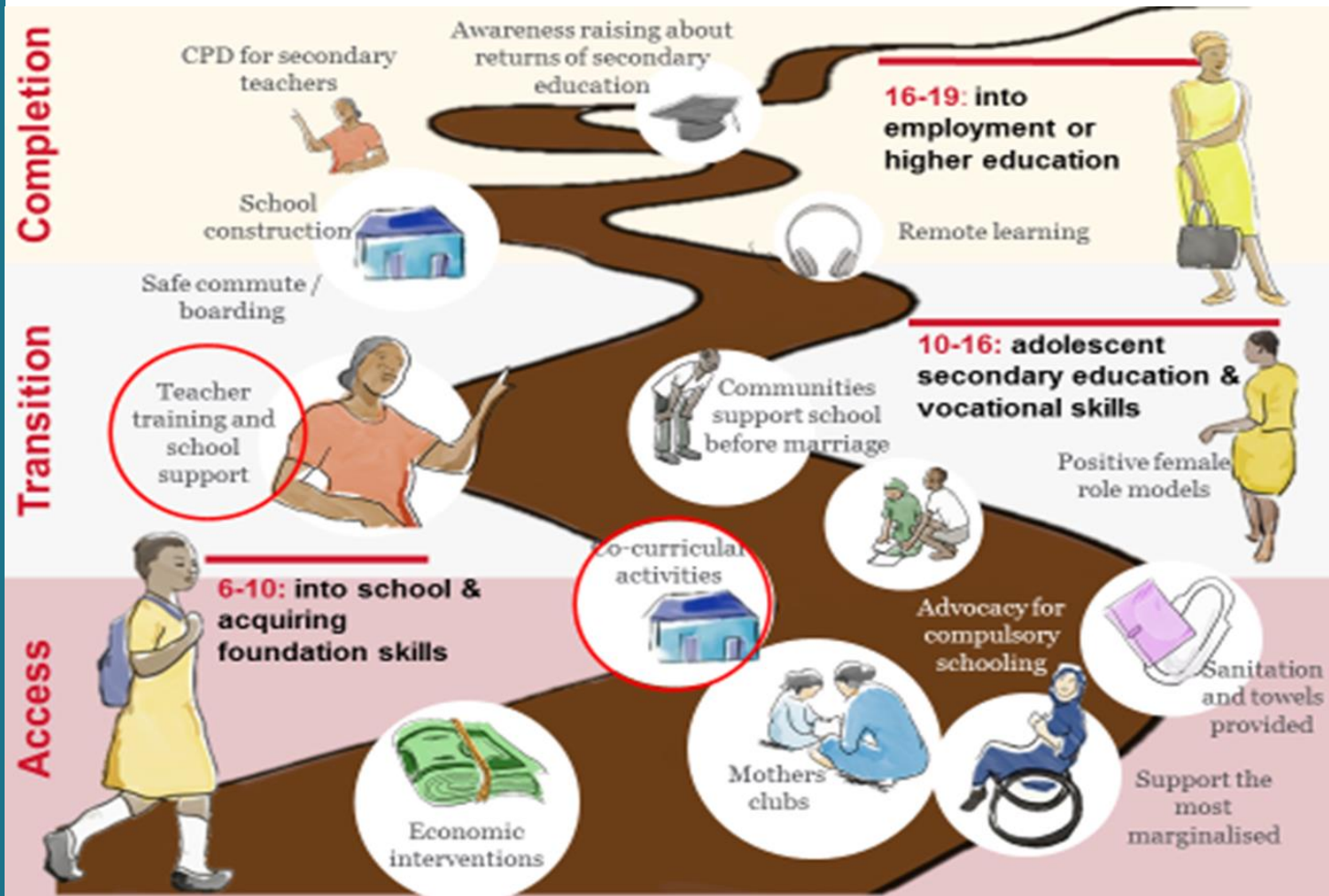
# DFID- Gender Equality & Social Inclusion

## Disability and Education

### GEC: Accelerating the learning of marginalized girls

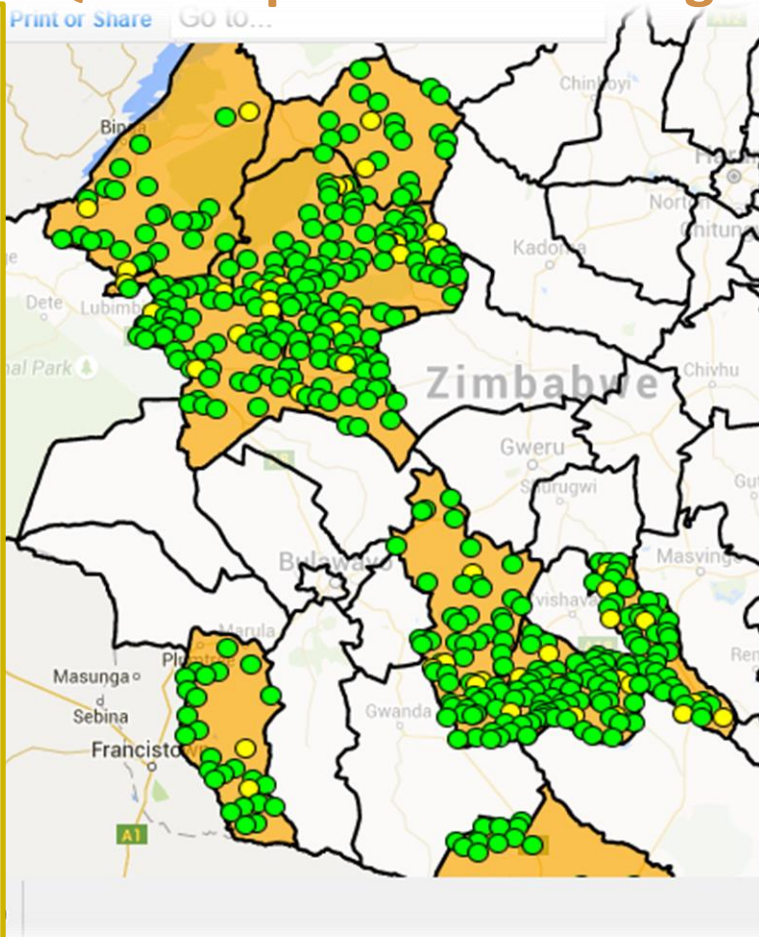


Understand which girls and women are most at risk of being left behind and ensure that we reach them – multiple discriminations, e.g. poverty + disability



# Improving Gender Attitude Transition Education (IGATE)

## Quasi Experimental Design



### Phase II (2017 to 2021).

- \*53,795 Girls
- \*318 Schools
- \*9 Districts
- \*4 Years GEC SCW
- \*6 Partners

### Outcomes



Learning



Transition



Sustainability

Community Engagement

Whole School Development

Community Based Education

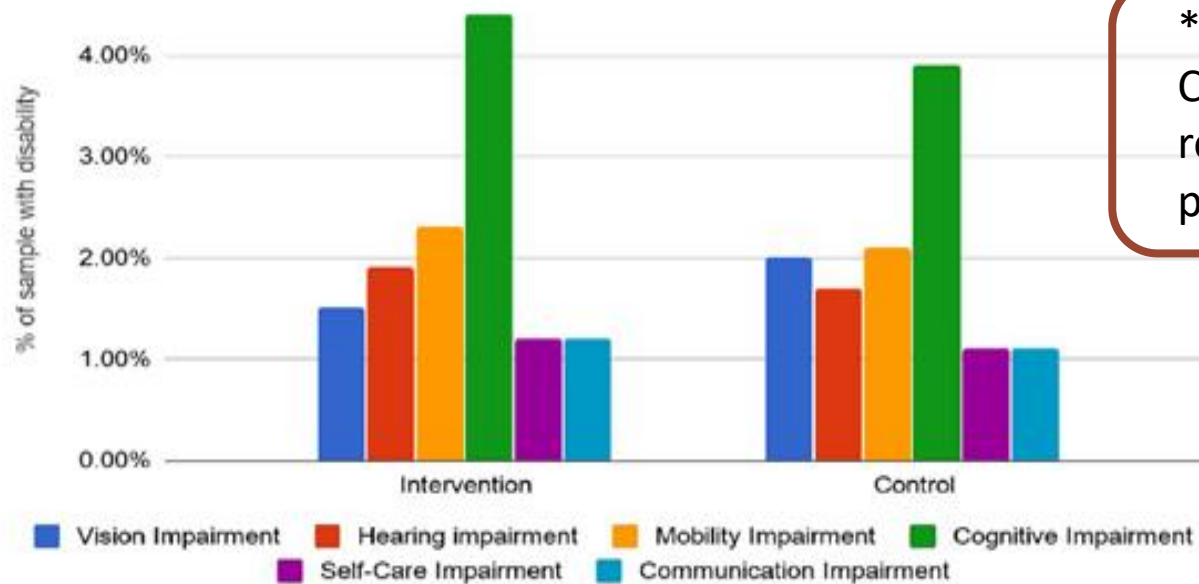
Leadership Clubs

Safeguarding and CP

# Prevalence of disability

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\*Ministry of Health and Child Care (2015), reported a disability prevalence of 7%.



- About 10.4% of girls in treatment schools have at least one reported disability compared to 10.3% in comparison sites; (152 girls)

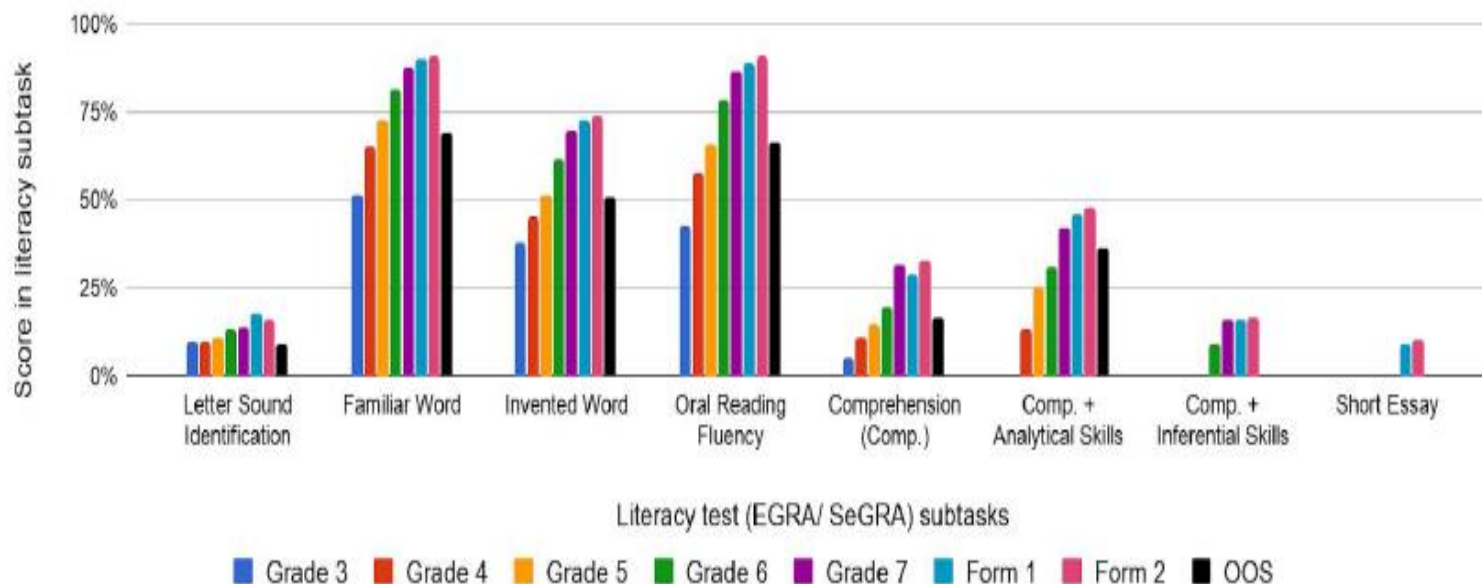
Asked parents and children and prevalence rates were the same!

- Cognitive impairment most common at 4%; (58 Girls out of 1463 Treat)
- Washington Group on Disability Short Questionnaire

Sample Size = 3,036 (IGATE T Schools 1463 and Control = 1573)



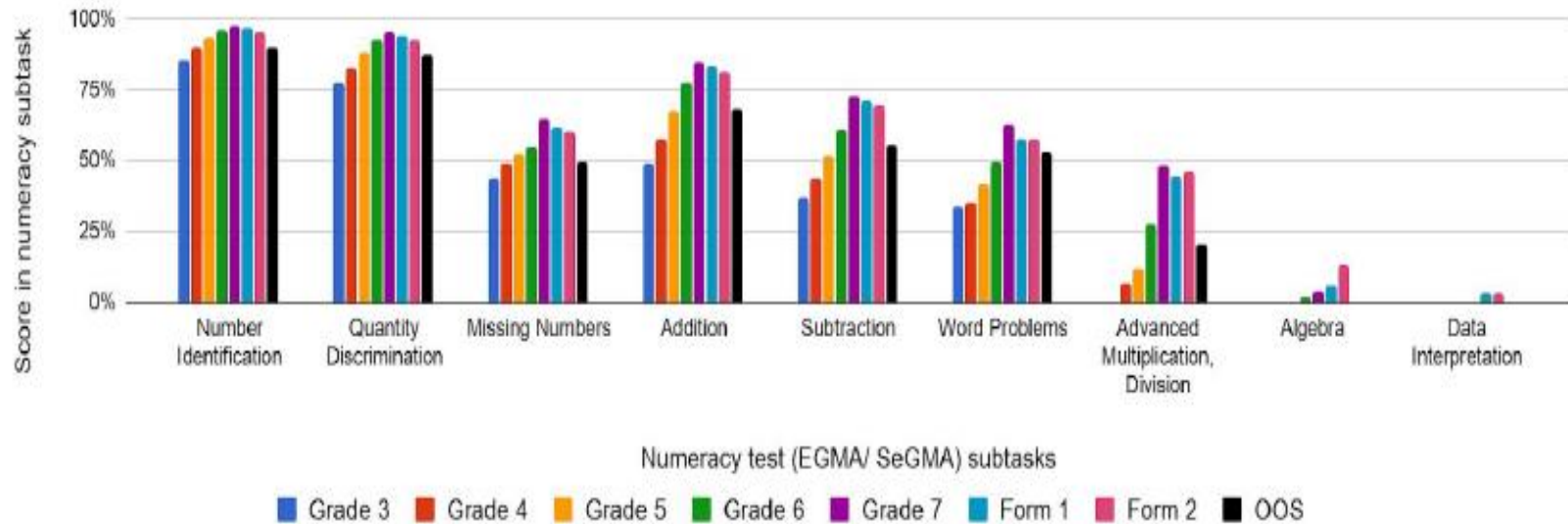
# Literacy Scores by Subtask



Nearly all girls sampled, regardless of grade, do poorly with letter sound identification and reading comprehension in literacy assessments.

This is consistent with earlier findings that suggest many children do not speak the language of instruction.

# Numeracy Scores by Subtask



Over a third of all students struggle with missing number problems and word problems.

Focusing on secondary students, fewer than 10% of students are considered “proficient” in any of the subtasks in the SeGRA/SeGMA assessments. Proficiency level one has to score 80% and above.

# Predictors of learning scores

Characteristics	Literacy		Numeracy	
	Average score	Difference from mean	Average score	Difference from mean
Total Sample	39.1	--	57.1	--
Has a disability	36.3	-2.8	54.0	-3.1***
- Visual	40.8	1.7	52.5	-4.6**
- Hearing	34.1	-5.0**	53.1	-4.0**
- Mobility	40.3	1.2	57.8	0.7
- Cognitive	31.0	-8.1***	49.6	-7.5***
- Self-Care	40.2	1.1	57.0	-0.1
- Communication	34.1	-5.0	54.0	-3.1
Uneducated parent				
- Head of Household	36.6	-2.5	55.6	-1.5*
- Primary Caregiver	36.3	-2.8***	55.0	-2.1**
Apostolic Household	36.9	-2.2***	56.3	-0.8***
Teacher often absent	37.1	-2.0***	55.5	-1.6***

There is a statistically significant difference between girls with and girls without each characteristics or barrier (\* $p < 0.1$ ; \*\* $p < 0.05$ ; \*\*\*  $p < 0.01$ ).

Statistically, the barriers or characteristics with the strongest impact on literacy and numeracy test scores are the **presence of a disability** (0.18 SD lower numeracy score), uneducated parents (0.15 SD lower literacy, 0.12 SD lower numeracy).

Cognitive disability has the highest effects (-7.8% difference) followed by hearing (-4.5% difference)

# Using data to adapt the project

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£



Low or No Cost

£



Medium Cost

£



High Cost

Most



\*Changed the **content** to include disability friendly activities;

Hearing



\*Teachers to re-arrange sitting arrangement based on learner's ability to see the board;

Visual



\*Materials developed by the project to consider using BIG Fonts;

All



\*Awareness raising at all levels;

Cognitive



\*Leverage for additional funding for school feeding;

Cognitive



\*Refine targeting for bicycle distribution to learners;

# Lessons, Best Practices and Way forward

- **Availability of data** on disability is a big challenge in developing countries. Where its available its not always clear what **methodology** and **instruments** were used to collect data.
  - **Policy & Legislation** : Governments in developing countries have signed to CRPD but have not **domesticated it into law**;
  - **Lack of resources** for interventions/programs;
  - **Methodology & Comparability**; Small samples vs Large Samples, Sample Representativeness;
  - **Data availability and Instruments**;
- Disability guidance from Donor came after project design and budget were approved. It was challenging to **adjust things retrospectively**;
  - **Limited Funding for disability** – donors and governments;
  - Perceived **high cost of intervention** per person with disability – balancing act;
  - Its no always straight forward to connect the '**disability dots**' with project outcomes e.g. cognitive disability and distance to school, food insecurity and learning outcomes; Disability does not always come out as a barrier to education;
- The project is being used a flagship to **influence inclusive programming** across the World Vision Partnership, Girls Education Challenge Partnership, and beyond through sharing what is working and challenges in different fora.
  - The project has presented their experience in the Comparative and International Education Society (CIES) Conference, USA (2019) and BAICE, UK (2018).
  - Using disability as one of the areas to improve equity in the **Value for Money and Adaptive Management** ;
  - Facilitated a training for all key programming WV UK Staff and developed a **Plan of Action on Disability**; There are still gaps on the tools, causes of disability.