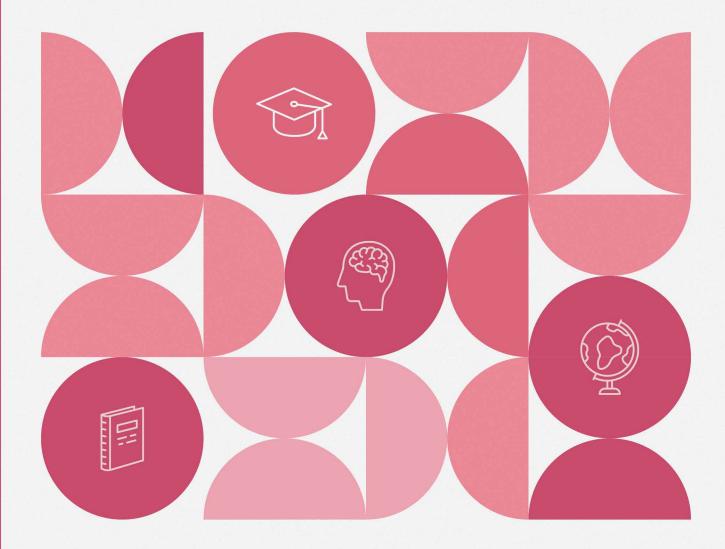






REVISITING EQUITY: COVID-19 AND THE EDUCATION OF CHILDREN WITH DISABILITIES





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EXECUTIVE SUMARY

About the study

This research focuses on understanding the impact of COVID-19 on the education of children with disabilities and to suggest possible strategies to sustain their participation in education. It specifically addresses the following sub-questions:

- 1. How have COVID-19 school closures impacted the education of children with disabilities who were enrolled in schools prior to the pandemic?
- 2. What have been the educational experiences of these children with disabilities during prolonged school closures?
- 3. What main concerns and opportunities have been identified in relation to the education of children with disabilities as a consequence of the pandemic?

The project started in October 2020 at a time when the pandemic was spreading rapidly across continents. Using remote methods, data were collected across three countries, namely Ethiopia, Nepal and Qatar, to capture the diversity of experiences in relation to learning for children with disabilities. Telephone surveys conducted with a total of 554 parents/caregivers and teachers who were teaching children with disabilities prior to school closures were the focus of these deliberations.

Country findings

Given the nature of the pandemic, each of these countries were at different points in terms of national lockdowns. While Ethiopian schools were opening up during data collection, the Nepalese government was putting in additional guidelines and tightening social distancing measures. We acknowledge that engaging with children with disabilities directly would have been most powerful, however given the remote nature of this survey and at a time of considerable upheaval in routine, we decided that direct engagement with children would not be practical or indeed, ethical. Nonetheless, the richness of our insights and the unique nature of this project, given it is one of the very few cross-national surveys focusing specifically on children with disabilities during the pandemic, makes this a very significant study.

In Ethiopia, our findings indicate that teachers had very little contact with their students and their families during school closures. Rather, when teachers did connect with parents it was primarily driven by the fact that their school had received guidelines from their Woreda Education Office, to contact parents. Interestingly, mainstream schools with an Inclusive Education Resource Centre (a state implemented provision in Ethiopian schools to encourage inclusion) received more support from the Woreda Education Office and NGOs, suggesting that targeted attention to these schools might have been valued by the state. Mainstream teachers were in some contact with children with disabilities and their families, but special school teachers had not had any contact with parents of their learners. However, special school teachers expressed greatest concerns about their pupils' well-being during school closures, which could be a reflection of the higher needs of their students. However, the special school teachers were also more likely to highlight their own income status as being a barrier to connecting with the children and their families, such as the inability to pay for phone calls, etc. and the lack of support in this regard. Parents and teachers noted the lack of accessible learning materials and academic support, as well as financial barriers faced by parents were identified as key barriers to continued learning for children with disabilities during school closures. Findings indicate that while parents valued education for both girls and boys with disabilities and were confident that their child would return to school, children with disabilities spent very little time studying, with a greater number of boys studying than girls. Parents and teachers were highly concerned about loss of learning and the socioemotional impact of closures on the child, a theme which was consistent across all three countries

In Nepal, the level of contact between teachers and children with disabilities was higher, and teachers contacted parents on their own initiative, given that they had received no formal guidelines during school closures. Special school teachers were more likely to have contacted parents of their children. Parents of children with disabilities ascribed significant importance to education for both boys and girls. While household chores were given more importance for girls, but girls were also described as studying and using the phone and internet for educational purposes more often than boys were. Parents with a daughter with disabilities also seemed more confident that they would return to school. However, loss of learning was a greater concern among parents with boys, and those from the higher age group. Across families, the lack of availability of additional academic support was identified as a significant barrier, particularly among parents of children who were deaf/hearing impaired and had a speech related disability. The overarching concern in the narratives was the significant negative impact of closures on children's socioemotional well-being. In Nepal, our findings also highlight some interesting province level variations in relation to access to on-line classes and the involvement of NGOs during the time of crisis.

In Qatar, both the parental income of the sample and the state of the wider education system in terms of access to resources shaped the experiences of children with disabilities. Findings clearly indicate high level of contact between school staff and children with disabilities and their parents, with over three quarters of staff being in contact either daily or more than one a week during closures. Like education for rest of the student population, technology played a central role in maintaining contact between teachers and learners, and in assisting learners with lessons. Both parents and teachers noted the greater availability of technology, which assisted in accessing lessons, however, they did question the quality of teaching. These concerns resonated in teacher responses, as many noted that they felt unprepared, and stressed the need for more appropriate teaching and learning materials and effective training. Parents played a key role in assisting their children with their learning during school closures, however all of them lamented about the negative impact on children's socio-emotional well-being with many reporting their child as having increased feelings of depression and decreased motivation.

Overarching reflections

The aim of this study was not to undertake a comparison across the three countries, nonetheless some overarching commonalities emerged when reflecting on the findings. Central among these is an acknowledgement that not only are changes needed in the wider education system to promote effective education of children with disabilities, rather that this change is urgent and possible. The pandemic and resulting impact on schools has reaffirmed the importance of education for children with disabilities. This was most profoundly expressed in the voices of parents, across income groups. Parents recognized the significance of academic learning during school closures and were aware of the immediate impact in terms of loss of learning, and were also very mindful of the loss of future opportunities.

Research studies have documented the multi-fold negative impact on persons with disabilities during the pandemic across countries, irrespective of their national wealth and/or commitment to disability rights and perceived progress on inclusive education. A key issue that has emerged from our research is the centrality of schools as being significant to the wider socio-emotional well-being of all children and even more so for children with disabilities. Being alone at home reminded parents of the loss of structure for their child's day, the loneliness arising from lack of contact with their friends, and the lack of opportunities, due to closures. There was also the inability in case of deaf children who were using sign language to socialize with others in their own communities.

Unexpected and prolonged school closures have also provided evidence that education cannot happen just within the four walls of the school. It needs to be connected with real life and also with families. This was most profoundly articulated by parents of deaf children, who talked about their total sense of resignation when attempting to support their child. They did not understand sign language, and hence found it challenging to support their child. The fluidity of school boundaries emerged as parents now found themselves in a more central position in relation to their child's schooling. Consequentially, parents reflected on how they need to be more involved in their child's schooling and strongly expressed the desire for training to support their child when at home.

More crucially, the pandemic has reiterated the crucial importance of teacher professional development and support for teachers. Many teachers were left on their own with little guidance or support. Continuous professional development opportunities need to be made available to teachers to help them undertake pedagogical adaptations. It is critical to empower teachers to work independently and to invest in training them to exploit the full potential of remote and blended learning. The notion of teachers as facilitators, which is often used as a cliché, needs to be explored more carefully, especially in terms of supporting parents and other community members in providing education for children with disabilities. As schools reopen, teachers will be required to readjust curriculum and learning objectives to meet the additional needs of all learners, particularly those with disabilities. Among other things, for some learners this might include remedial courses, 'catch-up' classes and/or accelerated curriculum delivery. As we move forward, there needs to be a greater acknowledgment of the fundamental right of children with disabilities to quality education, and the pivotal role that teachers play in making this happen. Finally, while a lot has been said about the changed role of schools, it must be acknowledged that the pandemic has also changed the role of teachers. The abrupt closure of schools has raised significant challenges in relation to teacher identity as well as changes in their roles and responsibilities. Teachers, like others, are also likely to be dealing with personal losses and hence, need support.

Recommendations for policy level stakeholders

- Children with disabilities need to be an integral part of the educational reform agenda
- Recognize schools as important spaces for nurturing cognitive development and fostering socioemotional well-being
- Teachers need to be trained and supported to address the diversity of learner needs
- Harnessing the potential of technology: low and high tech
- Building stronger partnerships between home and school

Recommendations for researchers

- Prioritize disaggregation of data for learners with disabilities
- Access and quality are both centrally important for accountability
- Understand not just existing gaps but what can be done to mitigate current losses
- Capture the lived experiences of children with disabilities and their families

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ONE DTER

The year 2020 will be remembered for a range of reasons, including for the extended periods of school closures experienced in most countries around the world. The United Nations noted that, as the COVID-19 virus spread across the globe, more than 190 countries implemented nationwide school closures, and approximately 90 percent of all students (1.57 billion) were out of school, at some point. COVID-19 has caused a global education emergency of an unprecedented scale.

This led to many countries' attempting to provide education to the millions of young learners now stuck at home. Rapidly, many countries started broadcasting lessons for different age groups on television, radio and/ or internet-based lessons. Distance learning solutions were provided in four out of five countries with school closures; however, there were vast variations in the opportunities provide not only across countries, but also, within them, in relation to who was able to access these lessons. Some estimates suggest that at least 500 million children and youth remained excluded from these formal learning options. Additionally, dramatic differences in countries' ability to respond to school closures became apparent in the second half of 2020, when 86 percent of children in primary education were effectively out of school in those with low human development -compared with just 20 percent in countries with very high human development (UNDP, 2020a).

While schools shut physically, intense scrutiny turned to debating the effectiveness of longterm school closures, given that in the initial stages of the pandemic, children were not considered to be under threat of infection on a large scale. These debates were anchored in the argument that schools are significantly important in the lives of children. Interestingly, these discussions focused on two central aspects of the schooling: learning and socialisation. Mounting evidence has clearly revealed that disrupted education is adversely affecting learning outcomes and having a profound negative impact on the social and emotional well-being of children and young people (OECD, 2020a; Banati, Jones & Youssef, 2020; Engzell et al., 2021).

As countries work towards managing continuity of schooling while protecting the safety and well-being of learners, there are some groups of learners who stand the risk of further marginalization and exclusion from formal learning opportunities. These are most often girls, learners with disabilities, and particularly those living in poverty (UNSDG, 2020; UNICEF, 2020a). Recent evidence points to the exacerbation of educational exclusion, with it being estimated that close to 40 percent of low- and low-middle income countries not having supported disadvantaged learners during the school shutdowns (World Bank, 2021). Undoubtedly, all children have been affected seriously by the pandemic, but those with disabilities, who were among the world's most vulnerable and marginalized populations even before the pandemic, have been most disproportionately affected.

There are multi-fold reasons for making this assertion. Firstly, evidence over the years has clearly suggested that persons with disabilities are disproportionately over-represented among poor households (Mitra et al., 2013). The pandemic resulted in the shutdown of economic activities globally, further pushing 88 million to 115 million people into extreme poverty (World Bank, 2020). The negative economic impact on persons with disabilities and their families is inevitable. Secondly, while countries were making significant progress on some aspects of UN Sustainable Development Goal 4 prior to the pandemic, they were still lagging significantly behind in making quality and inclusive education a reality for children with disabilities. With educational systems now dealing with additional challenges around significant learning loss during closures, there is a danger that the needs of children with disabilities will slip to the bottom once again. Finally, even though the pandemic saw a significant online response from some national governments, the needs of children with disabilities were forgotten even when simple adaptions, such as having a sign language interpreter for televised lessons, would have helped.

Thus, examining the impact of school closures due to the pandemic is an important undertaking as this will help target future action. However, we currently know very little about the type of opportunities available for supporting the learning of children with disabilities during the pandemic, the impact this crisis is having on their well-being and the challenges their families have been facing. Past experience has shown that similar crises, such as the spread of Ebola in Guinea, Liberia, and Sierra Leone in 2014-2016, there was little focus on collecting evidence in relation to persons with disabilities and their experiences. This lack of research evidence fails to support future learning and reinforces the continued neglect of children with disabilities, more so during times of crisis. The need for gathering robust evidence on the impact of COVID-19 on persons with disabilities is thus urgently needed. A call for scientific research to understand the impact of COVID-19 on children with disabilities within specific country contexts has been supported by many institutions and organizations, including the Global Rehabilitation Alliance (2020) and UNDP (2020a).

The overarching objective of the research reported here is to understand the impact of COVID-19 on the education of children with disabilities and to suggest possible strategies to sustain their participation in education. We specifically address the following sub-questions:

- 1. How have COVID-19 school closures impacted the education of children with disabilities who were enrolled in schools prior to the pandemic?
- 2. What have been the educational experiences of these children with disabilities during prolonged school closures?
- 3. What main concerns and opportunities have been identified in relation to the education of children with disabilities as a consequence of the pandemic?

Surveys conducted with parents/caregivers of children with disabilities and teachers who were working with them prior to the closures were the focus of these deliberations. We acknowledge that engaging with children with disabilities directly would have been most powerful, however given the remote nature of this survey and at a time of considerable upheaval in routine, we decided that direct engagement with children would not be practical or indeed, ethical.

Data were collected across three countries. namely Ethiopia, Nepal and Qatar, to capture the diversity of experiences, whilst also identifying commonalities. Each of these countries has a unique set of economic, social and political characteristics. For example, Qatar has the strongest ranking among the three countries on various human development indicators. Additionally, the nature and quality indicators of their general education systems is also highly varied. Children in Nepal and Qatar have an expected rate of 12 years of schooling, that is, the number of years of schooling that a child of school entrance age can expect to receive if prevailing patterns of age-specific enrolment rates persist throughout the child's life, while in Ethiopia the expected rate of schooling is 8.8 years (UNDP, 2021). Nonetheless, each of these settings has been faced with the challenge of providing quality education for children with disabilities in their mainstream education systems, even prior to the pandemic. All these countries, prior to COVID-19, had been making significant efforts to include children with disabilities, with varying levels of success.

Thus, focusing on these countries provides a unique lens to understand the nature and experience of formal learning for children with disabilities and their families during prolonged school closures. In the section below, we provide brief snapshots of the three case countries to frame subsequent discussions.

Ethiopia

Education of children with disabilities prior to the pandemic

In the Ethiopian school system, there are differing types of schooling practices for children with disabilities (MoE, 2017). These include regular schools that have established inclusive education resource centers in their compound that provide pedagogical support for children with disabilities by assigned itinerant teachers. Regular schools without inclusive education resource centers is another option, but most of them do not provide appropriate educational support that suits the learning pace and ability of children with disabilities. The other alternatives are special schools that work with children with a particular type of disability, with boarding and non-boarding arrangements. Children with disabilities also learn in special units that are attached to regular primary schools (MoE, 2017). Even though the above schooling practices were in place before the COVID-19 pandemic, the majority of children with disabilities were still being left behind by the education service in the country. Of the total of school-age children with disabilities only 0.9 percent are enrolled at pre-primary school level, 11.1 percent at primary school level, and 2.8 percent are enrolled at secondary school level. This affirms that 99.1 percent, 88.9 percent, and 97.2 percent of school-age children with disabilities at pre-primary, primary, and secondary levels, respectively, are out of school (MoE, 2020a).

State efforts to support primary education during school closures

In Ethiopia, it is estimated that almost 26 million students from pre-primary, primary, secondary, and tertiary level from over 47,000 schools in urban and rural areas were at home after 16 March 2020 as a result of measures to stop the spread of the virus (UNICEF, 2020b). From mid-October, schools in Ethiopia were reopened on a staggered basis, with priority given to schools in rural areas. Early in the pandemic, the government developed a Concept Note for Education Sector COVID-19 Preparedness and Response Plan describing measures to reduce the impact of school closure on student learning. The Ministry of Education put in place three remote learning approaches or core strategies. The first approach was digital learning, which focused on internet-based resources and content accessed by computer/tablet/smart phone. The second approach was audio-video programs, where the focus was on repackaging all digital and non-digital curricular content to be transmitted through television and radio. The third approach was material distribution, which

was focused on distributing the repackaged digital and non-digital curricular content for unreached children through connected devices and hard copies (MoE, 2020b).

Despite these efforts, recent reports from Ethiopia show that this has not reached all students, with differences across urban and rural areas, as well as for already disadvantaged groups, including children with disabilities (Tiruneh et al., 2021; Tiruneh, 2020). There was no clear direction given to teachers or other educators about how to support students with disabilities during school closure. The biggest concerns with regard to continuing in-school learning during the COVID-19 pandemic were large class sizes, lack of certainty on how the virus was transmitted, negligence at schools possibly leading to infection, and parents worrying that students would not follow the pandemic protocols provided by the Ministry of Education (MoE, 2020a). Furthermore, inadequate hand washing and hygiene infrastructure and materials at schools posed the risk of a resurgence of COVID-19 infections when schools reopened. In Ethiopia, only 27 percent of primary schools and 84 percent of secondary schools have a water supply. Also, only 79 percent of primary schools have toilets and 96 percent of secondary schools have traditional toilets (MoE, 2020c).

In contrast, children with disabilities were more visible in guidelines for school-re-opening. These guidelines ensured that the government would provide sufficient support for children with disabilities who have complex needs during the pre- and reopening periods. This included identifying children with disabilities with more complex needs, and working with them, their families, and community support agencies. It also included identifying contingencies for when the number of caregivers was limited or none were available. (MoE, 2020d).

Nepal

Education of children with disabilities prior to the pandemic

In recent years, important strides at the policy level have been made towards inclusive education, with efforts aimed at increasing the enrolment levels for all children, including those with disabilities. In addition to national laws and policies governing the provision of education for children with disabilities, (eg., Inclusive Education Policy for Persons with Disabilities 2017), Nepal also ratified several international frameworks on disability and education. In recent years, donor agencies (eg., World Bank and UKAid) and international non-governmental organisations (INGOs, eq., Humanity & Inclusion) have intensified the funding being provided to the national government and NGOs to support the development of an inclusive education system. The School Sector Development Plan (SSDP), the main policy document in the education sector, clearly envisions the access of the children with disabilities to mainstream education through enrolment and meaningful participation under the equity and inclusion heading (MoE Nepal, 2016).

However, these policy proclamations have not translated into practice, as noted by a Human Rights Watch Report of 2018. The rates of participation of children with disabilities continue to be low (Eide et al., 2016) and the quality of learning, both in mainstream classes and resources units (a common provision for children with disabilities in Nepal), remains very poor (HRW, 2018). Additional factors such as being a girl, living in rural areas and having a particular disability, have been found to further exacerbate exclusion (Eide et al., 2019). Available data from Nepal, though limited and debated, suggests that 35 percent of children with disabilities aged five to ten years are not attending school, in comparison to five percent among their non-disabled peers (Eide et al., 2016).

State efforts to support primary education during school closures

In response to the COVID-19 crisis, the Nepalese government enforced lockdown across the country, extending from March to September 2020, with some occasional loosening of the prohibitions for a short time in July and August. The educational institutions were continuously closed for a prolonged time. The government responded to the second wave of COVID-19 by enforcing prohibitory orders from April 2021, which again resulted in prolonged school closures.

Despite private schools --especially those in the urban areas-- having continued a limited amount of teaching using virtual platforms, public schools across the nation have been severely affected (Save the Children, 2021). The local governments across the country launched different programs for educational continuity. However, there was no acknowledgement of the learning needs of children with disabilities. This was evident in the government publication Student's Learning Facilitation through Alternative System Directive (2021). This document states that children will fulfill their academic needs through different media, such as television, radio and internet, during closures. Even though Section 2, Subsection 1 of the document specifically mentioned five groups of students who need specific attention, there is no mention of children with disabilities.

The COVID-19 Educational Cluster Contingency Plan 2020 (Ministry of Education, Science and Technology, 2020) does identify children with disabilities as being at higher risk of discontinuing their education due to the lockdown. The plan recognizes the importance of ensuring that digital platforms and remote teaching materials are accessible for children with disabilities. Implementation of these plans, however, has failed to materialize.

For example, various educational initiatives were launched, such as the "tele-sikai", a mobile phone-based education program in southern Nepal (UNICEF Nepal, 2021), which was rolled out in collaboration with the WHO by the Ministry of Education Science and Technology. A daily two hour television program was launched by the federal government focusing on English, math and science lessons. Additionally, Save the Children launched other programs, such as the Early Literacy and Math (ELM) at Home –a radio series targeted at children aged three to five, and "Hamro School" (Our School)a radio series targeted at grades one to three, along with the «Ramaundai Sikhdai» (Enjoy and Learn), which was targeted at parents and caretakers of children to age three. None of these programs, however, were found to have any focus on the needs of children with disabilities, in terms of content or accessibility features. Rather importantly, doubts have been raised about the outreach, uptake and effectiveness of these programmes, due to lack of internet connectivity in households, and frequent power outages in many parts of Nepal.

Qatar

Education of children with disabilities prior to the pandemic

Qatar has made important strides in the recognition and support of people with disabilities. The country has adopted the six recommendations of the 'Education for All' initiative that emerged from the Dakar Framework of Action, in 2000 (Guldberg et al, 2019; 22). In 1995, the country ratified the Convention on the Rights of the Child, and following its ratification of the UN Convention on the Rights of Persons with Disabilities in 2008, the government issued a Guidance framework for public schools in relation to their responsibilities towards students with various disabilities, impairments and difficulties (UNESCO, 2021). As part of the government's priority to increase enrollment of students with special needs and include them in the workforce, the Ministry of Education and Higher Education launched its 2018-22 strategy, which "intends to ensure enrolment of students with special needs in equitable, quality and diverse education programmes both in early childhood and in basic education" (UNESCO, 2021). Prior to this strategy, Mada, a non-profit organization affiliated with the Ministry of Communications

and Information Technology, launched a programme (2014-17), which included the objective of increasing education opportunities for students with disabilities in the public education track (Mada – Assistive Technology Center, n.d.). Most recently, Qatar has emphasized its commitment to the UN SDG 4.

Despite the important steps Qatar has taken, as in many Gulf countries policy has led to mixed model of inclusion where some students are included in regular classrooms, while specialty institutes (eq. the Shafallah Centre for students with autism spectrum disorder) cater to individual disabilities (Weber, 2012). Thus, children with special needs are often separated from the mainstream education system, which led former UN Special Rapporteur on Disability, Shuaib Chalken to note, after a visit to Qatar in 2010, that "There appears to be distinct lack of mainstreaming of disability in Qatar" (United Nations Special Rapporteur on Disability, 2010). Although Qatar has adopted laws to protect children with disabilities based on the principles mentioned in the above conventions, the policy implementation do not always translate to addressing the needs of the families in better supporting their children with disabilities (Al-Kaabi, 2010). More work is needed to implement and monitor the policies and initiatives Qatar has adopted, with in-depth research on the subject remaining sparse. Therefore, more comprehensive research is needed that asks how families and education stakeholders view the treatment of children with disabilities in order to identify what has and has not worked (Al-Kaabi, 2010, p. 20). Existing research related to this subject has touched on the need for inclusion at the policy level (Al Attiyah & Lazarus, 2007); the use of assistive technology (Arouri et al., 2020); experiences and satisfaction of parents (Abbs, 2009; Rocha, 2014), and legislation and policies (Al-Kaabi, 2010).

According to the Ministry of Development Planning and Statistics, in 2019, the number of children with disabilities between the ages of five and 14 years, was 6,288. There are currently 66 schools that include students with disabilities. In the education ecosystem, there are effectively four types of schools where children with disabilities can attend depending on their needs and severity of their disabilities. These are (1) mainstream public schools, (2) mainstream private schools, (3) special schools, and (4) specialized centers. From the 1990s, several specialized centers were established to cater to children with disabilities, some providing both schooling and therapy, while others provide just therapy sessions.

State efforts to support primary education during school closures

To control the COVID-19 outbreak, all public and private schools in Qatar were closed from 10 March 2020 (MOEHE, 2020) until September 2020. The Ministry of Education and Higher Education (MOEHE) issued a directive to discontinue on-site learning and developed a remote learning plan for students in grades one to 12. There was a clear focus on quickly developing alternatives to the physical classroom to allow pupils to continue their learning remotely. These included Qatar TV, YouTube and the MOEHE distance learning portals, Mzeed and Qlearning. Mzeed and Qlearning are online platforms created by the ministry in the wake of the pandemic, which offer digital and interactive resources to support distance learning services. For those lacking access to equipment or access to e-learning, computers, tablets, laptops and broadband devices for Internet access were provided by the ministry through collaboration with the telecommunications networks in Qatar. From September 2020, the ministry adopted a hybrid teaching model with remote learning taking place for only part of the week and the rest of the engagement taking place in class.

During this period, MOEHE also adopted certain measures to ensure better accessibility to learning for students with disabilities by providing special services and educational materials adapted to type and level of disability. Closed captions and sign language interpreters were included in the online application as well as video and television broadcasts of lessons (QNA, 2020), for students with hearing disabilities. To support those with visual impairment in general education, high quality videos were produced with clear sound. For students with intellectual disabilities, autism and multiple disabilities, teachers were to provide lessons based on the students' individual plans. Apart from guidelines for parents with children with disabilities, a webinar series titled Back to School Series for Parents of People with Autism Spectrum Disorder (ASD) and Special Needs, was organized in September 2020 by the Ministry of Public Health (MOPH). However, not much is known about how the school lockdowns from March to September 2020 impacted students with disabilities, and what steps were taken by their education providers to assist them.

Outline of the report

Overall, as evident from the three country cases it is clear that while there were differentiated efforts at the policy level to include children with disabilities in distant learning modalities, very little is known about their experiences. This report is unique in its focus and provides nuanced insights of the impact of prolonged school closures on children with disabilities and their families.

This report consists of five chapters. Chapter 2 provides insights into our research approach: the methods of data collection, sampling, analysis and research reflections across the three countries. This is followed by key findings from the three country surveys (chapter 3). Subsequently, there is critical reflection on what we have learnt about the education of children with disabilities during the pandemic (chapter 4). We also provide important insights for the future of education, with a particular focus on the schooling of children with disabilities (chapter 5).

RESEARCH APPROACH

T V V D T E R

This section of the report provides an overview of the research process adopted in this study. Due to national lockdowns and government guidelines, the safest way of collecting data was through remote methods. We chose a survey design as it enabled us to collect a large amount of data in a relatively short period. It also gave us the opportunity to capture both quantitative data to undertake descriptive analysis and in-depth qualitative data on experiences and perceptions concerning the impact of school closure on the education of children with disabilities. Surveys were also found to be flexible in that we were able to administer them in various ways, including online and by telephone.

We start by presenting an account of the development of the research instruments --the parent and teacher surveys. This is followed by an overview of the strategy used for sampling in each country, and a presentation of the final sample. The data collection process is then described, followed by reflections on this process and discussion of the ethical issues faced during data collection. This section concludes with an explanation of the procedure followed for the data analysis.

Research process

Data collection for the project was undertaken as the pandemic was spreading rapidly across continents. The surveys were designed and then rolled out at different points. In Ethiopia, for example, data collection took place from October 2020 to February 2021; in Nepal data was collected from December 2020 to March 2021; and in Qatar the survey was completed between March and May 2021. Given the nature of the pandemic, each of these countries was at a different point regarding national lockdowns. While Ethiopian schools were opening up during data collection, the Nepalese government was imposing additional guidelines and tightening social distancing measures.

In designing the survey we used both open and close-ended questions. Two survey instruments were designed, one each for parents and for teachers in each country. This process was carried out in five stages, as follows. **Stage 1:** To meet the objectives of the study, a draft outline of the survey themes and relevant questions under each was developed by the overseeing team. The process started with scanning for surveys that had already been used for research with parents and teachers on their experiences with education during COVID-19 in low- and middle-income countries (LMICs). This aided identifying the general issues being taken up in connection with education during the pandemic. Using this information, along with our in-depth knowledge of disability issues regarding LMICs, we created the first drafts of the surveys.

Stage 2: The survey drafts were further developed and sharpened in focus through close discussion with the respective country teams in Nepal, Ethiopia, and Qatar. As mentioned, the aim was to create two core survey instruments --one for parents and one for teachers. Important at this stage was finding the right balance between obtaining adequate and relevant information through the survey and the time required to complete it, which has been widely discussed in the literature (eg., Mitchell, 2021).

Both the final surveys comprised a total of 30 questions. The parent survey covered the following topics:

- parent background information
- information about the child with disabilities
- schooling and learning of the child with disabilities during school closure
- impact of school closure on the child with disabilities and the parents

The teacher survey included:

- teacher background information
- schooling during closures
- schooling during closures specifically for children with disabilities
- education recovery with a focus on children with disabilities

Most of the questions had a multiple-choice option, for some questions a Likert scale was used, where participants were asked to rate statements on a three-point scale. The survey ended with a few open-ended questions, in which they were able to express their views and experiences more freely. Stage 3: The core surveys were then tailored to each country context in collaboration with the country teams. At this stage, questions were added, omitted, and adapted. For instance, schools in Ethiopia were already in the process of reopening, so changes were made to the questions to capture both the experiences during school closure as well as preparations for the children's return to school. In addition, the options provided for the multiple-choice questions were also aligned to the context, eg., for type of schools, professions working in schools, yearly earnings and the common forms of social media used in the country. Finally, for the teacher survey the wording of certain guestions was adapted to their role in the school, ie., whether the person identified as a head teacher, special educator or class teacher. After the process of contextualization, there were minor differences in the number of questions in the parent and teacher surveys across the focal countries.

Stage 4: The contextualized parent and teacher surveys for each country were translated into the local language(s) by the country teams. The surveys were then piloted with a minimum of two parents and two teachers via telephone in Ethiopia and Nepal. In Qatar, the piloting was done through video conferencing, as the research team and the participants had easy access to these facilities. The piloting was important to check the appropriateness, clarity, and flow of questions, time required for survey completion; it was also an opportunity to capture, through the responses to the open questions, areas of inquiry that could be useful for integrating into the final version.

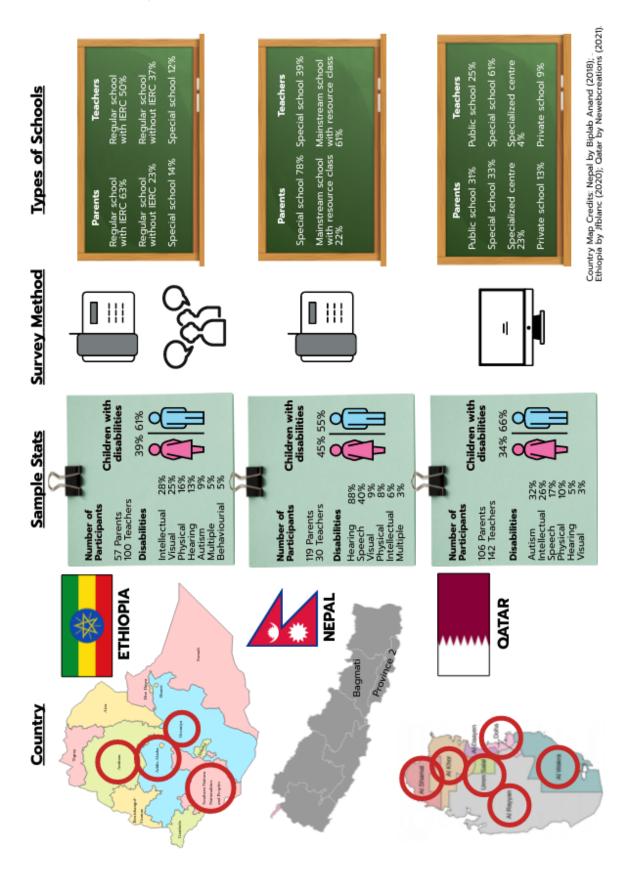
Minor changes were made in the content and structure for the surveys for each country. The language was also edited to aid comprehension of participants, and to allow for consistency across the field team. **Stage 5**: The final surveys were then administered in each of the three countries. In Nepal the survey was translated into Nepali; in Ethiopia the survey was conducted in Amharic, and in Qatar the survey was administered in Arabic and English.

Sampling strategy and overview

A purposive sampling approach was used whereby contact was made with parents and teachers by targeting schools that were more likely to have children with disabilities in the respective contexts. An overview of the sample across the three countries is provided in Figure 1

Figure 1.

Overview of the sample across the three countries



Ethiopia

Here the survey was conducted in three regional states and one city administration:

- Oromia
- Amhara
- Southern Nations, Nationalities and People's Regions (SNNPR)
- Addis Ababa

The decision was practical and also influenced by the fact that these regions had been making efforts prior to the pandemic to include children with disabilities. For example, the Amhara Regional State provided financial incentives for students with disabilities to stay in their education.

People tasked with delivering inclusive education at the education bureaus of the selected locations were contacted. Together they provided 102 contact addresses of potential schools that were being attended by children with disabilities within their respective location. These schools included regular schools without inclusive education resource centers (IERCs) that had a high number of children with disabilities, special schools, with boarding and non-boarding options, and regular schools with IERCSs. The school directors at each of these schools were then contacted. Based on this communication, the phone numbers of prospective participants (both teachers and parents) were obtained from the selected schools, amounting to a total of 250 potential participants.

Nepal

The two diverse provinces of Bagmati and Province 2 were selected for this study. Bagmati province is a hilly region, and includes the country's capital, Kathmandu. Kathmandu district is ranked as one of the best districts for educational outcomes in Nepal. Lalitpur is a district adjacent to Kathmandu, and is also a big metropolitan city. Province 2, a province on the plains, with an open border with India, is low performing and has become the focal point of the international donor community. Rautahat, Saptari and Siraha districts are at the very bottom of the of the district rankings on educational outcomes such as access, participation and learning, according to the government of Nepal. Higher inequality driven by gender and ethnicity is also reported in the equity index for these districts.

The two types of school settings that children with disabilities are likely to attend in Nepal are special schools and mainstream schools with resource classes. The first step was to identify the existing schools in the chosen provinces and to obtain their contact information. This was achieved in Bagmanti Province through the internet and from a report published by the Center for Education and Human Resource Development (CEHRD). In Province 2, identifying schools was much more difficult and involved contact with various individuals at different administrative levels. Finally, the list of potential participants was obtained from multiple district assessment centers in various districts of Province 2.

In Bagmati Province, three schools were approached. The contact details of 120 parents were collected in two of the districts. In Province 2, the contact information of 200 parents was obtained from eight schools in three districts. School records were accessed so that teachers who were working with children with disabilities could be identified, and their phone numbers sought. These included head teachers and deputy teachers, class teachers and resource or specialist teachers.

Qatar

A list of school settings, both public and private, where children with disabilities accessed education was generated through an online search. This included schools with resource centers, special schools and specialized centers. The research process outline in Figure 3 was followed. The final sample included schools in six of the eight municipalities in Qatar: Doha, Al Rayyan, Um Salal, Al Khor, Al Wakra, Al Daayen, and Al Shamal.

Process of contacting participants

Given that the teams for Ethiopia and Nepal primarily relied on phone surveys, the following steps were followed, as outlined in Figure 2:



Figure 2.

Research process in Nepal and Ethiopia

For Qatar, a slightly different process was followed as the survey was hosted online, and is outlined in Figure 3.

Introductory call schools	 introduce researcher and project request made to share the survey link with parents of children with disabilities and teachers in their school identify contact person at each school in order to follow-up
Follow-up call	 check if principals and directors have given their approval 18 of 23 contacted schools agreed to participate
E-mail schools	 survey cover letter introducing project, research team and consent link to parent and teachers surveys in Arabic and English
Follow up e-mail	e-mail contact person at the school to confirm the links were sent

Figure 3.

Research process in Qatar

Ethical issues and reflections on the research process

Ethical approval for the entire project was undertaken at the very start of the project though the ethical review process of the Faculty of Education, University of Cambridge after the instruments had been drafted and before the piloting. Additionally, in-country formal approval processes were adhered to. In Ethiopia permission was obtained from the Federal Ministry of Education, and in Qatar from the Biomedical Research Institute (QBRI) of Hamad Bin Khalifa University (HBKU). In Nepal, discussions were undertaken with key stakeholders given the lack of a formal ethical review process.

Throughout the research process the three county teams were conscious of ensuring that basic ethical principles as mandated in the BERA Ethical guidelines (2018) were complied with. The team members spent considerable time discussing issues such as ensuring anonymity and confidentiality of data, respect for participants' time, and finally, ensuring that there was transparency in the objectives and benefits of participation.

In deciding to use mobile phones to connect with parents in Nepal and Ethiopia, we acknowledge that the research has captured the responses of households that generally tend to be economically better off. Additionally, the respondents were more likely to be better educated, and were often the men in the household. Thus, our findings, to some degree, focus on the experiences of those who are relatively economically better off and educated rather than the many families of children with disabilities who live in very poor circumstances. Nonetheless, the findings provide unique insights into the lived experiences of children with disabilities during the pandemic in Ethiopia and Nepal, which are unavailable in the current literature.

Additionally, a key challenge was that phone connections were often problematic; and sometimes those reached were neighbours and relatives, rather than the parent or main caregiver of the child. In such cases, tracking down the most appropriate number was time-consuming. Conducting phone surveys during lockdown also meant that parents were at home and were willing to engage in discussions. In many cases, they noted that it was good to talk about their child with disabilities to individuals who either had experience of working with children with disabilities or were simply interested in knowing about their child's well-being. In Nepal, 50 percent of our parent sample consisted of fathers, and 40 percent in Ethiopia. This is notable given that in other research studies, most parental interviews seem to be with mothers.

Across the sample, there were concerns about the overrepresentation of some disability types. For example, in Qatar, most of the children whose parents responded to the survey had a diagnosis of autism, intellectual disabilities or learning related disabilities. In Nepal, there was a significantly higher overall number of deaf children in the sample. This concentration of a few types of disability groups in the sample is a reflection of challenges within existing education systems, where some types of disability groups are more likely to be in school than others. Nevertheless, the findings from this survey provide unique insights which collectively cut across different types of disability groups, specifically for children who were accessing schools prior to school closures due to the pandemic.

Data analysis

At the end of each week of data collection for Nepal and Ethiopia, the data recorded on paper was uploaded to an online survey in English. The country research teams transcribed and translated the responses to the open-ended questions into English. This two-step approach was needed due to the lack of reliable internet connectivity, and concern among the research team that data could be lost if not backed up. The numerical responses were downloaded from the online survey to Excel, and the qualitative open-ended questions were saved as Word documents. In Qatar, the quantitative data from the English and Arabic surveys was downloaded to Excel and merged into one data set in Arabic for each stakeholder group. The responses to the open-ended questions were saved as Word documents in the language used by the participants.

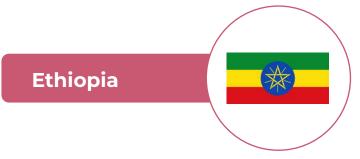
The numerical responses were scanned for potential errors and cleaned before analysis. Then, frequency tables were constructed, and descriptive analysis was undertaken, which was followed by a more in-depth thematic and comparative analysis across and within stakeholder groups. Frequency (percentage) analysis was undertaken across the dimensions of the gender of the children, disability type, province/region, school year, and school type. Multiple cross tabulations were produced to identify the patterns, trends, differences and similarities across groups. Two researchers read through the responses to the open-ended questions on the survey from each country, and developed themes independently. These impressions from the narrative responses were then discussed for overlaps and divergences for inter coder agreement. This led to the identification of the final key themes, and guotes were subsequently extracted illustrating these themes. There were regular meetings with each country team to check, refine, and shape the developing analysis multiple times during the analysis process. The next sections of the report focused on the key findings emerging from each of these country contexts.

KEY FINDINGS OF THE COUNTRY SURVEYS

THAPTER THREE

In this chapter we present the findings from the surveys conducted in Ethiopia, Nepal, and Qatar. In each country we examine the nature of contact between teachers and parents, the formal learning opportunities that were available for children with disabilities, the perceived value of schooling, concerns around loss of learning and socio-emotional impact of school closure. Each country section concludes with the key insights emerging from the data.

The intent of this study was not to draw direct comparisons across the countries. We present each country findings on their own, and where possible highlight salient differences that have shaped the experiences of children with disabilities during school closures.



Little contact between teachers and parents

Our findings provide clear evidence that there was little contact between teachers and parents during school closures, with only 41 teachers (out of a total of 100) reporting that they had been in touch with families. The frequency of the contact by those 41 teachers was reported as being once (71 percent) or twice (29 percent) a month. Teachers in a mainstream school with an attached IERC were more willing to contact parents, as shown in Figure 4. None of the teachers working in special schools reported being in touch with the parents of their students.

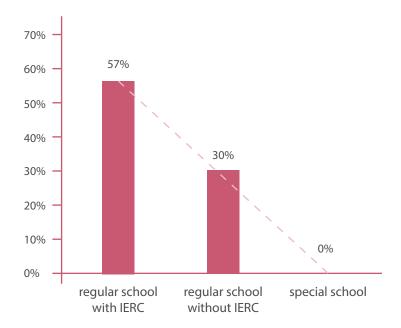


Figure 4.

Ethiopia: Teacher contact based on school type, reported by teachers

Teachers tended to use a combination of walking to the child's house or telephoning for establishing contact. Notably, in all cases the primary reason for contact remained focused on providing families with information on COVID-19.

Forty-one percent of the teachers reported that they had received some guidelines from their Woreda Education Office during closures. These official guidelines were primarily intended to provide families information on how to stop the spread of COVID-19. Only four percent of the mainstream teachers mentioned a focus on lessons in the received guidelines (Figure 5). Importantly, none of the special school teachers reported having received any instructions from the Woreda Education Office, and as noted earlier, none had made any contact with their students.

Overall, the findings suggest that there was greater likelihood of teachers who had been given guidelines by Woreda having contacted parents, whether or not it was a regular school with or without IERC. Almost all teachers who had received instructions established contact with parents.

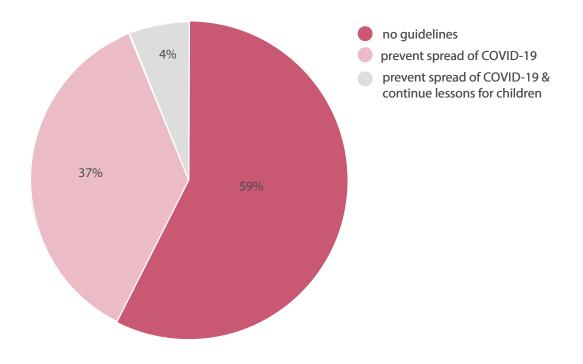


Figure 5.

Ethiopia: Guidelines received from the Woreda Education Office by schools

Furthermore, teachers working in regular schools with IERCs reported receiving more support from the Woreda Education Office and NGOs, compared with regular schools without one (Figure 6), whilst no such support was reported by special school personnel. Support from NGOs was also found to be much more commonly reported by teachers working in urban areas than in rural ones (50 percent and seven percent respectively).

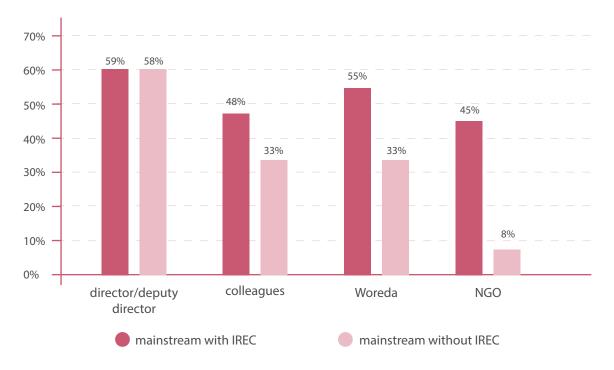


Figure 6.

Ethiopia: Sources of support identified by teachers who were in contact with families based on school type

This picture of little contact from schools was reiterated strongly in the data from parents, with 84 percent of parents reporting that they had not been contacted by the school. Only nine parents mentioned some contact, and in these cases, all the children were studying in regular schools with IERCs. The frequency of contact for five of the families was regular and, with one reporting, "The Special Needs Educator used to come once in two months and made phone calls three times every month". But for the majority of the parents the scenario was markedly different.

Limited access to learning materials and low levels of engagement with formal learning

When identifying the three main barriers that children with disabilities faced in continuing their learning during school closures, teachers were most likely to indicate that availability of accessible learning materials was a barrier (Figure 7). Financial barriers faced by parents was the next most often indicated barrier. Lack of a personal assistant and additional academic support was the barrier third most often indicated by teachers. They also indicated their own financial challenges as a barrier. While there was little difference in opinion among teachers working in different types of schools, the issue of financial barriers, particularly in terms of teachers not having the money for phone calls etc., in reaching children was more likely to be highlighted by special school personnel, who, as noted above had not established any contact with parents.

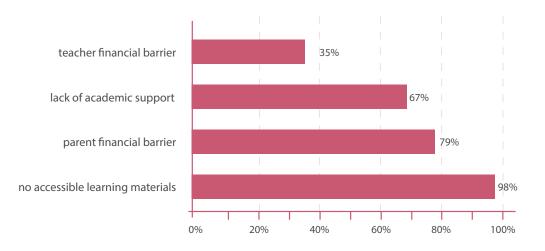


Figure 7.

Ethiopia: Main barriers faced by children with disabilities in continuing their learning as identified by teachers

Similarly, as Figure 8 demonstrates, parents were most likely to indicate availability of accessible learning materials as a barrier for their children. The lack of personal assistant or additional academic support were next most likely to be mentioned as a barrier. Unavailability of devices, and no internet were also commonly identified. A few parents also mentioned the availability of books and materials in print as a barrier. Only one parent mentioned having both a radio and computer. One parent described how his child who was attending a special school and hence, "all the equipment he was familiar with was not available at home."

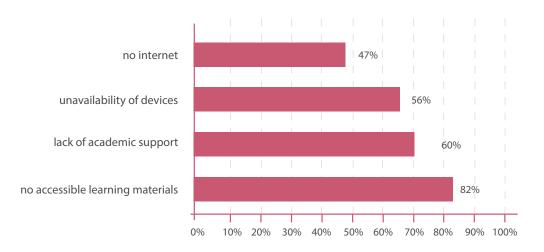


Figure 8.

Ethiopia: Main barriers faced by children with disabilities in continuing their learning identified by parents

It is therefore unsurprising that parents reported that their child with disabilities spent very little time studying, with 63 percent reporting that their child spent no time on formal learning. Notable gender differences emerged; according to parents, 82 percent of the girls did not study at all, in comparison to 51 percent of boys. In the instances where some studying was taking place, children were, in most cases, supported by their siblings. Only 18 percent of the children spent more than an hour studying daily, according to parents.

Clearly parents were anxious around their children's loss of learning. Eighty two percent of parents were worried that their child might fall behind in their learning, while 72 percent categorically stated that the loss of adequate schooling for a year would have an impact on their child's future opportunities. Similar views were expressed by teachers, who pointed out that the lack of availability of accessible and adapted learning materials as contributing to this lack of engagement in formal learning processes when children were stuck at home. Teachers also believed that school closures had reduced children's motivation to engage in learning and playing (95 percent). They also voiced fears of parental and caregiver neglect (77 percent). Here too, special school personnel were found to be much more concerned than

those working in other types of schools. A possible reason for these heightened concerns could be that special-school teachers had not had any communication with their students or their families during the closures. Additionally, it is also plausible that the learning and additional needs of children attending special schools could be higher, thus placing increased demands on the parents, which the special school teachers were mindful of.

Significant concerns on the social, emotional and financial impact of closures

Across the parent group, as shown in Figure 9, substantial concerns were highlighted regarding the negative impact of closures on children's socio-emotional wellbeing. This data dramatizes the significant isolation of children with disabilities. Lost contact with friends was most often reported by parents as an emotional impact on their disabled child. Boredom, sadness, related heightened feelings of loneliness, isolation, diminished interest in learning and playing were also observed by parents. Parents also noticed changes in behavior such as increased feelings of confusion and fear.

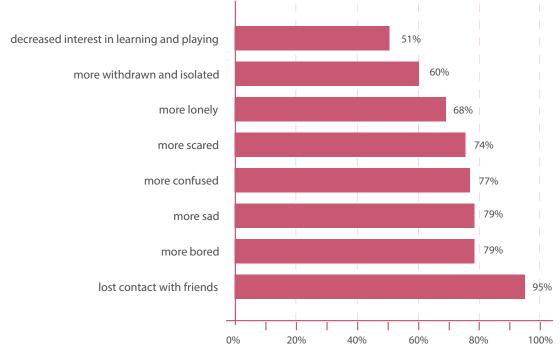


Figure 9.

Ethiopia: Parental perception of the social and emotional impact of school closures on their child

Almost all teachers (99 percent) expressed concerns around feelings of loneliness and anxiety, with much greater concern being expressed by those working in special and mainstream schools with IERCs. Over half the teachers noted the risk of domestic violence (53 percent), while others (34 percent) acknowledged that children were missing out on important therapies and other essential services (nutritional needs) that were delivered through schools.

Important to acknowledge here are the considerable challenges that parents were facing during COVID-19 lock downs, and how these were amplified further as they took sole charge of their child with disabilities. When discussing the impact of school closures on their lives, parents were acutely aware of increased demands on themselves, particularly their time.

> The school was sharing my burden and the closure added me more responsibility about my child with a physical disability. (father, girl)¹

> Before COVID-19 she used to be in school and I had some break until she returned back to home, but during the school closure, I have been taking too much of a burden to take care of her. (mother, girl)

Parents acknowledged that they were unable to attend to work, as they needed to look after the child who was at home. Interestingly, this was mentioned as a much greater concern for boys (10 boys and 1 girl). This could be due to the fact that there was a greater number of boys with physical disability and intellectual impairment in our sample. This loss of work resulted in loss of family income: "My income is reduced, because I am spending more time at home to take care of my child." (mother, boy)

In contrast, some parents noted how spending more time with their child had helped them become more aware of their child's needs: "It gave me an opportunity to read more about how to handle a child with behavioral impairment and I have practiced it. I have learned more things on how to support children with disabilities at home." (father, boy)

Parents also appreciated the value of spending time with their child:

It was an opportunity for me to stay with my child, because I have no other family members who live with me and my child. (aunt, girl)

I enjoyed being with my children at home while school was closed. I had time to discuss with them. Of course, they were assisting me with home-based activities. (mother, boy)

Return to school was a strong priority

Ethiopia was the only country in our sample where, during the data collection period, schools had begun a phased opening. Several media campaigns were launched at the national level to encourage parents to send their children back to schools. Schools were also making efforts with teachers in the study, explaining the very active approaches they had adopted to reassure parents that schools were safe. A diversity of approaches were described by participants, including the use of telephones, visits to the home (especially in rural areas), brochures and letters sent to the parents as well as the involvement of community leaders. Parent 'orientation' was given significant importance through school visits, to show school readiness for receiving their children, in terms of the precautionary measures being taken. These approaches were also reiterated by parents:

1- We use identifiers in these quotes to indicate the relationship of the respondent that we spoke with (in most cases, these were father or mothers, but in others we also had extended family members, such as grandmother, siblings etc.), and the gender of the child with disabilities.

The school has given us masks and only three days a week (every other day) is class arranged for students. (mother, boy)

...provided us sanitizer and orientation for the children as well as class size is reduced. (father, boy)

COVID-19 prevention steps are posted in the school and raised awareness about it with printed materials. (grandmother, boy)

...oriented us how ready they are for taking care of children with disabilities like my nephew. (uncle, boy)

These interventions seemed to have had a positive impact, as 62 percent of the teachers observed that almost all the students with disabilities had returned to school, with 35 percent stating that more than half had done so. A considerably high number of parents also noted that their child with disabilities had returned to school (79 percent). Of the 12 children, reported by parents as not having returned to school, for eight, this was because their schools had not reopened. Only four parents had made an active choice not to send their child back to school due to concerns about COVID-19. The importance of ensuring that their child continued with her/his education is well expressed in the following parental quote: "I told him the importance of education for him, more than everybody, because he has a disability." (mother, boy)

While parents were actively encouraging their children to return, when asked to rate their biggest concerns as schools opened, a significant number expressed strong apprehensiveness about their child's safety and hygiene (89 percent). Others worried that their child might not adjust back into the school routine (77 percent), while concerns around loss of learning (66 percent) and low motivation to learn among children (50 percent) were also emphasised. In preparing their child to return to school, hygiene remained an overarching concern:

I have given her sanitizer, taught her not to touch others and how to greet during COVID time. (mother, girl)

I trained my child to wash hands with water and soap every time he touched someone or something that others touch. (grandmother, boy)

I have trained my child on how to use the face mask and sanitizer. (mother, boy)

Several parents (23 percent) focused on supporting their child's learning to help their transition back to school:

I have provided learning materials and guided him to study. I have encouraged him back to school. (mother, boy)

I prepared my child by providing reference books and guiding him in his study. (mother, boy)

Interestingly, for children attending mainstream schools without IERC parents put greater focus on learning (nine of 13 parents) in preparation for the return to school, in contrast to those attending schools with an IERC (four of 36 parents). Some parents acknowledged the challenges, as indicated in this quote:

> It was so difficult to prepare my child with autism because my child is changeresistant. The school had an outreach program before re-opening and that helped me more with preparing him for school. (father, boy)

All teachers rated safety and hygiene of the students as the most important concern, followed by concerns that children might have forgotten what was learnt prior to school closure (92 percent) and their low motivation to learn (87 percent). More positively, teachers seemed to be much less worried about the previous systems of support being in place as children returned to school (26 percent).

Teachers noted that now that schools were reopening, they were ensuring the following:

The school has made available protective materials like face masks for each learner, a water tank for hand washing, and sanitizer at the gates of the classroom. (special school)²

The school has been engaged in the fulfilment of the required COVID-19 protective materials, particularly on the provision of face masks and sanitizers. (mainstream school without IERC)

Many teachers described having undergone training prior to schools being opened, to implement the safety measures and create a safe learning environment. Others mentioned discussions in the school regarding "how to teach learners safely".

There were a few teachers who stressed that the response needed to be the same for all children: "Special attention was not given for them [children with disabilities]. They were treated just like the other students." (mainstream school with IERC) Others noted that certain extra efforts were being made for children with disabilities as schools were preparing for re-opening, especially in relation to children's increased health vulnerabilities, as indicated below:

> We were made to understand the level of risk of getting COVID-19 for the different types of disabilities. (mainstream school with IERC)

Teachers were prepared with Braille format of lesson materials by special needs educators and teachers got two days of training on how to help students with disabilities in the time of school reopening. (mainstream school without IERC) Additionally, across schools, irrespective of the type of setting, physical changes in school had been implemented, such as running the school in shifts, dividing children into smaller groups, re-arranging the seats in the classroom, etc.

While safety remained the overarching concern, a few teachers highlighted the need for increased attention to learning, especially through tutorial classes, guidance and counseling. However, focus on continuing the formal learning of children with disabilities during closures, and even when schools opened up, did not emerge as the most significant priority.

Summary of key insights

- Very little contact between teachers and parents during school closures
- Schools that received guidelines from their Woreda Education Office were most likely to contact parents
- Schools with IERCs received more support from the Woreda Education Office and NGOs
- Special schoolteachers had not had any contact with parents, but expressed greatest concerns about their pupils and highlighted their own finances as a barrier.
- Lack of accessible learning materials and academic support, as well as financial barriers faced by parents were identified as key barriers to learning.
- Children with disabilities spent very little time studying, with a greater number of boys studying than girls.
- Parents and teachers were highly concerned about loss of learning and the socio-emotional impact of closures on the child.
- Schools were more engaged and active in encouraging parents to send their children back to school and most children with disabilities had returned to school.

2-We use identifiers in quotes from teachers to indicate the type of school they working at.

Nepal



Sixty-one percent of parents noted that they had been contacted by schools during closures. This was a higher degree of contact when compared to our sample in Ethiopia. There were significant differences, however, in the experiences of parents according to province they lived in. In Bagmati, 89 percent of the parents reported having been contacted by the teachers, in contrast to 32 percent in Province 2 (see Figure 10). Differences also emerged according to school type. As shown in Figure 11, parents of children enrolled in special schools were more likely to have been contacted (77 percent), compared to those attending a resource class in a mainstream setting (22 percent). This difference could reflect the generally scant engagement of public schools with their students during closures; it may also signal the likelihood that within large schools the needs of this small group were overlooked.

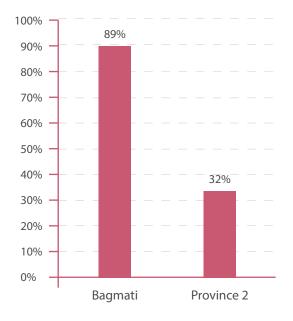


Figure 10. Nepal: Teacher contact based on province

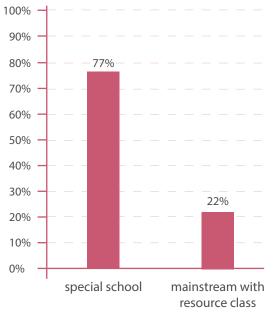


Figure 11. Nepal: Teacher contact based on school type

Interestingly, while teachers reported that they had not been provided with any official guidelines for contacting parents or supporting children's learning, 23 of the 28 teachers surveyed noted that they had been in touch with parents. There were a range of reasons reported by these 23 teachers for connecting with parents. Forty percent of them noted that it was to support the child's learning, which entailed providing books or information about which television programmes to watch. Other reasons for contact included providing information on COVID-19 (38 percent) and answering parental queries about school opening (38 percent). A few also mentioned getting in touch to provide emotional support to students (21 percent) and two teachers specifically noted that they contacted parents to check on domestic violence. There were no significant differences according to school type in the teacher sample. Most of the contact between parents and teachers took place via telephone, with very little use of social media or other internet platforms. A few parents and teachers also mentioned walking to the child's house.

Uninterrupted learning an important goal

Parents related that their priority during closures was on ensuring that their child continued learning, with 89 percent regarding this as being very important, and eight percent as important (Figure 12). Across the sample, for both boys' and girls' parents put significant emphasis on their child's education, as they were concerned that their child with disabilities was getting older without education. The significance parents attributed to schooling is evident in responses as to what they thought should be done differently during school closures:

> We don't have internet access in the village. They have to organize a mobile camp to teach children with disabilities in a village area. (mother, girl)

We have to keep running schools and hostels because we cannot provide our disabled children the service required for them at home. It will be better if we keep running schools and hostels with maintaining physical distance and other hygiene measures. Schools are the places where better manner and education is taught to our children, my daughter gets better education, sports training and she is happy to be with her friends there but that is not available at home. So, I think government have to allow schools and hostels to reopen. (mother, girl)

Online classes must increase. Accessible materials are needed. Only trained teachers can teach these materials. (mother, girl)

The online class or at least a TV program should be provided, parents should be made aware of the things that they can use in assisting their children with disabilities. (father, girl)

We should not stop their education at any cost. We need to continue their classes either by teachers or online or by phone. (father, boy)

I think teachers should teach here in the village in a group. We should not stop children's education under any condition. (mother, boy)

Parents generally rated academic learning and well-being more highly in importance than household chores during closures. However, parents considered learning household chores more important for girls (53 percent) than boys (33 percent), reaffirming traditional gender roles (Figure 12).

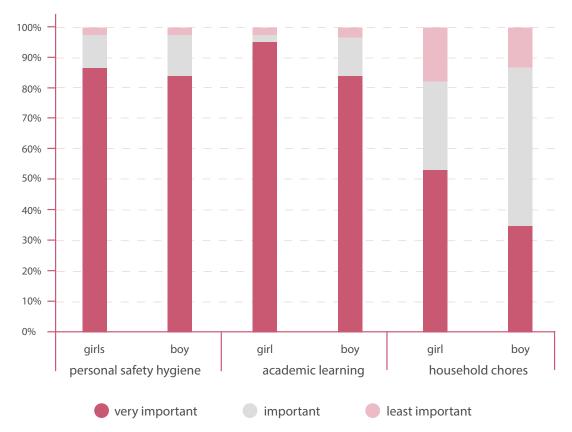


Figure 12.

Nepal: Importance of learning activities for boys and girls, reported by parents

When discussing the likelihood of their child's returning to school (Figure 13), 77 percent of parents were confident that they would do so. This desire is also evident in the following responses:

He doesn't want to stay at home because his friends are there in the school. People there can understand his language. He can talk there. (mother, boy)

When I told him that "your teacher has called me and the school has been reopened", he was so happy to hear that. He packed his belonging and he was ready to go to school right away. (father, boy)

She keeps saying that she should not stay at home for longer time, she has to go to school, she has to study otherwise her future will not be good, there is nothing that she can do if she doesn't study, she also keeps saying that it's more important for her to study because she is a disabled person. (sibling, girl) Here gendered differences emerged. Parents of girls were much more confident that their child would return to school (88 percent) in comparison to those with boys (74 percent). A greater number of parents with boys noted that their child would be less likely to return (21 percent), and some were not sure if their child would return (five percent). None of the parents of girls specified that their child would not do so. It is difficult to firmly establish why this might be the case; it could reflect the fact that parents might at times be more willing to let their boys enter the low skilled labor market than girls because of safety issues. Additionally, girls might be more willing to follow social norms by returning to schools than boys. It is difficult to know the reasons for these differences.

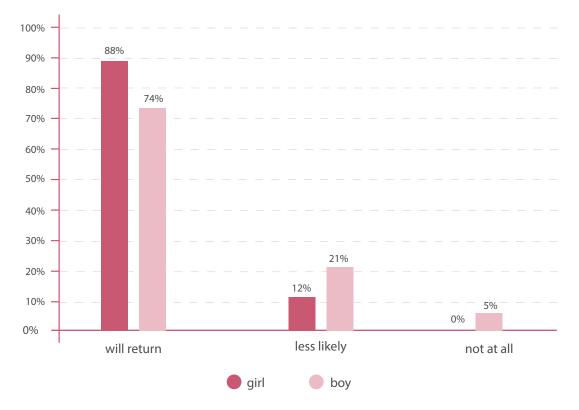


Figure 13.

Nepal: Likelihood of child returning to school, reported by parents

Considerable lack of resources, professional support and 'know how'

When asked about the kinds of learning materials that were available to children at home, 76 percent of parents said that they were extremely reliant on books and printed material, with very few reporting that their child had access to the use of tablets, radio and/or TV for learning purposes. Greater use of phones was reported by 46 percent of parents.

Parents reported notable gender differences in the use of telephone, as shown in Figure 14. More than half of the parents with daughters (66 percent) noted that their child used the phone for educational purposes, whereas only 32 percent of parents with boys reported the same. Similarly, 15 percent of parents of girls reported high internet usage, in contrast to only 4 percent of parents reporting that their boys were high internet users. Possible reasons for this could be that girls were more likely to be studying during school closures, according to parents, with 81 percent of parents reporting that their girls studied on average more than an hour per day; 70 percent of parents reported that boys studied this much. Parents of boys were also more likely to report that their child was not studying at all during closures. Moreover, the data shows that according to 42 percent of parents, girls with disabilities were also more likely to be found studying independently, compared 26 percent of parents reporting this for their boys.

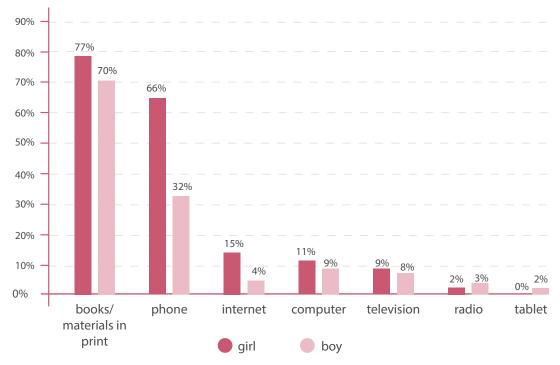


Figure 14.

Nepal: Use of devices and learning materials during COVID-19 school closure, reported by parents

When asked about where parents were sourcing learning resources for their children, the overall findings identified a comparatively heavy reliance on textbooks and materials available at home, and revealed limited coverage of TV, online and radio programmes. Differences between the provinces were again evident as shown in Figure 15.

Striking among these is the greater access to online classes and NGO run initiatives for children in Bagmati. Sixty-seven percent of parents noted that their child accessed online classes in Bagmati; all these children were enrolled in special schools. This degree of support was not noted in Province 2, where parents were more likely to rely on textbooks and limited TV and radio programmes. This is notable, given that 32 percent of parents in our sample (of those living in Province 2) had a yearly income greater than \$4,166 (USD); only 16 percent of parents whose children were studying in Bagmati province had this level of income.

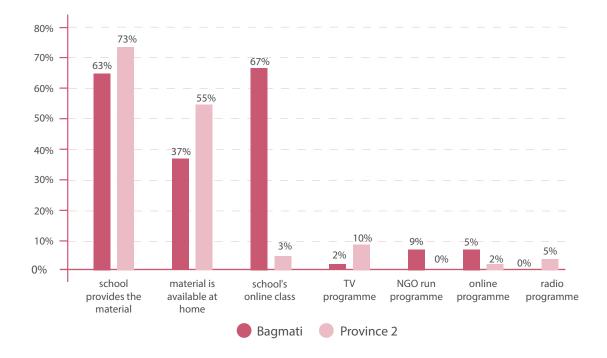


Figure 15.

Nepal: Sources of learning materials used at home, reported by parents

Even though parents were very supportive of the education of their child with disabilities, they noted a range of barriers such as the lack of internet (29 percent) and electronic devices (40 percent). Some parents explicitly requested devices to be provided to their child. Not surprisingly this was mainly asked for by parents in Bagmati province whose children had online learning available, but not necessarily the devices to access it. As noted by one family member: "I have to buy data to run online classes for him and it's very expensive for me, I cannot afford it easily." (sister, boy).

Across the sample, the most noted barrier --58 percent of parents-- particularly those with children who were deaf or had hearing impairment, was the unavailability of personal assistance or additional academic support. Nobody knows sign language at home, so it has been difficult to guide him in his study at home. (father, boy)

Other children can learn with their parents and siblings, they can get tuition classes but deaf children can't learn at home, they can't get tuition classes because we don't understand their sign language. (mother, boy)

My deaf daughter's educational experience during this lockdown has been difficult because of communication difficulty with us. If she was not deaf, I would easily guide her through her study but now I can't because we have communication barrier. (father, girl) The need for personal assistant or additional academic support was greater in Province 2, where there were few online classes on offer. Similar patterns were noted in teachers' responses. Lack of personal assistant or additional academic support and the unavailability of telephone or internet at the child's home are reported by 75 percent and 64 percent of the teachers, respectively.

Significant impact on children's social and emotional well-being and loss of learning

Two themes raised by parents regarding the impact of unprecedented school closures on their child resonated strongly throughout the data.

1) Significant negative impact on children's socio-emotional well-being

Parents noted that, over the course of the closures, their child had become more bored and sadder than usual. This was even more evident in the responses of parents with deaf children, who pointed out that given their own lack of understanding of sign language and that of the child's siblings, the deaf child found it very challenging to engage others at home. Similarly, across the board, parents also noted that children were showing decreased interest in learning and playing, as well as being more likely to express anger.

Some notable gender differences emerge. Girls with disabilities were more likely to be reported as missing friends, feeling bored, being isolated and becoming withdrawn. This could also reflect that girls were more likely to be confined at home due to perceptions of stigma. For example, letting a girl with disability move around the community was perceived to more likely impact her reputation and marriage prospects. Additionally, girls were more likely to be regarded as vulnerable to abuse and violence, resulting in their confinement to the home.

Differences between the provinces were evident in this analysis. Parents in Province 2 reported a higher negative impact of school closure on their children's emotional well-being. They reported increases in feelings of sadness, loneliness, and boredom; the children appeared more withdrawn and less interested in learning and playing. This could also be explained by the decreased opportunities in Province 2 for children to engage in online learning; this could have further reduced contact with teachers and peers. Notable differences were also evident in relation to the type of school the child attended; a greater negative impact was reported on children from this province attending resource classes. Children who were attending special schools were more likely to be engaged in on-line learning.

2) Concerns about loss of learning

As discussed under a previous theme (uninterrupted learning as an important goal), parents placed significant emphasis on the education of their child with disabilities (62 percent). Hence unsurprisingly, they voiced concerns that the lack of schooling during the closures was resulting in their child's growing older without education, and the likelihood that they would forget what they had learned. While parents valued education for both boys and girls, their concerns about loss of learning were more associated with boys (68 percent) than for girls (55 percent), and for children in the higher age groups (73 percent), that is, those 15 years old and older. This could be due to the parents' close association of loss of learning with future loss of earnings, as captured in the following quotes from parents:

> I was worried that my son's school was going to close. It was a matter of his life; without education what would he do? (father, boy)

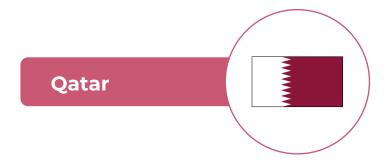
I am worried about her future education and that she will be behind in her learning. (father, girl)

I was worried about my disabled son's career. He is already older than his peers. If he doesn't get to study in time, he would be old and he won't get a job. I was thinking of making him complete his schooling in time and getting him a job so that he would have a comfortable life, but because of the school closure it has been difficult for him to complete his study. (father, boy) Teachers' responses also resonated closely with the concerns expressed by parents that school closures had negatively impacted socio-emotional well-being and loss of learning among children with disabilities. Interestingly, in both stakeholder groups, ie., teachers and parents, the loss of additional therapies during school closures was not highlighted. However, it is unclear if this simply reflects the lack of services usually available even when schools are open. Alternatively, it is possible that the types of disabilities captured in our survey did not require any additional therapies or services on a regular basis

Summary of key insights

- Teachers received no formal guidelines during school closures and contacted parents on their own initiative.
- Special-school teachers were more likely to have contacted parents.
- Continuing learning was ascribed significant importance by parents, equally for boys and girls.
- Loss of learning was a greater concern among parents with boys, and those from the higher age group.
- Household chores were given more importance for learning among girls.
- Girls were described as studying and using the phone and internet for educational purposes more often than boys.
- Girls were described as more likely to return to school.

- Children studying in Bagmati province had access to online classes and NGO run initiatives; these were largely absent in Province 2.
- Unavailability of additional academic support was identified as a significant barrier, particularly among parents of deaf/hearing impaired and speech related disability.
- School closures negatively impacted children's socio-emotional well-being.



High level of teacher contact using multi-channel communication

Unlike Ethiopia and Nepal, in Qatar there was a high level of contact among teachers, parents and children during school closures. Nearly all parents reported contact with the school, with 55 percent reporting at least daily contact, and 20 percent reporting contact at least once a week. Similarly, 80 percent of the teachers reported contact with the children or their parents daily or multiple times per week, as indicated in Figure 16.

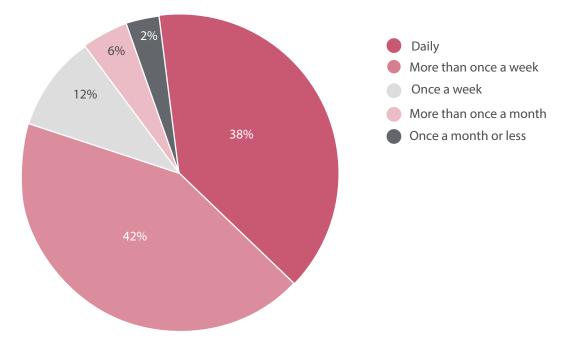


Figure 16. Qatar: Teacher frequency of contact with parents and/or children, reported by teachers

Ninety-three percent of the teacher sample reported that they had received instructions from the Ministry of Education at the time of school closure, which departs significantly from what we noted in Ethiopia and Nepal. While 74 percent reported receiving guidelines to help prevent the spread of the virus, 65 percent were also given COVID-19 related instructions to continue teaching. No specific guidance was given to schools related to disabled students

Teachers and parents were in touch with one another using various communication channels (Figure 17) in three overall groups: 1) social media and messaging apps (eg., Facebook, WhatsApp, and Viber), 2) online applications (Microsoft Teams, Google Meet, Seesaw, and Class Dojo), and 3) telephone. Figure 17 compares the communication preferences of parents and teachers. In their communication preferences, parents were most likely to mention social media and messaging apps, followed by telephone, and lastly, communication via online apps. Teachers were most likely to mention communication through online apps, followed by the telephone. They mentioned communication via social media the least often.

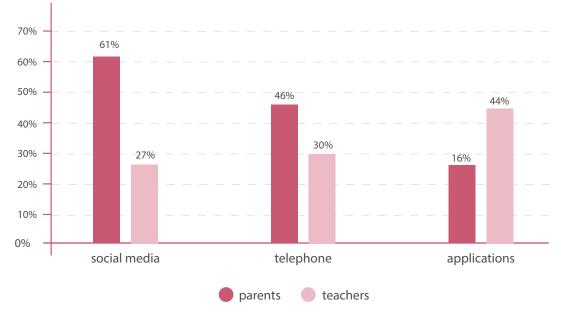


Figure 17.

Qatar: Preferred medium of communication by parents and teachers

In the teacher survey, differences were observed in the frequency and medium of contact based on type of school and disability. Special schools (60 percent) and public schools (28 percent) were more likely to contact parents primarily by telephone and social media daily or multiple times a week. From the data, we see that public school and special schoolteachers primarily contacted students to help with subjects (eq., maths), and provide emotional support to students and parents. Moreover, parents of children with autism, intellectual and learning disability were most likely to receive a call than parents of children with other disabilities. This indicates a recognition of the high support needs of this group. Specialized centers made the fewest calls, but it is important to note that this sub-group had the smallest number of participants in the sample.

Significant reliance on technology for learning, but quality was a concern

Fifty-one percent of teachers described the main purpose of contacting children with disabilities during school closure was to support their academic learning --in reading, writing, math, or other subjects. As noted previously, there was a significant reliance on technology to do so. When schools shut down, there seemed to be a quick shift across the four school types from in-person, to remote learning for most of the students with disabilities. Lessons were conducted on tablets and computers through various online programs such as Google Meet, Microsoft Teams, and Zoom. This approach is similar to the approach adopted for all pupils in general across the country.

In contrast to Ethiopia and Nepal, access to such resources was not an issue. As shown in Figure 18, most parents reported their children using one or more technological resources - tablets, internet, computers, phones and television. Most parents reported their children using at least one of these devices, which points to them being readily available in homes. As indicated in Figure 18, of all resources used by children for learning during closure, parents were most likely to mention tablets with online platforms or installed applications for learning. Not surprisingly the next most likely to be mentioned was the use of the internet (35 percent) which would have been used by some for lessons happening online or to access online learning platforms, or also to be in touch with teachers. Books and materials in print were the third commonly reported resource (31 percent) which was likely used by those that did not have access to technological resources in the home and used by some in addition to learning via technological resources.

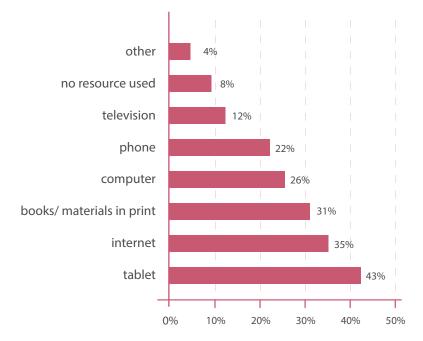


Figure 18.

Qatar: Resources used by children for learning during school closure, as reported by parents

Clearly, children with disabilities were spending time studying during school closure. Forty-two percent of parents reported that their children were able to spend at least one hour studying during this period; 42 percent of parents reported their children spent more than an hour, while 16 percent of parents reported that their child was not studying at all.

However, despite access to and the dominant use of technology for learning, there were many concerns expressed by both teachers and parents about the quality of online learning for children with disabilities. In response to the question on what would be most helpful to support the learning of children with disabilities were school closures to happen again, 63 percent of teachers' responses related to tools and resources. Many urged the creation of a better teaching-learning environment online and a clear remote learning plan. Others who recommended that teachers could work on making online lessons more stimulating, "by giving interesting activities for students so that the students look forward to attending the class". For some teachers, the quality of online instruction was not an issue, but the inadequacy of the online medium for children who required in-person support; these children needed to attend school "in small bubbles."

Many of the concerns expressed by teachers mirrored those raised by parents. Twenty-five percent noted unfamiliarity with technology as a barrier for their child to continue their learning, which was most likely due the use of new applications, rather than technology per se. Many parents expressed frustration about online lessons, with a strong sentiment suggesting that online learning was simply not the best format for their child. This was the case for those with autism, as indicated by one parent³:

> It has been extremely difficult as a parent seeing what my son has to go through. Being a boy with autism, routine plays an essential factor to his well-being in terms of behavior, anxiety, eating and sleeping. The closure of the center affected his behavior tremendously, which in turn, affected me physically and emotionally.

Alongside the concern about the quality of online learning, both teachers and parents called for more assistance and support on how to use the programs. Whilst internet usage and tablet availability were common, books and printed materials were also used (reported by 31 percent of parents; see Figure 18). This suggests such materials were used

3-In line with rules set by Qatar Biomedical Research Institute, the IRB for research in Qatar, no identifiers of any kind are given.

to supplement learning pursued through technological methods. It is clear from our data that communication from teachers, and the use of technological devices and software, were essential in helping children with disabilities continue their learning during the school closures, but that these provisions were inadequate.

Parents were instrumental in providing support

With schools closed, the role of learning support significantly shifted to parents to assist their children with their lessons, both directly and indirectly. Parents were most likely to indicate that they assisted their children in their studies, as shown in Figure 19.

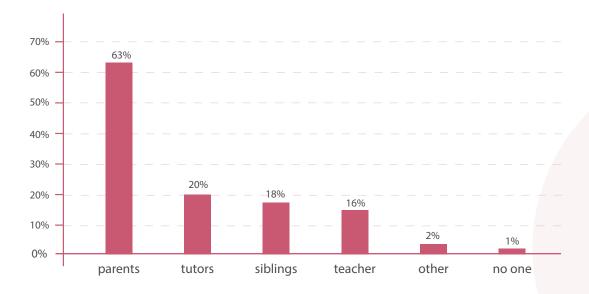


Figure 19.

Qatar: People assisting the child with studying reported by parents

Despite lessons continuing using online programs and devices, when schools reopened, parents and teachers shared the concern regarding children's loss of learning –that they might have forgotten material learned before school closure. As indicated in Figure 20, 44 percent of parents said learning loss was a concern to a great extent, whilst 35 percent reported that this was somewhat concerning. Fifty-three percent of teachers expressed great concern about students' forgetting what had been learned before the closures; 30 percent said it was somewhat concerning. As one parent wrote "I feel one year has been wasted." The worry about falling behind can be tied with concerns that parents had about their children getting older and losing valuable educational time.

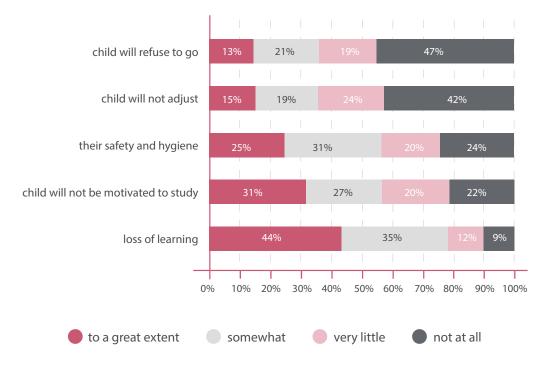


Figure 20.

Qatar: Parents' main concerns for their child with disabilities when schools reopen

The concern about loss of learning led some parents to supplement their child's learning with tutoring. After parents, tutors were the next largest group helping children with disabilities with their studies (20 percent), as indicated in Figure 19. It is not known whether these parents were already using tutors for their children before the school closures, but from some of our open-ended questions, it emerged that some did hire tutors due to fear of loss of learning. As one parent said, "I will bring in a special tutor at least two times a week." Several parents turned to special centers to help support their child's learning. One parent described the limited time on learning being offered to her child with disabilities in comparison to her other child:

> My daughter with disabilities went to school three times a week for seven hours and the remaining two days were done online, but my son with autism only went to school for four hours a week, so I took him to a private centre for extra support.

Loss of academic learning was not the only concern of the parents. Lack of access to important therapies or services for their child while schools were closed was noted as a major concern by 45 percent of parents.

> As parents we are not experts in the fields of ABA [Applied Behavior Analysis], OT [occupational therapy] and speech therapy. There is only so much we can do. We need professional support from school. They provide material for us to work with the child at home, but they don't have meeting or discuss how to do them. And even if they do, we still need support, especially when we have other children to look after too.

This goes to show the important health aspect that these schools provide along with the education, particularly in specialized centers and special schools, where some of the staff are trained in therapies. One parent complained about no support, and hired a therapist. There was no local support as the shutdown was across the board. I was left on my own to find private therapists that can assist in his daily therapies to ensure he does not lose any skills we worked so hard for him to gain.

Parents in the sample were relatively well off economically; they were able to obtain support externally if unable to provide it themselves. With monthly salaries ranging from QR10,000 to QR40,000 (\$2,747 to \$10,989 USD) (58 percent), and 22 percent with salaries in excess of Qr40,000, it is not surprising that parents were able to hire tutors and acquire other services to assist their children.

Teachers acknowledged the key role of parents for the child's learning during school closure. Communication and collaboration with the parents during school closures was the main concern raised by 38 percent of teachers. Teachers also recognized the need for more support for parents.

> Parents or caregivers should receive support at home plus training for them... many parents are working and are unable to support their child. Independent learning is almost impossible for children with a disability, as they need constant support.

Schools should work closely with parents on individual goals; train parents to work with their children.

Significant social and emotional impact on both children and parents

Across the parent group, significant concerns were raised around the negative impact of closures on children's socio-emotional wellbeing. As shown in Figure 21, parents observed that their child had experienced boredom to a great extent, lost contact with friends, and showed decreased interest in learning and playing. Most children had shown feelings of anger, loneliness, frustration, sadness all to a great extent. One mother commented that her child had become violent towards the sisters and her mother. Another noted that education for her child had become difficult, bored, and that he missed school.

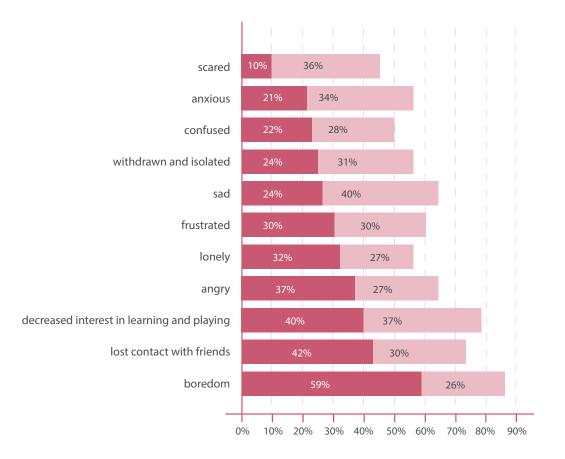


Figure 21.

Qatar: Parents' observations of social and emotional well-being of their child during school closure

Teachers stressed the negative impact of school closures on the mental and emotional wellbeing of disabled children. Thirty-two percent of teachers reported the closure resulted in feelings of increased loneliness among children with disabilities to a great extent; 48 percent reported the closure had somewhat resulted in these feelings. Teachers found that school closures had negatively impacted the motivation of children to engage in learning and playing, either to a great extent or somewhat (40 percent and 43 percent of teachers, respectively).

There was acknowledgement by 85 percent of teachers that school closures resulted in increased anxiety for parents. The need for emotional support was clearly indicated by parents too in their responses to the personal impact of school closures. Over 38 percent described psychosocial distress, anxiety, frustration, and sadness. Parents experienced greater stress than normal, having to balance their work, household chores, and helping their children. Schools being closed has added extra pressure, stress, frustration for me.

I find myself just as frustrated as he is and just as impatient since there is no outlet to either one of us.

I bore the burden of teaching my daughter, and as a teacher, I was suffering from work pressure with the pressure of doing homework and teaching my daughter.

The second most common response among parents was distress related to their children's work (24 percent).

It is a burden for me to get a tutor work working hard myself, while not being a teacher.

I was confused and frustrated due to the difficulty of educating my disabled child and sense of loss.

Parents also noted time-related distress (23 percent).

I was left feeling anxious about the time I am wasting, instead of using this important time ensuring he keeps progressing.

Time is very valuable, especially when they are young and I feel one year has been wasted.

Following time-related distress, was their children's distress (19 percent). This was felt even more strongly by parents of children with autism, who are known to be especially sensitive to changes in routine.

I have seen my son regress due to the lack of routine and time spent in therapy.

It affected me on the one hand that I work and my son at home only learns a small part.

We found that most teachers that contacted parents with the purpose of providing emotional support to parents were special schools (public/ private) (69 percent), followed by public schools at 21 percent. It is interesting to note that when compared to the other purposes, providing emotional support to students was the main reason public school teachers contacted parents or students (according to 32 percent of teachers), rather than supporting pupils with reading, writing or math (reported by19 percent). The possible explanation for this is that the learning was taking place in the same class groups, despite being through communication programs such as Google Meet, MS Teams and Zoom, while individual calls or messages to children and their parents were reserved for providing emotional support and checking in.

Summary of key insights

- Staff were in regular contact with children or parents during school closures, with over three quarters of staff being in contact either daily or more than once a week during closures.
- Technology, as for the entire student population, played a central role in maintaining contact between teachers and learners and in assisting learners with lessons.
- Many teachers felt unprepared with many reporting the need for more appropriate teaching and learning materials and training. But positive teacher collaboration was noted.
- Children with disabilities were reported to have increased feelings of depression and decreased motivation.
- Parents played a central role in assisting their children with their learning during school closures.



FOUR TER

The COVID-19 pandemic has been described as among the greatest human emergencies in living memory. Dr Tedros Adhanom, directorgeneral of the World Health Organization (WHO), stated on 11 March 2020 that "Pandemic is not a word to use lightly or carelessly". The full devastation caused by the virus remains untold both in economic and human terms. Early estimates predicated that as the virus became a global pandemic most major economies will have lost at least 2.9 percent of their gross domestic product (GDP) during 2020. This forecast was already restated to a GDP loss of 4.5 percent. To put this number in perspective, global GDP was estimated at \$87.55 trillion (USD) in 2019, meaning that a 4.5 percent drop in economic growth would result in almost \$3.94 trillion (USD) in lost economic output (Szmigiera, 2021). The long term economic fallout from the pandemic is likely to cripple even the most resilient of markets, threatening national and global growth. This has strong implications for education, where governments will be forced to reprioritize their investments with declining tax income and increased health and welfare costs due to the pandemic, limiting the availability of public funding for education (OECD, 2020b).

While global economic loss has been and will be significant, the human toll of misery has been even more stark. Children have had to face direct and indirect impacts of COVID-19: death of caregivers or other close members of the family, continued fear of infection, impact of loss of family income, future uncertainty etc. COVID-19 orphans is a term now commonly used in Indian media, with many children having lost one parent or both. COVID-19 has unleashed a whole spectrum of new challenges to systems that were already struggling with inequities in opportunities and outcomes prior to the pandemic. Educational inequities prior to the start of the pandemic were evident in an official United Nations (2019) document reporting progress towards the Sustainable Development Goals. It stated, "Despite the considerable progress on education access and participation over the past years, 262 million children and youth aged 6 to 17 were still out of school in 2017, and more than half of children and adolescents are not meeting minimum proficiency standards in reading and mathematics" (UN 2019, p.10). Furthermore it

read, "Refocused efforts are needed to improve learning outcomes for the full life cycle, especially for women, girls and marginalized people in vulnerable settings" (p.10).

The report noted that rapid technological changes were taking place, but many educational systems, both infrastructures and teachers, were unable to draw on this potential. It acknowledged that school systems in many developing economies still lack basic infrastructure and facilities to provide effective learning environments. For instance, less than half of primary and lower secondary levels in Sub-Saharan Africa have access to electricity, the internet, computers and drinking water. These observations have more profound significance when one notes that when the virus started spreading rapidly across the globe, 190 countries implemented school closures and approximately 90 percent of all children were out of school, at some point (UN, 2020). Nearly all countries resorted to some type of distance learning solutions, but at least 500 million children remained excluded from these options. This was primarily due to lack of access to the appropriate means of delivery, such as the lack of access to phones, television etc., but also because many countries did not consider the needs of children with disabilities, such as the provision of captioning or sign language when broadcasting lessons on TV (UNSD, 2021). The findings from our study are a sobering reminder of how, when under pressure, systems, irrespective of how advanced, tend to neglect the needs of those who are deemed hardest to reach.

In this section we discuss some of the key reflections emerging across the country case studies. These reflections highlight dilemmas and existing tensions, but also point to emerging possibilities. Novoal and Alvin's (2020: 35) articulation that "Nothing is new, but everything has changed" is a forceful reminder of the future of schooling. Contrary to what is heard every day, neither a new world nor a new school will arise because of the pandemic. Sooner rather than later schools will return to their traditional routines. But the pandemic has revealed that, in addition to being necessary, change in the nature of schooling is urgent and possible.

Reaffirming the importance of education for children with disabilities

Across the three focal countries there was a significant articulation of the importance of education for children with disabilities. This was most profoundly expressed in the voices of parents. This is contrary to the commonly held assumptions that parents of children with disabilities are not supportive of their children's education, particularly those from low-income backgrounds, and especially those living in developing economies. Parents in this study not only recognized the significance of academic learning during school closure and were aware of the immediate impact in terms of loss of learning, for they were also very mindful of the loss of future opportunities. That children in many cases have lost nearly a year of schooling and are considered behind in their learning has led to heightened concern that they may have forgotten what they learned previously.

These findings resonate strongly with those of a survey undertaken by UNDP (2020b, p. 23) with 2,049 respondents across Malawi. The findings noted that the majority of survey respondents (81 percent) "bemoaned the interrupted learning". This report also adds credence to parental fears noted in our survey, where parents pointed out that school closures might impact future employment opportunities, especially for older children. Moreover, parents noted how access to essential therapies for their child's development (eg., physiotherapy, occupational therapy, speech and language therapy) were interrupted. Given these concerns, it is not surprising that parents were highly vocal in their demands that school closures, especially for children with disabilities, should be more thoughtfully considered.

In recent years have we seen a strong narrative develop around the belief that parents of children with disabilities do not value their child's education. More recent work, including prior to the pandemic, has shown that even those living in poor communities and not highly schooled themselves, value their child's education. The belief in education as a common good that can deliver a better guality of life is clear across different strata of society (Krishna, 2004; De et al., 2011; Johansson, 2016). Parents living in poor communities in Karnataka, India (Singal, 2016), who were not highly schooled themselves, were mindful of both the short and long-term benefits of education. They valued schooling for their child with disabilities for the same reasons as for those without disabilities. They drew strong links between schooling and the child's future employment prospects, regarding schooling as a way of counteracting stigma. In their analysis of narratives gathered from young people with disabilities and their families, Singal et al. (2011, p.1216) reflect on the perceived benefits of schooling, noting how schooling as helped "boost young people's social capital – their ability to manage social relationships beyond the household, with the state - and their ability to counter negative stereotypes and hold their heads up with much more self-confidence than would otherwise be the case." While economic benefits were not necessarily linked to additional years of schooling, as the job market relied on many other extraneous factors, such as family networks, social status, etc., the additional benefits of schooling, such as better selfconfidence, respect of others, became more prominent and important. The case for ensuring that the education of children with disabilities, even during times of crisis, cannot be better made!

Across the globe, given that persons with disabilities tend to belong to poorer households (Morgon Banks et al., 2017), the impact of economic shutdown was highly debilitating. In Malawi, families reflected on the significant economic impact of COVID-19 on their lives. These accounts were anchored in their own precarious life situations, where their sources of income generation were slowly dwindling as the economy shut down and people struggled with meeting the basic nutritional needs of their children (Singal et al., in press). Increased financial pressure on families of children with disabilities has also been noted by other studies in Africa (Able Child Africa, 2020). While parents held onto the promise of education and upward social mobility for their children, they were losing in the current moment as they struggled with food shortages and uncertainty about the pandemic.

Centrality of schooling for academic, socioemotional and physical well-being

Research studies have documented the multifold negative impact on persons with disabilities during the pandemic across countries, irrespective of their national wealth and/or commitment to disability rights and perceived progress on inclusive education. In a report published by the UK Office for Standards in Education, Children's Services and Skills (Ofsted, 2020), it was observed that persons with special education needs/disabilities were less likely to be attending their schools and colleges than their peers. Additionally, those who experienced prolonged absence from education were exposed to increased levels of abuse and neglect while at home or in care. Some children were finding it difficult to return to school, with some even leaving school permanently. In the USA, a study (Becker et al. 2020) examining remote learning practices during the pandemic in adolescents with and without attention-deficit/ hyperactivity disorder (ADHD), noted that, whilst increased financial costs were incurred by all families to support remote learning, for those with adolescents with ADHD, this had a greater negative effect, more disrupted routines and more remote learning difficulties.

A key issue that has emerged from our research is the central importance of schools in the wider socio-emotional well-being of all children, especially for children with disabilities. Being alone at home reminded parents of the loss of structure in their child's day, the loneliness arising from lack of contact with their friends, and the lack of opportunities due to closures. There was also the difficulty facing deaf children using sign language to socialize with others in their own communities.

Similar evidence has been emerging from other contexts. For example, interviews conducted with parents and guardians of individuals with an autism diagnosis in Northern Italy (Colizzi et al., 2020), noted increased difficulties in managing daily activities, especially free time and structured activities. Children were reported as presenting more intense and more frequent behaviour problems. These insights resonate closely with those emerging from the experiences of children/young people with disabilities in many low- and middle-income countries, where researchers have noted how children with disabilities had little access to online learning, lacked routine, faced increased vulnerability to exploitation, and experienced significant impact on their mental health (Sharpe et al., 2021: Zambia and Sierra Leone; Wijesinghe, 2020: Sri Lanka; Mbukwa-Ngwira et al., 2021: Malawi), as closures remained in place. The impact of school closures on the socio-emotional well-being of children with disabilities was strongly felt by parents in Malawi (Singal et al., in press), who described their children as being more bored, anxious, angry and sad. This was closely related to the loss of structure in their child's day and increased loneliness arising from lack of contact with their friends. In the context of Zambia and Sierra Leone, Sharpe et al. (2021) found that certain disabilities, such as visual and intellectual ones, were significantly associated with low mental well-being as well as having two or more disabilities. The negative socioemotional impact of school closures on specific disabilities was found by Wijesinghe (2020). She noted that the communication difficulties faced by deaf children in interaction with their parents during school closure had an impact on their psychological well-being. However, the point of departure here is the sheer magnitude of numbers, and the fact that many educational systems in southern contexts were slowly making progress in developing effective structures for responding to the educational needs of children with disabilities, and now many of these are facing even more challenges at a time of economic downturn.

As schools reopen, the mental health of all children, particularly focusing on those with disabilities, will need to be a priority. This is strongly reaffirmed in a report by the International Commission on the Futures of Education (ICFE, 2020, p.14), which notes that "The mental health and well-being of children and youth have been greatly endangered, and in ways that could have lasting repercussions." Prior to the pandemic, quality education, as measured by higher levels of numeracy and literacy skills, dominated mainstream education debates. However, the uncertainties and insecurities arising from the pandemic have catapulted to the forefront a need to strengthen resilience and rebuild trust in institutions among children and their families. This will entail not simply providing catch up classes, but also, finding ways of helping children settle back into routines and develop new ways of learning, including exploring the role of educational technology (Lynch et al., 2021). Parents in our survey were mindful of the impact that being at home alone was having on the socio-emotional well-being of their child, and this will need to be an important focus as we move into the future.

These challenges extend far beyond education alone, however. With schools closed, many children have also lost access to vital professional services such as physio and speech therapists, as well as the wider socio-emotional support and safety that schools provide. Parents in our study reported a discernible impact on well-being, describing their children as sadder or more anxious than usual. They also talked about the lack of access to essential therapies, such as speech therapy and physiotherapy exercises for their children. In Qatar, parents particularly emphasized the loss of opportunities for their child to participate in physical play and exercises.

In Ethiopia and Nepal, given the low-income status of the many households, a concern emerged around child nutrition. Parents in Ethiopia talked about their struggles to feed their children, also noted by parents in Malawi (Singal et al., in press). For millions of children around the world, school is not only a place to learn. As the pandemic has shown, schools can be a safe place, where children receive free meals, and health and nutrition services, such as vaccinations, deworming and iron supplementation, as well as access other medicals services, such as physiotherapy and speech therapy. An estimated 379 million children missed out on school meals because of school closures during the pandemic (UNICEF 2021), an important lever for boosting school enrolment, attendance, and learning outcomes (World Food Program, 2019). Lastly, and importantly for Nepal and Ethiopia, concerns around the safety and well-being of children with disabilities, particularly girls, was noted. The heightened danger of vulnerability to sexual exploitation, teen pregnancy and early marriage were also concerns expressed by parents of girls with disabilities in Malawi (Singal et al., in press).

The absence of schooling reaffirmed the need for its physicality in terms of it being a learning space; a space safe; a space to access rehabilitation services and, somewhere to meet nutritional needs. Schooling provides routine and access to friends to combat loneliness, whilst at the same time nurturing the body and the mind. In the rush to digital and distance learning during the pandemic, we were reminded of how important our physicality is; children need to move, play and actively learn. While the importance of schooling in supporting formal learning, nurturing socio-emotional learning and the importance of routine has been reaffirming, what is also evident from the experience of education during COVID-19 that the reality-- the challenges and possibilities-- of schooling have been reshaped with great abruptness.

Disrupted realities of schooling

Unexpected and prolonged school closures have provided evidence that education cannot happen within the four walls of the school alone. It needs to be connected with real life and also with families. This was most profoundly articulated by parents of deaf children, who talked about their total sense of resignation when attempting to support their child. They did not understand sign language, parents' lack of sign language posed considerable challenges in their ability to communicate with their deaf child. This was most significantly seen in the case of special schools. This observation is not very different from that made by Wijesinghe (2020) in her research with teachers in deaf schools in Sri Lanka during COVID-19 school closures, where teachers reported that parents did not know sign language and hence, were unable to understand some of the basic needs of their child. Hence, there is a need to ensure that parents have the opportunities to learn sign language, and more broadly, that schools support parents in communicating effectively with their child.

Parents reiterated the need to see schooling as being beyond the four walls and asked for government efforts to include children with disabilities. Frustrations were evident, especially in Nepal, when it was noted by some parents that government funded radio and TV programmes made no attempts to engage with the needs of children with disabilities. Even though more sophisticated technological support, such as computers or other assistive devices (eg., Braille), or access to sign language interpreters did not feature very strongly in parental accounts, specifically in Ethiopia and Nepal, this could be attributed to the lack of availability or knowledge of how to use such devices in these income strapped households.

The fluidity of school boundaries emerged as parents found themselves, during closures, in a more central position in relation to their child's schooling. Consequentially, parents reflected on how they need to be more involved in their child's schooling and strongly expressed the desire for training to support their child when at home. When asked what they would require to be able do so, factors such as, specialist support not only for their child, but also, to help them develop the skills to be able to engage with their learning emerged. Parental responses also revealed high levels of guilt and despair at not being able to offer support towards learning for their child with disabilities, with loss of learning being an overwhelming concern. In Qatar parents could afford to employ tutors and/or take their child to special centers to get the required professional support. These circumstances meant that parents had resources and professional options available to them. In Nepal, by contrast, when some parents had the financial resources, they were unable to employ any tutors or seek professional help to support the learning of their child with disabilities, given the paucity of such professionals in the system.

As schools reopen, more inclusive strategies for fostering parents as partners in their child's education are needed. This is a real challenge for residential special schools which must find ways of strengthening better connections between school and home, not only to benefit short-term goals, but also to strengthen greater inclusivity and participation within the home and the extended community for persons with disabilities.

Across our sample parents were confident that their child with disabilities would return to school (in Ethiopia many children had already done so), and provided suggestions for what could be done differently in the case of future closures. Many of these were focused on the barriers faced during school closure, such as basic access to learning materials and availability of specialist support. These could prevent children from falling behind, and support their motivation to return to school. However, reflections on creating better distance learning opportunities, both in terms of content and follow-up, were supplemented by creative ideas such as drawing on teacher capacity in the village, mobile camps in village areas where there is limited electricity and internet, collaborative efforts between different stakeholders and the role of non-governmental organizations. Underpinning this narrative was a move away from schooling as a static enclosed institution, towards the possibility of creating various spaces where learning delivery could include others.

Evident in our findings was the lack of NGO engagement, especially in Ethiopia and Nepal, which had lately (pre-COVID-19) seen a significant rise in the number of such organisations working on disability and education issues. As we chart a course for the future, governments need proactively to build partnerships with parents or caregivers and NGOs to support continuity of learning for disadvantaged students. Partnership with parents and other caregivers is an essential precondition for successful remote learning which can be particularly challenging for poor families and parents of children with disabilities. Governments need to explore ways in which media, such as television and radio, can be used to promote an effective distance learning model and ways in which parents and caregivers can also support learners, with disabilities.

While all the countries in our case studies had instituted online instruction of some kind, there was significant variation in availability for students in Ethiopia and Nepal. The continued inequitable access to devices across and within countries has been pointed out by many (OECD, 2020c; UNICEF, 2020c; Mcclain-Nhlapo, 2021). For example, according to Li and Lalani (2020), whilst 95 percent of students in Switzerland, Norway, and Austria have a computer to use for their schoolwork, only 34 percent in Indonesia have the same access. In the US, there is a significant gap between those from privileged and disadvantaged backgrounds: whilst virtually all 15-year-olds from a privileged background said they had a computer to work on, nearly 25 percent of those from disadvantaged backgrounds reported they did not. In Sub-Saharan Africa, 89 percent of learners do not have a household computer (Unesco, 2020). The World Bank (2021), discussing the findings, note how even in households where there was access to some device, fewer parents (less than 20 percent) said that these assets were accessible or useful for children with disabilities.

While lessons were being broadcasted on TV in Ethiopia, there was no instruction delivered in sign language. In Nepal, access to the internet is very limited and rudimentary, more so outside urban areas like Kathmandu (World Bank data, 2021), as also shown in our findings. While daily classes for secondary school students were organized on national television channels and YouTube channels like NCED Virtual, the viewership was quite limited. The government's e-learning site (Leaning Portal) for Grades 1 through10, was not widely used either, as it needed appropriate parental orientation and access to the internet. In the majority of these cases, especially for primary school children, digital literacy among parents would be needed to help the child navigate the learning platforms. However, in a country with a literacy rate below 70 percent, this was undoubtedly a challenge. Thus, not surprisingly, analysis undertaken by the Ed Tech Hub (McAleavy et al., 2021) concluded that many low-income countries paid relatively little attention to the needs of students with special educational needs and disabilities, and thus an already marginalized group was being further disadvantaged by the school closure crisis.

Results from a survey undertaken by the Inclusive Education Initiative team at the World Bank (2021) elicited that, of the 474 teachers who responded, a significant proportion (41 percent) felt that they did not have the support needed to continue helping students with disabilities during school closures, while only 24 percent reported that they had managed to continue to do so. Some of the key challenges noted by all respondents, in rank order, were lack of personal assistance for the child with disabilities (58 percent); lack of accessible materials (49 percent), cost (48 percent); limited availability of internet/data (41 percent); lack of assistive devices (34 percent); lack of electricity (16 percent) and unfamiliarity with the use of technology (15 percent). In this survey, teacher respondents, when reflecting on the types of additional support they needed to continue education for children with disabilities, identified the following: availability of electronic devices that could help them engage with their students (17 percent); teacher aide/support for the child with disabilities (16 percent); and parental/caregiver support (15 percent). Notably, 12.5 percent raised the lack of availability of internet connection at their students' home as an issue, in contrast to only 3.5 percent reporting this lack in their home as being a problem.

There were countries where technology did play a significant role, for example, in Costa Rica, where teachers adapted the online materials being delivered for children without disabilities, for the specific learning needs for those with disabilities. In our study, the findings from Qatar highlighted the potential of technology. Availability and accessibility to technology allowed schools to make the transition smoothly to online learning for children with disabilities, irrespective of school type. However, the emphasis here was on continuity rather than the quality of learning, which came out strongly in both parent and teacher accounts, with little support being provided to teachers to organize better online environments or assistance being given to parents on using programs. Moreover, there was little monitoring of the quality of provision and

feedback loops were missing.

An additional point worth emphasising is that, whilst in Qatar there was widespread access to devices among the families we spoke with and hence, the use of hi-tech was prioritized, the families in Ethiopia and Nepal did not focus on the availability of computers or additional devices in their households. Instead, they called for simple low-tech solutions, such as having delivery in sign language and accessible materials, such as Braille books at home. That is, the lack of devices was not their primary concern, but rather the basic lack of books, accessible materials and any support from teachers in helping their children with disabilities to engage in learning.

There is a substantial body of relevant research that emphasises the need for skilful teacher mediation, if students are to benefit from new technology, and this is even more crucial in the case of children with disabilities. Teachers require training to be able to realise the benefits of any EdTech tool, particularly in relation to providing accessibility to and integrating assistive technology to support the learning of children with disabilities. Technology has made the role of teachers more central, rather than replacing them. Moving forward, greater thought is needed on how the role of teachers will change.

Empowering teachers as teachers for all

The pandemic has dramatized the crucial importance of teacher professional development and support. Interviews with teachers in our sample clearly highlight how they, in all contexts, were left more or less completely on their own. In Ethiopia they received no guidelines from the local offices and instead, the only messages that came through to them were aimed at stopping the virus from spreading. While this was, indeed, a powerful message to communicate, teachers were left with no clarity on their responsibilities for ensuring continuity of learning for children, and more so for the case of children with disabilities.

Interestingly, our research raises some complex interplay around the opportunities available to children with disabilities based on the type of school. In Nepal it was noted that teachers working in special schools were more likely to engage with children with disabilities during school closures when compared to those who were working in mainstream schools with resource classes. While no clear explanation is evident here, it is possible that given children with disabilities were only a small group in mainstream classrooms, their needs were neglected. Another possible explanation is that special schools tend to be private and hence, more likely to interact with children, while the mainstream schools in our sample were all public schools, which in general, were reported as having very few learning activities during the COVID-19 school closures.

This was not the case in Ethiopia, however, where children attending special schools were least likely to be contacted by their teachers, and interestingly, the most disadvantaged learners were attending these special schools. Teachers from these special schools also identified a greater number of barriers to learning for these children, which could reflect the significantly greater needs of this student group. They also expressed greater concerns around student welfare. Teachers' financial limitations, such as their inability to pay for telephone calls to check up on children, were raised a key barrier to supporting the learning of children with disabilities. In comparison, teachers working in Inclusive Education Resource Centers were more likely to engage with their students with disabilities and their families. This was corroborated by the fact that the few parents who were contacted in Ethiopia all had children who were studying in IERCs prior to the closures. Teachers working in IERCs were also receiving more direct support from the Woreda Education Office, and from NGOs. Even practical concerns like the supply of electricity, were less of a concern for these schools, despite being located in rural areas, where shortages of electricity are more pronounced.

This raises two important issues: the need to make teachers capable of pedagogical adaptations, where they are willing to move beyond traditional lecturing in-person models, to remote learning environments. No matter what the type of channel used (radio, TV, mobile, online platforms, etc.), teachers need to adapt their practices and be creative to keep students. It is critical to empower teachers to work independently and to invest in training them to exploit the full potential of remote and blended learning. The notion of teachers as facilitators, which is often used as a cliché, needs to be explored more fully, especially in terms of supporting parents and other community members in providing education for children with disabilities. Teachers' standard pedagogical repertoire was challenged as learning shifted online. They needed to adopt a diversity of new methods and modes in study and work. As schools reopen, teachers will be required to readjust curriculum and learning objectives to meet the additional needs of all learners, particularly those with disabilities. For some learners this might include remedial courses, catch-up classes and/or accelerated curriculum delivery. Most importantly, teachers will need support to strengthen their practices to account for the new challenges. In this case, effective teacher professional development and peer to peer support will play a crucial role.

Secondly, and more fundamentally, our findings highlight how most teachers did not necessarily see formal learning opportunities as being fundamental to the lives of children with disabilities during school closures. Whilst they regarded schooling as important for future success and noted the significant loss of learning of skills during closures, they did not offer ways that highlighted their personal agency as being pathways for change. As we move forward, there needs to be a greater acknowledgment of the fundamental right of children with disabilities to quality education, and the pivotal role that teachers play in this. Finally, while a lot has been said about the changed role of schools, with greater focus on positive socio-emotional outcomes for children, it must also be acknowledged that the pandemic has changed the role of teachers. In many cases, they were not prepared for this; therefore, professional development must also include socio-emotional monitoring and psychosocial support to ensure teacher wellbeing and avoiding burnout. The abrupt closure of schools has raised significant challenges around teacher identity as well as changes in their roles and responsibilities. Teachers, like others, are also likely to be dealing with personal losses and need support. Furthermore, prolonged closure is also likely to impact their motivation, while facing risks of loss of income. For example, many low fee private schools laid off their teachers and only paid a very small part of their salaries (All Africa, 2020). In Ethiopia, teachers' lack of funds for phone service was a barrier to contact with parents. These explicit risks to the teaching force have been noted in other contexts, such as in Sierra Leone and Liberia after the Ebola crisis. Based on interviews with teachers in England, Kim, Leary & Asbury (2021) concluded that the "importance of supporting teachers to feel autonomous, competent and connected with colleagues, pupils and their families" cannot be undermined, as it supports their wellbeing and their commitment to the profession now and in the future.



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CONCLUSION _

The findings presented in this report reveal the complexities and range of experiences of children with disabilities and their families during school closures across three different country contexts. The findings provide evidence of the profound exclusion and marginalization faced by children with disabilities and significant concerns about loss and a decline in socioemotional well-being. They also provide us with the opportunity to problematize homogenized narratives around disability.

As a starting point, contrary to popular discourse, insights from this report remind us that schooling is a centrally valued goal for parents of children with disabilities, across income groups. We also notice some subtle shifts in prevailing hegemonic gender discourses. In Nepal, for example, parents attached value to both academic learning and household chores as being important for girls, thus focusing on the traditional gendered roles attributed to girls, whilst not undermining the value of their schooling. On the other hand, our findings did not show any differences in relation to boys and girls experiences in Qatar.

Our findings also highlight the significance of being sensitive to differences within disability groups, especially in the case of deaf children. The communication challenges of family members and their deaf child highlighted the vast schism between school and home in many contexts. Financial differences among families, and availability of services in the wider system, shaped the very different experiences of children with disabilities and their families living in Ethiopia, Nepal and Qatar, in what they could access and in the struggles they faced.

Insights from this report give more credence to the long-held argument that schools, on their own, cannot be sites for addressing deeply entrenched inequities in society and that rather, this needs to be part of a broader project. The report raises important questions into how systemic reform and rebuilding efforts need to consider a holistic view of people's lives and contextualize action accordingly. Social safety nets need to be put in place to provide people with disabilities and their families support during times of upheaval, such as a pandemic. What brings these narratives together is a story of resilience and hope. In their stories of survival, parents spoke of hope, their staunch belief that their child would return to school, the promise of a better life. Discussions with parents during the surveys captured the small, cherished moments of positivity that emerged because of the devastating pandemic. A father noted how being at home had helped him understand his daughter with disabilities better; and a mother reported that she finally was getting to know her child and was teaching her things. As the philosopher Hannah Arendt wrote, "Education is the point at which we decide whether we love the world enough to assume responsibility for it...". An inclusive education system requires that we assume responsibility of all, including those with disabilities.

Recommendations for policy level stakeholders

Children with disabilities need to be an integral part of the educational reform agenda

Efforts to include children with disabilities in education systems cannot be merely bolt on efforts. During school closures in many countries, while online lessons were being provided, simple strategies to make them inclusive of learner needs were left aside, such as sign language interpretation, lesson pacing, etc. Only when children with disabilities are recognized as an inevitable and central component of the learner population will these efforts towards inclusivity become more institutionalized.

More significantly, as the economy ebbs in many countries, and budgetary cuts impact education systems, it is important that resources continue to be invested in equitable and inclusive ways. The significant gains made by efforts towards bringing children with disabilities into education systems cannot be lost, but must be revitalized. Lessons from the pandemic have clearly shown us that the most marginalized are indeed the ones most likely to be left behind at times of crises.

Recognize schools as important spaces for nurturing cognitive development and fostering socio-emotional well being

The pandemic and extended school closures have made explicit what are often seen as secondary benefits of schooling, such as friendships and children's emotional well-being. School, as spaces, must be recognized for the significant impact they have on the social and emotional well-being of children. These benefits must not be merely incidental; further efforts need to be directed toward teacher training so that head teachers and auxiliary staff more actively promote positive well-being through everyday classroom and school practices.

Additionally, for children with disabilities, schools also offer the vital link with essential support services, such as access to speech and language therapy, physiotherapy, et al. These services are essential in nurturing a holistic development of the child with disabilities, and hence must be prioritized in school and in health planning.

Teachers need to be trained and supported to address the diversity of learner needs

The research reflects a need to create a mechanism for delivering effective, continuous professional development to respond to rapidly changing demands placed on the teaching profession. In many instances, during forced closures, teachers felt unable to assist learners with disabilities, given their lack of know-how on how best to support them.

One important way in which teachers can be supported is to develop teacher collaboration and professional communities. These can be vital in fostering teacher autonomy and supporting positive action through exchange of idea and practices.

It is crucial to ensure that school leaders and teachers get the financial, logistical and moral support they need to succeed. The research revealed clear instances of teachers being left on their own without guidance. Clear direction on what and how to support distance learning needs to be provided by local or regional authorities. In parallel, teachers need the financial to support their reliable access to the internet, among other needs.

Harnessing the potential of technology: low and high tech

Experiences during the pandemic have clearly highlighted the significant digital divide across and within countries. They have also exposed the absence of equitable edtech practices in many low- and middle-income countries.

Teacher development programmes need to incorporate high-quality competency skill training to improve digital literacy, and skills to effectively engage with remote delivery modes. Governments need to subsidize and invest in edtech. This could be through increased availability of low-tech gadgets for students, but also, importantly, in building the appropriate infrastructure to support the use of edtech in schools.

Building stronger partnerships between home and school

Looking forward, we need to re-frame parents as partners in the education of their child with disabilities. The gap between school and home became even more evident and significantly challenging during the pandemic, as noted by the fact that many parents of deaf children faced challenges in communicating with their child, especially those who were attending residential special schools and found themselves back at home for extended periods. Schools need to find simple strategies to involve parents and actively support them in their child's learning. This needs to be done keeping in mind the many demands already placed on parents, especially those in lowincome households.

There is a need to focus on finding inclusive strategies of fostering partnerships between

home and school. This is a greater challenge for residential special schools, as they must find ways of strengthening better connections between school and home to benefit shortterm goals, and strengthen inclusivity and participation within the home and the extended community for persons with disabilities.

Recommendations for researchers

Prioritize disaggregation of data for learners with disabilities

There needs to be a stronger acknowledgement of the need for improved data on children with disabilities, both in and out of school. Evidence needs to provide more nuanced insights of how the pandemic is shaping the life opportunities of children with disabilities, whilst acknowledging the intersecting variables of disability, gender, age, location —urban, peri-urban, and rural, etc. We are frequently reminded that disability, in its many contexts, needs to be viewed through a wider lens that includes and acknowledges the broader impacts on families. We call for a new focus on generating robust evidence, strengthening national research ecosystems, and using evidence to support recovery efforts.

Access and quality are both centrally important for accountability

Research needs to be more aligned with global commitments set out in the UN Sustainable Development Goal 4 to "Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all" –and in the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). Research focusing only on issues of access is limiting, and does not consider the need for inclusive and equitable, quality learning experiences for learners with disabilities. There is a need for a multi-pronged focus of 'entry,' engagement' and 'empowerment'. There are growing concerns ahead around children's loss of learning and the kind of interventions needed to help support their reintegration into education systems. These concerns around quality of provision and re-engagement efforts are especially important for children with disabilities. It will be up to researchers to ensure that this group of learners do not become invisible.

Understand not just existing gaps but what can be done to mitigate current losses

Research on innovative solutions to provide and promote access to quality education are urgently needed to mitigate the impact of COVID-19. Beyond documenting losses, research needs to identify innovative and sustainable long-term solutions to pressing challenges. For example, it is important for researchers to explore how digital technologies can be used to improve access to high-quality education. Critical examination of mental health interventions in schools could provide important reflection on how socio-emotional well-being of children can be supported in these settings.

Capture the lived experiences of children with disabilities and their families

Alongside quantitative studies, research needs to include voices of learners with disabilities and their families to develop a deeper understanding of their lived realities. This is crucial to capturing the impact of short-term interventions and the long-term impact of the pandemic on individual lives. Researchers also need to consider the experiences of children and young people with disabilities in a range of educational institutions, and regarding specific disabilities, to understand how these may shape educational and other future opportunities. This requires undertaking in-depth qualitative work, focussing on narratives and rich explorations of perspectives, and lived experiences.

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ABOUT THE INSTITUTIONS



About WISE

The World Innovation Summit for Education was established by Qatar Foundation in 2009 under the leadership of its Chairperson, Her Highness Sheikha Moza bint Nasser. WISE is an international, multi-sectoral platform for creative, evidence-based thinking, debate, and purposeful action toward building the future of education. Through the biennial summit, collaborative research and a range of on-going programs, WISE is a global reference in new approaches to education.

The WISE Research series, produced in collaboration with experts from around the world, addresses key education issues that are globally relevant and reflect the priorities of the Qatar National Research Strategy. Presenting the latest knowledge, these comprehensive reports examine a range of education challenges faced in diverse contexts around the globe, offering action-oriented recommendations and policy guidance for all education stakeholders. Past WISE Research publications have addressed a wide range of issues including access, quality, financing, teacher training and motivation, school systems leadership, education in conflict areas, entrepreneurship, early-childhood education, twenty first century skills, design thinking, and apprenticeship, among others.

UNIVERSITY OF CAMBRIDGE

About the University of Cambridge

The University of Cambridge is one of the world's top ten leading universities, with a rich history of radical thinking dating back to 1209. Its mission is to contribute to society through the pursuit of education, learning and research at the highest international levels of excellence.

The University comprises 31 autonomous Colleges and 150 departments, faculties and institutions. Its 24,450 student body includes more than 9,000 international students from 147 countries. In 2020, 70.6% of its new undergraduate students were from state schools and 21.6% from economically disadvantaged areas.

Cambridge research spans almost every discipline, from science, technology, engineering and medicine through to the arts, humanities and social sciences, with multi-disciplinary teams working to address major global challenges. Its researchers provide academic leadership, develop strategic partnerships and collaborate with colleagues worldwide.

The University sits at the heart of the 'Cambridge cluster', in which more than 5,300 knowledgeintensive firms employ more than 67,000 people and generate £18 billion in turnover. Cambridge has the highest number of patent applications per 100,000 residents in the UK.



About CaNDER

Cambridge Network for Disability and Education Research (CaNDER) is a research network committed to generating rigorous scholarship in the field of disability and education. It has its genesis in the shared interests and common goals of researchers at the Faculty of Education, University of Cambridge. The membership has now grown to include scholars and practioners internationally.

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DISCLAIMER

Disclaimer

The views and opinions in this publication are solely those of the authors. Errors and omissions remain the responsibility of the authors.

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