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Executive summary

The global commitment to inclusive education for children with disabilities has gained significant momentum in recent years. In Cambodia, this has been reinforced by the endorsement of international conventions, such as the Convention on the Rights of Persons with Disabilities (CRPD) as well as the implementation of disability-inclusive policies and education strategies. Despite these efforts, challenges persist, including children facing barriers to accessing education (exacerbated by poverty), attitudinal biases and limited disability awareness. This has led to a gap between what exists in policies and legislation, and what is being implemented for children at the school and classroom levels.

This paper offers insights into Cambodia's education system from a disability-inclusive lens, exploring demand- and supply-side enablers or barriers to inclusion of children with disabilities, in addition to the enabling environment encompassing policies, legislation and data systems. The authors draw on the Leaning is For Everyone (LiFE) research implemented in Cambodia through a partnership between UNICEF and the Ministry of Education, Youth and Sport. The research methodology was derived from the third volume of the *Education* Sector Analysis: Methodological guidelines (UNICEF, et al., 2021). A mixed-methods approach was used, including policy and landscape analysis, secondary data analysis, in-depth primary qualitative research with children with and without disabilities and their parents, and quantitative surveys with teachers, head teachers and district officials. A summary of the key findings and recommendations are outlined below, structured around the four themes of:

- Enabling environment for inclusive education
- 2. Supply-side issues to accessing quality education
- 3. Quality of learning
- 4. Demand for inclusive education

Enabling environment for inclusive education

Key findings:

- 1. Cambodia's efforts in fostering inclusive education for children with disabilities through various policies demonstrates evolving attitudes around disability. Existing policies in Cambodia already outline various educational provisions for children with disabilities, but not all align with inclusion principles as some still refer to the use and upkeep of segregated schools. Further alignment with the CRPD and the human rights-based approach of disability is required.
- 2. While some data on children with disabilities exist in education management information systems (EMIS) and national surveys, there were issues with the quality, the classification of disability within them and the comprehensiveness of the data.
- 3. Data from district officials suggest stronger mechanisms are required for enhanced accountability and enforcement of policies.

Recommendations:

To begin moving towards a more inclusive education system, continually understanding the needs of the system to serve children with disabilities is a key step, and a quick way for Cambodia's education system to achieve this would be to:

Enhance the availability and quality of data on children with disabilities and their learning. Data collected, particularly in the EMIS, should include information on individual children's functional abilities and learning needs, whether they have multiple disabilities and teacher training in disability-inclusive education to understand how to better support schools in delivering disability-inclusive education for all children. Comprehensive quality assurance measures are also needed at all levels to ensure accurate data collection.

In the longer term, to achieve an enabling environment for the inclusion of children with disabilities in learning, it is essential to:

- Further align policies and legislation with the social or human rights model of disability as well as with the principles of inclusion. This is essential as the medical model, which is still partly followed in Cambodia, overlooks the complex interaction between physical conditions and social factors, impacting how disability is perceived and data is collected. Clear policy and legislative support for inclusion is also important for fostering an enabling environment for children with disabilities, alongside standardized definitions of disability and inclusive education for the Cambodian context.
- Develop strategies to monitor the implementation of policies to ensure alignment between policy and practice, and identify gaps in policy implementation. Establishing a dedicated framework with indicators can effectively track policy implementation as well as improve access and learning for children with disabilities in mainstream education. This can be through using existing data collected by district officers or integrating new indicators into the EMIS.

Supply-side issues to accessing quality education

Key findings:

1. Secondary data suggest children with disabilities in Cambodia were three times less likely to have attended school compared to those without disabilities. Disability status had the most prominent impact on school attendance, outweighing factors such as wealth, gender and location. Qualitative insights suggest that parents of children with disabilities did not find that mainstream schools were well-equipped to meet their children's needs and the number of special schools was limited, leaving few options for school enrolment.

- 2. Even in cases where children with disabilities are enrolled in schools, qualitative data suggest their attendance may not be fulltime due to overcrowded classrooms, long-distance commutes and issues with transportation to schools with capacity to enrol children with disabilities.
- 3. Only 1 in 10 teachers reported receiving either pre-service or inservice training in inclusive education, with many reporting feeling unprepared to address the needs of children with disabilities.
- 4. Most teachers and head teachers reported being in favour of inclusive education, yet also reported that children with disabilities should learn in separate classrooms. This contradiction may either reflect a lack of understanding in the definition of inclusion, or teachers may also be referring to the current state of mainstream schools and classrooms, which do not yet have the capacity to enrol children with disabilities.
- 5. There was an absence of standardized disability screening mechanisms, with the responsibility of screening lying primarily with teachers and head teachers. Clear guidelines on the screening process, particularly for children with intellectual disabilities, were not offered to teachers or administrators for this process.

Recommendations:

In the short term, teachers across special and mainstream schools, starting in provinces with the highest proportion of children with disabilities enrolled in schools, must be offered:

 Comprehensive and ongoing professional development opportunities for teachers in all schools, focusing on effective strategies for teaching children with diverse learning needs and ways to achieve inclusion within mainstream classrooms. Training programmes should focus on providing teachers with tailored teaching and learning techniques and methodologies for children with various types of functional abilities, and how to implement them in mainstream classrooms. Training on building cohesive classroom environments is also integral, empowering teachers to foster positive attitudes, address discrimination and promote inclusive learning for all children. This should also include access to adequate resources and practical application opportunities.

In the medium term, to ensure children with disabilities are identified within the system and receive the appropriate support needed, there will be a need to:

• Establish standardized screening protocols and tools for identifying children with various types of disabilities and their learning needs. Enhancing screening protocols requires clear delineation of responsibilities and specialized training for accurate identification, particularly for children with intellectual disabilities. Additionally, establishing clear methodologies for communication and data-sharing among relevant stakeholders will enable a structured process for identifying and supporting children with disabilities, followed by conducting special needs assessments to address learning needs effectively.

Quality of learning

Key findings:

- 1. While limited, existing data on the learning of children with disabilities indicate that entering the school system was a greater barrier than learning achievement once in school. However, this might be linked to the child's learning needs and disability type, with qualitative data suggesting that only children with less severe degrees of disabilities are enrolled in schools.
- 2. Disability was associated with a higher likelihood of prolonged school absenteeism, leading to gaps in understanding that impair children's ability to progress if not addressed, which affects the continuity of learning for children with disabilities.

- 3. Disability was associated with higher illiteracy rates in Cambodia. However, school attendance reduced rates of illiteracy among children with disabilities as well as reduced the gap in literacy rates between children with and without disabilities.
- 4. Benefits of inclusive education and inclusive schools extended to all children in Cambodia. Learning assessment data suggest children without disabilities learning in schools rated as more child-friendly (an index that measures inclusiveness of schools for children with physical disabilities) scored higher on reading, writing and mathematics numeracy than peers studying in less childfriendly schools.

Recommendations:

An immediate priority to tackle frequently mentioned challenges among teachers and head teachers, and to move towards inclusive schools across Cambodia, would be to:

• Develop accessible and adapted learning curricula and assessments to track the learning of children with disabilities. The development of accessible curricula, mainstreamed across all schools in Cambodia, is paramount to working towards inclusive school environments. Implementing systematic and adapted assessment methods is also crucial for identifying gaps in inclusive education delivery. Further efforts are required to develop nationwide assessments for children with and without disabilities across all education levels to address these challenges comprehensively. In the medium and longer term, as access to mainstream schools increases, it is essential to ensure that systems are in place to:

• Support the learning continuity of children with disabilities following long periods of absenteeism and minimize their risk of missing out on or dropping out of school. Implementing remedial education strategies can help children catch up on learning during prolonged periods of school absence to ensure their learning continuity. Children can also be provided with accessible and/or digital solutions to continue their learning in prolonged periods of missing school. Identifying the primary risk factors that determine dropout is essential to mitigate this risk.

Demand for inclusive education

Key findings:

- Negative beliefs about disability persist among teachers and parents of children without disabilities. While parents generally support the inclusion of children with physical or mobility impairments alongside their own children, less favourable attitudes are observed towards the inclusion of children with intellectual disabilities.
- Children with disabilities reported cases of discrimination and ostracism in mainstream schools, which has led to a lack of willingness to attend these schools.
- 3. While education is free in Cambodia, parents of children with disabilities reported needing additional financial and material support, including learning aids and transportation, to support their children's school attendance.

Recommendations:

In the shorter term, while access to inclusive mainstream schools is being expanded, it is essential to:

 Strengthen financial and material support for families of children with disabilities. Ensuring access to education for children with disabilities in Cambodia involves addressing the indirect costs of school enrolment. Additional funds should be allocated to ensure children with disabilities have additional financial support for learning equipment and assistive devices, through scholarship programmes or cash transfer schemes.

While working towards longer-term transformation of the education system into an inclusive one, efforts must be made to:

• Promote public awareness of the importance of inclusive education as a practice that is beneficial to children with and without disabilities. Tailor interventions to the social and cultural context, targeting individuals, families, communities and educational institutions at all levels of Cambodian society to address negative attitudes and beliefs towards disability and promote inclusive education. One effective strategy is through contact-based activities, where direct and extended interactions between individuals of diverse social backgrounds and statuses can foster positive attitudes both within and towards these groups.



Background

Inclusive education is a global commitment aimed at enhancing all individuals' quality of life, fostering equality and celebrating diversity. It is particularly crucial for vulnerable children, including those with disabilities (UNICEF, n.d; UNESCO, 2020). Inclusion is a comprehensive process of systemic reform entailing modifications in content, teaching methods, approaches, structures and strategies in education (United Nations, Convention on the Rights of Persons with Disabilities, 2016). There has been a worldwide shift towards inclusive education in recent decades, driven by the ratification of the Convention on the Rights of Persons with Disabilities (CRPD), the commitment to achieving Sustainable Development Goal 4 (quality education) and various international conventions (UNESCO, 2020). This shift reflects an effort to eliminate barriers to participation in education and fostering an inclusive learning environment for all children. UNICEF has also reaffirmed its commitment to supporting inclusive education

CRPD RATIFIED

As of April 2024,

195

countries signed the CRPD and

191 ratified it.

through the Disability Inclusion Policy and Strategy 2022–2030. The strategy serves as a comprehensive road map for cross-sectoral coordination for providing disability-inclusive support and services for children with disabilities worldwide (UNICEF, 2022).

As of April 2024, 195 countries signed the CRPD and 191 ratified it (Office of the United Nations High Commissioner for Human Rights, n.d.). Many countries are promoting the inclusion of children with disabilities in mainstream education in laws and policies. Promising practices have also been observed globally, some of which include expanded teacher training programmes for inclusive education (Sightsavers, et al., 2020; UNICEF, 2023b), removal of physical barriers hindering children's access to schools (UNESCO, 2020) and enhancements in the identification of specific disabilities and impairments (Khochen-Bagshaw, 2020). Challenges persist as the existence of laws and policies is insufficient, and their implementation is often unsystematic or not comprehensive. This is exacerbated by weak monitoring and accountability systems, a lack of disabilitydisaggregated data, challenges in identifying individuals with disabilities and negative perceptions around the education of children with disabilities (UNESCO, 2020; Olusanya, et al., 2022; World Bank Group, 2022).

Southeast Asia follows some global trends in inclusive education by having equity legislation in place and enacting laws and policies promoting principles of inclusion (Singh, 2022). The region faces various challenges, such as high prevalence of special or segregated schools, rigid curricula, cross-sectoral and subnational coordination issues, use of the medical model of disability (see Box 1), insufficient teacher training in child-centred and inclusive pedagogies, and a scarcity of assistive devices and data. Challenges with data include the absence of reliable education statistics for children with disabilities and the lack of comparable data among countries in the region (Singh, 2022; UNICEF, 2023a).

Models of disability

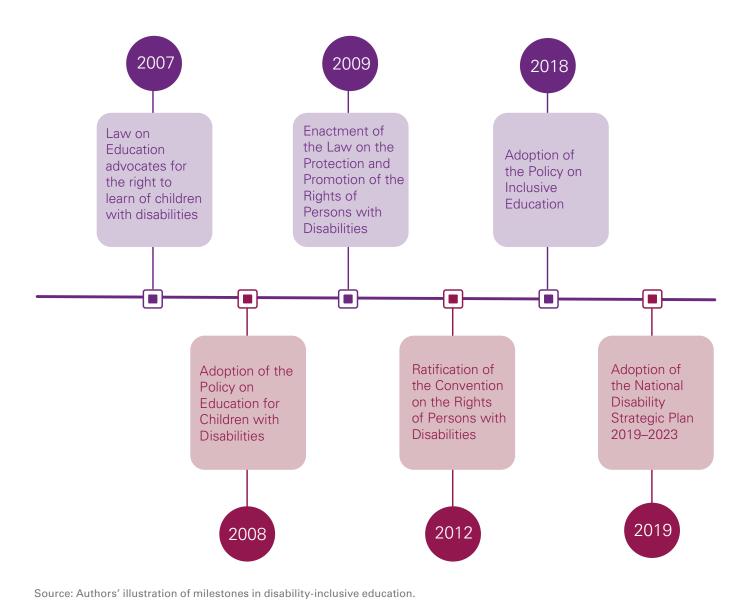
The understanding of disability has transformed throughout history, leading to the development of various explanatory models. Each of these models offers a distinctive perspective on disability (PiET Lab, York University, 2020; Olkin, 2022; United Nations High Commissioner for Refugees, n.d). The primary models include:

- **Charity model:** Under this model, persons with disabilities are often regarded as necessitating 'care' and presumed to be incapable of making their own decisions.
- **Medical model:** Disability is conceived as a medical condition. trauma or health condition that must be treated individually. Under this model, persons with disabilities need to be 'cured' or treated through medical interventions to actively participate in the community.
- Rights-based model: This model recognizes persons with disabilities as having the right to equal opportunities and participation in society. It recognizes the barriers in society as discriminatory and provides mechanisms for persons with disabilities to complain about these barriers.
- Social model: Disability results from a mismatch between the person with disability and the environment. Its focus is on removing barriers so that persons with disabilities have the same opportunities to participate.

In Cambodia, substantial progress on inclusive education has been achieved through the establishment of inclusive laws, regulations and policies (see Figure 1). Cambodia has endorsed international conventions such as the CRPD and the Education 2030 Incheon Declaration, in addition to implementing its own regulations (Singh, 2022). Notably, the 2008 Policy on Education for Children with Disabilities played a pivotal role in advancing the screening of children with disabilities by providing training to head teachers and village health workers on using simple identification checklists or a screening toolkit. In 2016, the Ministry of Education, Youth and Sport (MoEYS) established the Special Education Department (SED) and the National

Institute for Special Education (NISE) in 2017. These institutions oversee the provision of inclusive education, teacher training and the operation of special schools for children with disabilities (Long-term Assistance and Services for Research Partners for University-led Solutions Engine [LASER PULSE], 2021). Currently, the MoEYS's Education Strategic Plan for 2019–2023 is focused on establishing a high-quality, equitable and inclusive education system for all children, including those with disabilities. The 2018 Policy on Inclusive Education furthered the cause by devising strategies to deliver quality education to children with disabilities.

Figure 1: Milestones in disability-inclusive education regulations in Cambodia



MISSING OUT

As many as

children with disabilities were not enrolled in primary and lower secondary school, compared with

children without

disabilities.

Cambodia has the largest gap in the education of students with and without disabilities among Southeast Asian countries. As many as 1 in 2 children with disabilities were not enrolled in primary and lower secondary school, compared with 1 in 14 children without disabilities (UNICEF East Asia and Pacific Regional Office, 2020). Efforts have been directed towards achieving quality and inclusive education for all children, with emphasis on vulnerable groups including children with disabilities and Indigenous minorities (UNICEF, 2018). Despite these efforts, challenges persist for children from vulnerable backgrounds, especially regarding access to early childhood education and in rural areas (UNICEF Cambodia, 2019). These challenges are further exacerbated by poverty, with a minimal number of children both with and without disabilities from the poorest quintile enrolled in upper secondary school (Shaeffer, 2019). The Report of Cambodia Socio-Economic Survey 2021 (Cambodia, National Institute of Statistics and Ministry of Planning, 2022) underscores that the primary obstacles to educational access are the necessity for children to contribute to household income, followed by a lack of inclination to attend school and being too young to enrol in school.

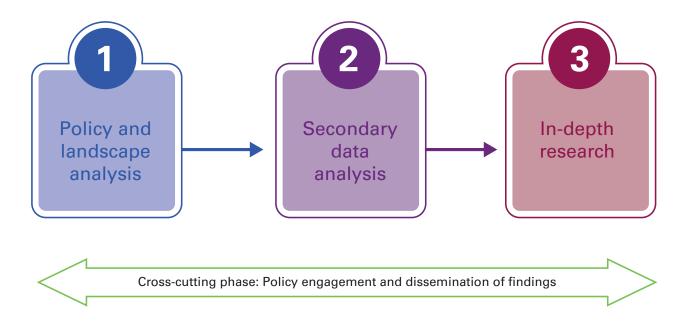
Several barriers prevent access to education for children with disabilities, and an interplay of factors often exacerbates them. For instance, children with disabilities living in poverty face heightened challenges in accessing education (Takasaki, 2020). The most common barriers in Cambodia include:

Attitudinal: This pertains to values, beliefs and attitudes towards disability influenced by the prevailing social and cultural context. Existing evidence highlights a pervasive belief, particularly in rural areas, that attributes disability to spiritual causes and positing that children with disabilities may face learning challenges (Kalyanpur, 2011). Consequently, there is hesitancy in these regions to enrol children with disabilities in schools or consider their employability in the future. Nevertheless, it is worth acknowledging that over time, teacher attitudes have shown a positive trend towards inclusivity (Ravet and Mtika, 2024).

- **Environmental:** These encompass architectural obstacles leading to accessibility issues in mainstream schools (UNESCO, 2021). Additionally, it also extends to challenges to school access caused by geographical distances, poor roads, flooding during the rainy season and lack of transport (Ravet and Mtika, 2024).
- **Financial:** Insufficient funding for inclusive education, coupled with poverty, impede both the quality and accessibility of education, respectively (Vong and Penh, 2019).
- Structural: These encompass school processes, procedures, and the organization of teaching and learning. Additionally, there is a notable shortage of comprehensive training in inclusive education (Mak and Nordveit, 2011; LASER PULSE, 2021), limited resources and scarcity of assistive technologies (Shi, Ke and Banozic, 2022), all of which hinder the integration of inclusive principles into teaching (Ravet and Mtika, 2024).

Within this context, this paper was developed as part of the Learning is For Everyone (LiFE) research. The LiFE research aims to explore the extent to which education systems are disability-inclusive, and it is currently being implemented in seven countries. In Cambodia, the research was conducted through a partnership between UNICEF and the MoEYS, with an overarching goal of providing system-level recommendations to ensure equitable learning opportunities for children with disabilities. The research uses the third volume of the Education Sector Analysis: Methodological guidelines (UNICEF, et al., 2021) and includes four phases (see Figure 2 and the methodology section).

Figure 2: The four phases of the LiFE research



Source: Authors' adaptation from the third volume of the Education Sector Analysis: Methodological guidelines (UNICEF, et al., 2021).





Research methodology

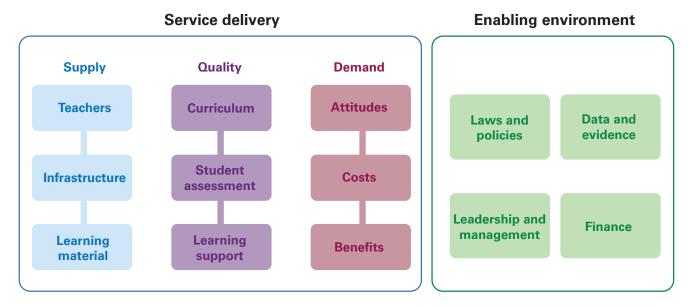
This research explored Cambodia's education system as defined by the third volume of the Education Sector Analysis: Methodological guidelines (UNICEF, et al., 2021). This included education service delivery from a demand, supply and quality perspective, in addition to the enabling environment (see Figure 3).

The research questions that guided the study were drawn from the third volume of the Education Sector Analysis: Methodological guidelines (UNICEF, et al., 2021, p. 31) and included:

- 1. What is disability-inclusive education and what does it mean for children with disabilities?
- 2. Are children with disabilities accessing learning opportunities? How?
- 3. Is the current education system appropriate for the implementation of disability-inclusive education?

4. What needs to be done and what resources need to be allocated to enable the implementation of disability-inclusive education?

Figure 3: The framework for inclusive education for children with disabilities



Source: Authors' adaptation from third volume of the Education Sector Analysis: Methodological guidelines (UNICEF, et al., 2021, p. 41).(UNICEF, et al., 2021).

> A mixed-methods approach was adopted to explore these questions, including:

- 1. Policy and landscape analysis (April–May 2023): Including a desk review of policy documents and literature on Cambodia's education system. A total of 14 policies were analysed, encompassing general education guidelines and those specific to disability and inclusive education (see Annex A). Quantitative and qualitative analysis on the policies was conducted, with a focus on indicators outlined in the education sector analysis framework for the quantitative analysis (see Annex B).
- 2. Secondary data analysis (June-September 2023): This involved analysis of existing data sets, including a 10 per cent sample of the 2019 Cambodia population census,¹ the 2022–2023 education management information system (EMIS), the 2018 Programme for International Student Assessment for

The authors of the report were provided with access to 10 per cent of the population census data for use in this research.

Development (PISA-D), the 2021 Cambodian Demographic and Health Survey (CDHS) and the Southeast Asia Primary Learning Metrics (SEA-PLM) programme data from 2019.

- 3. In-depth mixed-methods research (August–October 2023): Including the administration of digital questionnaires, semistructured interviews and focus group discussions. All tools used were based off the questionnaires in the third volume of the Education Sector Analysis: Methodological guidelines (UNICEF, et al., 2021) and were contextualized and validated with the MoEYS. The research instruments and fieldwork protocols were reviewed and approved by an independent institutional review board.
 - **Digital surveys:** questionnaires were developed and administered through an online platform with teachers, head teachers and district officials. Participating schools were selected randomly using EMIS data, and the digital questionnaire was sent to teachers and head teachers at the pre-primary, primary and secondary levels to participate (see Annex C). The final sample consisted of 2,895 teachers, 918 head teachers and 391 district officials. Consent was obtained through the digital survey platform – participants were required to answer whether they approve taking part in the questionnaire before proceeding to the first set of questions.
 - Qualitative research: Qualitative data collection took place in eight provinces by a team from the MoEYS and nongovernmental organizations, following training by UNICEF Innocenti in August 2023 (see Annex C). Data collection included semi-structured interviews with in- and out-ofschool children with disabilities as well as with their parents and teachers. Focus group discussions were conducted with children without disabilities who attend school and their parents. All interviews and focus groups were conducted in Khmer. For children who use sign language, a parent or teacher assisted the interviewer with translation and the interview process. Sampled children were aged 11 years or older. All respondents provided verbal and written consent before participating. Parental consent was also obtained for their children's participation in addition to the child's assent.

Limitations

All policy documents reviewed were in English. While translations are official and reliable, it is worth noting that inclusive education terminology is relatively new in Khmer. Consequently, these translations may not capture the full nuance and intent of the original laws.

While the primary data in the research explored disability using a rights-based model, the secondary data used in this paper primarily adopt the medical model in defining disabilities and the adult functioning model covering mainly six functional domains such as seeing, mobility, hearing, self-care, walking, remembering and communication. This limits some of the functional domains that can be explored through the data for a full analysis of disability-inclusive education.

Interviews and focus group discussions were conducted and transcribed in Khmer. Automated translation to English was used, with clarification of unclear segments by UNICEF Cambodia Khmerspeaking staff. However, potential information and nuances in the dialogue may have not been fully reflected in these translations. Furthermore, the study did not include children with severe disabilities in the sample due to difficulties in obtaining their consent or assent. As a result, our insights for children with severe disabilities were primarily informed by interviews with their parents or legal guardians, potentially limiting their direct perspectives.

Finally, while the digital surveys achieved a notable sample of teachers, head teachers and district officials, most respondents were from urban areas and specific provinces.



Research findings

To what extent does the environment enable inclusion and learning for children with disabilities?

Cambodia has implemented several policies and regulations to promote inclusive education for children with disabilities over the years, with evidence of evolving perceptions around disability. Only 3 out of 14 policies reviewed define disability, with the earliest reference in the 2007 Law on Education and the most recent in the 2018 Policy on Inclusive Education (see Box 2).

- The Law on Education (2007) predominantly adopts a medical model of disability, framing disability as a medical condition.
- The Law on the Protection and Promotion of the Rights of Persons with Disabilities (2009) maintains aspects of the medical model, but transitions to more inclusive terminology and non-stigmatizing language.

The 2018 Policy on Inclusive Education comes closest to the social model by recognizing how physical conditions may hinder an individual's participation in society. However, it falls short in acknowledging the complex interplay between physical conditions and social factors that can hinder full participation.

Despite these changes, the terms and concepts embedded in current legislation highlight the need for further alignment with the social and human rights models as well as the definition of disability outlined in the CRPD. The CRPD views disability as the interplay between individuals with impairments, in addition to attitudinal and environmental barriers that impede their full and effective participation in society (United Nations, CRPD, 2016). Many terms employed in official government documents defining disability were critiqued and found to not align with international standards of disability classification (Hayes and Bulat, 2018).

BOX 2

Definitions of disability in Cambodia's policies and legislation

Law on Education (2007): "Disabled learner refers to learners who require facilitation for their education. Disabled learners are learners who are: disabled with either one or two of their legs, deaf, mute or blind in both of their eyes, or have mental disabilities" (p. 18).

Law on the Protection and the Promotion of the Rights of Persons with

Disabilities (2009): "Persons with disabilities: refers to any persons who lack, lose, or damage any physical or mental functions, which result in a disturbance to their daily life or activities, such as physical, visual, hearing, intellectual impairments, mental disorders and any other types of disabilities towards the insurmountable end of the scale" (p. 5).

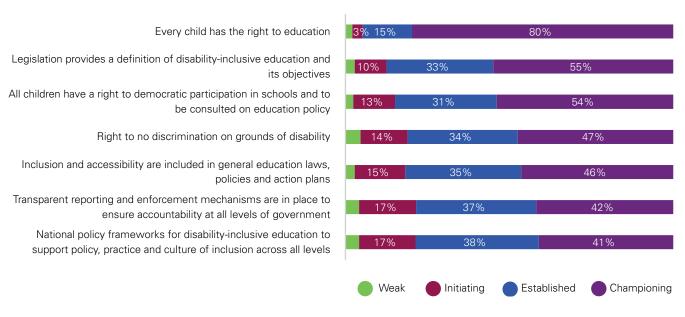
Policy on Inclusive Education (2018): "Disability: refers to the impairment or complete loss of parts of body, intellectual or mental that hinders their full and effective participation in society on an equal basis" (p. 12).2

The quotation presented is the exact text from the official translation of the policy from Khmer to English.

Existing policies in Cambodia outline various educational provisions for children with disabilities, but not all align with **inclusion principles**. The Law on Education of 2007 stipulates that if a child with disabilities can effectively learn in the same classroom as children without disabilities, they can attend mainstream classes. If not, the law recommends attendance at special schools, going against inclusion principles. In contrast, the Education Strategy Plan 2019–2023 is aligned with the Sustainable Development Goals and advocates for inclusive education, equitable quality learning and lifelong opportunities. It highlights inclusive education training for pre-service and in-service teachers as well as improved access and retention at various education levels, putting emphasis on early childhood and secondary education. The Education Strategy Plan also emphasizes enhancing inclusive early childhood education, for instance by expanding inclusive education programmes at public and community preschools and provision of relevant training.

Survey data from district officials suggest policies in Cambodia comprehensively address several dimensions of disability inclusion, though stronger mechanisms for accountability and enforcement are required. For instance, more than 9 in 10 district officials reported that Cambodia's policy is championing or established in ensuring every child has the right to education, and more than 8 in 10 similarly reported that the legislation provides a well-defined framework for disability-inclusive education and its objectives (see Figure 4). However, implementation of policy frameworks was perceived as weaker. Indeed, 1 in every 5 district officials reported that policies are still at a weak or initiating level when considering transparent reporting and enforcement mechanisms to ensure policy accountability, and in supporting the practice and culture of inclusion across all education levels (see Figure 4).

Figure 4: District officials' ranking of the state of disability-inclusive education within legislation and policy



Source: Authors' analysis of UNICEF Innocenti's digital survey data. No. of respondents: 390.

Cambodia's definition of inclusive education emphasizes the diverse needs of learners and eliminating exclusion within educational settings, but lacks specificity on vulnerable groups

(see Box 3). While it lacks specificity regarding vulnerable groups, the MoEYS refer to a comprehensive definition of social exclusion emanating from factors such as ethnicity, race, religion, sexual orientation, descent, gender, age, disability, HIV status, migrant status, first language or place of residence (Cambodia, MoEYS, 2021). Additionally, they highlight a challenge in achieving inclusive education in Cambodia due to the relatively new concepts of social exclusion and inclusion, evidenced by limited incorporation of Khmer terms within the policies to articulate these concepts. Understanding the intersecting factors of marginalization children face is essential to better target programmes, interventions and policies to support their learning.

Definition of inclusive education in Cambodia

Inclusive education is a dynamic process of addressing and responding positively to the diverse needs of individuals and groups through participating in learning, cultures and communities, and reducing and eliminating exclusion within and from education. It involves changes, modifications in content, approaches, structures and strategies that include all persons in the education system. It is a process that helps expand the education system's responsibility in delivering education services to all learners.

Source: Policy on Inclusive Education (2018), p. 11.

Nearly all policies explicitly mention children with disabilities' right to education, emphasizing the provision of quality inclusive education at all educational levels. However, the right to non-discrimination is less frequently addressed. For instance, the Law on the Protection and Promotion of the Rights of Persons with Disabilities (2009) mandates free education at public institutions for children with disabilities, along with access to study materials. In private institutions, children are entitled to special discounts on school fees, study materials and stationery. However, some policies offer separate classes for "persons with disabilities who cannot attend an inclusive class".3 Such practices run counter to the principles of full inclusion promoted by the CRPD, leading to segregation (Human Rights Watch, 2021). Only 4 out of the 14 documents refer to nondiscrimination and lack specific mechanisms for enforcement and prevention. Similarly, the protection against violence is mentioned in only 2 of the 14 policies, primarily focusing on sexual exploitation or general violence. These policies do not provide mechanisms for enforcing these rights or address other forms of violence, such as physical and psychological abuse based on gender, which are safeguarded by the CRPD. Survey results corroborated this finding. Most district officials reported that policies are at an established or championing level when it comes to the right to education for children

As found in the Law on the Protection and Promotion of the Rights of Persons with Disabilities 2009 and the latest disability law currently under revision.

(95 per cent), yet the right to non-discrimination based on disability was less advanced (81 per cent) (see Figure 4).

To what extent do the supply-side components of the system support access to inclusive and high-quality learning for children with disabilities in Cambodia?

Access

While policies and legislation acknowledge all children's right to an education, a young person with a disability in Cambodia was, on average, three times less likely to have ever attended school than a child without disability. The 2019 census showed that 9 per cent of young people (aged 5-24 years) without a disability had never attended school, compared with over 30 per cent of those with a disability. This trend was consistent and significant across several data sets explored.

Having a disability of any kind was associated with a decreased likelihood of school attendance (see Figure 5), with disability status having the largest effect on attendance when compared to wealth, sex and location. This analysis showed girls with disabilities in Cambodia tended to fare similarly to boys with disabilities in terms of access. However, being in rural areas further compounded the challenges faced by children with disabilities in accessing school, although this effect was smaller than the effect of disability overall.

Two interesting trends emerge when exploring school attendance by disability type and severity across the population and young people (see Figure 5):

1. On average, people who could not see at all or could not hear at all had a slightly higher likelihood of attending school than those with 'a lot of difficulty' in either of these categories.⁴ However, they were still significantly less likely

Categories are defined in the census as follows: Responses to each of the six disability types are grouped into three categories: some disability ("some difficulty"), moderate disability ("a lot of difficulty") and severe disability ("cannot do at all") (NIS, 2020, p. 97).

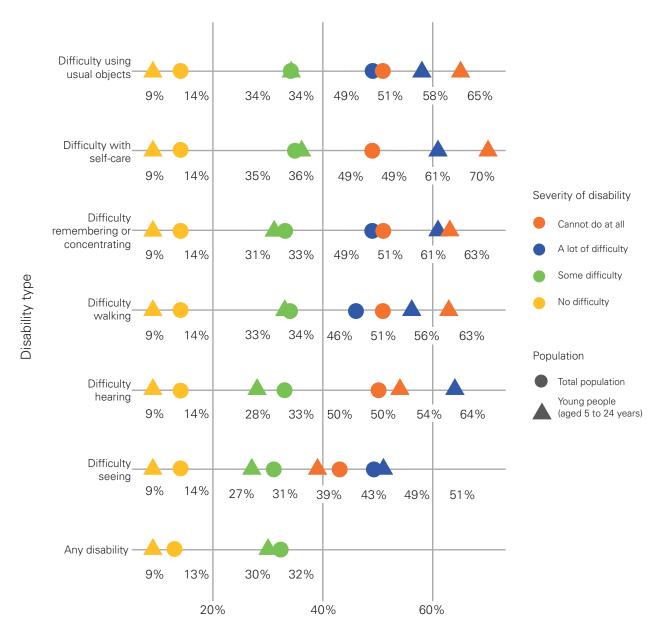
to attend school than their peers without disabilities. This is likely due to the availability of segregated schools – or 'special schools' as they are currently referred as in Cambodia – that cater predominantly to deaf and/or blind children. 5 This may suggest that while segregated schools exist and cater for more severe cases of disability, children with less severe cases of disability may struggle to find mainstream schools to enrol in.

A young person with a disability in Cambodia was, on average, three times less likely to have ever attended school than a child without disability.

2. While overall school attendance rates were increasing for persons without disabilities in Cambodia, this was not true for persons with disabilities. This analysis in addition to several sources (e.g., 2021 CDHS) suggest that access to education is generally improving over time. However, the trend was reversed among individuals who had 'a lot of difficulty' or reported that they 'cannot do at all'. This means that although access to education is improving at the population level, access for children with disabilities is in fact getting worse. Census data do however show that disability rates increase with age in Cambodia, meaning that the total number of adults with more severe disabilities are likely to be higher compared with the younger population. As such, the population-level data for adults may be overestimating the number of individuals with disabilities that attended school, as census data reflects their disability status at the time of data collection, rather than their disability status at school age. This means that some individuals may not have had disabilities when they were schoolaged children and did in fact attend school, and only acquired their disability later in life.

The segregated, or 'special' schools are discussed in the next section (3.2.1).

Figure 5: Percentage of people who have never attended school, by disability type and severity



Percentage of people who have never attended school

Source: Authors' analysis of 10 per cent of the Cambodia 2019 population census data.

There was variation at the provincial level in enrolling children with disabilities in schools, with some provinces having lower enrolment despite high proportions of disability within the population. Census data showed that the Kep province had the highest proportion of children with disabilities attending schools (75 per cent), and one of the highest proportions of disability within

the population overall (15 per cent). This was followed by the Pailin province (with 71 per cent of children with disabilities enrolled in schools), which also had a relatively high proportion of disability prevalence (15 per cent). However, the Prey Veng province, which had one the highest proportions of disability among the population, also had an overall low proportion of children with disabilities enrolled in schools (40 per cent). A similar trend was observed across several provinces, including Mondulkiri, Ratanakiri, Siem Reap and others (see Annex D). Schools in some provinces may require more resources and support to enrol children with disabilities. Qualitative interviews suggest that the concentration of segregated schools in specific provinces contributes to access issues for children with disabilities from other provinces. This was cited as an obstacle by several parents, who emphasized the pressing need for more accessible mainstream schools catering to children with disabilities across various provinces.

QUOTE

"I have a request for our country, for our children. Because children with autism can be born in all provinces and cities, not just Phnom Penh, some poor people cannot afford to send their children to school in Phnom Penh and pay school fees, so I want them to establish schools in all areas of all provinces."

- Parent of a child with disability enrolled in a special school in Phnom Penh

Only 0.5 per cent of the student population were recorded as having disabilities in the 2022–2023 academic year. Meanwhile, census data suggest at least 1 per cent of children aged between 5 and 19 years have some kind of disability, while the CDHS shows up to 5 per cent have some disability.

There were 15,018 children reported as having disabilities enrolled in 1,880 primary and secondary schools, and 360 children with disabilities enrolled in 160 preschools (2022 EMIS).6 The mean number of children with disabilities enrolled in primary and secondary

These figures exclude one school with several errors in reporting on the number of children enrolled, number of children with disabilities and type of disability (e.g., 114 per cent of children are reported as having disabilities).

schools was eight, with a median of three students. The average is skewed due to six segregated primary and secondary schools, located in five provinces, that only cater for children with disabilities (see Table 1). These schools, which enrol roughly 4 per cent of students with disabilities, catered predominantly to deaf and blind students at primary level, and to deaf, blind and students with mobility difficulties at secondary level. The centralization of segregated schools in certain provinces was noted as an obstacle by parents of children with disabilities in interviews. Parents highlighted a need to have more schools in general that accept children with disabilities and can support their children's needs.

Table 1: The total, mean and median number of children with disabilities enrolled in schools, by school type

SCHOOL TYPE	TOTAL NUMBER OF CHILDREN WITH DISABILITIES ENROLLED	MEAN NUMBER OF CHILDREN WITH DISABILITIES PER SCHOOL	MEDIAN NUMBER OF CHILDREN WITH DISABILITIES PER SCHOOL
All schools	15,018	8	3
Mainstream schools (inclusive settings)	14,457	2	0
Segregated schools (non-inclusive settings)	561	94	61

Source: Authors' analysis of the 2022–2023 EMIS data.

Children with disabilities enrolled in mainstream schools may require less support in their learning, as parents of children with disabilities who needed more support reported facing challenges with school enrolment. It is difficult to ascertain the extent to which mainstream schools can cater for children with advanced cases of functional difficulty and learning needs as such data is not currently collected. Adding such indicators in the EMIS can help determine whether segregated schools are the sole education providers for children with advanced cases of functional difficulty. Such indicators can also highlight whether mainstream schools, which may have more advanced cases of functional difficulty enrolled, require further resources or support. Additionally, as the EMIS does not currently collect child-level data, it is difficult to identify which children

have multiple disabilities, and to what extent mainstream schools are able to enrol and support them. Qualitative interviews with parents of children with disabilities suggest that mainstream schools are not yet equipped to meet the needs of their children. Parents reported challenges with enrolment, with instances of rejection based on the school's perception of their ability to support the child. A parent of a child with autism mentioned: "... they do not accept, they do not have the ability, they said that they do not have the ability to help my children." In cases where parents were able to enrol their children, they reported that their child was not treated appropriately or was not provided with learning opportunities tailored to their needs.

QUOTE

"There are many types of schools that [my child] went to before entering [School name], but I had a hard time because they teach ordinary students, so when my children go and do not listen to them, they shake their heads behind them because he did not listen to them, I saw the situation, I did not like it. I immediately removed my child and went to a special school, they looked after my child better there."

- Parent of a child with disability enrolled in school in Phnom Penh

Insights from qualitative interviews with teachers reveal similar trends. Generally, teachers indicated that children with disabilities are permitted to enrol in their schools. However, based on the type of disability and required additional support, schools may find it difficult to enrol the child or place them in the same classroom as children without disabilities:

QUOTE

"With minor disabilities, in general, they are included in the same class, but if students have severe disabilities such as deafness, it is not possible to arrange for him to attend school with students with minor disabilities."

- Teacher in a mainstream school

Even in cases where children with disabilities are enrolled in schools, their attendance may not be regular. Findings from qualitative interviews revealed that due to high demand and overcrowded classrooms, some children with disabilities do not attend school every day of the week. School attendance schedules are determined by the school administration based on availability and capacity. Several parents voiced concerns around irregular school attendance, and desired for their children to attend school full-time to support their learning.

QUOTE

"Reduce the number of students, the classes are full, some students go to school for two to three days, some students study one morning a week, most of the time I want for [my child] to go to school at least four days a week."

- Parent of a child with disability from Sihanoukville

Of the mainstream primary and secondary schools enrolling children with disabilities, only 3 per cent enrol a relatively high rate of children with disabilities. This may be linked to challenges in data collection, screening and identification.

Within these schools, the distribution of type of disability changes substantially when compared to all schools that enrol children with disabilities (see Figure 6). Most children with disabilities across all schools were listed as having difficulty seeing, corresponding to population data from the CDHS. Meanwhile, in schools with a high proportion of children with disabilities, the categories with the highest numbers of children are 'other difficulties' and 'slow learners', which lack clear definitions.8 Indeed, Cambodia's education system still faces challenges in collecting and disaggregating data on children with disabilities (LASER PULSE, 2021; UNICEF East Asia and Pacific Regional Office, 2020). A notable concern is the presence of screening tools or checklists constructed based on misconceptions or inaccurate

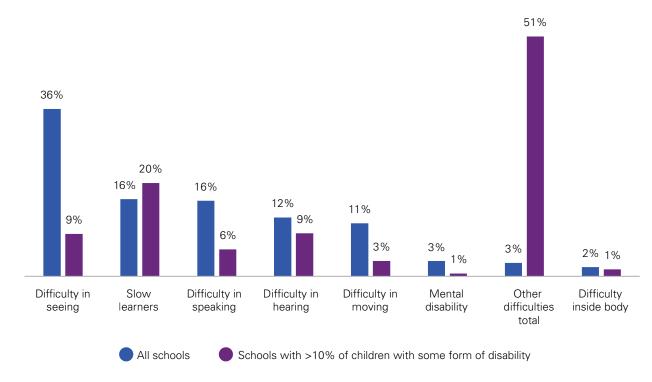
The authors used a cut-off of more than 10 per cent of the student population having a disability for this analysis.

The categories of disability type listed in the EMIS data were: difficulty moving, difficulty seeing, difficulty hearing, difficulty speaking, difficulty inside body, slow learners, mental disability and other difficulties.

Due to high demand and overcrowded classrooms. some children with disabilities do not attend school every day of the week.

information relating to disability. For instance, for collecting national data, the SED grouped learning and intellectual disabilities under the same category, despite their distinctness (Roberts, 2023). Steps are being taken to strengthen data on children with disabilities through the implementation of a disability identification mechanism, launched in 2020. This mechanism uses a Disability Management Information System and classifies disabilities into physical, sensory, intellectual, mental and others (Cambodia, Ministry of Social Affairs, Veterans and Youth Rehabilitation [MoSVY], 2023). It is essential to adopt these categories with clear definitions within the EMIS and establish robust mechanisms for data collection to obtain high-quality data to inform decision-making around children's education and inclusion in learning.

Figure 6: Percentage of children with different types of disabilities, in all schools with students with disability and at schools with rates of disability at >10 per cent



Source: Authors' analysis of the 2022-2023 EMIS data.

Notes: Data on total number of students in preschools were not available, so this analysis was limited to primary and secondary schools; Categories of disability types are listed as they appear in the EMIS.

> Qualitative data indicate an absence of standardized screening tools covering different functional difficulties for children. Teachers and schools were responsible for screening children; however, they lacked training and received little guidance in this area. This could exacerbate referral, identification and

reporting errors. There is a relatively higher level of standardization for identifying children with hearing and visual impairments in schools, compared to other functional difficulties. One teacher mentioned, "Our school has a new project that the Ministry has put in place to test the eyes and ears of children, we did that. As a result, I am aware of cases of weak hearing, weak eyesight, and speech difficulties." Meanwhile, teachers mentioned relying on unstandardized methods to assess a child's cognitive abilities. Several teachers noted that parents exhibit scepticism or disbelief when it comes to acknowledging their child's disability following such screening results. This issue may be exacerbated by the fact that parents are usually not involved in the assessment or screening process.

Infrastructure and learning materials

Policies establish guidelines for school accessibility, yet available data suggest more progress is required to achieve accessible classrooms and schools for children with disabilities.

The Inclusive Education Action Plan (IEAP) 2019–2023 advocates for the development of universal design standards for all school buildings as well as water and sanitary facilities. These standards aim to ensure accessibility throughout school premises, encompassing classrooms, study rooms, sports facilities, laboratories and others. Approximately 80 per cent of district officials believed policies were at a championing or established level in ensuring all schools are accessible. However, the expert policy scoring (see Annex A) revealed that universal design standards seem to primarily apply to new schools with some falling short of meeting all criteria, while existing schools still face accessibility challenges. Data on school accessibility were limited (see Box 4). However, the SEA-PLM programme (2019) showed that only 10 per cent of schools with a library in Cambodia had disability access. It is unclear whether disability access refers solely to mobility access (e.g., wheelchair ramps) or if it includes other facilities and resources for children. Survey data revealed school infrastructure was a challenge for delivering disability-inclusive education by nearly 3 in every 10 teachers and head teachers (see Figure 7). This tended to be a slightly larger challenge among teachers in regular schools when compared with teachers in special schools: 29 per cent and 26 per cent, respectively. Additionally, more than 4 in 10 teachers agreed or strongly agreed that physical and/or architectural barriers are present

in their schools (see Figure 8). Qualitative interviews with parents and children did not reveal large concerns about accessibility of school infrastructure. Indeed, most children with disabilities noted they had not encountered any accessibility issues. Only one parent highlighted the necessity of having a ramp at the public mainstream school for their child's wheelchair

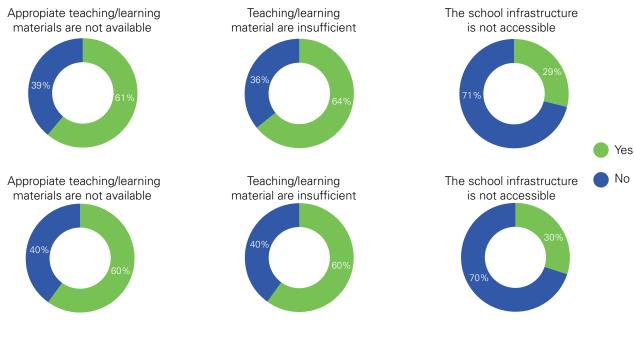
BOX 4

The availability and use of data on school accessibility in Cambodia

Some data on the accessibility of schools is collected in the EMIS questionnaires. Questions include indicators around the quality and/or availability of a ramp for students or teachers with disability to use, a resource centre, a cafeteria, a health care room and other rooms outside of classrooms. However, this data was not reported on in the annual education statistics summaries and were not available for this analysis. Using this data from the EMIS can support the MoEYS in resourcing schools that are most in need in the short-term, before ensuring that all schools are accessible for children with disabilities.



Figure 7: Perceived accessibility-related challenges faced by teachers and head teachers when asked, "As a teacher, which of the following difficulties/challenges do you face when delivering disability-inclusive education successfully in your classroom?"



Source: Authors' analysis of the UNICEF Innocenti survey data. Note: No. of head teachers: 917. No. of teachers: 3,079.

SCARCE **MATERIALS**

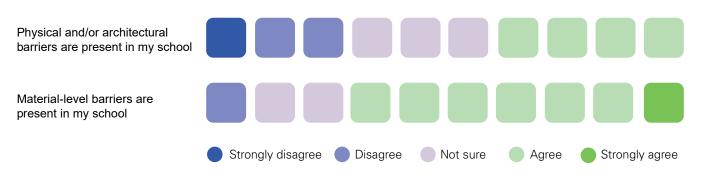
The scarcity of diverse learning materials and resources was a substantial barrier to delivering disability-inclusive education according to

> head teachers and teachers.

Policies also address the provision of accessible learning materials, yet teacher and head teacher data show challenges due to a dearth of accessible materials. Policies outline the need for resources and support for students with hearing and visual impairments, including sign language and Braille (e.g., IEAP 2019-2023). The Policy on Inclusive Education (2018) also stipulates that the curriculum within special schools must align with the national curriculum. Yet learner-centred pedagogy, such as the universal design for learning methodology, remains unaddressed in Cambodia's legislation (UNICEF East Asia and Pacific Regional Office, 2020), which has proven effective in promoting inclusive education (CAST, 2018). The scarcity of diverse learning materials and resources was a substantial barrier to delivering disability-inclusive education. As many as 6 in every 10 head teachers and teachers reported a lack of appropriate teaching and learning materials as challenges (see Figure 7). Furthermore, more than 7 in 10 teachers agreed or strongly agreed that material-level barriers

were present in their schools (see Figure 8). Trends from qualitative interviews with teachers corroborated this, with teachers referring to the absence of materials or the inadequacy of existing resources. However, children with disabilities (mostly from special schools) highlighted the availability of inclusive learning materials. Specific mentions included the availability of sign language books in their schools, tactile learning aids such as Braille maps, slate and stylus, and pictures to support instruction time.

Figure 8: Proportion of teachers who agreed or disagreed with the following statements



Source: Authors' analysis of the UNICEF Innocenti survey data. No. of teachers: 3,079.

TRAINING

Only around

of teachers agreed or strongly agreed that they have been adequately trained to meet the needs of children with disabilities.

Teacher preparation for inclusive education

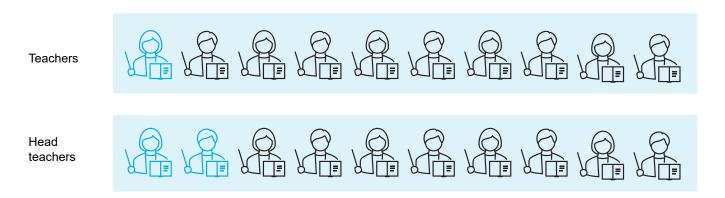
Policies reference pre-service and in-service teacher training in inclusive education. However, only 1 in 10 teachers reported receiving such training, with many feeling unprepared to address the needs of children with disabilities. Policies include references to training that aim to equip teachers with the skills to accommodate diversity and meet the needs of children with disabilities. Notably, the National Strategic Development Plan 2019-2023 stipulates the provision of civil servant status for teachers with disabilities who possess the expertise to teach sign language, Braille and special education across all educational levels. However, only 10 per cent of participating teachers reported receiving training in inclusive education, compared with 17 per cent of head teachers (see Figure 9). Only around 29 per cent of surveyed teachers agreed or strongly agreed that they have been adequately trained to meet the needs of children with disabilities. Additionally, when asked what challenges hinder their ability to deliver disability-inclusive education, 78 per cent reported the need for more training. Insights from interviews with teachers also confirm these findings.

BOX 5

The availability and use of data on teacher training in inclusive eduction in EMIS

The 2022–2023 EMIS data set includes a variable on the number of teaching staff with training in inclusive education, but was recorded as zero across all schools. It is not known whether schools did not report on this or whether there were no teachers with the training. It is likely a lack of reporting, pointing to the importance of ensuring the availability and quality of administrative data.

Figure 9: The proportion of teachers and head teachers that reported receiving preservice, in-service training or both in inclusive education



Source: Authors' analysis of the UNICEF Innocenti survey data.

Note: The sample of teachers who received training was 269 and the sample of head teachers was 157.

A recent mapping reveals an increase in inclusive education preservice and in-service training programmes (Goecker, 2021). In 2017, a 28-hour inclusive education training manual was introduced for general educators during their mandatory two-year training, mostly focused on visual and hearing disability content (Hayes and Bulat, 2018). Moreover, in 2019, the NISE graduated its first cohort of teachers with a one-year diploma in special education (LASER PULSE, 2021).

Policies do not specify requirements for duration or content of teacher training, which may contribute to the lack of standardization and limited focus on key training topics needed to achieve inclusion in classrooms. For example, policies did

not refer to the length of training or the inclusion of an awareness component (Lynch, Singhal and Francis, 2021). Interview data showed the duration of trainings varied largely, with some lasting two to three days and others lasting for two weeks, which teachers considered insufficient to support them in delivering inclusive education. Existing in-service training also tends to consist of short-term and noncontextualized workshops, often lacking a practical component and follow-up (Kalyanpur, 2011; Roberts, 2023).

QUOTE

"Training is not complete because we are only learning the basics but have not yet learned the technique of teaching children with disabilities together with children without disabilities, it is not yet deep... we only know the definition."

- Teacher in a mainstream school

Indeed, teachers demonstrated general understanding of the concept of inclusion and its benefits, but did not refer to any modifications required to teaching styles or the system to achieve it. Interviewed teachers were able to define inclusive education as the education of children with and without disabilities in the same setting:

QUOTE

"This is based on my knowledge and experience in teaching... I understand that students with and without disabilities must be enrolled together to help children with disabilities have the same knowledge as students without disabilities."

- Teacher in a mainstream school

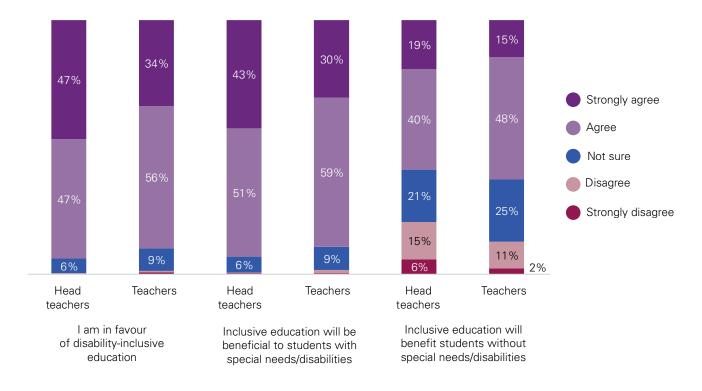
Teachers mentioned relying on intuition and experience when integrating children with disabilities into their classrooms. For instance, for students with hearing impairments or visual difficulties, a common approach adopted was to seat them in the front row to enhance their participation.

Trainings should equip teachers with the skills needed to manage classrooms that have children with and without disabilities as well as techniques to do so without overburdening their workload. Nearly half of teachers reported facing increased challenges when teaching children with disabilities in mainstream classrooms. Specifically, 44 per cent agreed that their workload would intensify if they had children with disabilities in their class and 45 per cent expressed concerns about their ability to provide adequate attention to all students in an inclusive classroom.

Teacher perceptions on inclusive education

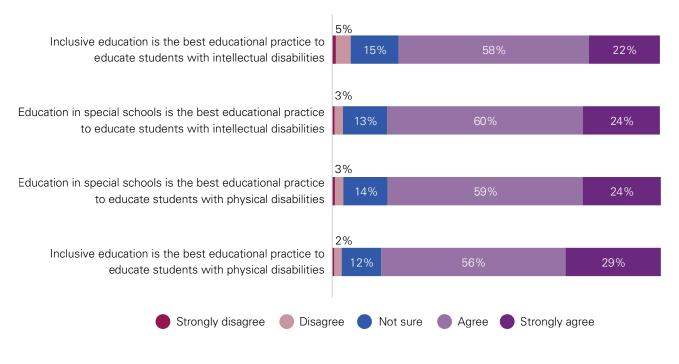
While most teachers and headteachers reported being in favour of inclusive education, many held beliefs counter to inclusion principles. As many as 9 in 10 teachers and head teachers reported being in favour of inclusive education, and nearly 90 per cent reported that it will be beneficial for students with special needs or disabilities (see Figure 10). Teachers had positive attitudes towards disability in general, emphasizing their commitment to treating all students equally, and in the ability of children to learn regardless of their disabilities. Yet, a larger proportion of teachers expressed confidence in the academic progress of students with physical compared to intellectual disabilities. Additionally, there were minor differences in the proportion of teachers that agreed inclusive education is the best educational practice for children with disabilities when compared with special education. For instance, 80 per cent agreed or strongly agreed that inclusive education is best for children with intellectual disabilities, compared with 84 per cent who agreed that special education is (see Figure 11).

Figure 10: Views of teachers and head teachers on disability-inclusive education



Source: Authors' analysis from UNICEF Innocenti survey data. No. of head teachers: 917. No. of teachers: 3,079.

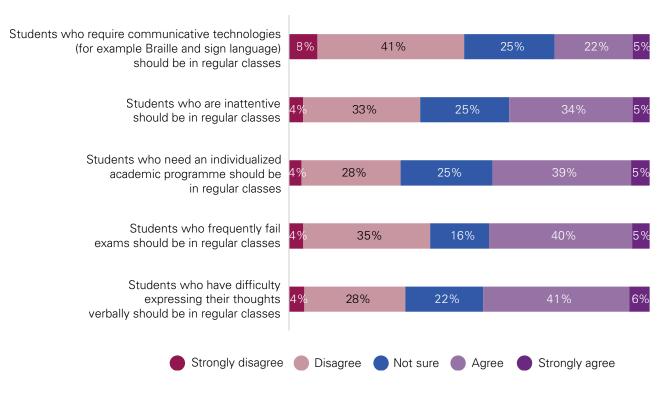
Figure 11: Teachers' attitudes towards inclusive and special education, by type of disability



Source: Authors' analysis from UNICEF Innocenti survey data. No. of teachers: 3,079.

On PISA-D, 74 per cent of teachers agreed that "Students with disabilities should be taught in special schools". Additionally, 49 per cent of teachers agreed or strongly agreed that children with disabilities should be placed in separate classrooms, while 22 per cent were unsure (see Figure 12). Only around 30 per cent of teachers agreed that students requiring augmentative communication technologies should be in regular classes. This increases to almost 45 per cent when referring to students with difficulties in expressing their thoughts verbally, students who frequently fail exams or students who require individualized learning programmes. Coupled with data on perceptions around inclusive education, these findings may suggest an incomplete understanding of inclusive education or that teachers hold beliefs counter to inclusion principles. Alternatively, if inclusive education is not effectively implemented in schools, teachers may be reflecting on the reality of inclusive mainstream schools that may not yet be well-equipped to support the education of children with disabilities.

Figure 12: Teachers' perceptions for student's inclusion in regular classes, based on individual needs



Source: Authors' analysis from UNICEF Innocenti survey data. Note: No. of teachers: 3,079.

Supporting teachers to manage diverse classrooms and build cohesion among children is essential to improve inclusive education practices.

Such beliefs may also be due to challenges associated with providing inclusive education. In qualitative interviews, teachers mentioned the need for reduced class sizes and expressed difficulties in providing sufficient attention to all children, particularly those with additional learning needs. Indeed, survey data showed more than a third of teachers report class sizes were too large, hindering their ability to deliver disability-inclusive education. Hiring learning support assistants and reducing class sizes can support addressing this challenge. Discrimination was also mentioned in interviews as a challenge when teaching in inclusive classrooms. Supporting teachers to manage diverse classrooms and build cohesion among children is essential to improve inclusive education practices.

Quality

Assessing learning for children with disabilities

Policy documents and frameworks outline the need for diverse assessments for children with disabilities, but lack detail on mechanisms to do so. The need to provide alternative, flexible and fair assessments for children with disabilities by providing reasonable accommodations is referenced (Policy on Education for Children with Disabilities, 2008; Policy on Inclusive Education, 2018; IEAP, 2019–2023). There was a lack of specification around the mechanisms to do so. The 2018 K-12 student learning assessment framework only acknowledges the role of the SED in evaluating children with disabilities. The SED's role includes creating a user-friendly manual for disability checklists, providing support to develop a practical and clear manual for classroom-based assessments, and assisting technical departments in implementing assessments.

District officials reported that children with disabilities' learning is assessed through various formats. However, qualitative findings suggest a lack of differentiation at the child's level or between assessments for children with and without disabilities. Approximately 80 per cent of district officials agreed that children with disabilities are assessed using different formats. Yet qualitative data indicated a general lack of differentiation, with minimal accommodations for children with disabilities. According to

children, assessments primarily included homework and monthly exams as well as teachers tracking their progress through journals or booklets. Interviewed children and teachers noted that adaptations in assessments were not common. Teachers mentioned that children with disabilities are usually assessed in the same way as children without disabilities. Adapted assessments were more common in special schools, as children reported their teachers adjusted their approaches and exhibited greater flexibility based on individual needs.

Fewer than half of teachers and head teachers felt knowledgeable in assessing the learning of children with disabilities (34 per cent and 46 per cent, respectively). It is essential to ensure teachers and head teachers have the appropriate training and support required to tailor and administer differentiated assessments, both formative and summative, and use information from them to inform their teaching practices.

BOX 6

Evidence of developing practices for assessing the learning of children with disabilities

Consultations conducted as part of this research identified positive practices towards developing accessible assessments. The Research Triangle Institute International have developed an accessible version of the Early Grade Reading Assessment in Cambodia. This tool adapted an existing tool for assessing language and literacy skills for use with students in Cambodia reading in Braille and for students using Cambodian Sign Language. This tool is typically used by the Ministry of Education, Youth and Sport to assess the learning of first- and second-graders in Cambodia. The assessment was adapted and piloted with a sample of students who are blind, deaf or hard of hearing within Cambodia's special education schools. Available data at the time of this research were from the testing of the tool and was therefore not used in the analysis.

Education and learning outcomes for children with disabilities

Having a disability was associated with a decreased likelihood of attending and completing school. Persons with disabilities were more than twice as likely to have never started school than persons with no disabilities (34 per cent compared with 14 per cent, respectively). Additionally, more than 70 per cent of persons with disabilities either never started school or dropped out from primary school, compared with slightly more than 40 per cent of persons without disabilities (see Figure 13). Interviews with out-of-school children with disabilities suggest their disability was the primary reason for school dropout. Interestingly, many interviewed out-of-school children had previously attended either preschool or primary school, but eventually dropped out at a later stage.

QUOTE

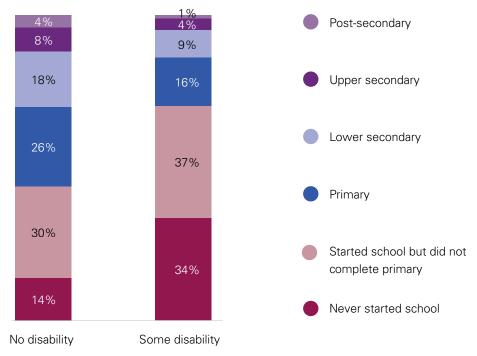
"I stopped studying by the fifth grade, because I could not hear, could not hear anymore."

- Out-of-school child with disability from Kandal

Although out-of-school children attended some form of education in the past, insights from interviews reveal they have limited learning opportunities once they are out of school. Parents of out-of-school children with disabilities mentioned that their children do not receive any formal education at home. Some parents discussed attempting to provide their children with home-based education independently, using various educational content or online materials. As such, once children are out of school, they receive limited standardized education or learning support.

Of the proportion of students who remain in schools, only 44 per cent of those with disabilities complete at least up to primary school, compared with 65 per cent of those without disabilities. While school attendance and completion rates are only one component of educational success, this data may suggest disparities in the system's ability to ensure that persons with disabilities attend and remain enrolled in schools.

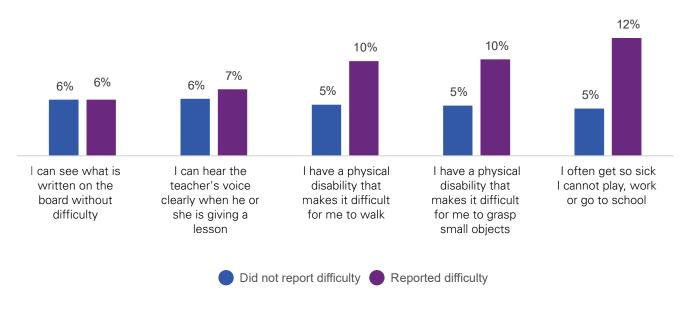
Figure 13: Highest level of education completed, by disability status for the population



Source: Authors' analysis of the 2019 population census data.

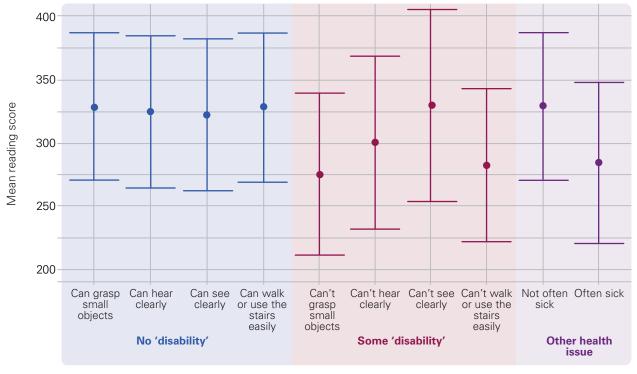
Disability was also associated with a higher likelihood of prolonged school absenteeism, affecting the continuity of learning for children with disabilities. Students aged 15 years who reported physical difficulties in walking or grasping objects as well as those who reported often getting sick were more likely than their peers who did not report difficulties to miss school for more than three months at a time (see Figure 14). Students who reported some form of disability, particularly physical disabilities and illness, had lower mean scores in reading than students who reported difficulties in seeing and hearing (see Figure 15). Children with disabilities who often miss school may therefore require catch-up lessons or ways to continue learning remotely in cases of prolonged absences to ensure learning continuity.

Figure 14: Proportion of 15-year-old students who reported missing school for more than three months in a row, by reported difficulty



Source: Authors' analysis of the 2019 PISA-D data.

Figure 15: Mean reading scores by responses to health-related statements



Disability type

Source: Authors' analysis of PISA-D data for Cambodia (error bars represent standard deviation of the scores). Notes: 1) The trend was the same across mathematics and science scores. 2) Students with no disability who reported seeing clearly had lower average reading scores than children who reported they could not. This may be because data on disability is self reported or because severity is not measured.

Reasons for absenteeism vary, such as difficulty in getting to school, indirect costs for sending children to schools or treatment needs during the week. Evidence from qualitative interviews highlighted issues relating to classroom and school capacity to enrol children with disabilities. This was related to schools' abilities to address the needs of children with disabilities and overcrowded classrooms hindering the possibility of regular enrolment. Additionally, qualitative insights showed children with disabilities are typically accompanied to school daily by either their parents or older siblings, thereby making their attendance contingent on the availability of a caregiver.

Trends showed that schools had a positive impact on children's learning and socio-emotional skills.

Disability was associated with higher illiteracy rates in Cambodia. However, school attendance reduced rates of illiteracy among children with disabilities and reduced the gap in literacy rates between children with and without disabilities.

Children (aged 5–19 years) with disabilities were nearly twice as likely to be illiterate than children without disabilities (39 per cent compared with 19 per cent, respectively). Given that disability increases the likelihood of never attending school, it is unsurprising to see a similar association between disability and illiteracy. Of children who are attending or have ever attended school, no difference in literacy rates is observed among children with and without disabilities (94 per cent and 95 per cent, respectively, according to the 2019 census). However, children with disabilities who have never attended school were more likely to be illiterate compared to peers with no disabilities who have never attended school (95 per cent compared with 86 per cent, respectively). Trends from interviews with parents also showed that schools had a positive impact on their children's learning and socio-emotional skills. They mentioned that their children started to communicate more effectively and found it easier to express their emotions after attending school.

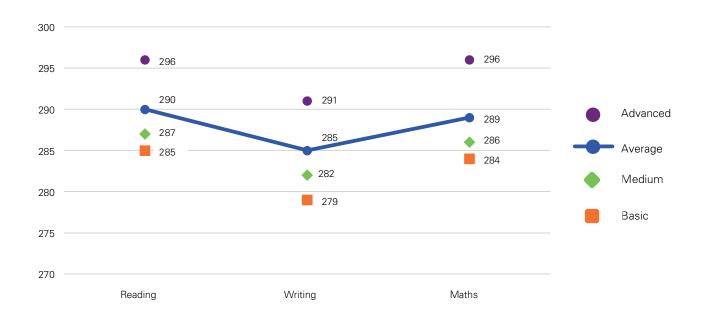
QUOTE

"He is in a school for more than a year, I see that he has progressed a lot, like coming out, so he is not afraid of places. Before when seeing a new place, he did not dare to walk in, he was scared, but not anymore. Also, he goes outside to play with others."

- Parent of a child with disability from Phnom Penh

The analysis showed that benefits of inclusive schools and pedagogy can extend to all children - with and without disabilities. However, not all teachers are aware of the benefits of inclusive education for all children. Analysis of the 2019 SEA-PLM data for Cambodia shows that Grade 5 students who were enrolled in 'child-friendly schools' achieved higher scores on average in reading, writing and mathematics (see Figure 16). The child-friendly schools framework considers six components for a school to be certified as child-friendly, with the main condition being that a school should be inclusive, ensuring all children have access to schooling (Cambodia, MoEYS, 2021). This particularly includes "the most vulnerable such as orphans, ethnic minorities and those with physical disabilities" (Cambodia, MoEYS, 2021, p. 12). While the emphasis on inclusivity is positive, other types of disability should also be considered within this framework to ensure all children can indeed benefit from school access. As aforementioned, most teachers and head teachers agreed that inclusive education is beneficial for children with disabilities. However, this decreases to approximately 30 per cent when referring to its benefits for children without disabilities (see Figure 10). Evidence shows that inclusive education is not only beneficial for children with disabilities, but all children as teachers become more attuned to the diverse needs of students in the classroom (Hosshan, et al., 2020). Raising awareness on the benefits of inclusive education for the learning of all children is valuable so that support, advocacy and demand for inclusive education increases within schools and among parents to drive policy change.

Figure 16: Mean scores in reading, writing and mathematics among the fifth-grade students who participated in the 2019 SEA-PLM programme in Cambodia, by rating of child-friendly schools



Source: Adapted from the SEA-PLM national report for Cambodia (MoEYS, 2021).

To what extent do the demand-side components of the system support inclusive access to learning for children with disabilities?

Policy documents highlight actions aimed at raising awareness of disability and inclusion, but did not specify ways to implement it or identify all relevant stakeholders and measures each can take.

- The National Strategic Development Plan 2019–2023 underscores the role of the Disability Action Council in promoting awareness and integrating disability-related topics across all sectors. It also emphasizes the importance of fostering positive attitudes towards acknowledging and valuing the voices and actions of individuals with disabilities.
- The Policy on Inclusive Education 2018 encourages parents and communities of children with disabilities to gain a better understanding of the impact of disability, thereby enabling and supporting access to education for children with disabilities.

Parents of children without disabilities exhibited less favourable attitudes towards the inclusion of children with intellectual disabilities in mainstream classrooms.

However, specific mechanisms to enforce such inclusion were not addressed. The policies also did not include all relevant stakeholders or outline specific roles for each to achieve inclusion. Evidence suggests the need for comprehensive and contextual social and behavioural change strategies to effectively combat negative attitudes and beliefs towards disability and inclusive education. Such strategies should target all levels of society, including individuals, families, communities, and social and educational institutions (UNICEF East Asia and Pacific Regional Office, 2020). This is particularly crucial in Cambodia, where previous studies have identified a lack of awareness among parents of children with and without disabilities (Morgan and Tan, 2011) as well as negative attitudes of parents of children without disabilities (Hayashi, 2014).

Raising awareness on the benefits of inclusive education among the community is essential, as some negative beliefs persist among both parents of children with and without disabilities.

Qualitative data showed that parents of children with and without disabilities believed every child deserves the opportunity to learn. Although parents of children without disabilities generally supported the inclusion of children with physical or mobility impairments alongside their children, they exhibited less favourable attitudes towards the inclusion of children with intellectual disabilities. Several parents emphasized their belief that children with intellectual disabilities should receive education in special schools or separate classrooms.

QUOTE

"If a child's brain is working, if they are missing a limb or they are paralyzed they should come to the same school, otherwise they should study separately."

- Parent of a child without disability

Interestingly, some parents of children with disabilities shared these perceptions, highlighting they do not want their children to 'burden' the education system.

Promoting inclusion among children is also required to minimize discrimination against children with disabilities, which may lead to their lack of willingness to attend mainstream schools.

Most children with disabilities disclosed facing discrimination either at school or within their communities. Focus group discussions with children without disabilities did not necessarily demonstrate any negative attitudes towards children with disabilities, but they did express sentiments of pity towards children with disabilities. This pity, though often unintentional, perpetuates damaging stereotypes, such as portraying individuals with disabilities as helpless and deserving of charity rather than equal respect and opportunities

QUOTE

"I feel sorry for them, and we must not laugh at them for being paralysed, for they are just like us and have the right to live like everyone else."

- Child without disability from Prey Veng

Other sentiments included a desire to foster better understanding of and connection with children with disabilities. However, this was not grounded in their real-life experiences as most children without disabilities did not have peers with disabilities.

QUOTE

"I want to study with them because I want to know about his suffering as a disabled person and know what he thinks."

- Child without disability from Phnom Penh

Communication and friendships with children without disabilities were also often restricted even if they attend the same school, particularly for deaf children who face barriers due to the absence of sign language interpreters. This was echoed in interviews with children with disabilities. While some children reported encountering bullying and discrimination, others mentioned their peers did not often engage them in social activities.

QUOTE

"We want our children to study all day or in a non-discriminatory school, in a school that gives equal rights to students, so my children can study."

- Parent of a child with disability from Battambang

Children with disabilities who attend both special and mainstream schools, a set-up in Cambodia where children spend part of their day in a special school and another part in a mainstream school, reported experiencing more discrimination in mainstream schools. Children with disabilities generally described feeling more understood in special schools. Some also expressed their preference for the special school or reluctance to continue attending mainstream school due to bullying.

QUOTE

"In public schools, there is some fear... The first involves discrimination... Most teachers do not hear what is being said to us."

- Child with disability from Battambang

Secondary data from PISA-D revealed similar trends. Children who reported facing difficulties in seeing and/or hearing, or physical and health issues were slightly less likely to feel like they belonged in school and were more likely to feel awkward and out of place in school (see Figure 17). Differences were starker among children who reported having a physical disability or often feeling sick, when compared with children who have difficulties seeing what is on the board or hearing the teacher's voice. Children who reported missing out on school or being absent for prolonged periods of time were also less likely to feel a sense of belonging to school (see Figure 18).

Figure 17: Percentage of students who agreed to statements around sense of belonging and feeling awkward in school, by responses to health-related statements

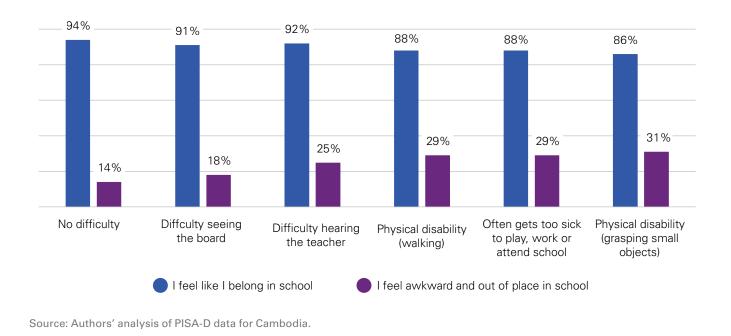
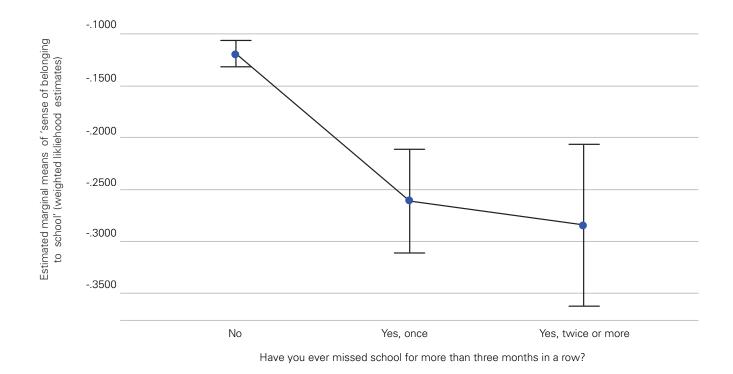


Figure 18: The effects of extended absences from school on reported feelings of belonging



Error bars: +/- 1 SE

Source: Authors' analysis of PISA-D data for Cambodia.

Policies address the various layers of marginalization persons with disabilities may face. However, specific mechanisms to do so still need to be comprehensively identified. To achieve effective inclusive education, policies should not only address discrimination against individuals with disabilities, but also focus on children with disabilities who are at higher risk of vulnerability.

- The Law on the Protection and the Promotion of the Rights of Persons with Disabilities (2019) mentions support for children with disabilities from low-income families. While general education is free in Cambodia, the law specifically stipulates that children with disabilities from disadvantaged backgrounds are entitled to receive free education at public educational institutions. This stipulation can protect families from additional or indirect costs required to support their child's education within mainstream schools.
- The Education Strategic Plan 2019–2023) mentions providing scholarships to students from low-income families and children with disabilities.
- These measures are also supported in the Policy on Inclusive Education 2018 and acknowledge the heightened vulnerability of children with disabilities in poverty.

More is needed to address the intricate relationship between poverty and disability (Kang, Sawada and Chung, 2014; Takasaki, 2020). Financial constraints were mentioned as challenges to supporting their children's education by parents during qualitative interviews. When discussing the support required to send their children to school, most parents cited needing material resources such as clothing and financial assistance. Out-of-school children also highlighted costs associated with essential aids, such as wheelchairs or transportation, hinder their ability to enrol.

Is the education system well-connected to other support systems for children with disabilities?

Reports from district officials suggest that there is a high level of collaboration when it comes to implementation of disability-inclusive education, but efforts are needed to ensure sustainability and scalability of related activities. Particularly, 62 per cent affirm the presence of a government-wide and coordinated approach to disability-inclusive education. Furthermore, 77 per cent agreed or strongly agreed that several ministries work in tandem to implement disability-inclusive education at the district level, and around 60 per cent agreed that there are accountability measures to ensure cross-departmental commitments are honoured. Existing research has highlighted that the newly established SED is an essential convener for stakeholder collaboration (Roberts, 2023). However, due to a lack of internal capacity, there is strong reliance on non-governmental organizations for implementation, resulting in unconsolidated efforts across multiple activities with limited pathways for scalability and sustainability (Roberts, 2023).

Cross-sectoral collaboration is also mentioned in several policy documents to enhance holistic support provided to children with disabilities. Such collaboration aims to address several barriers that may hinder their participation in society, from identification mechanisms to social protection and health-related interventions.

Collaboration for identification of disability:

- The IEAP 2019–2023 outlines interministerial collaboration for early identification of children with disabilities or delays to provide them with necessary support and rehabilitation. The SED leads this effort, with support from other institutions including the Ministry of Health (MoH) and the MoSVY.
- The National Action Plan on Early Childhood Care and Development 2022–2026 promotes holistic development of children from birth to school age. The plan assigns responsibilities to the National Committee for Early Childhood Care and Development, comprising members from 11 ministries, to identify and detect young children with special needs and disabilities.

Collaboration for health-related interventions

The IEAP 2019–2023, the Policy on Education for Children with Disabilities (2008) and the Policy on Inclusive Education (2018) emphasize collaboration with different institutions, including the MoSVY. The collaboration aims to provide a range of services, including disability prevention programmes, immunization, health education interventions, services for children with malnutrition, delayed development and disabilities, as well as rehabilitation services.

The IEAP emphasizes delivering health and protection education for girls and women with disabilities, with oversight provided by the MoH, the SED and school health departments.

Collaboration for social protection interventions

A family package to deliver social protection to low-income and vulnerable families and children was developed as part of a wider integration agenda (Chan, et al., 2023). Programme implementation is the responsibility of multiple social protection stakeholders. The package includes a cash transfer programme for the disadvantaged for improved access to care services and disability-inclusive livelihood programmes.

Collaboration for labour-force participation and vocational training

The IEAP 2019–2023 highlights the need for coordination across the Ministry of Labour and Vocational Training (MoLVT), the Vocational Orientation Department, the Department of General Secondary Education and the SED. This collaboration is aimed at ensuring the availability of vocational training, life skills programmes, and sports opportunities for girls and women with disabilities. Additionally, the IEAP mandates a cooperative effort between the SED, EMIS and MoLVT to integrate data pertaining to individuals with special needs who are engaged in vocational training.



Policy recommendations

Enabling environment

To begin moving towards a more inclusive education system, continually understanding the needs of the system to serve children with disabilities is a key step, and a quick way for Cambodia's education system to achieve this would be to:



Enhance the availability and quality of data on children with disabilities and their learning.

Data collected, particularly in the EMIS, should be expanded to include information on the level of the child's functional difficulty and their learning needs, whether a child has more than one disability, and on the training of teachers and other school staff in disability-inclusive education and pedagogies. This would require the collection of data at an individual child level per school. While more time-consuming for schools and teachers, such data can provide valuable information regarding school- and individual-level needs.

Effort must be made to improve the quality of collected data. This should include more comprehensive quality assurance at each step within the data collection process: principal,

provincial and district levels. Quality assurance steps should include, for example, confirming the number of children within the school and to ensure the completion of all indicators. While the process of filling in the EMIS questionnaires is already digitized, building in logic checks can support gathering more accurate data. It would also be important to provide clear definitions of all categories and indicators to ensure they are being responded to accurately.

Making accessible assessments that inform the progress of learning among children with disabilities are also important to identify ways to enhance their learning. This should include both formative and summative assessments for teachers to continuously explore student progress and enhance their teaching practices.

Children with disabilities should also be included in learning assessments, whether local, regional or international. In many instances, children with disabilities who are enrolled in schools are not included in learning assessments. When children are sampled, disability status is not always be recorded. While large-scale assessments are not intended to provide individual-level learning data, they can support in identifying school and/or teacher characteristics and practices that are linked with enhanced student outcomes across different disability statuses.

In the longer term, to achieve an enabling environment for the inclusion of children with disabilities in learning, it is essential to:



Further align policies and legislation with the social or human rights model of disability as well as with the principles of inclusion.

The medical model falls short in acknowledging the complex interplay between physical conditions and social factors that can create barriers to full participation in education and beyond. The medical model also influences how disability is understood and the type of data that is collected in a country, and consequently how it is analysed to inform decisionmaking that affect children's learning. Additionally, some policy documents have contradictory information about the best ways to ensure children with disabilities receive an education, with reference to both segregation and inclusion. Promoting inclusion at the policy and legislation levels helps garner an enabling environment towards a more inclusive system. Similarly, it is crucial to establish standardized definitions for disability and inclusive education within the Cambodian context.



Develop strategies to monitor the implementation of policies to ensure alignment between policy and practice, and identify gaps in policy implementation.

While policies generally stipulate the importance of inclusive education, district officers reported ways to ensure enforcement of these policies are not always in place. Trends from qualitative interviews and quantitative data also often showed a mismatch between legislation and implementation. Integrating methods to monitor implementation of policies can help assess alignment between policy and practice. Creating a dedicated framework with indicators to oversee the implementation of policies and legislation promoting the inclusion of children with disabilities in mainstream education, covering aspects of access and learning, and leveraging data collected by district officers in each province could represent a viable approach to achieve this goal. Alternatively, adding further indicators in the EMIS can support monitoring of policy implementation. For example, indicators on the availability of diverse learning materials or assessments can be part of the data collected within the EMIS.

Supply

In the short term, teachers across special and mainstream schools, starting in provinces with the highest proportion of children with disabilities enrolled in schools, must be offered:



Comprehensive and ongoing professional development for teachers and head teachers, focusing on effective strategies for teaching children with diverse learning needs and ways to achieve inclusion within mainstream classrooms.

Training should cover a wide range of topics, including ways to achieve inclusive education in classrooms and what an inclusive classroom looks like. Primarily, trainings must focus on providing teachers with teaching and learning techniques and methodologies tailored to children with disabilities in mainstream classrooms, for all types of functional abilities. Training programmes must also equip teachers with the skills needed to build cohesive classroom environments where children with and without disabilities learn alongside one another. Teachers can play a large role in fostering positive attitudes among children and in addressing cases of discrimination or bullying.

Integrating theoretical as well as practical opportunities to apply training content is essential to prepare teachers for various learning needs in the classroom, aligning with the principles of universal design for learning. Such practical components of training can also help address issues with teacher shortages and large class sizes, where trainee teachers can support the main classroom teacher and gain first-hand experience in the classroom.

Focus for professional development can begin in provinces with the highest proportion of children with disabilities, with the longer-term aim of providing training systematically to all teachers across all provinces.

In the medium term, to ensure children with disabilities are identified within the system and receive the appropriate support needed, there will be a need to:



Establish standardized screening protocols for identifying children with various types and degrees of functional abilities.

A lack of standardized screening protocols may result in cases of unidentified disabilities or learning needs. Establishing and implementing standardized screening is integral for identifying referral pathways for potential disabilities and learning needs to be identified. Clear delineation of responsibilities in the screening, referral and identification processes must be set up, outlining steps from screening to referral and identification. Specialized training and certification must be provided to individuals who will conduct screenings to ensure accuracy in identification, especially for cases involving children with intellectual disabilities, and to garner trust from families regarding diagnoses.

There must also be clear methodologies to effectively communicate and share collected data with relevant stakeholders such as the MoEYS, MoH and MoSVY. These measures will facilitate a more structured and transparent process for identifying children with disabilities and supporting their needs. Following that, stakeholders must conduct a special needs assessment to better understand children's learning needs and adjustments needed.

Quality of learning

An immediate priority to tackle frequently mentioned challenges among teachers and head teachers, and to move towards inclusive schools across Cambodia, would be to:



Develop accessible and adapted learning curricula and assessments to track the learning of children with disabilities.

Data on learning for children with disabilities, while scarce, paint a picture that entering the school system is currently a larger barrier than learning achievement once in school. Finding ways to systematically assess student learning is essential to better identify gaps in delivering inclusive education. Pockets of good practice have been observed, with the development of an accessible early grade reading assessment by Research Triangle Institute International. More efforts are needed for developing nationwide accessible assessments of children's learning at all levels of education.

In the medium and longer term, as access to mainstream schools increases, it is essential to ensure that systems are in place to:



Support the learning continuity of children with disabilities following long periods of absenteeism, and minimize the risk of missing out on and dropping out of school.

The learning continuity of children with disabilities, as measured through frequent absenteeism or dropout from basic education, suggests a need for strengthening mechanisms to minimize disruptions to learning and ensuring school completion. Devising remedial education strategies for children to catch up on learning following long periods of school absenteeism can support this goal. Additionally, children can be provided with accessible and digital solutions to continue their learning in prolonged periods of missing school. Furthermore, identifying the risk factors that hinder the probability of school completion is essential to address the issue of dropout.

Demand

In the shorter term, while access to inclusive mainstream schools is being expanded, it is essential to:



Strengthen financial and material support for families of children with disabilities.

Although public education is free in Cambodia, families of children with disabilities often have indirect costs associated with sending their children to schools. Allocating additional funds to ensure children with disabilities have access to the necessary learning equipment and assistive devices to support their learning is imperative. This can be achieved through scholarship programmes or cash transfer schemes to support breaking down barriers to accessing education. Collaboration among various stakeholders, including health and social services, is important to ensure students consistently receive needed support. Additionally, investing in accessible transportation mechanisms for children with disabilities can support ensuring their ability to continuously attend school.

While working towards longer-term transformation of the education system into an inclusive one, efforts must be made to:



Promote awareness on the importance of inclusive education as a practice that is beneficial to children with and without disabilities.

Peers: Findings showed children with disabilities were discriminated against or excluded from social interactions with children without disabilities. A key factor contributing to this issue is the separation of children with disabilities into separate schools or classrooms, as fully inclusive mainstream schools have still not been achieved. Prior research has demonstrated the effectiveness of contact-based activities, where direct and extended interactions between individuals of diverse social backgrounds and statuses can foster positive attitudes both within and towards these groups (Armstrong, et al., 2017). It is recommended that efforts to transition towards fully inclusive schools are strengthened. These schools should provide spaces where children with disabilities can engage with their peers in various cognitive and social activities. Contact-based interventions can be further enriched by incorporating other techniques, such as role-playing and the use of informational activities (Chae, Park and Shin, 2019).

Family and community: Collaboration between families and schools supports the wellbeing of students. Raising awareness among families and community members is integral. In the case of parents of children with disabilities, it is recommended to involve them in their child's learning process, aiming to enhance their participation and involvement (Singh, 2022).

This participation should encompass educating parents on the fundamental concepts of inclusive education, addressing any doubts or concerns they may have, and highlighting how it can benefit their children. Parents of children with disabilities should not be the sole focus. Instead, all parents should be included in disability awareness programmes that aim to reduce stigma associated with disabilities and misconceptions towards inclusive education to garner more public support from the community for inclusion.

Extending disability awareness training to the broader community is also imperative as it has been proven effective in improving the attitudes of both adults and children towards individuals with disabilities (Hayward, et al., 2021).

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Annex A: List of Cambodian national policies reviewed

Constitution of the Kingdom of Cambodia (1993, revised in 2008)

Law on Education (2007)

Policy on Education for Children with Disabilities (2008)

Law on the Protection and the Promotion of the Rights of Persons with Disabilities (2009)

National Policy on Early Childhood Care and Development (2022–2026)

Sub-decree on the Organisation and Functioning of the Disability Action Council (2013)

National Policy on the of Physical Education and Sport Sector Development (2015)

Policy on Inclusive Education (2018)

K-12 student learning assessment framework (2018)

Law on the Protection and the Promotion of the Rights of Persons with Disabilities (2019)

1National Disability Strategic Plan (2019–2023)

Inclusive Education Action Plan (2019–2023)

Education Strategic Plan (2019–2023)

Understanding Social Exclusion in the Cambodian Context and Planning for Inclusive Education (2021)

Annex B: Quantitative policy analysis – Indicators provided by the education sector analysis framework

Fifteen experts in the field were asked to rate broad and specific legislative policies in Cambodia. Indicators were drawn from the third volume of the *Education Sector Analysis:*Methodological guidelines (UNICEF, et al., 2021). The experts assigned scores on a scale of 1 to 4 for each indicator, where 1 = weak, 2 = initiating, 3 = established and 4 = championing. Responses were averaged and are summarized in the table below.

BROADER LEGISLATIVE POLICIES	AVERAGE	SPECIFIC LEGISLATION POLICIES	AVERAGE
Every child has the right to protection from discrimination on grounds of disability.	2.53	Every child has the right to education.	3.71
Children with disabilities and their families are able to seek redress if they experience discrimination or other violations of their rights.	2.00	The disability-inclusive education framework is compliant with relevant international human rights standards.	3.35
The right of every child to live with their family is recognized in legislation.	2.63	Legislation provides a definition of disability-inclusive education and its objectives.	3.06
Children with disabilities are cared for and supported within their families or substitute family environment.	2.12	Teachers, including teachers with disabilities, are supported to work in inclusive education settings.	2.65
Children are protected from all forms of violence in schools.	2.81	A government-wide and coordinated approach to disability-inclusive education is in place.	3.24
Children have a right to democratic participation in schools and to be consulted on education policy.	2.56	All schools are required to be accessible.	3.06
		Children with disabilities are provided with reasonable accommodations to support their participation in education.	3.00

Annex C: In-depth research sample

Digital questionnaires sample

Annex C presents an overview of the sociodemographic information concerning the participants who were part of the survey. This data includes education-related characteristics of teachers, head teachers and district officials. Additionally, it delves into the level of difficulty experienced by these three participant groups across various types of disabilities, encompassing visual, hearing, mobility, memory-related, self-care and communication-related challenges. It is worth clarifying that the data analysed from this survey were not disaggregated at province level.

Table C.1: Sociodemographic data of district officials, head teachers and teachers

PARTICIPANT	N	GENDER			AREA	
		Male	Female	I prefer not to say	Rural	Urban
District officials	390	62%	36%	2%		
Head teachers	917	82%	18%	0.10%	15%	85%
Teachers	2,895	38%	61%	0.60%	20%	80%

Table C.2: Teacher education-related characteristics

scнос	HOOL TYPE TEACHER TYPE		SCHOOL LEVEL		EXPERIENCE TEACHING		
Regular school	98% (220 schools)	Regular teacher	96%	College	15%	0-2 years	10%
Special school	2% (39 schools)	Resource teacher	4%	Lycée	16%	3–5 years	18%
		Special education teacher	1%	Primary	58%	6–9 years	21%
				Pre-primary	11%	10-15 years	21%
						15+ years	31%

Table C.3: Head teacher education-related characteristics

SCHOOL LEVEL		EXPERIENC	E HEADING	EXPERIENCE TEACHING		
Lycée	7%	3-5 years	23%	3-5 years	5%	
College	9%	0-2 years	14%	0-2 years	1%	
Primary	81%	6-9 years	26%	6-9 years	5%	
Pre-primary	9%	10-15 years	17%	10-15 years	16%	
		15+ years	21%	15+ years	73%	

Qualitative research sample

Eight provinces were selected in collaboration with UNICEF Cambodia and the SED of the MoEYS, including Battambang, Kandal, Phnom Penh, Preah Vihear, Prey Veng, Ratanakiri, Sihanoukville and Siem Reap. Nine schools were selected to cover urban and rural settings, and private and public provision, in addition to mainstream, integrated and special schools. Out-of-school children were sampled from the same provinces. Overall, 31 children with disabilities and 29 parents were interviewed. Additionally, seven focus groups were conducted, including four with children without disabilities and three with their parents. Students without disabilities were randomly chosen from the enrolled student list in the selected schools and their parents were also interviewed. In most instances, interviews were conducted with all students with disabilities and their parents in the school. However, if there were more than five to six students with disabilities enrolled, students were randomly selected from the list. Finally, the study interviewed nine teachers to provide qualitative data to complement the quantitative data from the questionnaires.

Annex D: Key figures on the number of children with disabilities in schools by province

PROVINCE	CENSUS			EMIS			
	Percentage of entire population with a disability	Percentage of children with disabilities	Percentage of children with disabilities who are in school	Percentage of children in EMIS with disabilities	Percentage of schools with at least one child with disabilities	Number of special schools	
Кер	15.4%	0.34%	75.0%	2.43%	29.0%	0	
Pailin	15.2%	0.65%	71.4%	0.40%	17.0%	0	
Stung Treng	16.3%	1.51%	66.7%	0.53%	14.0%	0	
Phnom Penh	10.8%	1.07%	64.8%	0.46%	14.0%	2	
Svay Rieng	14.0%	1.21%	63.8%	0.42%	24.0%	0	
Kratié	15.1%	1.01%	62.8%	0.69%	24.0%	0	
Kandal	13.3%	1.18%	62.2%	0.17%	13.0%	1	
Koh Kong	13.1%	0.98%	61.8%	0.41%	14.0%	0	
Kampong Cham	14.7%	1.28%	61.4%	0.35%	19.0%	1	
Sihanoukville	13.6%	1.16%	61.2%	0.54%	23.0%	0	
Kampong Speu	13.4%	1.88%	57.0%	1.19%	25.0%	0	
National average/ total	13.9%	1.09%	56.6%	0.54%	21.0%	6	
Takéo	12.9%	1.12%	56.4%	0.44%	20.0%	0	
Pursat	15.8%	0.99%	55.3%	1.10%	30.0%	0	
Preah Vihear	16.7%	1.93%	54.1%	0.82%	34.0%	0	
Oddar Meanchey	15.7%	1.22%	54.0%	0.71%	14.0%	0	
Banteay Meanchey	14.2%	1.39%	54.0%	0.32%	15.0%	0	
Kampong Thom	15.3%	1.46%	53.6%	0.38%	18.0%	0	
Battambang	16.0%	0.88%	53.0%	0.63%	25.0%	1	
Kampong Chhnang	16.2%	0.71%	52.8%	0.23%	22.0%	0	
Siem Reap	14.2%	1.01%	51.5%	0.96%	36.0%	1	
Kampot	13.0%	0.94%	50.7%	0.38%	15.0%	0	
Mondulkiri	15.7%	0.80%	47.8%	0.32%	12.0%	0	
Tboung Khmum	13.3%	0.60%	47.4%	0.26%	16.0%	0	
Ratanakiri	13.5%	0.84%	45.9%	0.62%	12.0%	0	
Prey Veng	15.1%	0.58%	39.9%	0.16%	15.0%	0	

Source: Authors' analysis of EMIS and population census data.

Acknowledgements

This report was prepared by Bella Baghdasaryan, Ghalia Ghawi, Thomas Godfrey-Faussett and Ursula Hinostroza Castillo under the supervision and guidance of Linda Jones (Chief of Education, UNICEF Innocenti -Global Office of Research and Foresight), Thomas Wells Dreesen (Education Manager, UNICEF Innocenti) and Matt Brossard (former Chief of Education, UNICEF Innocenti).

The authors express sincere gratitude for the invaluable contributions throughout the research provided by colleagues from UNICEF Cambodia (Hiroyuki Hattori, Rin Ream, Davy Chhean, Ratana YY, Kezang Deki and Linda Jonsson), UNICEF East Asia and Pacific Regional Office (Erin Tanner and Natasha Graham) and UNICEF Innocenti (Alessandra Ipince and Gavin Wood). The research team appreciates the constructive feedback received from the Ministry of Education, Youth and Sport (MoEYS) of Cambodia and civil society organizations on the different phases of the research, and to the MoEYS in particular for the support and coordination of the research and data collection. Special recognition to His Excellency Serei Chumneas (Secretary of State) and Her Excellency Neang Phalla (Chairperson of the Management Committee of the Special Education Department within the MoEYS).

Special thanks are extended to Asma Maladwala (UNICEF Headquarters), Ellen Smith (Aga Khan Foundation), Hayley Niad (Inclusive Development Partners), Nora Shabani (UNICEF Europe and Central Asia Regional Office) and Suguru Mizunoya (UNESCO International Institute for Educational Planning) for their thoughtful input and detailed feedback as technical reviewers of the report.

Finally, the authors are immensely grateful for all the schools, parents, teachers and children for sharing their experiences with the research team, and for their time and contributions to this research.

Copy editing: Strategic Agenda (Liyana Aini) Layout: Strategic Agenda (Amina Khurram)

Photography:

Cover credit & page 1: UNICEF/UN0690653/Soeum

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Suggested citation

Baghdasaryan, Bella, et al., *Paving the Pathway for Inclusive Education for Children with Disabilities in Cambodia*, UNICEF Innocenti – Global Office of Research and Foresight, Florence, June 2024.

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